

B9723
GEGEAR
D'ARCY JAMES

THE CANADIAN PENSION COMMISSION

MEMORANDUM

To.....Pension Medical Examiner, **TORONTO**

Ottawa, **Nov.21st, 1944.**

From.....Head Office.....

B-9723 GNR. GEGEAR, Darcy J.

P. & N. H.

677-D

The Department of National Defence, **Army,**
officially reports that the marginally named was reported -
Killed in action,
on the **25th Oct. 1944** on service **Overseas.**

His next of kin is reported as -

**Father -
Mr. James Andrew Gegree,
Box 74,
Cadillac, Que.**

The Addressograph Stencil shows payment of Assigned Pay of

\$ **20.00** a month to - **Mrs. Lottie Gegree,
(Relationship not stated.)**
DISC. 22.3.43

As no D.A. was payable the Commission will not take
any action unless a claim is filed.

 /AS

E. Clewes,
for
Canadian Pension Commission.

25-10-44

AWARDS—CANADIAN ARMY (ACTIVE)

1838

M

C.B.

500M-1-44 (3467)
H.Q. 1772-45-8

FILE NO. 405-G-18,194

<u>GEGEAR</u> Darcy James	B-9723	Gnr.	R.C.A.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE
			C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS)

NO.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	4140 22/10/49
France & Germany Star	
Defence Medal	
War Medal, 1939-45	
CVSM & Clasp	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO Mrs. Lottie GEGEAR (MOTHER)

ADDRESS: Box 74,
CADILLAC, Que.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. Lottie Gegear, (MFM5) (ENGLISH)

1838

ADDRESS: Box 74, Cadillac, Que.

MEMORIAL BAR

DATE DESP.....

REGN. NO.....

247

(2)

(3) DESP. FEB 17 1945

REGN No. 13907

3.9723 *MOR* GEGEAR *Still overseas* D'ARCY
 Regt'l Number Last Name First Name

CARDS PUNCHED-1
 JAMES
 Middle Names

3-46 14th Field Regt
 Unit *No. 1 C.A.R.U. (Ability)*
 1 Corps *R.C.A. (Fd.)* *(R)* 264

2 Nationality *08* *Canadian* By Birth By Naturalization Country of Birth *Canada*
 3 Racial *French-British* 4 Language spoken in home: French
 Origin *French-British* Other English

50" M" Test Score SM
 1 15 S. Test *40*
 2 13 SM
 3 12
 4 23 *48*
 5 25 SM
 6 8 S. Test *47*
 7 15 SM
 8 24
 Tot. 125 SM Grade C

25 Second Most Important Occupation: Description: *9418 Truck driver*
 Duration (from-to) *July/40 - Aug/41*
 Employer's Name and Address
 Estimate of skill Weekly Wage *15.00*

5 Age *21 7/12* 6 Height *6'3"* 7 Weight *172* 8 Silhouette
 9 Eyes: *1* Colour of *Blue* 10 Acuity 11 Glasses
 12 Hearing: Acuity 13 Speech Defects

9
 10
 11
 12
 13
 14
 15

26 Third Most Important Occupation:
3544 Various odd jobs
 Duration (from-to) *June/38 - July/40*
 Employer's Name and Address *Various*
 Estimate of skill Weekly Wage

14 Handedness 15 Med Category *A*
 Cause
 Attitude to own health *Reasonable* To Medical attention
 Health History

16
 17
 18
 19
 20
 21
 22
 23
 24

Trade Union or Professional Society
 Vehicles: 27 Heavy Truck 28 Light Truck *D* 29 Auto *D* 30 Motorcycle
 31 Farm Tractor 32 Tracked Vehicle 33 Power Launch 34 Aeroplane
 35 Accident Prone

16 Education Level: Illiterate E *8 (16)* S (Grade completed)
 Conduct during school life

51 OTHER MENTAL
 Test
 Score L. Grade
 Date

Farming Experience: Wide Limited
 District Type
 Job promised after discharge By whom? Name
 Address
 Other provision for post-discharge occupation
 Type of work desired *motor mechanic*
 Occupational history: Ambitious Accidental
 Stable Erratic

17 University or Professional	Course Taken	Years Completed	Degree
19 Post Graduate	Course	From-To	Degree

52 MECHANICAL
 Test
 Score Grade
 Date

Specialized Training:
 20 1. (Course)
 At From-To Completed
 21 2. (Course)
 At From-To Completed
 22 3. (Course)
 At From-To Completed

53 TRADE TEST
 1. Score G. Date
 2. Score G. Date
 3. Score G. Date
 4. Score G. Date

36 Material Status: M S W D Sep.
 2 Marital Problems (Remarks)
 Age of wife Wife's attitude to Service Wife's Health
 37 No. of Children No. Brothers *3* No. Sisters *1*
 Position in family *3* 38 No. Dependents *0*
 Relationship of Dependents
 Status of home in childhood

Other trades papers, Diplomas
 Certificates or Qualifications

54 OTHER
 Test
 Score Grade
 Date

39 Hobbies: Photography M S Radio Engines
 Mechanics Other
 40 Sports: (1) *Shunting (dex-bar)* (2) *Skating - Skating* (3)
 Team Games and Position (1) (2) (3)
 41 Ability to Entertain: Music: String Brass
 Woodwind Percussion Piano Vocal
 Theatrical Other

23 Languages: Spoken fluently *English*
 02 Written well
 24 Main occupation: Description *Lineman (Hydro-electric)*
 4950 Estimate of skill *Good*
 Duration (from-to) *July/37 - June/38* Weekly Wage *125.00*
 Employer's Name and Address *Northern Ontario Power Co. New Luskland - Ont.*

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 ^{22/10} 28/09/41 Place Enlisted North Bay - Ont.

Date From-to	Country	Corps	Unit and Sub-unit	Rank	Principal Duty	Performance
28/9/41 - 30/10/41	Canada	R.C.A.	#22 B.T.C.	priv.	Training	
30/10/41 - 6/1/42	"	"	C.A.T.C. (A2) Bdy	1/6dr.	Training & M.T. Driver	307
18/1/42 -	England	"	No. 1 C.A.R.U. / Rty			
3/4/42	Can	"	14th Gld. Regt.	priv.		
11/8/43	GB	"	"	"		

45 COURSES ATTENDED

PLACE	Date: From-to	Qualified as	Rating
M.T. Training	7 weeks Nov-Dec/41	Driver III	832
Tank Equip & Tank. Pl. att.	3. C.A.R.U. 18.7 - 11.8.43		

46 Crime: Number Courts Martial Convictions Hospitalization
 Number Civil Convictions Minor Offender Occasional Offender
 Chronic Major Offender Chronic Minor Offender Occasional Offender

49 Psychiatric

47 Classification: Military Specialties and Trades

Designation	Degree of Proficiency	Date	Authority
Driver 307	Class III	18.12.41	Do. 169

55 Type of Service Desired (1) Driver mechanic (A.Ty) (2) 167

Remarks re Outstanding or Limiting Factors
 - well built, fine looking chap. - He should be N.C.O. material - is anxious to learn a trade while in the Army, preferably as a mechanic, though he has had little experience for either this work. - Suggest C.M.H.Q. Course # 197 Motor Mechanic, or a Junior N.C.O.'s course.

1 Oct 42. 5 hours of B.T.C. Refd. as driver II

Attitude to Interview: Antagonistic Overanxious Co-operative Indifferent

Reason for Joining Cdn. Army (if ascertainable) - was a trainee, and then decided to join active as he liked army well enough.

48 Suggested Possibilities for Employment (1) - train as driver mechanic (2) - possibly N.C.O.'s course

Tests Indicated: 2nd Mental Mech. Apt. Clerical Apt.
 Other Apt. Pers. Trade Test as

Interviewed by J.R. McIntosh - Lieut. R.C.A. Date 4/2/42
 Reviewed by Date

MILITIA ACT
THE NATIONAL RESOURCES MOBILIZATION ACT, 1940

N.R.M.A. PERSONNEL
ENROLMENT FORM

N.R.M.A. Serial Number of Notice of Call B.37952. Regimental Number B.605973.

- 1. Taken on Strength of No. 2 N.R.M.A. Clearing Depot Toronto, Ontario, Canada
- 2. Surname (Block Letters) G. E. G. E. A. R.
- 3. Christian Names (in full) DARCY, JAMES
- 4. Present Address ²⁶ 27 McAnus Street, Kirkland Lake, Ontario, Canada.
- 5. Place of Birth Canada, Ontario, Copper Cliff
(Country) (County or Province) (Town or Township)
- 6. Date of Birth August 15th, 1920. 7. Religion—Roman Catholic.
Denomination
- 8. Physical Description: Height 6'3" Weight 162 lbs. Eyes gray Hair brown
Complexion fair Identification marks Scar over left knee.
- 9. Married, Single, Widower? Single
- 10. Next-of-Kin Mrs. Lottie Gregear. Relationship Mother
(Name)
27 McAnus Street, Kirkland Lake, Ontario, Canada.
(Address)
- 11. Trade or Occupation Labourer.
- 12. Previous Naval, Military or Air Service NIL
(State Units and Dates of Service)
- 13. Preference, if any, for, R.C.N.? Yes Army? NIL R.C.A.F.? NIL
(Arm of Service)
- 14. Employment in War Industry, if any NIL

Darcy James Gregear
(Signature of Man)

E. Elliott - Hunt
(Signature and Rank of Enrolment Officer)

Aug 28 1941.
(Date of Signature)

TRAINING CENTRE PARTICULARS

- A. Attached to Basic T.C. No. 22 at North Bay, Ontario. Date August 28th, 1941
Completed..... Days Basic Training.
(Date, Signature, and Rank of Recording Officer)
- B. Attached to Advanced T.C. No. at Date
- Completed..... Days Advanced Training.
- Qualities of Leadership, Positive..... Becoming Evident?..... Dormant?.....
- Transferred to..... Date.....
(R.C.N., formation or unit of the C.A., R.C.A.F.)
- (Date, Signature and Rank of Recording Officer)
- C. Medical Category on acceptance at Basic Training Centre "A"

Regtl. No **B. 605972.** Rank Surname **G E G E A R** Christian Names **DARCY, JAMES.**

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief Details and Signature	Date	Brief Details and Signature	Date	Brief Details and Signature
5.9.41	VAC.- T.A.B.T. 1 T.A.B.T. 2 T.A.B.T. 3 <i>Jlgn</i>				
26.9.41					
16.10.41					
10.9.41	<i>Lay neg Jlgn</i>				

STATION	Date of Arrival at Station	DATES OF						DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied.	Signature of Medical Officer
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				

ORIGINAL
DUPLICATE
TRIPLICATE

M.F.M. 2
A.F.B. 271
200M-3-41 (9720)
H.Q. 1773-30-1046

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

Unit No. 2 District Depot C.A. (A) Regimental Number B. 9723

R.C.A. WING

ACTIVE FORMATIONS AND UNITS OF THE CANADIAN ARMY

ATTESTATION PAPER

1. Surname..... G E G E A R
2. Christian Names..... D A R C Y J A M E S
3. Present address..... 27 McCamus Avenue, Kirkland Lake, Ontario.
4. Date of birth..... August 15th. 1920
5. Place of birth..... Canada Ontario Coppercliff
(Country) (County or Province) (Town or Township)
6. Religion (state denomination)..... Roman Catholic
7. Trade or Calling..... Labourer
8. Married, Widower or Single..... Single
9. Name of next of kin..... Mrs. Lottie Gogear
10. Relationship..... Mother
11. Address of next of kin..... 27 McCamus Avenue, Kirkland Lake, Ontario.
12. Do you belong to, or have you served in a Reserve Formation or Unit of The Canadian Army?..... Yes
D. 605973 No. 2 N.R.M.A. Clearing Depot August 30th. to October 21st 1941
(If Yes, Give Unit and Dates of Service)
13. Have you served in (a) an Active Formation or Unit of The Canadian Army?..... No
(Yes or No)
..... (b) Any other Naval, Military, or Air
Force?..... No
(If Yes, Give Regimental No. and Unit) (Yes or No) (If Yes, specify Unit and Period of Service)
14. Did you serve during the Great War 1914-1918?..... No
(If Yes, specify Regimental No., Unit and Dates of Service)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, DARCY JAMES GEGEAR, 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 October 22nd 1941. D J Gogear (Signature of recruit)

Witness: [Signature]

OATH TO BE TAKEN BY MAN ON ATTESTATION

I, DARCY JAMES GEGEAR, do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

D J Gogear (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 North Bay, Ontario. this 22nd day of October 1941

[Signature] Major {Signature of Magistrate, Justice or Attesting Officer.
2 1/c No. 22 (Basic) P.C. North Bay {Office or Rank and Unit
A/Commissioner 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

Record of Service of GEGEAR (Surname) DARCY JAMES (Christian Names) Regimental Number B. 9723

QUALIFICATIONS

EDUCATIONAL QUALIFICATIONS

Military Nil High School } Nil Graduation } Nil
 Business or Professional Nil or } (years completed) } OR } (specify)
 Trade or Civil Labourer Collegiate } *College Nil Matriculation }
 Technical Nil *University Nil
 Languages English

*(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.

