A118078
DION
LAURENCE JOSEP

30-7-44

AWARDS—CANADIAN ARMY (ACTIVE) M

500M—1-44 (3467) FEB.
H.Q. 1772-45-8

FILE NO. 405-D-17099

SURNAME (IN BLOCK LETTERS) CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
DION, Laurence Joseph	A.118078	Pte.	Regt.de Mais.,

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star France-Germany Star ~~Defence Medal~~ War Medal CVSM with Clasp	1389 - 3-11-49

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO Mrs. Germaine DION (STEPMOTHER)

ADDRESS: 1444 Drouillard Road,
WINDSOR, Ont.

MEMORIAL BAR

(1)

DATE DESP.....

REGN. NO. 1223

(2) MEMORIAL CROSS

WIDOW

SINGLE

(2)

ADDRESS:

(3) MEMORIAL CROSS

MOTHER

DECEASED (M.F.M.5)

(3)

ADDRESS:

If you do not wish to
amount desired opposite

FEB. 15.....

FEB. 28.....

MAR. 15.....

MAR. 31.....

APR. 15.....

APR. 30.....

MAY 15.....

MAY 31.....

JUNE 15.....

JUNE 30.....

JULY 15.....

JULY 31.....

25 MAY 1944

PERIOD

From DEC 15 1943 19..... To JAN 31 1944 19.....

VERIFIED
DATE 25/5/44 BY

MILITIA BOOK M. 1

PART II

250M—10-42 (5040-2 & 5232)
H.Q. 1772-39-1672

CANADIAN ARMY

Soldier's Pay Book

(For use on Active Service)

Linc. & Well. Regt

Reg. No. A. 118078.

Surname (Capitals) DION

Christian Names in full LAURENCE
JOSEPH

PARTICULARS OF SOLDIER

Regimental Number A. 118078

Name in full (surname first) DION LAURENCE JOSEPH

Date of Attestation 28 MAY/43.

State whether married, widower or single S.

If married after enlistment, state date of marriage:

If married, give full postal address of wife, or if widower, name and address of guardian of children, if any, or if single, name and address of next-of-kin, stating relationship to the Soldier (see page 1, para. 6):

Mrs. Germaine ~~Donat~~ Dion (~~Father~~ mother)
1444 Drouillard Rd.
Windsor Ont

PARTICULARS OF ASSIGNED PAY, ETC.

Assignment of pay:		Effective date:
(a)	$ 15.00	Aug. 43
(b)	$ 8.40	Nov. 43 to Apr. 44
(c)	$	
(d)	$	

Name, address and relationship of assignee:

(a) Mrs. Germaine Dion (mother)
1444 Drouillard Rd., Windsor, Ont.

(b) Fifth V.L. Bond.

(c)

(d)

Dependents allowance, payable to: (state relationship)

n/a

CASUALTIES AFFECTING DAILY RATE OF PAY AND ALLOWANCES

Date effective.	Particulars	Part II Order	Date	Signature of Paymaster
28 May 43	Pte.	132	3 June 43	[illegible]
28 Sept 43	To Drawl 1/40	14	21-11-43	[illegible]
28 Nov 43	To Rec Inc 1/50	278 A	27 Dec 43	[illegible]

DAILY RATE OF PAY

Rate of Pay in Issue $	c.	Date Effective	Signature of Paymaster
1	30	28 May 43	[illegible]
1	40	28 Sept 43	[illegible]
1	50	28 Nov 43	[illegible]

Soldier's Signature L. J. Dion

Book opens on 15 Dec 43 Balance Cr. or Dr. $ 14.67

Date 1943	Particulars	Credits	Cash Payments and Other Charges: Local Currency	Cash Payments and Other Charges: Canad'n Currency	Assigned Pay
L.P.C.	Bals. Br't Forward	14 67			
Bal. Res. Pay		23 80			
24 Dec	AR 75		1-0-0	4 47	
29 Dec.	D.O 278A Inc Nov-Dec	3 40			
Jan. Pay		46 50			23 40
29 Dec	AR 79		2-0-0	8 94	
Jan 14	AR 72		10/-	2 24	
	Totals	73 70		15 65	23 40

Balances only will be carried forward.

Paymaster's Signature: T. E. Gould Capt.

Deferred Pay and/or Restricted Pay	BALANCE: Debit	BALANCE: Credit	Signature of Paymaster or Officer Making Award
	14 67		[illegible]
		9 13	[illegible]
		4 66	[illegible]
		4 06	[illegible]
		31 16	[illegible]
		22 22	[illegible]
		19 98	J. R. Snydam
		19 98	

If you do not wish to draw all pay due, **place the amount desired** opposite date of pay day.

FEB. 15.....	AUG. 15.....
FEB. 28.....	AUG. 31.....
MAR. 15.....	SEP. 15.....
MAR. 31.....	SEP. 30.....
APR. 15.....	OCT. 15.....
APR. 30.....	OCT. 31.....
MAY 15.....	NOV. 15.....
MAY 31.....	NOV. 30.....
JUNE 15.....	DEC. 15.....
JUNE 30.....	DEC. 31.....
JULY 15.....	JAN. 15...105.....
JULY 31.....	JAN. 31...none.....

Received.....Checked.....Card.....Observations.....

FINGERPRINTED

NOMINAL ROLL
No. 1362
JUN 23 1943

M.F.M. 2
A.F.B. 271
750M—5-42 (4398)
H.Q. 1772-39-1645

~~ORIGINAL~~
DUPLICATE
~~TRIPLICATE~~

OCCUPATIONAL HISTORY FORMS COMPLETED

(To be completed in triplicate. Copy designation to be shown by striking out terms not applicable.)

GENERAL LIST

Unit No. 1 District Depot, (CA) (A) (Windsor Det.) Regimental Number A-118078

ACTIVE FORMATIONS AND UNITS OF THE CANADIAN ARMY

ATTESTATION PAPER

01
PTE

1. Surname DION
2. Christian Names LAURENCE JOSEPH
3. Present address 1444 DROUILLARD RD., WINDSOR, ONTARIO, CANADA
4. Date of birth 24 MAY, 1923
5. Place of birth CANADA (Country) QUEBEC (County or Province) DRUMMONDVILLE (Town or Township)
6. Citizenship CANADIAN (Of What Country are You Now a Citizen)
7. Religion (state denomination) ROMAN CATHOLIC
8. Trade or Calling FACTORY HAND
9. Married, Widower or Single SINGLE
10. Name of next of kin DONAT DION
11. Relationship FATHER
12. Address of next of kin 1444 DROUILLARD RD., WINDSOR, ONTARIO, CANADA
13. Do you belong to, or have you served in a Reserve Formation or Unit of The Canadian Army? NO (If Yes, Give Unit and Dates of Service)
14. Have you served in (*a*) an Active Formation or Unit of The Canadian Army? (Yes or No) NO (If Yes, Give Regimental No. and Unit) (*b*) Any other Naval, Military, or Air Force? NO (Yes or No) (If Yes, specify Unit and Period of Service)
15. Did you serve during the Great War 1914-1918? NO (If Yes, specify Regimental No., Unit and Dates of Service)

Verified DOG
23 Feb 44

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, LAURENCE JOSEPH DION, do solemnly declare that the above particulars are true, and I hereby engage to serve in any Active Formation or Unit of The Canadian Army so long as an emergency, i.e., war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization after said emergency ceases to exist, and in any event for a period of not less than one year, provided His Majesty should so require my services.

