

BEHM C18
SIDNEY WYNN

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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

Behm Sydney Winn

Section A—GENERAL INFORMATION

PLEASE LEAVE BLANK

1. (a) Print name in full..... *Sidney Winn* (b) Reg'l. No..... *Q-18*
2. (a) Arm of service..... *Army* (b) Unit..... *1st. Flid. Regt.* (c) Rank..... *Capt.*
3. (a) Date of birth..... *2 April, 04* (b) Have you any dependents?..... *Yes* (c) Place of residence at time of enlistment..... *St. Chestney Ont.*
4. (a) Place of enlistment..... *Kingston Ont.* (b) Date of enlistment..... *6 Sept 29*

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school..... *19* (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 10*
7. If you attended a university, give name of university and standing or degree secured..... *None*
8. (a) Did you ever enter upon a trade apprenticeship?..... *Yes* (b) If so, for what occupation?..... *Iron moulder* (c) Did you finish it?..... *No* (d) If you did not finish it, how long did you serve at it?..... *2 yrs.*
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?..... *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..... *Various employers* Address..... *Ontario*
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)..... *Transportation*
20. (a) Your specific occupation..... *Transport driver* (b) Number of years' experience at this occupation with any employer..... *10 yrs.*
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?..... *Yes* (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?..... *Dairy*
25. (a) Were you born on a farm?..... *No* (b) How many years' actual farming experience have you had?..... *2* (c) In what provinces did you have experience?..... *Ontario*

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.).....
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form.....

DATE..... *27th. Feb.* 194 *3*

SIGNATURE

Blanche E. Kelly
For Officer i/c Records C.M.H.Q.

DUPLICATE

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

ORIGINAL
DUPLICATE
TRIPPLICATE

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

ISS. 28.9.43

medical

M.F.M. 2
A.F.B. 271
168M-11-36 (9359)
H.Q. 1772-45-18



Unit A Coy. C.H.A. Regimental Number 218

ACTIVE SERVICE
CANADIAN FIELD FORCE 01
ATTESTATION PAPER

Assistant Comd

- Surname BEHM
- Christian Names Sydney Wynn
- Present address Mount Chestney, Ontario, Canada.
- Date of birth 2nd April, 1904
- Place of birth Canada quebec quebec.
(Country) (County or Province) (Town or Township)
- Religion (state denomination) C of E
- Trade or Calling Farmer
- Married, Widower or Single Married
- Name of next of kin Clara Lucy Behm
- Relationship wife
- Address of next of kin Mount Chestney, Ontario, Canada.
- Have you served in any Naval, Military or Air Force? Yes
- If previous war service, state arm, force and regimental particulars No
- Do you now belong to or have you served in the Active Militia of Canada? Yes
R.C.H.A. (R.E. Det. R.M.C.) 10th July, 1925 to 31st July, 1929
(Give unit and date of attestation)

See Change

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, Sydney Wynn Behm do solemnly declare that the above particulars are true and I hereby engage to serve in the Canadian Active Service Force 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 6th September, 1939 Sydney Wynn Behm
(Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

I, Sydney Wynn Behm do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Sydney Wynn Behm (Signature of Recruit.)

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER.

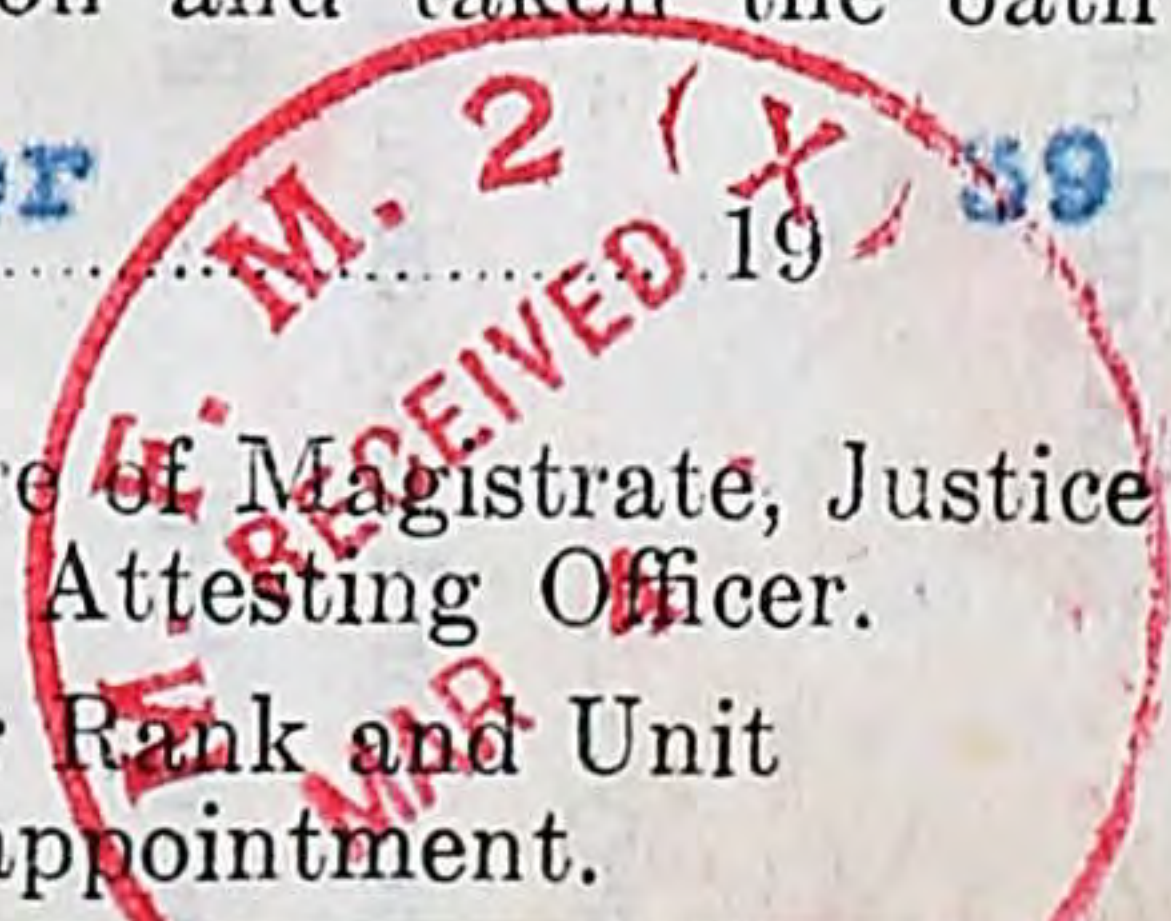
The Recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law.