Report		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Canadian Army. (Active)	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		Joined on appointment						
22-10-41	T.O.S. No. 22	(B) T.C. North Bay, Ont. on Attachment From <u>No. 2 D.D.</u>	C.N.R.	22-10-41	<u>No. 22</u>	<u>North Bay</u>	<u>D.O. 245</u>	<u>27-10-41</u>
28-10-41	B.T.C. No. 22	S.O.S. ON TRANSFER TO No. <u>Det. A.T.C. Petawawa Ont</u>	"	29-10-41	"	"	<u>D.O. 250</u>	<u>28-10-41</u>
		T.O.S. C.A.T.C. (A2) ALL PURPOSES	"	30-10-41	C.A.T.C. (A2)	PETAWAWA	<u>" 125</u>	<u>30-10-41</u>
		<u>To be A/L/Bdr. without pay.</u>	<u>A/L/Bdr</u>	<u>19-11-41</u>	"	"	<u>" 143</u>	<u>20-11-41</u>
		<u>Qualified 3rd class driver</u>	"	<u>18/12/41</u>	"	"	<u>" 169</u>	<u>20/12/41</u>
		<u>Reprimanded 4 forfeits 1 day pay F.R. & I</u>	"	<u>31-12-41</u>	-	-	<u>" 2</u>	<u>1-1-42</u>
		<u>2 Wk. 23 hrs. 30 min.</u>	"				<u>" 4</u>	<u>6-1-42</u>
		<u>Reverted to permanent rank of</u>	<u>Gnr.</u>	<u>6-1-42</u>	"	"		
		<u>gunner on proceeding to port of embarkation</u>	<u>Gnr</u>	<u>6-1-42</u>	"	"	<u>" 4</u>	<u>6-1-42</u>
		<u>CEASES TO BE ATTACHED C.A.T.C. (A2) ALL PURPOSES.</u>						
		<u>on proceeding to port of embarkation</u>						

SOS-CASF (CANADA) ON EMBARKATION AT 8 Jan 42
 T.O.S. CASE ON TRANSFER ON 9 Jan 42 AND DISEMBARKED AT 19 Jan 42
 T.O.S. I ARTILLERY ON LDING UNIT

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

Gnr. 20 Jan 42 1 CARJ UK

2015 21-1-42

CERTIFICATE OF MEDICAL EXAMINATION

Name in full DARCY JAMES GEGEAR Place North Bay, Ontario.
 Place Kirkland Lake, Ontario. Date October 21st. 1941.

Part 1. Information obtained from the recruit.

1. Age 21 2. Have you ever suffered from any of the following diseases?
- | | | | |
|------------------------------|-----------|---|-----------|
| a. Rheumatism | <u>NO</u> | k. Ear disease | <u>NO</u> |
| b. Tuberculosis or pleurisy | <u>NO</u> | l. Eye disease | <u>NO</u> |
| c. Bronchitis or asthma | <u>NO</u> | m. Fits | <u>NO</u> |
| d. Heart disease | <u>NO</u> | n. Nervous or mental disease | <u>NO</u> |
| e. Kidney or bladder disease | <u>NO</u> | o. Syphilis | <u>NO</u> |
| f. Stomach or bowel trouble | <u>NO</u> | p. Gonorrhoea | <u>NO</u> |
| g. Rupture | <u>NO</u> | q. Have you ever worn glasses? | <u>NO</u> |
| h. Varicose veins | <u>NO</u> | r. Are you now or have you in the past received disability pension or compensation? If so, give details | <u>NO</u> |
| i. Foot trouble | <u>NO</u> | | |
| j. Nasal trouble | <u>NO</u> | | |

D. J. Gearing
 Signature of Applicant

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

1. Identification marks or scars. (If operative obtain history).
Scar Outside Right Ankle
2. Height 6 feet 2¹/₂ inches. 3. Weight 168 pounds.
4. Complexion Fair Eyes Blue 5. Development Good Good
Fair
Poor
- Hair Fair
6. Chest measurement—Girth on full expansion 39 inches.
 Range of expansion 3 inches.
7. Vision, right 20/60 left 20/30 8. Hearing, right c.v. 20' left c.v. 20 ft.
 With Glasses— right 20/30 left.....
9. Condition of mouth and teeth Good
10. The abnormalities (congenital and pathological) found on examination are as follows.....
Ears - Normal
Urine - Normal
Reflexes - Normal

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.....

P. A. White President *W. G. Gearing* Member *B. G. Gearing* Member

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
21-10-41	Xray Chest Negative <i>W.G.</i>		
29.11.41	VAC. <i>J.P.M.</i>		
26.9.41	T.A.B.T. 1		
10.10.41	T.A.B.T. 2		
	T.A.B.T. 3		
26-11-41	CAT, CONFIRMED <i>J.P.M.</i>		
PETAJAWA	<i>J.P.M.</i>		

Regtl. No. B. 9723

Rank ~~SERGEANT~~ CNR

Surname GEORGE

Christian Name DARCY JAMES

STATION	Date of Arrival at the Station	DATES OF						DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied.	Signature of Medical Officer
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				

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

No. ~~60577~~ ^{B9123} Name Ciegear, D.J. Sqn., Battery, or Company } # 2 N.R.M.A. Clearing Depot

Corps R.C.A.

Date of enlistment } 28/8/41

G.C. Badges }

Service or Proficiency Pay }

M.F.M. 6
(A.F.B. 122)
500M-11-40 (8025)
H.Q. 1772-45-18

Date of last entry in Company Conduct Sheet }

No. and date of last drunk }

Period not reckoning towards freedom from extra fine }

Sheet No. 22-10-41

Signature O.C. Company, etc. [Signature]

Character [Signature]

34

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
<u>North Bay</u>									
<u>Petawawa</u>	<u>28/12/41</u>	<u>L/Bdr.</u>	-	<u>Overstaying pass from 0700 hrs 28/12/41 until 0630 hrs 29/12/41. Absent 23 hrs 30 min</u>	<u>Sgt. McDonald</u> <u>Sgt. Johnston</u>	<u>Reprimanded</u>	<u>30/12/41</u>	<u>M. J. C. F.</u> <u>W. J. J.</u>	<u>1 day pay.</u> <u>P. R. J. J.</u>
<u>In the field.</u>	<u>20-6-42</u>	<u>G.N.R.</u>	-	<u>A.W.L. from 1200 - 1410 hrs 20 June 42 - 2 hrs. 10 min AA 15 (1)</u>	<u>Sgt. Keating J.K.</u>	<u>2 days C.B.</u>	<u>23-6-42</u>	<u>M.C. Hoel</u> <u>Major</u>	<u>R.A. Bain</u>
" " "	<u>25 Dec 42</u>	"	"	<u>A.A. 15(1) absent 2 hrs</u>	<u>BD MS Bly J.A.</u>	<u>7 C.B. 7 days pay</u>	<u>26 Dec 42</u>	<u>St. Col. H.S. Stiffin</u>	<u>E.</u>
" " "	<u>13 Feb 43</u>	<u>Sgt.</u>	"	<u>A.A. Sec 40 Conduct of vehicle of W.A. vehicle.</u> <u>A.A. Sec 40 Conduct of vehicle making a false entry in work sheet.</u>	<u>H. Bl. Duley, Et.</u> <u>G.M. Kallins, M.M.</u>	<u>28 days pay</u> <u>and</u> <u>28 days F.P.</u>	<u>15 FEB 43</u>	<u>W. C. Kuff</u>	<u>ht kuff</u>

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER **B-9723**

RANK **Gunner**

SERVICE UNIT **14th Field**

Regiment R.C.A. (C.A.)

NAME **GEGEAR, Darcy James**

DATE OF BIRTH

DAY **15th**

MONTH **August**

YEAR **1920** Date Enlisted: **22-10-41**

MARITAL STATUS

Single

Religion: **Roman Catholic**

NEXT OF KIN AS SHOWN ON
M.F.M. 1, 2 & 5 RELATIONSHIP

Father

NAME
ADDRESS
D.A.B.

Mr. James Andrew Gearing,

ADDRESS

**Box 74,
Cadillac, Quebec.**

ADDITIONAL PERSON
TO BE NOTIFIED

ADDRESS

PARENTS NAME

ADDRESS
(IF SOLDIER
MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO.

Canrecords 3028A

H.Q. 405-G-18,194

CASUALTY DETAILS

Killed in action

DATE **25-10-44**

FRANCE

LAST WILL ATTACHED TO
NOTIFICATION TO A. OF E.?

YES/NO

M.F.M.5. ATTACHED TO
NOTIFICATION TO A. OF E.?

YES/NO

DATE **9-11-44**

MM

O/S with R.C.A.