Date 2 JUNE 1943 Laurence Joseph Dion (Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

I, LAURENCE JOSEPH DION do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Witness C. Kathleen Sgt. (Name) (Rank) Laurence Joseph Dion (Signature of Recruit)

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER

The Recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law.

The above questions and answers were then read to the recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me,

at Windsor Ontario this 2nd day of JUNE 19 43

Major {Signature of Magistrate, Justice or Attesting Officer.

COMMANDING NO. 1 DISTRICT DEPOT (WINDSOR DET) {Officer or Rank and Unit or appointment.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT

5303-

Record of Service of DION (Surname) LAURENCE JOSEPH (Christian Names) Regimental Number A-118078

Qualifications

Military: NONE

Business or Professional: NONE

Trade or Civil: FACTORY HAND

Technical: NONE

Languages: ENGLISH & FRENCH

Educational Qualifications

High School or Collegiate: NONE (years completed)

Graduation or Matriculation: N/A (specify)

*College: NONE

*University: NONE

*(Name of institution, courses or years completed, and degrees obtained to be shown)

All enlisted personnel will be taken on as Private soldiers, appointments and promotions to higher rank to be shown as provided in the space below.

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Rank Shown	Effective Date	Unit	Place	Authority: Part II D.O. No. Cas. List, etc.	Authority: Dated
Joined on appointment T.O.S. NO. I DISTRICT DEPOT (WINDSOR DETACHMENT)	PTE.	29-5-43	# I D.D. WIND.DET.	WINDSOR	D.O.# 132	3 June 43.
SOS No. 1 D.D.(Windsor Det) on transfer to No.12 BTC Chatham Ont.	Pte.	17 Jun 43	" "	"	" #143	16 Jun 43
TOS 12 CA(B)TC for all purposes & allocated to INF (O)	"	18 Jun 43	12BTC	CHATHAM	PT II # 84	18 Jun 43
Blood Donor	"	9-7-43	"	"	PT II #100	12-7-43
SOS 12 CA(B)TC on transfer to A.29 C(I)TC Camp Ipperwash, Ontario.	"	17 Aug 43	"	"	PT II # 130A	18 Aug 43.
TOS on transfer from No. 12 BTC Chatham, Ontario, posted to No. 4 Coy .	"	18Aug43	A29CICTC	Camp Ipperwash	DO 202	21 Aug 43.
warded 3 days C.B. Forfeits 1 days pay, for Absence without eave from 0200 hrs 18 Oct 43 to 1040 hrs 18 Oct 43. (Total bsence 8 hrs, 40 mins.)	"	19 Oct 43	"	"	D 0 256	19 Oct 43
Granted Special Leave from 21 Oct. 43 until 26 Oct. 43. and 50¢ per diem in lieu of rations.	Pte.	21 Oct.43	A-29	Ipperwash	D 0 269	2 Nov. 43
S.O.S. A29 C.I.C.T.C. on transfer to No.1 Training Brigade Debert, N.S.	2"	3 Nov 43	"	"	D 0 271	3 Nov 43
T. O. S. TRG. BDE. GP.	"	4 Nov 43	2 Trg Bn	DEBERT	DO 3	5 Nov 43
INCR. $1.40 PER DIEM	,,	28 Sep 43	TR BDE GP	DEBERT	14	21.11.43

For additional entries use M.F.M. 1 and 2 (a)

CERTIFICATE OF MEDICAL EXAMINATION

Date of Medical Examination

Name in full DION, Lawrence Joseph ..... Place Windsor, May 28, 1943.

Part 1. Information obtained from the recruit.

1. Age 20 ..... 2. Have you ever suffered from any of the following diseases?

a. Rheumatism	NO	k. Ear disease	NO
b. Tuberculosis or pleurisy	NO	l. Eye disease	NO
c. Bronchitis or asthma	NO	m. Fits	NO
d. Heart disease	NO	n. Nervous or mental disease	NO
e. Kidney or bladder disease	NO	o. Syphilis	NO
f. Stomach or bowel trouble	NO	p. Gonorrhoea	NO
g. Rupture	NO	q. Have you ever worn glasses?	NO
h. Varicose veins	NO	r. Are you now or have you in the past received disability pension or compensation? If so, give details	NO
i. Foot trouble	YES		
j. Nasal trouble	NO		

I hereby declare that I have not suffered from any diseases whatsoever except as stated above.

Lawrence Joseph Dion
Signature of Applicant

Part 2. Information obtained by medical examination. THE RECRUIT MUST BE STRIPPED.

Medical Officer's Remarks on information as stated in Part 1

Feet perspire freely in summer time.

1. Identification marks or scars Scar Rt. knee, Rt. forearm.
2. Height 5 feet 9 inches. 3. Weight 142 pounds.
4. Complexion Med. Eyes Brown Hair Brown 5. Development Good (Good / Fair / Poor)
6. Chest measurement—Girth on full expansion 39 inches. Range of expansion 2 inches.
7. Vision, right 6/6 left 6/9
   With Glasses— right - left - 8. Hearing, right CV. 20 ft. left CV. 20 ft.
9. Condition of mouth and teeth Upper fair, lower fairly good.
10. Blood Pressure:— S. ..... D. ..... (Required if recruit is over 35 years of age, or if otherwise indicated)
11. Urinalysis Negative - reflexes normal.
12. The abnormalities (congenital and pathological) found on examination are as follows:—
    Nil.
    Ears - Chronic dermatitis both external ears and canals.
    No psychiatric disability, W. Breslin, Capt.
13. Chest X-Ray Negative No. 11102 Laboratory at which taken DR. R. E. HOLMES, Radiologist.

Part 3. We, the examiners, find no evidence of the diseases mentioned in question 2, Part 1, except as reported in the remarks. We have examined the Recruit in accordance with the pamphlet "Physical Standards and Instructions for the medical examination of Recruits" and he is found fit for Category A-1

Special remarks when category lower than A

A. L. Poisson, Lt. Col. (President) — C. J. Hemond, M. B. (Member) — W. G. G. Coulter, Major (Member)
rank — rank — rank

Date May 28, 1943.

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
3 June/43	Vacc. G. A. Warmington Capt.		
29 June 43	1 A B 3		
20 July 43	RE-EXAMINATION, CAT. A1		
AUG 17 1943	CONFIRMED. R C Cornelson Capt		
Oct 20/43	Re Exam: Y.O.B. 23 P / U / L / H / E / M / S / confirmed		
	W B Ritchie for major		
	J M Stewart Lieut.		

CERTIFIED TO BE A TRUE COPY OF ORIGINAL

Secretary Med. Board

NOTE: Any corrections to entries made must be initialled by the Officer making them. Such Officer must indicate his rank and corps. Corrections are not to be written over the original entry.

June 4/43

This form will accompany the soldier's regimental documents at all times.

DEPARTMENT OF NATIONAL DEFENCE
(Army)

Personnel Selection Record

INFANTRY (OTHER) — Arm or Corps

Trade (if Tradesman or Trade Trainee)

Work in Arm (if Non-Tradesman)

I.