S/L 1151

OFFICER I/C RECORDS

6

COPY FOR DOCUMENT FILE

(a) Report		(b)	(c)			(g)
Date	From whom received	Unit	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	Place of Casualty	Date of Casualty	Army rank as at (e) Army Form or other authority for entry to be shown
			SOS-CASE (CANADA) ON EMBARKATION AT ON 8 Jan 42			
			TOS-CASE (OV. SEAS) ON TRANSFER ON 9 Jan 42 AND EMBARKED AT ON 19 Jan 42			
21-1-42		ICARU	T.O.S. I. ARTILLERY HOLDING UNIT	U.K.	20 Jan 42	Gnr LD 15
2 Apr 42			S.O.S. to 14 th Field R. (Spec. M.)		2 Apr 42	P-0-76
2 Apr 42	O.C.	14 th Field R.	T.O.S. from No 1 ICARU	Field	3 Apr 42	20 No 18 d 10 Apr 42
			S.O.S. to 14 th C.F.R.		25 Jun 42	30 29 Jun 42
			T.O.S. from Sp. Sme.		26 Jun 42	30 29 Jun 42
			P.L. (9 days) to 18 Nov 42		9 Nov 42	53 d/3 Dec 42
29 Dec 42			Awarded 7 days C.B. for 7 days pay for an offence under A.A. Sec 15 (1) A.W.L. from 2300 hrs, 25 Dec 42 to 0800 hrs, 26 Dec 42 (2 hrs). For 7 days pay FR&I 179 (2)	Field	26 Dec 42	Pl. II No. 2 d/14 Jan 43
19 Feb 43			28 days F.P. for 28 days pay for an offence under Sec 40 A.P. For 28 days pay FR&I 179 (1) (b)		15 Feb 43	Pl. II No. 10 d/4 Mar 43
19 Feb 43			Att. App. to 1 F.P. Camp P. No. 2		16 Feb 43	10 d/4 Mar 43
18 Mar 43			Placed att. to 2 F.P. Camp P. No. 2		13 Mar 43	15 d/1 Apr 43
			Granted Daily Rates of Pay of 11 th pers. div		15 Jun 43	27-28 Jun 43
27 Jul 43			Proc on 3rd Equip. - Inland Course & att to 3 C.A.C.R.U. to 14 Aug 43		18 Jul 43	32 d/27 Jul 43
4 Oct 43	"	"	Increased R.R. of Pay to \$1.50	"	16 Aug 43	42 d/7 Oct 43
25 Nov 43			Graded Dr. Mech "C" (JTB Report)		16 Nov 43	49 d/25 Nov 43
			Graded T. Pay Dr. Mech "C"		16 Nov 43	49 " "
			Awarded Canadian Volunteer Service Medal and Clasp		15 Jan 44	3 - 22 Jan 44
			EMBARKED U.K.		1 Jan 44	29 - Jul 44
			DISEMBARKED FRANCE		6 Jun 44	
			Reclassified as Dr. Mech MV "C"		8 Jul 44	30 - Jul 44
			SOS Killed in Action (Dr. Mech MV "C")		25 Oct 44	45 - Nov 44

M. F. M. 14
 480M-10-40 (7443-4)
 H. Q. 1772-39-1662
 No. B 9723

34

RANK ~~SPEX~~ GNR NAME GEGEAR James Darcy

*MARRIED PLACE OF ENLISTMENT
 *WIDOWER AND DATE 22-10-41
 *SINGLE Toronto, Ont.

RATE OF PAY

D. O. No.	DATE	RANK	GROUP	P. F. OR A. S.	DAILY RATE	IF LIABLE PEN. DED.	REMARKS
245	22-10-41	Pte.			\$1.30		TOS #22 BTC 22-10-41
27	24-6-43				1.40	15-6-43	North Bay, Ont.
27	7-10-43				1.50	16-8-43	
<p>NEXT OF KIN MA JAMES ANDREW GEGEAR, (FATHER) Box 74 Cadillac, Quebec, Canada</p>							

ASSIGNMENTS

DEPENDENTS' ALLOWANCES

ASSIGNEE	EFFECTIVE DATE	AMOUNT	TOTAL	DATE APPLICATION FORWARDED	RELATIONSHIP	AMOUNT AWARDED	EFFECTIVE DATE
Lottie GEGEAR (MOTHER)	1-9-41	10.00	10.00		NIL		
27 McAnus St. Kirkland Lake, Ont. (Mother)	1/2/42	20.00	20.00	Cancelled	12/2/43		
6 H.B. May 1944		8.40					
722 B Nov/Dec 45		16.80					

CTO 24

OUTFIT ALLOWANCE \$ PAID ON
 *DELETE WORDS WHICH ARE INAPPLICABLE

IN RECEIPT OF PENSION UNDER PENSION ACT
 OR MILITIA PENSION ACT. (1910) \$ P. A.

CASUALTIES, ETC.

PART II D. O.		
NO.	DATE	
250 247	OCT 28 1941	S. O. S. No. 22 (B) T. B. NORTH BAY, ONT. ON TRANSFER TO No. ^{Ant} A. T. C. <u>Petawawa - Ont</u> EFF. OCT 29 1941
125	30.10.41	T.O.S. C.A.T.C. (A2) to B.B.Ty eff. 30.10.41
155	4.12.41	app. A/A/Bd WOT. eff. 1.12.41
4	6.1.42	S.O.S. C.A.T.C. (A2) on proceeding of 5000 eff. 6.1.42
15	21.1.42	T.O.S. No. 1. C.A.R.U. from Canada eff. 20-1-42
15	21-1-42	T.O.S. No. 1. C.A.R.U. from Canada eff. 20-1-42
76	2.4.42	S.O.S. #1 C.A.R.U. to 104 C.F.R. wef 2.4.42 (Spl. Inc.)
18	10-4-42	T.O.S. Spec Incr from 1 C.A.R.U. eff. 3-4-42.
30	29-6-42	S.O.S. 14th FLD. REGT. R.C.A. (Spec. Incr) to 14th FIELD REGIMENT R.C.A., 25-6-42.
30	29-6-42	T.O.S. 14th FLD. REGT. R.C.A. from Spec. Incr, eff. 26-6-42.
53	3-12-42	Granted 9 days P.L. with R.A. - 9 to 18 NOV 42
2	14-1-43	awarded 7 days C.B. and for 7 days pay on 26-12-42 for A.W.L. 2 hrs.
10	4.3.43	on 15 Feb 43 and 28 days F.P. and for 28 days pay for cond. & the prof. etc.
10	4.3.43	att. fpts to 1 2d Pen. Camp wef 16 Feb 43
15	1.4.43	examined at " " " wef 13 Mar 43
16	8.4.43	9 days P.L. with R.A. 18-27 Mar 43
27	24.6.43	Granted 8/40 wef 15-6-43 15-6-43

No. B601973

RANK

Pte. ^D

NAME GEGEAR

DARCY JAMES

MARRIED
 WIDOWER
 SINGLE

PLACE OF ENLISTMENT North Bay, Ontario.

DATE 28-84-

RATE OF PAY

0900 hrs 9th Trg. Period

D.O. No	DATE	RANK	DAILY RATE	REMARKS
198	28-8-41	Pte.	1.30	TOS#22(B)TLC.eff28-84-41

ASSIGNMENTS

DEPENDENTS' ALLOWANCES

ASSIGNEE	EFFECTIVE DATE	AMOUNT		TOTAL	DATE APPLICATION FORWARDED	RELATIONSHIP	AMOUNT AWARDED		EFFECTIVE DATE
Lottie Gegear, 2726x McAnus St., Kirkland, Lake, Ont. (Mother)	1-9-41 DO. 139			10.00		NTL			

*DELETE WORDS WHICH ARE INAPPLICABLE

M.F.M. 111
100M-2-41 (9405
H.O. 1772-39-1801

CASUALTIES, ETC.

PART II D. O.		
No.	DATE	
<i>Continued from Rev. Board</i>		
145	22-10-41	1 Cease to be att. A/P # 22 BTC. Retd. NRMA Clg. Depot on enlistment in C.A. (A) Unit. EFF. 21-10-41
10	4-3-43	at. f.u.p. to 1 W. Punishment Camp w.e.f. 16 Feb 43.
32	29.7.43	at fup to 3 CACRU - Tank Equip & Maint. Base 18.7.43 14-8-43
42	7.10.43	Increase to 1.50 w.e.f. 16-8-43
47	11-11-43	Temp RA 21 to 30-10-43
49	15-11-43	Qual Diver mech Coy "C" w.e.f. 16-11-43
49	15-11-43	Granted Trademark S. M. Coy "C" w.e.f. 16-11-43
3	22-1-44	Avd Gen Val Best Medal & Clasp w.e.f. 15-1-44
27	12-7-44	Emb UK 1-6-44 DiSEmb BR 6-6-44
30	27-7-44	Reloc to mech Coy "C" w.e.f. 8-6-44
CR33	26-10-44	S.D.S, 14th FLD. REGT. R.B.A. Killed in action 25-10-44 DM "C"

To be made out in duplicate

M.F.M. 5
200M-241 (9495-6)
H.Q. 1772-39-1651

PARTICULARS OF FAMILY OF AN OFFICER OR OTHER RANK OF THE CANADIAN
ARMY (AF) OR R.C.A.F. (ON ACTIVE SERVICE)

INSTRUCTIONS.

- (a) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the Canadian Army (AF) or R.C.A.F. ON ACTIVE SERVICE.
- (b) All questions, etc., must be completed.
- (c) Both copies of the form are to be forwarded by the Officer Commanding the unit for each officer and other rank, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District, Command, or Camp Paymaster, to the Officer i/c Records, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster of the unit, when transferred to another unit the copy retained by the Paymaster will be sent to the Paymaster of the individual's new unit.

-
- (1) Name of Officer or Other Rank..... GEGEAR, DARCY JAMES
(Surname first—Christian names in full—Block capitals)
-
- (2) Regimental or Official Number and Rank..... Sapper B. 9723
ATT. # 22 (B) T. C.
- (3) Unit..... No. 2 District Depot C.A. (A) R.C.A. WING
- (4) Are you married?..... NO
- (5) If married, state,
- (a) Full name of your wife..... NO
-
- (b) Present postal address of wife..... NO
- (6) If married, have you been regularly supporting your wife? If not—state reasons..... NO
-
- (7) Are you a widower?..... NO
- (8) Have you any children?..... NA..... Number of boys..... NA..... Girls..... NA
Names and ages..... NA
-
- (9) If Dependents' Allowance is claimed in respect of children—state whether you have been regularly supporting them..... NA
-
- Give particulars of Guardians to whom Dependents' Allowance should be paid—if authorized.
- Name..... NA
- Postal Address..... NA
-

[SEE OTHER SIDE]

RECORDS M. D. 2

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife for at least 2 years immediately prior to appointment or enlistment?..NO.....

If so, state her full name and Postal Address..... NA

(11) Is your father alive?..... Yes

If so, state name and address, occupation..... Mr. James Gegear

..... 27 McCamus Avenue, Kirkland Lake, Ontario..... (Electrician)

(12) If your father is a widower and is totally incapacitated from earning a living—are you his sole or partial support?..... NA

(13) If sole or partial support of father who is a widower, totally incapacitated from earning a living—state what amount per month you have given him prior to appointment or enlistment..... NA

Also state reason he has no other means of support if partially supported by you, what is your reason for not providing full support?..... NA

(14) Is your mother alive?..... Yes

If so, state name and address..... Mrs. Lottie Gegear

..... 27 McCamus Avenue, Kirkland Lake, Ontario.

(15) If your mother is a widow, are you her sole or partial support?..... NA

(16) If sole or partial support of widowed mother—state what amount per month you have given her prior to appointment or enlistment..... NA

Also state reason why she has no other means of support, if partially supported by you what is your reason for not providing full support?..... NA

(17) Are you contributing to the support of any dependents, other than those shown above?..... NO
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment.

If so, state the following particulars:—

Relationship N

Full Name I

Postal Address L

Amount contributed monthly during the past six months..... NA

(18) Are you insured?..... NO

If so, in what Company?..... NA
(Give number of policy)

Have you made arrangements for payment of your Insurance Premium?..... NA
If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

I hereby certify that the information given by me on this form is correct in each and every particular.

..... *J. Gegear*
(Signature of officer or man)

Date..... October 22nd. 1941.

..... *W. A. Stowell* Capt.
Officer Commanding..... No. 22 (Basic) T.C.,

Date..... October 22nd. 1941. North Bay, Ontario.

N.B. If parent(s) of the officer or other rank concerned has (have) been replaced by foster parent(s), questions relating to fathers and/or mothers above should be altered and answered as applicable.