Regt. No.	Rank	Name (surname first)	A or R	Age	Med. Cat.
A-118078	Pte.	DION, Laurence, Joseph	A	20	A1

Main Language	Other Language(s)	Place (Unit) Interviewed	Date Interviewed
French	English	#1 D.D. (W.D.)	29-May-43

II. Revised Examination "M"

Windsor, Ont. (Place Tested) 28-May-43 (Date Tested) Z.S. Phimister, Capt. (By Whom)

Total	Group	Subtests	1	2	3	4	5	6	7	8	Subtotals	1–3	4–5	6–8	English or French
125	IV		14	12	08	17	24	08	20	22		34	41	50	E.

Other Tests

Y.O.B.	P	U	L	H	E	M	S
23	1	1	1	1	1	1	1

III. Educational Background Completed Grade VII and attended 6 months of Grade VIII at 16 (Holy Rosary Separate School, Windsor, Ont.). Says he got along fairly well and best subjects were arithmetic, history and spelling. Says he had to leave school to go to work to give his family some assistance.

IV. Occupational Background Delivery - Grocery Store, Windsor, Ont. - 5 months.
Hired help - farming - 3 months.
Helper - Service Stations, Windsor, Ont. - 2 years.
Stock man, shipping and labourer - Chrysler's, Windsor - 1½ years. 93¢ hr.

V. Military Background Nil. N.R.M.A. Call to report 28-May-43.

VI. Other Personal History and Appraisal Height: 5' 11" Weight: 174 lbs.

HOBBIES AND SPORTS:- Reading (fiction and newspapers), roller skating, fishing, swimming and hunting.

Mother is deceased. Father remarried and lives at 1444 Drouillard Rd., Windsor, Ont. Father is employed at Chrysler's. One brother living and one deceased. Three sisters, one married. Recruit is single.

Roman Catholic Church. Attends about once every two or three months. He smokes and drinks moderately and lives fairly quietly. He enjoys normal social activities but generally spends spare time at his home. He has driven friends' cars and cars at the service station considerably.

SUMMARY:- A young, French-Canadian of strong build and a slightly nervous manner who says he'd like to be a paratrooper. It is doubtful if his stability is satisfactory for that very exacting work. He seems to have a good attitude and will quite possibly try hard in training. He has a strong desire to be a driver and, if there is a possibility of his doing that work, it may prove advisable to give him a trial. His learning ability seems about average.

1 June 43 PSYCHIATRIST'S REPORT
No psychiatric disability SIGNED: W.I.BRESLIN Capt. Psychiatrist

VII. Recommendations **INFANTRY (OTHER)- Non-tradesman group**

(Signed) J. E. Smith Lieut.
(J.E. SMITH) Army Examiner

M.F.M. 196
200M—1-43 (7957)
H.Q. 1772-39-1916

See reverse side for further information and follow-up

FURTHER INFORMATION AND FOLLOW-UP

A118078 Pte. Dion, L. J.
Interviewed during 6th week of training 51st Q.
Dion is in good physical condition and is making satisfactory progress.
He will qualify and is satisfied with his allocation.

#12 B.T. G., Chatham, Ont. 26-7-43 Howard Small Capt.
(H. Small) Army Examiner

Volunteered for Can. Parachute Troops but rejected by A.E. 5-8-43.

A.118078 Pte. Dion, L.J.

Very moody. Requires checking. Slow of thought. In good condition. Attitude is not the best.

Additions made at A.29 C.I.C.T.C.
At end of 8th week A.T. 9 Oct.43. N. Muir Capt.
(N.Muir) A.E.

20 Oct.43.

Y.O.B.	P	U	L	H	E	M	S
23	1	1	1	1	1	1	1

Suitable for No.1 Training Brigade.

J. C. McClelland Capt.
(for) N.Muir, Capt. A.E.

MFM 196, PULHEMS profile and apparent adaptability suitable for O/S as Inf.

R W Humphrey
A.E., Debert, N.S., 8-11-43.

A118078 | DION | Laurence | Joseph

Regimental Number | Last Name (Block letters) | First Name | Middle Names

L&W Regt.

Soldiers Qualification Card

CONFIDENTIAL

Unit ~~3 CRU~~

1 Corps General reinforcement 5 --

2 Nationality Cdn | By Birth | By Naturalization | Country of Birth Canada

08

3 Father Racial Origin French Cdn (Canada)

Mother French Cdn (Canada) 2

4 Language spoken in home: French ✓ English

2 Other

5 Age 20 (24.5.23 5/12) 6 Height 5 ft. 9 in. 7 Weight 162 8 Silhouette 1 2 3 4

Eyes 4 9 Colour of brown 10 Acuity 1 2 3 (1 ✓) 10 Glasses no 11 Colour Vision 1 2 3 4

12 Hearing: Acuity 1 2 3 (1 ✓)

13 Speech Defects none

14 Handedness R (✓) L A

15 Med. Category A (P-1)

Cause —

Attitude to own health normal To Medical attention normal

Health History normal (Collar bone has been broken twice)

16 Education Level: Illiterate El. 8 (16) Sec. ( ) Grade completed)

Conduct during school life

17 / 18 University or Professional Institution	Course Taken	Years completed	Degree	Year

19 Post Graduate	Course	From—To	Degree	Year

20 Specialized Training:

1. (Course)

At From—To Completed ?

21 2. (Course)

At From—To Completed ?

22 3. (Course)

At From—To Completed ?

Other trades papers, Diplomas Certificates or Qualifications

23 Languages: Spoken fluently English + French.

02 Written well English + French.

11

24 Main occupation: Description Stock + shipping dept with Chrysler

Estimate of skill

$50.00 Duration (from—to) 19 months until 1.5.43 Weekly Wage $50.00

Employer's Name and Address Chrysler Corp. Plant 1 Windsor Ont.

50 "M" CAN. N

Test	Score	S.M.	
1	14		Sub-total
2	12		
3	08	34	S.M.
4	17		Sub-total
5	24	41	S.M.
6	08		Sub-total
7	20		S.M.
8	22	50	
Tot.	125		Grade "D"

Test 9 Score

English ✓ French

51 OTHER MENTAL

Test

Score Grade

Date

52a MECHANICAL APT.

Test

Score Grade

Date

52b CLERICAL APT.

Test

Score Grade

Date

53 TRADE TESTS

Trade and Grading	Date

54 OTHER

Test

Score Grade

Date

25 Second Most Important Occupation: Description: Service station attendant

Estimate of skill

7866 Duration (from—to) 2 years Weekly Wage $13.00

Employer's Name and Address Curry Service station Windsor Ont

26 Third Most Important Occupation: General mart in grocery store

Estimate of skill

35 44 Duration (from—to) 6 months after school Weekly Wage $10.00

Employer's Name and Address Hickory Grocery Windsor Ont.

Trade Union or Professional Society

Vehicles: 27 Heavy Truck 28 Light Truck W 29 Auto W 30 Motorcycle

31 Farm Tractor 32 Tracked Vehicle 33 Power Launch 34 Aeroplane

35 Accident Prone Animal management Teamster

Farming Experience: Wide Limited None ✓

District Type

Job promised after discharge? no By whom? Name

Job Address:

Other provision for post-discharge occupation

Type of work desired Likes work in stock room

Occupational history: Ambitious Stable Accidental Erratic

36 Marital Status: M S ✓ W D Sep.

2 Marital Problems

Wife's ~~or Husband'~~ Age Attitude to Service Health

37 No. of Children 38 No. of Dependents 0

Relationship of Dependents

No. of Brothers 1 (step) No. of Sisters 2 (step) Position in family 2

Status of home in childhood normal

Religious Denomination R.C.

39 Hobbies: Photography M S Radio Engines

O Mechanics Other Likes to drive - To hunt.

40 J Sports: (1) Swimming (2) bowling (3)

43 P Team Games and Position (1) Softball

1 (2) Hockey (3)

41 Ability to Entertain: Music String Brass

Woodwind Percussion Piano Vocal

Theatrical Other

42 Previous Experience in Armed Forces

ARM or CORPS	Type (C.E.F., N.P., etc.)	Years	Highest Rank	Last Discharge (Yr.)	Special Training Received

43 CURRENT SERVICE: Date Enlisted 22 - MAY 1943. Place Enlisted

Date From—to	Country	Corps	Unit and Sub-unit	Rank 44	Principal Duty	Performance
28.5.43 - 21.12.43	Cda	Inf	Training centers		Training	
22.12.43 -	UK.	Inf	3 CDRU	PTE	Reinforcement.	

A

45

COURSES ATTENDED	PLACE	Date: From—to	Qualified as	Rating

46 Crime: Courts Martial Convictions..... Major Offences..... Minor Offences 1 day A.W.L.

Civil Convictions..... Fines..... Hospitalization.....

49 Psychiatric ☐ ☐ ☐ ☐ ☐

YEAR OF BIRTH	P	U	L	H	E	M	S
23	1	1	1	1	1	1	1

C.M.H.Q. 1000:115
40/P&S/1246(2609)

47 Classification: Military Specialties and Trades

CONFIDENTIAL

Designation	Degree of Proficiency	Date	Authority

55 Type of Service Desired (1) Truck driver with Inf. (2).....

Remarks re Outstanding or Limiting Factors

Deportment	fair
Disposition	Very moody
Appearance (grooming)	fair - not very neat
Physical appearance	looks strong but often falls behind platoon
Map Reading	fair knowledge
Military Knowledge	fair
Mechanical Knowledge	limited

Average ability. Untidy appearance. Unshaven. Not very keen on training.

Reason for Joining Cdn. Army received second call and enlisted

Attitude to Interview: Antagonistic..... Overanxious..... Co-operative ✓ Indifferent.....

Tests Indicated: 51..... 52a..... 52b..... 53..... Other.....

48 Suggested Possibilities (1) Inf. G.D. Pass Dr 1/c.

for employment (2) ~~Dr. 1/c~~

Interviewed by [illegible] Capt. Date 23/12/43

Reviewed by..... Date.....

OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full DION, Laurence Joseph (b) Reg'l. No. A-118078
2. (a) Arm of service Army (b) Unit No. 1 Dist. Depot (W.D.) (c) Rank Pte
3. (a) Date of birth 24 May 23 (b) Have you any dependents? No (c) Place of residence at time of enlistment Windsor Ontario
4. (a) Place of enlistment Windsor Ontario (b) Date of enlistment 28 May 43

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 1 yrs (b) Were you attending school or college up to the time of enlistment? No
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) Grade 8
7. If you attended a university, give name of university and standing or degree secured NA
8. (a) Did you ever enter upon a trade apprenticeship? No (b) If so, for what occupation? NA (c) Did you finish it? NA (d) If you did not finish it, how long did you serve at it? NA
9. (a) What languages do you speak fluently? English & French (b) What languages do you read well? English & French

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) Working (b) At time of enlistment of what trade union or professional society were you a member? None

Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

11. Had you ever been employed fairly regularly since leaving school?
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked (b) State how long you had worked at this trade or occupation
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment
15. Give details of last employer, if any: Name Address
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)
17. (a) If your last employment was in a business of your own, state nature and address of business (b) Date of discontinuing it

Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21

18. Name of employer Chrysler Corporation Address Windsor Ontario
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Mfg. war materials
20. (a) Your specific occupation Stockman (b) Number of years' experience at this occupation with any employer 1 yr
21. (a) Did your employer promise definitely to give you employment on discharge? No (b) Did your employer refuse to promise you employment on discharge? No (c) Do you wish to return to your former employment? Yes

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

22. (a) State nature of business, or professional practice (b) Where was it located?
23. (a) Number of years engaged in this business (b) Have you made, or will you make plans to return to the same or a similar business on discharge?

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? No (b) Do you feel competent to operate a farm? No (c) If so, in what kind of farming? NA
25. (a) Were you born on a farm? No (b) How many years' actual farming experience have you had? None (c) In what provinces did you have experience? NA

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? No
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.) NA
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form Machinist

DATE 28 May 1943 SIGNATURE Laurence Joseph Dion

SERVICE AND CASUALTY FORM

PART I (For all ranks)

M.F.M. 4 (Part I)
A.F.B. 103 (Part I)
200M—8-42 (5892)
H.Q. 1772-39-1649

Unit: No.1 Dist.Depot (Windsor Det) Regimental Number: A-118078

1. Surname: DION
2. Christian Names: Laurence Joseph
3. *Substantive Rank and Appointment: Pte
   *Acting Temporary or Local Rank
   giving date
   *To be entered in pencil to facilitate alteration.
4. Place of birth: Drummondville, Que.
5. Date of birth as declared on attestation: 24 May 23
   (A)
6. Date of enlistment: 28 May 43
7. Place of enlistment: Windsor Ontario
8. Residence at time of enlistment: Windsor Ontario
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion: Roman Catholic
12. If married, state date: Single
13. Trade on enlistment: Factory hand.
14. Corps, trade and grade
15. (D) Qualifications
16. (E) Miscellaneous entries

(17) Regiment or Corps: Ordr Tpt Corps
Unit (Battn., etc.): Gen List
Linc & Welld Regt

(18) Medical

Category	Date	Authority
A-1	28 May 43	Medical Board
A-1	17 Aug 43	Medical Board
A-1	20 Oct 43	Medical Board

YEAR OF BIRTH	P	U	L	H	E	M	S
23	1	1	1	1	1	1	1

20 Oct 43

(19) Next of kin (entries to be made in pencil): Father
Mr Donat Dion
1444 Drummond Rd.
Windsor Ont

(20) E
(21) E DO 9/44
(22) E

NOTES—
(A) Here enter particulars of any subsequent claim as to actual age after verification of birth certificate.
(B) Whether for home service only, enlisted at special rates of pay, etc.
(C) If to be retained on home service, period if specified to be stated; also authority and on what grounds; see (A) above.
(D) Signaller, Farrier, etc.
(E) Instructions regarding allotment of these sub-heads will be made as may be necessary after mobilization.