THE CANADIAN ARMY—RESERVE PERSONNEL
CERTIFICATE OF DISCHARGE

This Certifies that B. 605973 Darcy James GUGEAR
(Regtl. No.) (Rank) (Name in full)
of Kirkland Lake County of District of Temiskaming
Province of Ontario served continuously in the
No. 22 (Basic) Training Centre, North Bay, Ontario
(Regiment or Corps)
from the 28th day of August 1941, to
the 21st day of October 1941, and is now discharged
therefrom, and that he attended and completed Annual Training for the years
1941 - 55 Days - Discharged on enlistment in the C.A. (A)
(Each year separately, in figures)
Fifty Five Days
(Total number of years, in words)
H. J. Guear
(Signature of Soldier)
Place North Bay, Ontario
Date October 22nd, 1941
Commanding "D" Company
(Sqn., Bty. or Coy.)
G. A. Stilwell, Capt. Adj.†
Commanding No. 22 (Basic) T.C.
(Regt. or Corps)

† NOTE—Not required in the case of an Independent or Detached Squadron, Battery or Company.

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

Section A—GENERAL INFORMATION

1. (a) Print name in full M. ARCY JAMES GEGEAR (b) Reg'l. No. B9723
2. (a) Arm of service Army (b) Unit R.C.H. (c) Rank PTE
3. (a) Date of birth Aug 15 1920 (b) Have you any dependents? No (c) Place of residence at time of enlistment Kirkby Lake Ont
4. (a) Place of enlistment North Bay (b) Date of enlistment Oct 21 1941

PLEASE
LEAVE
BLANK

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school Sixteen (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.) 10 years Public School (etc.)
7. If you attended a university, give name of university and standing or degree secured No
8. (a) Did you ever enter upon a trade apprenticeship? No (b) If so, for what occupation? Pub (c) Did you finish it? Yes (d) If you did not finish it, how long did you serve at it? Yes
9. (a) What languages do you speak fluently? English (b) What languages do you read well? English

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? No

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 Leonard Eastmore Address St Catharines
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Hardware Contractor
20. (a) Your specific occupation Truck Driver (b) Number of years' experience at this occupation with any employer Two Years
21. (a) Did your employer promise definitely to give you employment on discharge? Yes (b) Did your employer refuse to promise you employment on discharge? No (c) Do you wish to return to your former employment? No

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

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? Nil
25. (a) Were you born on a farm? No (b) How many years' actual farming experience have you had? Nil (c) In what provinces did you have experience? Nil

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.) Have been assured of a job
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form. (Electrician) (Lawyer)

DATE October 21 41 1941 SIGNATURE M. Arcy James Gearing

No B-9723 Rank Gunner Name GEGEAR, Dar^cey James

Unit R.C.A. Date of death 25th Oct. 1944

Died at ~~France~~ Belgium

Cause Killed in action

Death occurred on strength of Forces.H.Q. 405-G-18194

N/K Mr. James Andrew Gegear Relationship Father

Address Box 74, Cadillac, Que.

Remains buried in Belgium Maldagem 006998 Cemetery

CHK ✓

Grave location

OVER—

BURIAL REPORT TO N.K. **JAN 2 1946**

RETURN TO BUR. OF STAT. **SEP 14 1945**

ROYAL MESSAGE DESP'D. **29-11-44**

CAN. MESSAGE DESP'D. **DEC 16 1944**

Temp BR sent to NK & Ma.

REBURIAL

Adegem Canadian Military Cemetery
Adegem, Belgium.

Grave 3, row E, plot 9.

HI & CR Form Desp'd. OCT 29 1946

Photographs

Despatched

OCT 28 1947

2014

FORM NO. 1

Register No. Nominal Roll No.

To: P.M.G. H.Q. File No.

CANADIAN ARMY (ACTIVE)

Computation of Service

WAR SERVICE GRANT

Regt. No.	Rank when S.O.S.	Surname	Christian Name in Full
B 9723	CNR	G.E.G.E.A.R.	DARCY JAMES ✓

REASON FOR TERMINATION OF SERVICE:

1st Enlistment... *KILLED IN ACTION* ✓ CARO ()

2nd Enlistment..... CARO ()

3rd Enlistment..... CARO ()

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. <i>22 Oct 41</i> ✓	T.O.S.	T.O.S.
S.O.S. <i>25 Oct 44</i> MD <i>0/5</i>	S.O.S. MD	S.O.S. MD
Total Days <i>1100</i>	Total Days	Total Days

Total Service *7700* DAYS

	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere.....	<i>79</i> ✓	<i>1</i>	<i>78</i>
Overseas Service.....	<i>1021</i> ✓	<i>35</i>	<i>986</i>
Totals.....	<i>1100</i>	<i>36</i>	
Add Non-qualifying Service.....			<i>36</i>
Total Service.....			<i>1100</i>

EMBARKATION DETAILS:

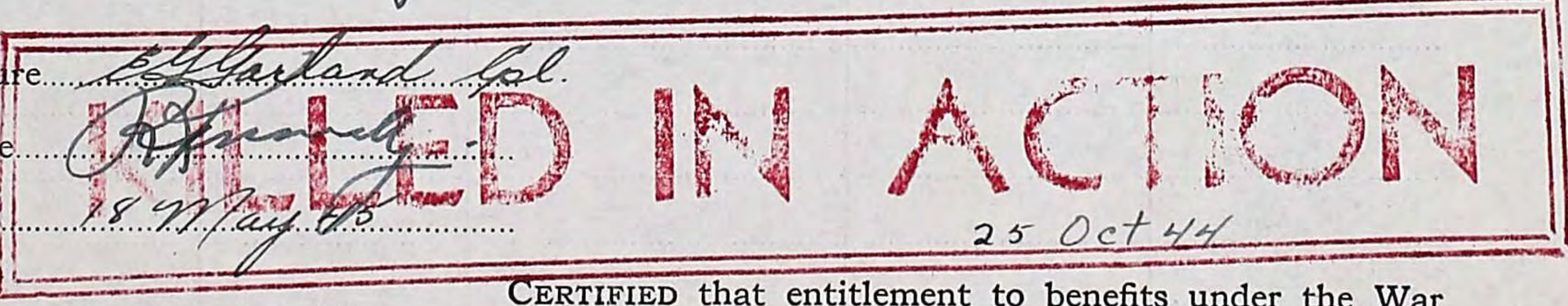
1. Date S.O.S. Overseas *25 Oct 44* 2. Date S.O.S. Overseas.....

REMARKS: *B-605973 NRMA from 28 Aug 41 to 21 Oct 41*

Computer's Signature..... *[Signature]*

Checker's Signature..... *[Signature]*

Date Computed..... *18 May 60*



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

[Signature]
 C. L. LAURIN,
 Colonel,
 DIRECTOR OF RECORDS.

Details of Non-Qualifying Service

Western Hemisphere—

Forfeits for	From	To	Effective Date	Days	Total
AWL	n/a	n/a	31 Dec 41	1	1

Total 1

Overseas: T.O.S. 9 JAN 42 T.O.S. T.O.S.
S.O.S. 25 Oct 44 S.O.S. S.O.S.

AWL	25 DEC 42 ✓	26 DEC 42 ✓		7	7 ✓
PA SEC 40	n/a	n/a	15 Feb 43	28	28 ✓

Total 35

Register No.

Nominal Roll No.

To: P.M.G.

H.Q. File No.

CANADIAN ARMY (ACTIVE)
N.R.M.A.
 Computation of Service
 WAR SERVICE GRANT

Regt. No.	Rank when S.O.S.	Surname	Christian Name in Full
B 9723 605973	GNR	GEGEAR	DARCY JAMES ✓

REASON FOR TERMINATION OF SERVICE:

1st Enlistment... *Enlisted in CA(A)* ✓ CARO ()
 2nd Enlistment..... CARO ()
 3rd Enlistment..... CARO ()

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. <i>28 Aug 41</i> ✓	T.O.S.	T.O.S.
S.O.S. <i>21 Oct 41 MD 2</i>	S.O.S. MD	S.O.S. MD
Total Days <i>55</i>	Total Days.....	Total Days.....

Total Service

55 DAYS

	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere	<i>55</i>		<i>55</i>
Overseas Service			
Totals.....	<i>55</i>		<i>55</i>
Add Non-qualifying Service.....			
Total Service			<i>55</i>

EMBARKATION DETAILS:

1. Date S.O.S. Overseas..... 2. Date S.O.S. Overseas.....

REMARKS: *B 9723 CA(a) wof 22 Oct 41 to 25 Oct 41*

Computer's Signature.....
 Checker's Signature.....
 Date Computed..... *21 May 45*

N.R.M.A.
NO SERVICE IN
THE ALUTIAN ISLANDS

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

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

**CANADIAN ACTIVE SERVICE FORCE
OVERSEAS**

District.....
Dispersal Area.....

LAST PAY CERTIFICATE

(All Ranks)

Regtl No. **B9723** Rank and Name **GEGEAR, D.C. Gnr.**

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

(Transfer or Discharge)..... on **25th October** 19 **44**.

Reason **Death** Authority **C.C.L. "A" 510 d/3rd Nov: 44**

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

Dr		Cr	
Particulars	Amount	Particulars	Amount
Balance Dr from last account.....		Balance Cr from last account.....	467 15
First Monthly Payment.....		Regimental Pay 31 days at \$1.50	46 50
Casual Payments.....		Tradesmen's Pay 31 days at \$	7 75
Payments on Transfer or Discharge.....		Additional Pay (Give particulars).....	
Assigned Pay.....	8 40 days at..... \$.....	
Regimental Charges.....		Allowances (Give particulars)..... days	
Public Stoppages (Give particulars):		at..... \$.....	
.....		Def. Pay Interest	10 40
.....		
.....		
.....		
To Balance Cr { Free.....	131 40	
{ Deferred.....	392 00	By Balance Dr.....	
Total.....	531 80	Total.....	531 80

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

Remarks :

Assnd Pay \$8.40 (6th V.L.) Stopped eff November.1944.

Compiled by **E.G.Ripley.**

Checked by *S. Braughton*

Date **25th May.1945.** 19.....

Certified correct.....
for Chief Treasury Officer, Overseas

In lieu of CFA 187

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH

INVENTORY

Of personal effects received by Casualty
Section Vol C.K.S.D.

NO RANK & NAME, . . . B-9728 Gnr. Gregear . D.J. Dec'd . . .
RECEIVED FROM, . . . G.H.Q. Cdn. Section 2nd. Ech. 21 Army Grp.
M-16018 Pte. Murdoch W.J.
CHECKED BY, B.-73775 Pte. Todd F.a. DATE . . . 3 Feb 45

1	Folder of Postcards		
1	Sixth V/L Receipt to Offr. I/C Estates		
1	Pocket Book		
1	Kerchief		
1	Rosary		
3	Lighters		
1	Religious Token		
2	Souvenir Coins		
1	Photo Folder & Photos		

Original) To Officer i/c Estates with
Duplicate) original inventory, if any

Triplicate with effects

Ja. Todd Pte.
for OC 1 Cdn K S DEPOT

RECEIVED
HEADQUARTERS

NO. 1000

TO THE COMMANDANT
HEADQUARTERS

RECEIVED
HEADQUARTERS



403-G-17194

RECORDS OFFICE OVERSEAS.
CANADIAN MILITARY HEADQUARTERS.
GRAVES REGISTRATION CARD.

P.A/K

NAME GEAGER
~~GREGER~~, Darcy James
RANK Gnr.
UNIT 14 Fd. Regt., R.C.A.

PLACE & DATE OF BIRTH COPPERCLIFFE, Ontario
15 Aug 1920
REGIMENTAL NO. B-9723
NEXT OF KIN & ADDRESS Father:
Mr. James Andrew ~~GREGER~~ GEAGER, 74 Cadillac
Quebec.

PARTICULARS OF HOSPITALISATION.