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry to be shown
		A29	Awd 5 days CB. Forf 1 days Pay for AWL 8 hrs 40 min.	Spyrowood	19 Oct 43	Pte	256 19 Oct 43
		TR. Bde Gp.	Increased Pay to $1.40 per day	Debert	28 Sep 43	"	14 21 Nov 43
		3 CIRU	Granted daily rate of pay $1.50	U.K.	28 Nov 43	Pte	278A - 27 Dec 43.
		3 CIRU	SOS CDN ARMY (CANADA)	UK	14 Dec 43		
		"	TOS CDN ARMY (O/S) ON TRANSFER	"	15 Dec 43	Pte	276 22 Dec 43
		"	DISEMBARKED IN U.K.	"	21 Dec 43		
		"	TOS 3 CDN INF REINF UNIT	"	22 Dec 43		
	SOS	"	SOS to L & WR. Fd Unit	"	11 Jan 44	"	8 11 Jan 44
8Jan44	EA2/2949	L&WR	TOS from 3 CIRU	Field	12Jan44	PTE	2 - 14 Jan 44
19Apr44	CR	"	Awd'd 10 days FP and a forf of 10 days pay for an off under AA 40. Forf 10 days pay under FR&I 149(2).	"	18Apr44	"	19 - 28Apr 44
21JUN44	"	"	SOS to X4 LIST CIC Auth-EA7/6100 d/21 JUN 44	"	21JUN44	"	28 - 30 JUN 44
X4	CIC Gen	11 Bn	TOS from Line & Welld. Regt.		25 June 44	Pte	9 - June 44
X4	CIC	11 Bn	SOS to X4 R de Mais	c	24 Jun 44	c	9 - Jul 44
X4	R de M	11 Bn	TOS from X4 CIC	c	25	c	24 - Jun 44
			EMBARKED ENGLAND 2 JUL --DISEMBARKED FRANCE 3 JUL 1944				25 1944
X4	R de Mais	11 Bn	SOS to R de Mais	fd	18 Jul	Pte	29
ob	R de Mais		TOS from X-4 List (11 Bn) R de Mais.	"	19 " 44	"	WO. 41/44
"		"	~~SOS to X-6 List R de Mais Missing~~	"	30 " 44	"	~~" 46/44~~ WO 50
	X6 "		~~TOS from R de Mais~~	~~fd~~	~~31 Jul 44~~	"	~~31/44~~ Cancel 3 2/44
ob	R de Mais		SOS Killed in Action	Field	30 Jul 44	"	WO 50/44

Regimental No. [redacted]-118078 Rank Pte. Sheet No.

M.F.M. 1 & 2 (a)
300M—5-43 (154)
H.Q. 1772-39-1646

Name DION, Laurence Joseph

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc.—	Rank Shown	Effective Date	Unit	Place	Authority D.O. Number	Authority Dated
ADMITTED TO DEBERT MILITARY HOSPITAL	PTE	10 Nov 43	TRG BDE	GP DEBERT	7	10 Nov 43
DISCHARGED FROM DEBERT MILITARY HOSPITAL	"	19 Nov 43	" "	" ""	16	23 Nov 43
SOS TO SERIAL 294B		14.12.43			36	14.12.43
SOS CDN ARMY (CANADA)	Pte	14 Dec 43				
TOS CDN ARMY (O/S) ON TRANSFER	"	15 Dec 43				
DISEMBARKED IN U.K.	"	21 Dec 43	3 C I R U	U.K.	276	23 Dec 43
TOS 3 CDN INF REINF UNIT	"	22 Dec 43				
(C2) SOS S.O.S to L+W.	Pte.	11 Jan 44	3 C I R U	U.K.	8	11 Jan 44
TOS T.O.S from 3 C I R U	Pte.	13 Jan 44	L+W	U.K.	2	14 Jan 44
(C2) Granted daily Regtl. Rate Pay $1.50	Pte	28 Nov 43	3 C I R U	U.K.	248A	27 Dec 43
624 AA 40 Awd. 10 days F.P. forf. 10 days pay	Pte	18 Apr 44	L+W	U.K.	19	28 Apr 44
Cp SOS SOS to L+W L Lt R.	Pte	21 June 44	L+W	21 A G	28	20 June 44
TOS TOS						
Cp. SOS SOS to R de Mais X 4 L.S.T.	Pte	24 June 44	X L. Inf Gen	21 A G	9	6 July 44
TOS TOS						
Embarked at U.K. on						
Disembarked at France. on	Pte	2 Aug 44 3 July 44	X L. Reg. Mais	21. A G.	25A	13 July 44
TOS from X-L Pris (9 Bn) R de Mais	Pte.	19 July 44	R de Mais	21. A G.	41.	27.7.44
Missing	Pte	30 July 44		AEF	A-477	
Do S'O d/31 Aug 44 ~~SOS to X 6 L. R. de Mais (Missing)~~	~~Pte~~	~~30 July 44~~	~~R. de Mais~~	~~21 A G.~~	~~46~~	~~19 Aug 44~~
m 140. Killed		30 July 44		AEF	A4-52	25 Aug 44
SOS. SOS. Killed in action.	Pte	30 July 44	R de M.	21 Cdn.	S'O	31 Aug 44

File-No 405-D-17099

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. A118078 Name Dion, Laurence Joseph

Rank on Discharge Pte Date of Discharge 30-07-44

Authority for Discharge or Retirement Deceased

Served in:

				Non-qualifying service
Canada	from 2-6-43	to 14-12-43		
	from	to		
United Kingdom	from 15-12-43	to 2-7-44		
	from	to		
Italy	from :-	to		
Northwest Europe	from 3-7-44	to 30-7-44	(Killed in action)	
---------	from	to		
---------	from	to		

Eligible for award of:

1939 - 45 Star OK

~~Italy Star~~

France-Germany Star OK

Defence Medal OK

War Medal OK

Canadian Volunteer Service Medal OK

with Clasp OK

M

Verified by Annette Routhier

Date JUL 3 1946

Carded JUL 8 1946

NRD.

HA 165

11th September 1944

Mr. Donat Dion,
1444 Drouillard Road,
Windsor, Ontario.

Dear Mr. Dion:

It was with deep regret that I learned of the death of your son, A118078 Private Laurence Joseph Dion, who gave his life in the Service of his Country in France on the 30th day of July, 1944.

From official information we have received, your son was killed in action against the enemy. You may be assured that any additional information received will be communicated to you without delay.

The Minister of National Defence and the members of the Army Council have asked me to express to you and your family their sincere sympathy in your bereavement.

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

H. F. G. LETSON
Major - General
Adjutant - General

SEP 7 19

(H.F.G. Letson),
Major-General,
Adjutant-General.

/EMA

BATTLE CASUALTY
CASUALTY SECTION EXTRACT FORM

This Space is for the **RED X** See Below

Message Received from 21/CAS/2784

Time Message Received

Date Message Received 22 AUG 44

Theatre: AEF

Regimental No.	Rank	Name	Full Christian Names
A 118078	PTE	DION	LAURENCE JOSEPH

Unit REGT DE MAISONNEUVE

SERIAL

CASUALTY PARTICULARS

KILLED 30 JUL 44

(PREV REPORTED MISSING 30 JUL 44 A.477)

"A" 482

Hospital Admitted To ..... Date .....

Hospital Transferred To ..... Date .....

Hospital Transferred To ..... Date .....

Hospital Discharged From ..... Date .....

IMPORTANT—Always Give Full Address and Relationship of all Next of Kin—IN PLAIN CLEAR PRINTING

Next of Kin DONAT DION Relationship Father

1444 DROUILLARD ROAD
Windsor, Ontario.

NOTE: If the Next of Kin resides in the British Isles or U. S. A. MARK RED X in UPPER LEFT HAND SQUARE

IMPORTANT

Home Town Same

Cable No. 9660

Inland Tel. No.

18

Verification Clerks Signature

CFA 48
40/P & S/1568 (6218)

H.Q. 405-D-17099 D.R.2(C)

18th March, 1946.

Mr. Donat Dion,
1444 Drouillard Rd.,
Windsor, Ontario.

Dear Sir:

Information has just been received from overseas that the remains of your son, A118078 Private Laurence Joseph Dion, have been carefully exhumed from the original place of interment and reverently reburied in grave 12, row G, plot 3, of Bretteville-sur-Laize Canadian Military Cemetery, Bretteville-sur-Laize, France. Marked map is enclosed. This is a recognized military burial ground and will receive care and maintenance in perpetuity.

The grave will have been marked with a temporary cross which will be replaced in due course by a permanent headstone suitably inscribed. While it cannot now be stated when this work of permanent commemoration will begin, before any action is taken you will be communicated with and an opportunity will be given you to submit a short personal inscription of your own choice for engraving on the headstone. Therefore, if you should change your address would you be good enough to inform the undersigned.

Yours faithfully,

for C.L. Laurin, Colonel,
Director of Records,
for Adjutant-General.

JJJ

Dfd.

No A.118078 Rank Private Name DION, Laurence Joseph

Unit Regt. de Maisonneuve Date of death 30th July, 1944.

Died at France.

Cause Killed in action.

Death occurred on strength of Forces H.Q. 405-D-17099 d

N/K Mr. Donat Dion, Relationship Father

Address 1444 Drouillard Road, Windsor, Ontario.

Remains buried in St. Martins de Fontenay Cdn. Cemetery
sheet 7F/1 MR 022604 Grave No. 8 row 4 plot

Grave location

CHK

OVER-

REBURIAL

Bretteville-sur-Laize Cdn. Mil. Cem
Bretteville-sur-Laize, France.

Grave 12, row G, plot 3.

HI & CR Form Despd. OCT 24 1946

Photographs
Despatched
SEP 2 1947

Temp BR sent to NK & Map

SEP 12 1944

CAN. MESSAGE DESP'D. SEP 16 1944

ROYAL MESSAGE DESP'D. OCT 20 1945

RETURN TO BUR. OF STAT

BURIAL REPORT TO N.K. MAR 18 1946

Form 6

PROVINCE OF ONTARIO
VITAL STATISTICS ACT
REGISTRATION OF DEATH

Registration Number

For use of Registrar General only.

OCT 20 1945

1. PLACE OF DEATH
City, Town or Village of: IN THE FIELD (FRANCE) Street:
(If death occurred in a hospital or institution, give the name instead of street and number)
Township of: County or District of:

2. LENGTH OF STAY (in years, months and days) | In Municipality where death occurred | In Province | In Canada (if immigrant)

3. PRINT FULL NAME OF DECEASED: DION (Surname or last name) Laurence Joseph (Given or Christian names)

4. PERMANENT RESIDENCE OF DECEASED:
City, Town or Village of: Windsor Street: 1444 Drouillard Rd.
Township of: County or District of: Province of: Ontario

5. SEX	6. CITIZENSHIP (See marginal note)	7. RACIAL ORIGIN (See marginal note)	8. Single, Married, Widowed or Divorced (Write the word)	9. BIRTHPLACE (Province or Country)
M			Single	Quebec

10. Date of Birth: May (Month by name) 24th (Day) 1923 (Year)

11. AGE: Years 21 | Months | Days | If less than one day ....hrs. or ....min.

OCCUPATION

12. (a) Trade, profession or kind of work as spinner, grader, clerk, etc.: Factory hand
(b) Kind of industry or business, as paper mill, lumber, bank, etc.:
(If "Labourer" specify kind of work above)

13. Date deceased last worked at this occupation:

14. Total years spent in this occupation:

15. If married, widowed or divorced give name of husband or maiden name of wife of deceased:

16. Name of father: DION (Surname or last name) Donat (Given or Christian names)

17. Maiden name of mother: (Surname or last name) (Given or Christian names)

18. Birthplace:
Father: (Province or Country) Mother: (Province or Country)

19. I certify the foregoing to be true and correct to the best of my knowledge and belief.
Given under my hand at Ottawa, Ontario, this 19th day of October 19 45
Signature of informant: [signature] Relationship to deceased:
Address: Director of Records, Dept. of National Defence France

20. Burial, Cremation or Removal: Date (Month by name) (Day) 19 (Year)
Place of Burial (Municipality): Cemetery:
Burial Permit was issued by: Address:

21. Funeral Director:
Name: Address:

22. Marginal notations (Office use only)

MEDICAL CERTIFICATE OF DEATH

23. DATE OF DEATH: July (Month by name) 30th (Day) 19 44 (Year)

24. I HEREBY CERTIFY that I attended deceased from: 19
to: 19, and last saw h. alive on: 19

I	CAUSE OF DEATH	DURATION Yrs.	Mos.	Dys.
Immediate cause — Give disease, injury or complication which caused death, NOT the mode of dying, such as heart failure, asphyxia, asthenia, etc.	(a) Killed in action			
	due to			
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	(b)			
	due to			
	(c)			
II				
Other morbid conditions (if important) contributing to death but not causally related to immediate cause.				

OVERSEAS CASUALTY CANADIAN ARMY

25. If a woman, was the death associated with pregnancy? Duration weeks. Was there a delivery?

26. Was there a surgical operation? Date of operation 19
State findings: Was there an autopsy?

27. If death was due to external causes (violence) fill in also the following:—
Accident, suicide or homicide? (State which) Date of injury 19
Manner of injury (How sustained)
Nature of injury
Specify whether injury occurred in INDUSTRY, in HOME, or in PUBLIC PLACE

Signed by **Designation** M.D., Coroner, etc.
Address **Date** **19**

Division Registrar's Record No.
Date of Registration 19 (For use of Division Registrar only) (Signature of Division Registrar)

32

MARGIN RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING INK. THIS IS A PERMANENT RECORD.

CITIZENSHIP (NATIONALITY) is defined in terms of the country to which the person owes allegiance. The term "Canadian" should be used as descriptive of a person who was born in Canada or who has rights of Citizenship in Canada, unless he or she has subsequently become the citizen of another country.

RACIAL ORIGIN is defined in terms of the people or race to which the person—traced through the father—belongs, whether English, Irish, Scottish, French, German, Russian, Ukrainian, etc. The terms "Canadian" or "American" should not be used for RACIAL ORIGIN, as they express CITIZENSHIP (NATIONALITY).

In case of Stillbirth consult reverse side before making out certificate.

FOR COMPLETION AND RETURN BY

Form P. 64

Mr. Donat Dion,
1444 Drouillard R d.,
Windsor
Ont.