DATE OF ADMISSION _____ NAME & LOCATION OF HOSPITAL _____
DIAGNOSIS _____

PARTICULARS OF DEATH

DATE OF DEATH 25 Oct 44 PLACE OF DEATH BELGIUM
HRS _____
CAUSE OF DEATH KILLED

PARTICULARS OF BURIAL

DATE OF BURIAL 26 October 44 CEMETERY BELGIUM MALDEGEM CEM SH 21-31-
MR 006998
PLOT NO 1 ROW E GRAVE _____
DEATH CERT. NO _____
RELIGION Roman Catholic

DATE 20 October 1945
Eric Whelan Bay
M. BLUTEAU ϕ CAPT
for COLONEL
O i/c Records,
CANADIAN MILITARY HEADQUARTERS

Extracted from Burial Records,
RECORDS OFFICE OVERSEAS,
ACTON, LONDON W.3.

H.Q. 405-G-18194
D.R. 2(C)

28th February, 1946.

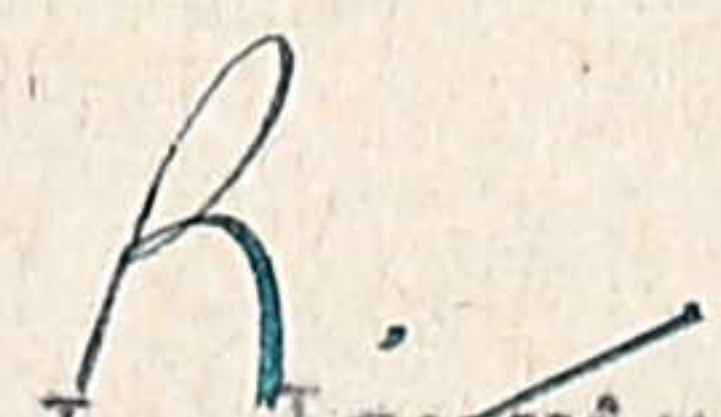
James Andrew Gegear, Esq.,
Box 74,
Cadillac, Quebec.

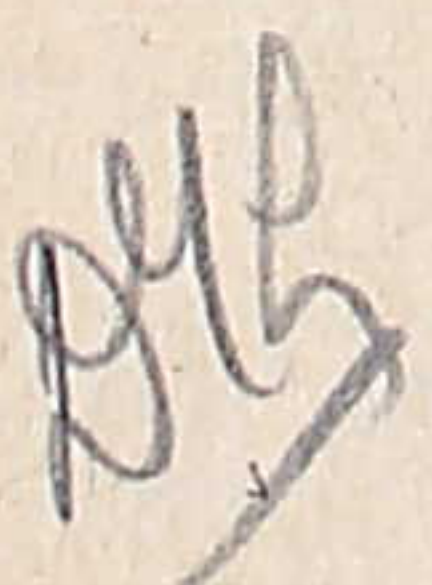
Dear Sir:

Information has just been received from overseas that the remains of your son, B.9723 Gunner Darcy James Gegear, have been carefully exhumed from the original place of interment and reverently reburied in grave 3, row E, plot 9, of Adegem Canadian Military Cemetery, Adegem, Belgium. 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.

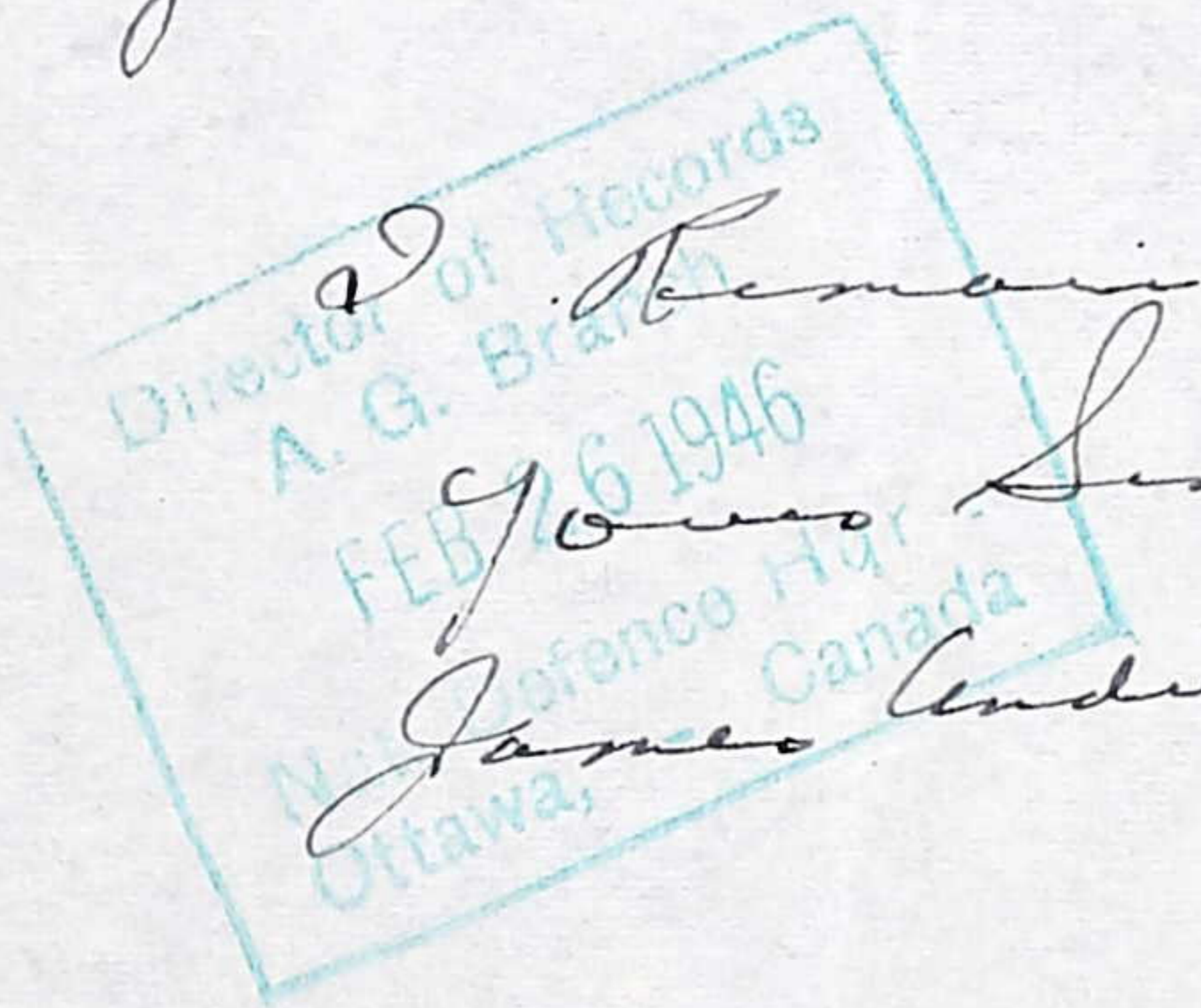
 DGL/ET

Cardiac Feb. 22/46

Dear Sir

I received a letter and
a map from your Dept. Some
time ago. I am returning the
letter. Will you please send
some in English. As we are
unable to read French.

Hoping you will do this
for me.



Yours Sincerely
James Andrew Gayer



CITEZ NO Q.G. 405-G-18194 D.R. 2(D)

MINISTÈRE DE LA DÉFENSE NATIONALE
ARMÉE

OTTAWA, le 2 janvier 1946.

Monsieur,

Nous avons reçu récemment d'outre-mer des renseignements qui indiquent que les restes de votre fils, le canonnier Darcy James GEGEAR, matricule B-9723, ont été soigneusement exhumés de l'endroit original d'inhumation et respectueusement inhumés de nouveau dans la tombe 3, rangée E, lot 9 du cimetière militaire canadien d'Adegem, à Adegem en Belgique. (Carte marquée ci-jointe). Cet endroit est un lieu de sépulture militaire reconnu et l'entretien en sera perpétuel.

La sépulture a été marquée temporairement d'une croix qui sera remplacée en temps opportun par une pierre tombale permanente portant une inscription appropriée. Pour des raisons évidentes nous ne pouvons dire à quelle date commencera ce travail de commémoration permanente, mais vous pouvez être assuré qu'à ce moment, nous communiquerons avec vous et nous vous donnerons l'occasion de choisir une courte inscription personnelle destinée à être gravée sur le mémorial. Par conséquent nous vous saurions gré de nous informer de tout changement dans votre adresse.

Veillez agréer, monsieur, mes sincères salutations.

Pour l'adjudant général,

(C.L. Laurin) colonel,
directeur des archives.

M. James Andrew Gegear,
Boîte 74,
Cadillac, Québec.



CANADA

QUOTE NO. H.Q. 405-G-18194
(D.R. 2(D))

DEPARTMENT OF NATIONAL DEFENCE
ARMY

OTTAWA, CANADA,

F.T.

2nd January, 1946.

Mr. James Andrew Gegear,
Box 74,
Cadillac, Quebec.

Dear Sir:

Information has just been received from overseas that the remains of your son, B9723 Gunner Darcy James Gegear, have been carefully exhumed from the original place of interment and reverently reburied in grave 3, row E, plot 9, of Adegem Canadian Military Cemetery, Adegem, Belgium. 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.

/EMA

DISTRIBUTION OF SERVICE ESTATES

MH
Estates Form "P. 4"

ARMY

Name..... GEGEAR, Darcy J. No. E-9723
Surname Christian Names

Gvt. C.A. O/S 25-10-44
Rank Unit Date of Death

AMOUNT

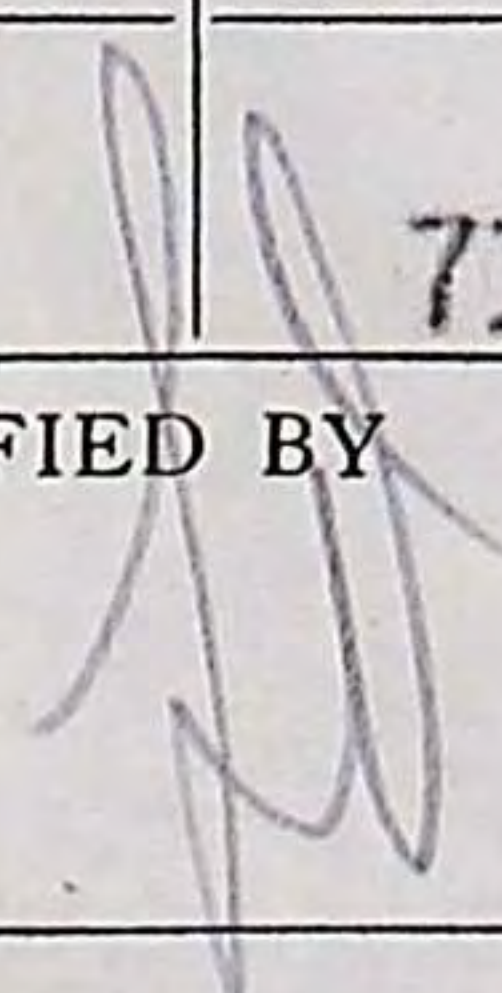
Date..... 8-11-45.....

R.S.G. \$ 609.22
L.P.C. \$ 523.40
 Other Credits..... _____
 Total..... 1132.62
 Prev. dist. 523.40
 This dist. 609.22

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Lottie Gegear, Box 74, Cadillac, Que. (Sole beneficiary per will)	609.22

P4 TO TREAS.
DEC 1 1945

WSG

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	\$609.22
CLASSIFIED BY			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED


 (L. M. FIRTH) Colonel
 Director of Estates

AUDITED FOR PAYMENT

.....
For Chief Treasury Officer

609.22
Exp

DISTRIBUTION

SERVICE

NAVY
ARMY ✓
AIR FORCE
C.E.F.

NAME: Segean Percy J.

NO B-9723 RANK Sgt.