Any further communication on this subject should be addressed to:—

THE DIRECTOR OF ESTATES,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO.

and the following number quoted:—

H.Q. 405-D-17,099 F^D-298

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

Oct., 2, 1944

For the purpose of record and in the event of there being any Service estate available for distribution (according to law) on account of the late

DION Laurence Joseph Pte.

A.118078 CA

ESTATES BRANCH OCT 14 1944 H.Q. OTTAWA NATIONAL DEFENCE

it is necessary that certain information regarding the deceased and his relatives should be furnished the Estates Branch. You are asked therefore to read the enclosed memorandum before completing pages 2 and 3 of this form. The particulars required are to be carefully filled in and the Declaration on page 4 should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths, Notary Public or a Commissioned Officer of any of His Majesty's Forces who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

If there is insufficient space for complete particulars to be given opposite any question on pages 2 and 3 of this form, the space under "additional remarks" on page 4 should be used.

JMR/HS

Director of Estates.

M.F.W. 77
6-44 (4878)
H.Q. 1772-39-972

ANSWER IN FULL ALL APPLICABLE QUESTIONS

STATEMENT of the Names, Ages and Addresses or Dates of Death, of all the relatives that the deceased ever had in each of the degrees specified below:

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT: NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased		—		
2	Children of the Deceased and dates of their Births		—		
3	Father of the Deceased		David Donat Dion	52	1444 Drouillard
4	Mother of the Deceased		Aurore Baribeau	27	(17 June 1923 - date of death)
			Marie Germaine Baribeau	40	→ adopted mother 1444 Drouillard Rd
5	Brothers of the Deceased	Full Blood			
		Half Blood	Marcel Dion	17½	1444 Drouillard
			Roland Dion died at age of 1 yr 3 mo.		(29 June 1928)
6	Sisters of the Deceased	Full Blood	Lorraine Dion	~~23~~	
			Marlin	23	Cadillac St Windsor
		Half Blood	Claire Dion	11	1444 Drouillard
			Pauline Dion	10	1444 Drouillard
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each.		Names and ages of their children (if any)		Address of their children
	Roland Dion 29 June 1928				

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Laurent Joseph Dion
9	Date of his birth.	24 May 1923
10	Place and date of his marriage.	
11	Place and date of his parents' marriage.	Drummondville, P.Q. 29 November 1920

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Drummondville P.Q.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Pro. of Quebec 1923 (one month (b) (c) Pro. of Ontario - Essex County (d) up to his enlistment 1942
14	Nature of employment before enlistment.	Shipper - Laborer
15	State whether he owned the premises in which he lived, and, if so, where situated.	— no
16	Name place where deceased stated he intended to make his permanent home.	Back to the home on Dromillard Rd.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	may have one in the Army — but not to our knowledge
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	—
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	Provincial Bank of Canada - Dromillard Rd Windsor. Amount [redacted] $375.25
20	Amount of War Savings Certificates held by deceased. Indicate where located.	$95.00 1444 Dromillard Rd. Windsor
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	$350.00 — not Registered. 1444 Dromillard Rd. Windsor
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Aetna Life Insurance - $2000.00 → Marie Germaine Dion "La Sauvegarde" - $1000.00 Marie Germaine Dion
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	no Debts
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	Father Paid the Funeral Service $25.00 masses for deceased $10.00 at Our Lady of Rosary Church Windsor Ont.

(NOTE:—The government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada or elsewhere in the North American zone, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)

(PLEASE TURN OVER)

DECLARATION

*Insert degree of relationship for example, "Widow", "Father", "Brother", etc.

I hereby declare that all the particulars shown on this form are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees specified; and that I am the

*.....Father.....of the deceased.

N.B.—To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

.....Donat David Dion..... {Signature of Informant

.....1444 Drouillard Windsor..... Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief.....Donat David

See above. .....Dion..... {Name of informant} is the.....Father.....of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at.....Windsor.....this.....11th.....day of.....October.....19 44

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

.....Raymond G. Horton..... Qualification.....Priest.....

Address.....229 Cadillac St. Windsor.....

NOTE.—Before granting the above Certificate, care should be taken to see that the informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative specified is stated in its proper place in the Statement opposite.

(If the deceased has no living relatives of the degrees shown on page 2, the names and addresses and relationship of other relatives should be set out below.)

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

Personal Belongings:-

Wrist Watch worth	$50.00
Fountain Pen & Pencil "	$15.00
Wallet "	$5.00
Rosary "	$5.00

Read this whole Form and Instructions on other side before commencing to complete.

WILL

M.F.M. 10
150M—6-42 (4820)
H.Q. 1772-39-1656

(1) I, LAURENCE JOSEPH DION (Name in Full), of the CITY (City, Town, Village, Township)

Address in civil life.

of WINDSOR, in the County ~~XXXXX~~ of ESSEX

Province of ONTARIO, FACTORY HAND (Civil Occupation)

Regimental No. A-118078, Unit NO. I DD (WD), do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

Relationship, names and address of beneficiaries, and what each is to receive.

(2) I GIVE, DEVISE AND BEQUEATH unto MY STEP-MOTHER

MRS. GERMAINE DION,

1444 DROUILLARD RD.,

WINDSOR, ONTARIO,

ALL MY ESTATE

Relationship, names and address of residuary beneficiaries.

~~(3) I GIVE, DEVISE AND BEQUEATH all the rest and residue of my estate, both real and personal of whatsoever kind and wheresoever situate unto~~

(4) I appoint MRS. GERMAINE DION, (Name) 1444 DROUILLARD RD., WINDSOR, ONTARIO (Address)

HOUSEWIFE (Civil Occupation), to be the ~~Executor~~ Executrix of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 28 day of May 1943

Signed and acknowledged by the Testator, in the presence of us present at the same time who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as witnesses.

Laurence Joseph Dion (Signature of soldier)

First witness sign here.

(5) Signature C R Lawson

Civil Address 28 Cartwright St., London, Ontario.

Civil Occupation Clerk.

Second witness sign here.

Signature Julia D. Dale

Civil Address Petrolia, Ontario.

Civil Occupation Clerk.

(Witnesses are not to be beneficiaries.)

[OVER]

25M-12-44 (6215)
H.Q. 1064-81-3

4
ARMY

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Laurence Joseph (CHRISTIAN NAMES) DION (SURNAME)

REGISTER NO. D-15843
FILE NO. 405-D-17099
DATE 10-1-46
SERVICE NO. A-118078
FINAL RANK OR RATING Pte.
DATE OF DISCHARGE 30-7-44

PAYEE Director of Estates
ADDRESS

DATE OF TERMINATION OF OVERSEAS SERVICE 30-7-44

	$ ¢
A. TOTAL QUALIFYING SERVICE — NO. OF DAYS 419/30 EQUAL TO 13 COMPLETE PERIODS AT $7.50	97.50
B. QUALIFYING OVERSEAS SERVICE — No. of Days 219 LESS 29 INELIGIBLE DAYS, EQUAL TO 190 DAYS @ 25c. PER DAY (SEE PAR. 2 OVERLEAF FOR EXPLANATION)	47.50
	145.00
C. SUPPLEMENT FOR OVERSEAS SERVICE	
DAILY RATES AT DISCHARGE: PAY $ 1.50; SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.25; ADDITIONAL PAY $; $; $; DEPENDENTS' ALLOWANCE 1/30 OF $; $	
TOTAL $ 2.75 X7 = $ 19.25; NO. OF DAYS 219/183 X$ 19.25	23.04
D. WAR SERVICE GRATUITY	168.04
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES $; DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $; OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE	168.04

G. YOUR PORTION OF GRATUITY IS— 100%

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ _____ OF $ = $

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

ΔT

CERTIFICATE I CERTIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED AND IS PAYABLE IN ACCORDANCE WITH THE TERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REGULATIONS ISSUED THEREUNDER.