REGT: C.A. 015 DATE OF DEATH 25-10-44

All mother

Mrs Lottie Segean
Box 74

PAY TO: Cadillac, Inc.

W.B.H. 609.22
L.P.C. 523.40
OTHER CREDITS

TOTAL 1132.62

Prescribed 523.40

This visit 609.22

(Sole beneficiary under will)

DEPARTMENT OF NATIONAL DEFENCE
NAVY ===== ARMY ===== AIR FORCE
STATEMENT OF WAR SERVICE GRATUITY

322
5352
2
ARMY

DECEASED
MEMBER'S
NAME

Darcy James GEGEAR
(CHRISTIAN NAMES) (SURNAME)

REGISTER NO. D-11430
FILE NO. 405-G-18194
DATE 26-9-45
SERVICE NO. B-9723
FINAL RANK OR RATING Gnr.
DATE OF DISCHARGE 25-10-44

PAYEE **Director of Estates**

ADDRESS

DATE OF TERMINATION OF OVERSEAS SERVICE **25-10-44**

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS **1064** EQUAL TO **35** COMPLETE PERIODS AT \$7.50
30

\$ 262.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS **986** LESS **14** INELIGIBLE DAYS, EQUAL TO **972** DAYS @ 25c. PER DAY
SEE PAR. 2 OVERLEAF FOR EXPLANATION

243.00

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 **986** X \$ 19.25
183

505.50

103.72

D. WAR SERVICE GRATUITY

609.22

E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES \$
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$
OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE

609.22

G. YOUR PORTION OF GRATUITY IS—

100%

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

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 **KRM** CHECKED BY *[Signature]*

TREASURY
CHECKED BY _____ DATE _____

[Signature]
SERVICE REPRESENTATIVE

COMPUTATION OF WAR SERVICE GRATUITY

MEMBER'S NAME DARCY JAMES GEGEAR Register No. D11430
(Christian Names) (Surname)
 PAYEE'S NAME DIRECTOR OF ESTATES File No. 405-6-18194
(Christian Names) (Surname) Date 21-9-45
 ADDRESS..... Service No. B9723
 Final Rank Gen
 DATE OF TERMINATION OF OVERSEAS SERVICE 25-10-44 Date of Discharge 25-10-44

	AMOUNT	
	\$	c
A. TOTAL QUALIFYING SERVICE No. of day <u>1064</u> = <u>35</u> ⁽¹⁴⁾ Periods @ \$7.50 30	262	50
B. QUALIFYING OVERSEAS SERVICE No. of days <u>986</u> less <u>14</u> Ineligible days, equal <u>972</u> Days @ 25c per day	243	00
C. SUPPLEMENT FOR OVERSEAS SERVICE	505	50
Daily Rate of Pay \$ <u>1.50</u>		
Subsistence Allowance \$ <u>1.25</u>		
Additional Pay \$ <u>✓</u>		
Dependents' Allowance 1/30 \$ <u>✓</u>		
TOTAL \$ <u>2.75</u> × 7 = \$ <u>19.25</u>		
No. of Days <u>986</u> × \$ <u>19.25</u> 183	103	72
D. WAR SERVICE GRATUITY	609	22
Computed By <u>Mentley</u>		
E. DEDUCTIONS		
Overpayment of (1) Pay & Allowance \$.....		
(2) D.A. & A.P. \$.....		
Other Deductions \$.....		
Entered By <u>Wey</u>		
F. AMOUNT PAYABLE (This amount is payable in monthly instalments of \$..... each)	609	22
G. Monthly instalment not to exceed daily rate of Pay & Allowances per (C) \$..... × 30 = \$.....		

REMARKS S.O.S. 25 Oct 44
no DA

12

File No. 405-4-18194

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. B9723 Name GEAR Darcy James

Rank on Discharge Sgt Date of Discharge 25-10-44

Authority for Discharge or Retirement Decorated

<u>Served in:</u>		<u>Non-qualifying service</u>
Canada	from <u>22-10-41</u> to <u>8-1-42</u>	
	from _____ to _____	
United Kingdom	from <u>9-1-42</u> to <u>5-6-44</u>	
	from _____ to _____	
Italy	from _____ to _____	
Northwest Europe	from <u>6-6-44</u> to <u>25-10-44</u> <u>KA</u>	
	from _____ to _____	
	from _____ to _____	

Eligible for award of:

- 1939 - 45 Star OK
-
- Italy Star OK
- France-Germany Star OK
- Defence Medal OK
- War Medal 1939-45 OK
- Canadian Volunteer Service Medal OK
- with clasp OK



WA

Verified by [Signature]

Date 31-10-46

Carded NOV 4 1946

NO RIBBON DESIGNED

Casualties ONLY
For purposes of W.S.G.
Casualties include death
subsequent to discharge.

Register No. D.11430

File No. _____

WAR SERVICE GRANTS ACT 1944i

Ottawa 10 May 194 5

To: Chief Treasury Officer,
Dependents' Allowance and Assigned Pay Branch

Service No. B-9723

Name D.J. GEGEAR
Christian Name Surname

Please supply the following information in respect of the marginally
named at the time of his discharge or death and return this form in
duplicate along with the file to the undersigned.

K.W. Rice
(K.W. Rice) Lieutenant,
for (A.R. Mortimore) Brigadier,
Paymaster-General.

Names of persons in receipt of D.A. and amount of monthly award

Name	Amount
_____	\$ _____
_____	_____

If no D.A. in issue, list names of persons in receipt of A.P., who may be classed as dependents under W.S.G. Act, 1944 and amount of monthly assignment.

<i>Mrs Lattie Gearing</i>	\$ <i>20.00</i>
_____	_____
_____	_____

Names of persons whom assigned pay was continued by supplementary award after death.

_____	\$ <i>nil</i>
_____	_____

Amount of overpayment of dependents' allowance and/or assigned pay deductible from the War Service Gratuity and name of person to whom paid.

_____	<i>nil</i>
_____	<i>SE</i>

23/4/5 194 5

A. Mallett
For Chief Treasury Officer,
D.A.&A.P. Branch

C.T.O., D.A.&A.P.

Overpayments of D.A. and / or A.P. recovered from W.S.G. \$ _____
_____ 194 _____

_____ for C.T.O.

111430

P.O. Box 74,
Cadillac, Quebec.

Department of National Defense,
Ottawa, Ontario.

Dear Sirs:

I would like to make application for Gratuity
payment of my son, B-9723, Gegear, D.J., 14th Field Regt.,
34th Field Bty., R.C.A., who died in action on October
25, 1944.

Yours very truly,

Mrs Lottie Gegear



2

DISTRIBUTION OF SERVICE ESTATES
ARMY

Estates Form "P. 4"

Name: **GEGEAR** Surname
Darcy J. Christian Names
 No.: **B9723**
 Rank: **Gnr.** Unit: **C.A. O/S** Date of Death: **25-10-44**

AMOUNT

Date: **28-6-45**

L.P.C.....\$ **523.40**
 Other Credits.....
 Total..... **523.40**

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	<p>Mrs. Lottie Gegree, Box 74, CADIALLAC, Que.,</p> <p align="center">(sole beneficiary under will)</p>	<p><i>R</i> 523.40</p>

P4. TO TREAS.
 20-7-45
 QW

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	\$523.40
CLASSIFIED BY <i>[Signature]</i>			EXAMINED BY For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

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

AUDITED FOR PAYMENT

.....
 For Chief Treasury Officer

SIXTH VICTORY LOAN BONDS

Certified that B9723 Gnr. Gegear, D.J.
(Regimental No.) (Rank) (Name)

has subscribed for \$ 50.00 SIXTH VICTORY LOAN BONDS

- (a) ~~By outright purchase in respect of which Cheque/Draft/Crossed Warrant/Money Order for \$..... has been received.~~
- (b) By monthly assignments of pay \$ 3.40

Bonds to be delivered to: Mrs. Lottie Gegear, Box 74 Cadillac, Quebec, Canada.

Date: 18 Apr. 44

NOTE: This stub to be torn off and handed to subscriber.

Jane S. Whittle
(Unit Representative)

Mr. James Andrew Gegree,
 Box 74,
 Cadiallac, Que.

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-G-18,194 FD 183

DEPARTMENT OF NATIONAL DEFENCE
 ESTATES BRANCH
 OTTAWA, ONT.

Dec 12 194 4

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

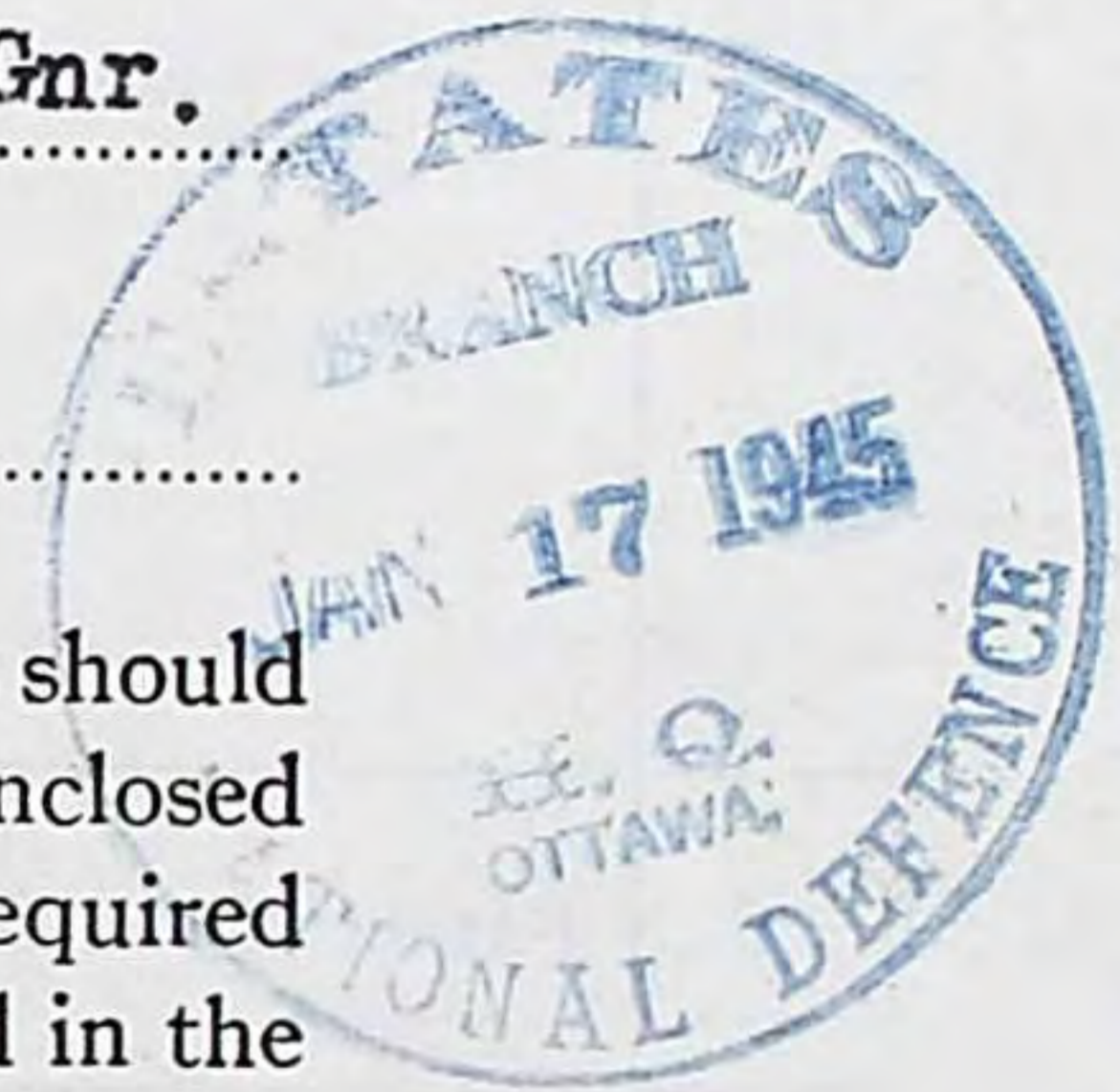
GEGEAR

Darcy J.

Gnr.

B.9723

Canadian Army



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.

CS/JR

C. Stevenson
 Director of Estates.

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.....	James Andrew Gegear	53	BO Box 74 Cadillac, Quebec PO Box 74	
4	Mother of the Deceased.....	Elizabeth Lotetia Gegear	50	Cadillac Quebec.	
5	Brothers of the Deceased	Full Blood	Norman Lawrance Gegear	31	682 Regent St. S Sudbury, Ontario
			Mervin Gregory Gegear	27	POBox 74 Cadillac Quebec
		Half Blood	John Ray Gegear	20	Malartic, Quebec.
6	Sisters of the Deceased	Full Blood	Mildred Reta Gegear	22	Noranda, Quebec.
		Half Blood			
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		

ANSWER FULLY EACH QUESTION ON THIS PAGE
PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	D'Arcy James Gegear
9	Date of his birth.	August 15, 1920
10	Place and date of his marriage.	
11	Place and date of his parents' marriage.	Copper Cliff Ontario.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Copper Cliff, Ontario
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Ontario (b) Temiskaming District (c) Kirkland Lake, Ontario (d) 17 Years
14	Nature of employment before enlistment.	Truck Driver
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.	Cadillac, Quebec.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	No
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?	No
20	Amount of War Savings Certificates held by deceased. Indicate where located.	3 Tyranite Mines Ltd., Ontario.
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	One \$50.00 in my possession.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	
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
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.	NO

(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

* Fatherof 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.

James A. Geyser
PO BOX 74, Cadillac, Quebec.

{Signature of Informant
Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief James A. Geyser

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

Dated at Cadillac this 15th day of January 19 45

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

J. Robinson Qualification J. P.
Address Cadillac Que.

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

PARTICULARS OF FAMILY OF AN OFFICER OR OTHER RANK OF THE
CANADIAN ARMY (AF) OR R.C.A.F. (ON ACTIVE SERVICE)

INSTRUCTIONS

- (a) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the Canadian Army (AF) or R.C.A.F. ON ACTIVE SERVICE.
- (b) All questions, etc., must be completed.
- (c) Upon completion, the form will, in the case of the Army personnel, be forwarded to the District Records Officer for transmission to Officer i/c Records (Army) N.D.H.Q., Ottawa. In the case of R.C.A.F. personnel the form will be forwarded to R.C.A.F. Records Officer, Dept. of National Defence for Air, Ottawa.

(1) Name of Officer or Other Rank..... GEGEAR Darcy James.....
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Official Number and Rank..... Sapper B9723.....

(3) Unit..... No. 2 D.D. C.A. (A) R.C.A. Wing Att. # 22 (B) T.C.....

(4) Are you married?..... NO..... (5) If married, state,

(a) Full name of your wife.....

(b) Present postal address of wife.....

(6) If married, have you been regularly supporting your wife? If not—state reasons:.....

(7) Are you a widower?.....

(8) Have you any children?..... Number of boys..... Girls.....

Names and ages.....

(9) If Dependents' Allowance is claimed in respect of children—state whether you have been regularly supporting them.....

Give particulars of Guardians to whom Dependents' Allowance should be paid—if authorized.....

Name.....

Postal Address.....

(10) Have you a common-law wife whom you have been regularly supporting and publicly representing as your wife for at least two years immediately prior to appointment or enlistment?.....

If so, state her full name and postal address.....

(11) Is your father alive?.....YES.....If so state name and address, occupation.....Mr. James Gegear
27 McCamus Ave., Kirkland Lake, Ontario.....Electrician

(12) If your father is a widower and is totally incapacitated from earning a living—are you his sole or partial support?.....

(13) If sole or partial support of father who is a widower, totally incapacitated from earning a living—state what amount per month you have given him prior to appointment or enlistment.....

Also state reason he has no other means of support; if partially supported by you, what is your reason for not providing full support?

(14) Is your mother alive?.....YES.....If so, state name and address.....Mrs. Lottie Gegear
27 McCamus Ave., Kirkland Lake, Ontario

(15) If your mother is a widow, are you her sole or partial support?.....

(16) If sole or partial support of widowed mother—state what amount per month you have given her prior to appointment or enlistment.....

Also state reason why she has no other means of support; if partially supported by you, what is your reason for not providing full support?.....

(17) Are you contributing to the support of any dependents, other than those shown above?.....
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment. If so, state the following particulars:

Relationship.....

Full Name.....

Postal Address.....

Amount contributed monthly during the past six months.....

(18) Are you insured?.....NO.....If so, in what company?.....
(Give number of policy)

Have you made arrangements for payment of your Insurance Premium?.....
If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

I hereby certify that the information given by me on this form is correct in each and every particular.

Date.....22 Oct 41..... Sgd. D.J. Gegear
(Signature of officer or man)

Sgd. W.A. Stilwell Capt.

Date.....22 Oct 41..... for Officer Commanding No. 22 (B) T.C.
North Bay, Ontario

N.B. (If parent(s) of the officer or other rank concerned has (have) been replaced by foster parent(s), questions relating to fathers and/or mothers above should be altered and answered as applicable.)

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

WILL

M.F.M. 10
75M-10-40 (7779)
H.Q. 1772-80-1656

Address in
civil life.

(1) I, Darcy James Geyear (Name in Full), of the City (City, Town, Village, Township)

of Kirkland Lake in the County of Jornship District of Deek

Province of Ontario, Miner (Civil Occupation)

Regimental No. B-9723, Unit RCA, 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 Mother Lattie Geyear
27 Mcamus Ave Kirkland Lake 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 Rita Mildred Geyear (Name) 27 Mcamus Ave Kirkland Lake Ontario (Address)

Stenographer (Civil Occupation), to be the Executrix of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 5th day of January 1942

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.

Darcy James Geyear (Signature of soldier)

First witness sign here.

(5) Signature B. J. Peterson
Civil Address 33 Bequignat Ave Kitchener
Civil Occupation Bank

Second witness sign here.

Signature S. P. Patte
Civil Address 813 Water St, Peterboro,
Civil Occupation Salesman

(Witnesses are not to be beneficiaries.)

[OVER]

PROVINCE OF ONTARIO
VITAL STATISTICS ACT
REGISTRATION OF DEATH

Registration Number
For use of Registrar General only.

SEP 14 1945

1. PLACE OF DEATH
City, Town or Village of IN THE FIELD (BELGIUM) 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 Municipality where death occurred In Province In Canada (if immigrant)
(in years, months and days)

3. PRINT FULL NAME OF DECEASED GEGEAR Darcey James
(Surname or last name) (Given or Christian names)

4. PERMANENT RESIDENCE OF DECEASED:
City, Town or Village of Kirkland Lake Street 27 McGamus Ave.,
Township of..... County or District of..... Province of Ont.

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

10. Date of Birth August 15th, 1920 11. AGE } Years Months Days If less than one day
(Month by name) (Day) (Year) } 24 hrs. or min.

OCCUPATION 12. (a) Trade, profession or kind of work as spinner, grader, clerk, etc. Labourer
(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 GEGEAR James Andrew
(Surname or last name) (Given or Christian names)

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

18. Birthplace: Father..... Mother.....
(Province or Country) (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 Director of Records, Dept. of Natl. Defense this..... day of..... 19.....
Signature of informant..... Relationship to deceased.....
Address Director of Records, Dept. of Natl. Defense

20. Burial, Cremation or Removal..... Date..... 19.....
(Month by name) (Day) (Year)
Place of Burial Belgium Cemetery.....
(Municipality)
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 Oct. 25th 19 44
(Month by name) (Day) (Year)

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

I Immediate cause Give disease, injury or complication which caused death, nor the mode of dying, such as heart failure, asphyxia, asthenia, etc.	CAUSE OF DEATH	DURATION		
		Yrs.	Mos.	Dys.
(a) <u>Killed in action.</u> due to				
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	(b)..... due to			
	(c)..... due to			
II Other morbid conditions (if important) contributing to death but not causally related to immediate cause.				

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?..... Date of injury..... 19.....
(State which)
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)

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.

15

15

6th September, 1945

Mr. James Andrew Gegear,
Box 74, Cadillac, Que.

Dear Sir:

Information has now been received from the overseas military authorities that your son, B9723 Gunner Darcy James Gegear, was buried with religious rites in a temporary cemetery located at Maldegem, Belgium. Marked map is enclosed.

The grave will have been temporarily marked with a wooden cross for identification purposes and in due course the remains will be reverently exhumed and removed to a recognized military burial ground when the concentration of graves in the area takes place. On this being completed the new location will be advised to you, but for obvious reasons it will likely take approximately one year before this information is received.

Yours faithfully,

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

/JLH

J.S.

14

FIELD SERVICE

405-B-18194
9/31B Army Form B. 2090A.
40/P & S/2551 (5504)

REPORT of Death of an Officer or a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death. See Table II, Appendix III, Field Service Regulations, Vol. I.

REGIMENT } 14th Fld Regt RCA }
OR CORPS } Squadron, Troop }
Officer's Personal No. (if known) } B9723 }
Soldier's Army No. } Rank } Gnr.
Surname } Gogear. } Christian Names } D.J.
Died { Date } 25 Oct 44 } Place } Belgium }
Cause of Death* } Killed. }
Nature and Date of Report } A.F.W. 3014/152 31 Oct 44 }
By whom made } Cdn Sec GHQ 2nd Ech 21 A Gp. }

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

Burial { Place } Belgium Maldegen 006998 } Date } 26 Oct 44 }
By whom reported } J.E. Whittles. 14th Fld Regt RCA }

State whether he leaves { (a) in Army Book 64 } No. }
a Will or not { (b) as a separate document } Not Received }

All private documents and effects received from the front or hospital, as well as A. B. 64, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any report received as to verbal expressions by a deceased officer or soldier of his wishes as to the disposal of his estate should be forwarded to the War Office at once, supported by a certified statement of the person who actually received the information.

In the case of a soldier a duplicate of this report is to be sent to the Paymaster at the Base, together with the deceased's A. B. 64 (after withdrawal of any will from the latter), for transmission to the Paymaster who compiles the soldier's account.

Station and } Belgium } Signature of Officer in charge of Section }
Date } 7 Nov 44 } Adjutant-General's Office at the Base }
for Officer i/c

Cdn Sec GHQ 2nd Ech 21 A Gp. B

**BATTLE CASUALTY
CASUALTY SECTION EXTRACT FORM**

This Space
is for
the
RED X
See Below

Message Received from 21/CAS/5216

Time Message Received.....

Date Message Received.....

Theatre
AEF

Regimental No. Rank Name Full Christian Names

B9723 GNR GEGEAR DARCY JAMES

Unit 14 FD REGT

SERIAL
707

CASUALTY PARTICULARS

KILLED 25 OCT 44

"A" ⁵¹⁰

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 MR James Andrew GegeAR Relationship Father
74 Cadillac Quebec

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 KIRKLAND LAKE ONT
Cable No. 3038A
Inland Tel. No.

Mrs M. L. G. 11
Verification Clerks Signature

20th November, 1944.

Mr. James Andrew Gegear,
Box 74,
Cadillac, Quebec.