PREPARED BY	CHECKED BY
KIM	[illegible]

TREASURY	
CHECKED BY	DATE
[illegible]	14.1.46

[illegible]
SERVICE REPRESENTATIVE

IM

DISTRIBUTION OF SERVICE ESTATES

ARMY

Estates Form "P. 4"

Name: DION (Surname) Laurence J. (Christian Names) No.: A-116078

Pte. (Rank) C.A. O/S. (Unit) 30-7-44 (Date of Death)

AMOUNT

Date: 9-7-45

L.P.C. $ 36.25

Other Credits 381.32

Total 417.57

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Stepmother	Mrs. Germaine Dion 1444 Drouillard Rd., WINDSOR, Ont. (Sole beneficiary under will)	417.57

P4. TO TREAS. 25-8-45 AW

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	417.57

CLASSIFIED BY

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Lt.-Colonel
Administrator of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

50M—8-44 (5426)
H.Q. 1772-80-2

MFM 510
40/P & S/254 (3444)

CANADIAN ACTIVE SERVICE FORCE
OVERSEAS

District.....

Dispersal Area.....

LAST PAY CERTIFICATE
(All Ranks)

Regtl No A.118078 Rank and Name Dion, L.J. Pte.

of (Unit)..... on.....

~~(Transfer or~~ Discharge)..... to..... on 30th July 19 44.

Reason Death. Authority: C.C.L. "A"482. d/25th Aug 44.

The following is a statement of the account of the above-named from 1st July to 31st July 19 44. the inclusive date of transfer or discharge.

Dr Particulars	Amount		Cr Particulars	Amount	
Balance Dr from last account			Balance Cr from last account	39	06
First Monthly Payment AR.49 d/15.7.44	22	35	Regimental Pay 31 days @ $1.50	46	50
Casual Payments			Tradesmen's Pay ..... days at ..... $		
Payments on Transfer or Discharge			Additional Pay (Give particulars) ..... days at ..... $		
Assigned Pay	27	00			
Regimental Charges			Allowances (Give particulars) ..... days at ..... $		
Public Stoppages (Give particulars):			Def. Pay Interest.		04
To Balance Cr — Free	31	25			
To Balance Cr — Deferred	5	00	By Balance Dr		
	36	25			
Total	85	60	Total	85	60

BALANCE GIVEN IS SUBJECT TO ANY CHARGES AND/OR CREDITS ENDORSED ON THE REVERSE HEREOF

Remarks:

Assigned Pay $27.00 (M) Stopped eff. August, 44.

The above statement has been compiled from Treasury Records, the latest paybook not being available.

ESTATES BRANCH FEB 15 1945 H.Q. OTTAWA NATIONAL DEFENCE

Compiled by M. Durham.

Checked by E.V. Collins

Date 6th February, 19 45.

Certified correct [signature]
for Chief Treasury Officer, Overseas

AR.

2000

FORM No. 1

Register No. D-15843 Nominal Roll No. D-388

To: P.M.C. H.Q. File No. 405-D-17099

CANADIAN ARMY (ACTIVE)

Computation of Service

WAR SERVICE GRANT

Regt. No.	Rank when S.O.S.	Surname	Christian Name in Full
A118078	Pte	DION	LAURENCE JOSEPH.

REASON FOR TERMINATION OF SERVICE:

1st Enlistment KILLED CARO ( )

2nd Enlistment CARO ( )

3rd Enlistment CARO ( )

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. 28 MAY 43 AL.	T.O.S.	T.O.S.
S.O.S. 30 JUL 44 MD OS.	S.O.S. MD	S.O.S. MD
Total Days 430	Total Days	Total Days

Total Service 430 DAYS

—	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere	201 RL	1	200 RL
Overseas Service	229	10	219
Totals	430 RL	11	419 RL
Add Non-qualifying Service			11
Total Service			430 RL

T.O.S. O/S. 15 DEC 43

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 30 JUL 44 2. Date S.O.S. Overseas

REMARKS:

KILLED IN ACTION 30 JUL 44

Computer's Signature

Checker's Signature J. F. O'Leary

Date Computed 6 MAY 45

ALL DOCUMENTS SHOW ABOVE DATES T.O.S. & S.O.S.
INITIALS
D. RECORDS D. R. 9

CERTIFIED that entitlement to benefits under the War Service Grants Act, 1944, has been established, based on service shown herein.

C. L. LAURIN,
Colonel,
DIRECTOR OF RECORDS.

500M—11-44 (6012)
H.Q. 1772-45-8

Details of Non-Qualifying Service

Western Hemisphere—

Forfeits for	From	To	Effective Date	Days	Total
AWL.	18 Oct 43			1	1
				Total	1

Overseas: T.O.S. 15 DEC 43 T.O.S. T.O.S.

S.O.S. 30 JULY 44 S.O.S. S.O.S.

AA 40			18 Apr 44	10	10
				Total	10

CFA 187
40/P & S/2[illegible] (4066)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

of personal effects received by
Casualty Section, No. 1 CKSD

No., RANK and NAME ..A-118078 Pte. Dion L. J. (Deceased).....

RECEIVED FROM .....Cdn Sec GHQ 2nd Echelon 21 Army Group.....

CHECKED BY .....C-5591 Pte. Patterson L.K.
B-126252 Cpl. Sislofsky A. ..... DATE 17 Nov 44.....

	Personal Letters		
	Postcards		
1	Rosary		
2	Div Patches		
2	Shoulder Unit Titles		
2	Red Service Stripes		
1	Leather Cigarette Case		
1	Pair Swimming Trunks		
1	Pen and Pencil Case (Empty)		

ORIGINAL } To Officer i/c Estates with
DUPLICATE } original inventory, if any.
TRIPLICATE — with effects.

A. Sislofsky Capt
for OC 1 Cdn KSD

CFA 187
40/P & S/2[illegible]4066)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

of personal effects received by
Casualty Section, No. 1 CKSD

101

No., RANK and NAME ..... A-118078 Pte. Dion L. J. (Deceased) .....

RECEIVED FROM ..... H.Q. No. 1 C.K.S.D. .....

CHECKED BY ..... C-5591 Pte. Patterson L.K. B-126252 Cpl. Sislofsky A. ..... DATE .... 4 Oct 44 .....

1	Khaki Dress Shirt		
3	Cotton Undervests		
1	Woollen Sweater		
2	Cotton Towels		
1	Black Tie		

ORIGINAL } To Officer i/c Estates with
DUPLICATE } original inventory, if any.

TRIPLICATE — with effects.

Sislofsky Sgt
for OC 1 Cdn KSD