Dear Mr. Gegear:

It was with deep regret that I learned of the death of your son, B9723 Gunner Darcy James Gegear, who gave his life in the Service of his Country in the Western European Theatre of War, on the 25th day of October, 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,

A. E. WALFORD
Major-General
Adjutant-General

NOV 15 1944
(A.E. Walford),
Major-General,
Adjutant-General.

mem x - mother

29-11-44.

EFH

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER **B-9723** RANK **Gunner**

SERVICE UNIT **14th Field**

NAME **GEGEAR, Darcy James**

Regiment R.C.A. (C.A.)

DATE OF BIRTH DAY **15th** MONTH **August** YEAR **1920** Date Enlisted: **22-10-41**

MARITAL STATUS **Single** Religion: **Roman Catholic**

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP **Father**
 ADDRESS **Box 74,
 Cadillac, Quebec.**

NAME **Mr. James Andrew Ggear,**
 ADDRESS
 D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME
 ADDRESS
 (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. **Canrecords 3028A**
 CASUALTY DETAILS **Killed in action**

H.Q. 405-G-18,194
 DATE **25-10-44**

FRANCE

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO

M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO

DATE **9-11-44**

MM

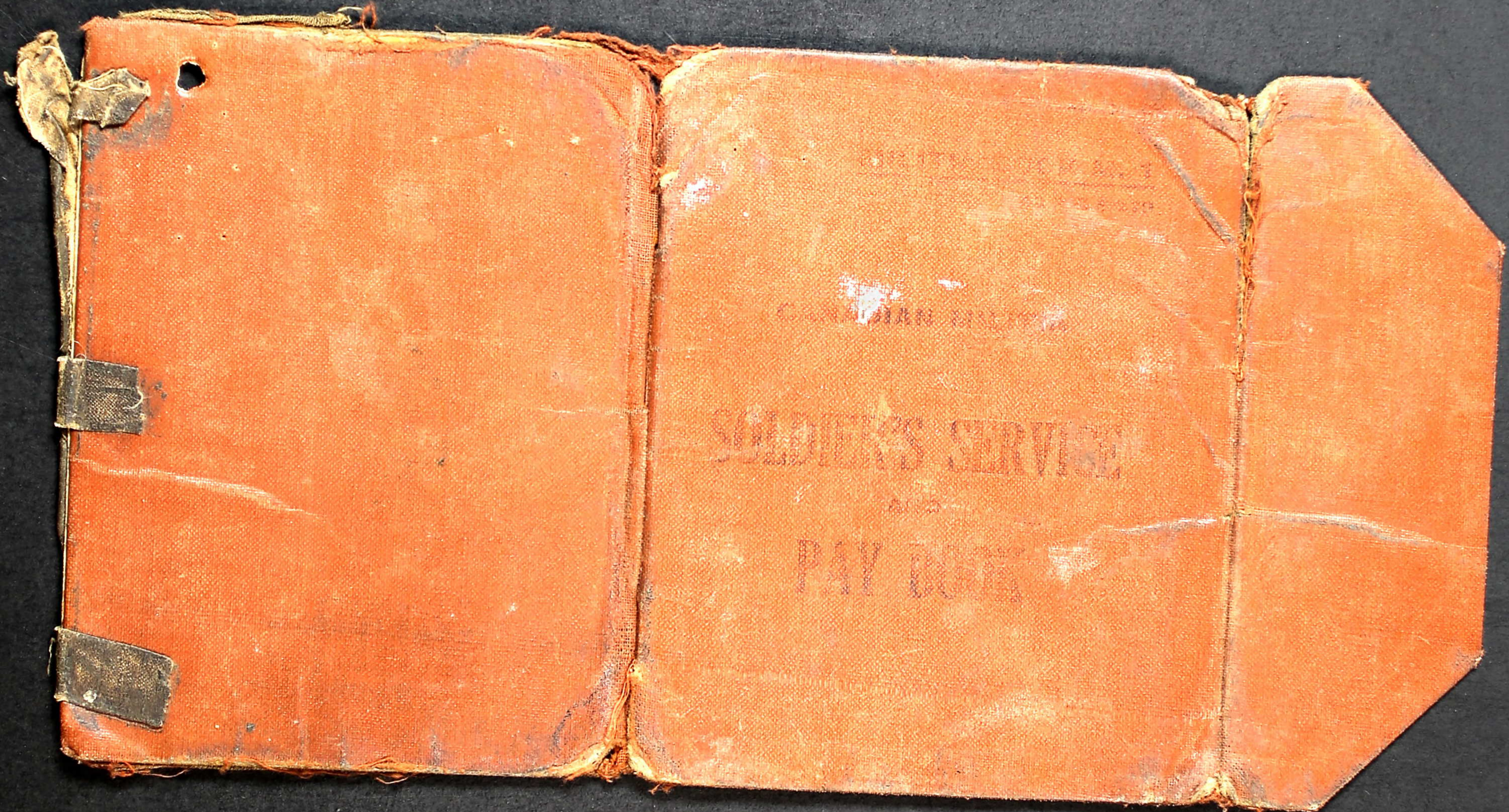
O/S with R.C.A.

S/L 1151

OFFICER I/C RECORDS

5

COPY FOR C.R. FILE



SOLDIER'S SERVICE

and
PAY BOOK

B 4723
GEELEP D.J.

682 Regent St. S.

Deceased.

14th Reg't RCA
it

[Faint handwritten notes, possibly "The Star of..."]

SOLDIER'S SERVICE BOOK

(Soldier's Pay Book, Militia Book M. 1 (Part II)
will be issued for active service.)

Every entry in this book (other than those on page 24 of this part of Militia Book M. 1, connected with the making of a Soldier's short form of Will) is to be made under the superintendence of the Officer Commanding the Squadron, battery or company to which the man belongs, or is attached.

Alterations in any of the entries will be initialled by an officer.

INSTRUCTIONS TO SOLDIER

1. You will be held personally responsible for the custody of this book.
2. You will always carry this book on your person when on duty, and on active service.
3. You must produce this book whenever called upon to do so by a competent authority, viz.: Officer, Warrant Officer, N.C.O., Military Policeman or Civilian Police.
4. You must not alter or make any entry in this book (except as regards short form of Will on page 24; see instructions on pages 20 to 23), and disobedience of this order will be treated as a serious offence.
5. Should you consider that any entry is lacking or incorrect, or should you lose the book, you will report the matter to your immediate military superior.
6. You will be permitted to retain this book after discharge as a record of your services, but should you lose the book after discharge it cannot be replaced.

(II) NEXT OF KIN

Any change becoming known is to be duly noted with date of
NOTE.—No entry in these pages has any legal

Nearest degree of relationship		Names	Date
1st	Wife		
	Children		
2nd	Father	James Andrew Gegeran	
	Mother	Lottie Gegeran	30 Mar 43
3rd	*Brothers and Sisters		
4th	Other Relations (stating relationship)		

*State whether brothers are older or younger.

NOW LIVING

such change and reported by O.C. Unit to the Officer i/c Records.
effect as a Will (see pages 20 to 23)

Latest known Address in full

Box 74 Cadillac Quebec

Box 74 Cadillac Quebec

B 9723
GEGERAN
D.T.

(XIV) PROTECTIVE INOCULATIONS

Nature of Vaccine, "T.A.B." Cholera, Plague, etc.	Date	Signature of Medical Officer
T.A.B.T 1	5-9-41	A.L. Campbell RCA.
2	26-9-41	
3	10-10-41	
T.A.B.T - 1/2 cc	9 Jun 42	S. Malikin Capt.
1/2 cc	3.6.43	
TYPHUS Vaccine 1/4 cc	20 Dec 43	S. Malikin Capt.
1/2 cc	27 Dec 43	
1 cc	7-1-44	
Typhus vaccine 1 cc	23-4-44	S. Malikin Capt.
T.A.B.T. 1/2 cc	4-8-44	S. Malikin Capt.

(XV) VACCINATION

Date Vaccinated	Signature of Medical Officer
5-9-41	A.L. Campbell RCA.
29.2.44. Vaccinoid Reaction	S. Malikin Capt.

B 4123
RECEIVED O.T.

(XVI) MISCELLANEOUS ENTRIES

(For entries for which space is not otherwise provided)
NOTE.—No entry on this page has any legal effect as a WILL

Particulars	Date	Signature of Officer
X ray Neg	21/10/41	A.L. Campbell RCA.
DM Chamber CAP	22/11/42	
M test + Q card	3/11/42	
2nd Priv Leave. W.	4/2/42	S. Malikin Capt.
3 Priv Leave. W. FTW.	18-27 Feb 43	
	20-29 Oct 43	W. Maddoch St.
FINGERPRINTED—CAIB		
Cdn Volunteer Medal and Clasp PRO 1167	15 Jan 44	C. H. Grant St.
Gas Chamber CAP	8 Feb 44	
N.V. TEST POOR		

A soldier who has made a Will is recommended to inform his Commanding Officer where such Will has been deposited and the Commanding Officer shall upon receipt of such information forthwith complete the following certificate and despatch the same to the Officer i/c Records.

No. Rank Name

states that he has executed a Will and that the same has been deposited with at

Signature of Officer.
Rank or Appointment.

Date

Soldiers who possess real estate and who have not made a Will are recommended to make a formal Will before embarkation when action as indicated above should be taken, or to make a Will on one of the forms provided, M.F.M. 10 with one or more beneficiaries or M.F.M. 10a in the case of a soldier owning real estate, and to hand this document duly executed to their Commanding Officer for transmission to the Record Officer concerned for safe custody.

The Officer receiving such Will shall complete the following certificate—

Certificate

M.F.M. 10 received and forwarded to the Officer i/c Records at *CM 44*

W. H. Seligman
Signature of Officer.
Rank or Appointment.

Signature of Officer.....

Date Certificate or Will extracted.....

Dept.....

To whom sent.....

Date Certificate or Will extracted.....

To whom sent.....

Dept.....

Solely for use on Active Service. The Will, on page 24, must NOT be used until you have been placed under orders for Active Service.

SHORT FORM OF WILL
(Write Will on next page)

If a soldier on active service, or under orders for active service, wishes to make a short Will, he may do so on next page. **It must be entirely in his own handwriting and must be signed by him and dated.** The full names and addresses of the persons whom he desires to benefit, and the sum of money or the articles of property which he desires to leave to them, must be clearly stated. **The mere entry of the name of an intended legatee on the next page without any mention of what the legatee is to receive is of no legal value.**

The following is a specimen of a Will leaving all to one person :—

In the event of my death I give the whole of my property and effects to my mother, Mrs. Mary Bull, 999 High Street, Toronto.

(Signature) **GEORGE BULL,**
Private No. 30000,

Date 5th August, 1936.

The following is a specimen of a Will leaving legacies to more than one person :—

In the event of my death, I give \$10.00 to my friend, Miss Rose Smith, of No. 1, High Street, London, and I give \$5.00 to my sister, Miss Maud Bull, 999 High Street, Toronto, and I give the remaining part of my property to my mother, Mrs. Mary Bull, 999 High Street, Toronto.

(Signature) **GEORGE BULL,**
Private No. 30000,

Date 5th August, 1936.

Signature of Officer.....

Date Certificate or Will extracted.....

To whom sent.....

Dept.....

*B 4723
RECEIVED
D.J.*

Solely for use on Active Service. This Will page must NOT be used until you have been placed under orders for Active Service.

WILL

(For use if the soldier has not already made a Will or wishes to alter one already made. See instructions on page 23).

Signature.....
Rank, Regt'l Number.....
Date.....

B 4723
RECEIVED

407
1788
407

% Standing
6 Claremont St
Branding
Seeds
Forks

[Redacted]

[Redacted]

[Redacted]