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 Kingston, Ont. this 6th day of September 1939

Langford M. [Signature] Major, R.C.A.
O.C. R.C.A. Depot, Kingston Ont. (Signature of Magistrate, Justice of the Peace or Attesting Officer.)
Office 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

FINGERPRINTED

Record of Service of BEHM Sydney Wynn
(Surname) (Christian Names)

Regimental Number C. 18

QUALIFICATIONS

EDUCATIONAL QUALIFICATIONS

Military.....
 Business or Professional.....
 Trade or Civil..... Farmer.....
 Technical.....
 Languages.....

High School } One Year } Graduation }
 or } } or }
 Collegiate } (years completed) } Matriculation } (specify)
 *College.....
 *University.....

*(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 Field Force	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
<u>2101</u>		Joined on appointment <u>Asst. R.C.H.A. Depot C.A.S.F.</u>	<u>Sgt.</u>	<u>6-9-39</u>	<u>A 136 R.C.H.A.</u> <u>1st Lt. Bde.</u> <u>C.A.S.F.</u>	<u>Kingston</u>	<u>#201 Part II D.O.</u> <u>R.C.H.A.</u>	<u>8-9-39</u>
		<u>Awarded 10 days F.P.R. 12416</u>	<u>-</u>			<u>F-B</u>	<u>5030</u>	<u>28.10.40</u>
		<u>SOS CASB (CANADA) ON EMBARKATION AT Halifax ON 7 Dec. 39</u>	<u>"</u>	<u>7 Dec. 39</u>	<u>1st Lt.</u>	<u>"</u>	<u>5</u>	<u>24 Jan 41</u>
		<u>8 Dec. 39 AND DISEMBARKED AT Lunenburg ON 18 Dec. 39</u>	<u>"</u>	<u>8 Dec. 39</u>	<u>1st Lt.</u>	<u>"</u>	<u>5</u>	<u>24 Jan 41</u>
		Embkd. at Plymouth	<u>Gnr.</u>	<u>11 Jun 40</u>	<u>1st Lt. Regt.</u>	<u>Yd.</u>	<u>13</u>	<u>19 Mar 41</u>
		Disembkd Br est France	<u>"</u>	<u>12 Jun 40</u>	<u>1st Lt. Regt.</u>	<u>"</u>	<u>13</u>	<u>19 Mar 41</u>
		Embkd. Br st France	<u>"</u>	<u>17 Jun 40</u>	<u>1st Lt. Regt.</u>	<u>"</u>	<u>13</u>	<u>19 Mar 41</u>
		Disembkd. Plymouth	<u>"</u>	<u>18 Jun 40</u>	<u>1st Lt. Regt.</u>	<u>"</u>	<u>13</u>	<u>19 Mar 41</u>
		<u>Stoppage of pay \$20.00 158(2) FR+1</u>	<u>Sgt.</u>	<u>2 June 41</u>	<u>1st Lt. Regt.</u>	<u>Yd.</u>	<u>30</u>	<u>27 June 41</u>
		<u>Leave 7 days F.T.W.</u>	<u>Sgt.</u>	<u>23 Apr. 41</u>	<u>1st Lt. Regt.</u>	<u>U.K.</u>	<u>36</u>	<u>25 July 41</u>
		<u>AWL 17 Aug. 41 ftd 1 days pay 149(1)(a) FR+1</u>	<u>Sgt.</u>	<u>18 Aug 41</u>	<u>1st Lt. Regt.</u>	<u>U.K.</u>	<u>46</u>	<u>19 Sept 41</u>

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

smR

CERTIFICATE OF MEDICAL EXAMINATION

Name in full Sydney Wynn Behm Date 6th September, 1939

Part 1. Information obtained from the recruit.

1. Age 35 2. Have you ever suffered from any of the following diseases?
- | | |
|---|---|
| a. Rheumatism..... <u>No</u> | j. Nasal trouble..... <u>No</u> |
| b. Tuberculosis..... <u>No</u> | k. Ear disease..... <u>No</u> |
| c. Bronchitis or asthma..... <u>No</u> | l. Eye disease..... <u>No</u> |
| d. Heart disease..... <u>No</u> | m. Epilepsy..... <u>No</u> |
| e. Kidney or bladder disease..... <u>No</u> | n. Nervous or mental disease..... <u>No</u> |
| f. Gastro-intestinal..... <u>No</u> | o. Syphilis..... <u>No</u> |
| g. Rupture..... <u>No</u> | p. Gonorrhoea..... <u>No</u> |
| h. Varicose veins..... <u>No</u> | q. Have you ever worn glasses?..... <u>No</u> |
| i. Flat or deformed feet..... <u>No</u> | |

Sydney Wynn Behm
(Signature of Recruit)

Examiner's remarks re above: No disability pension

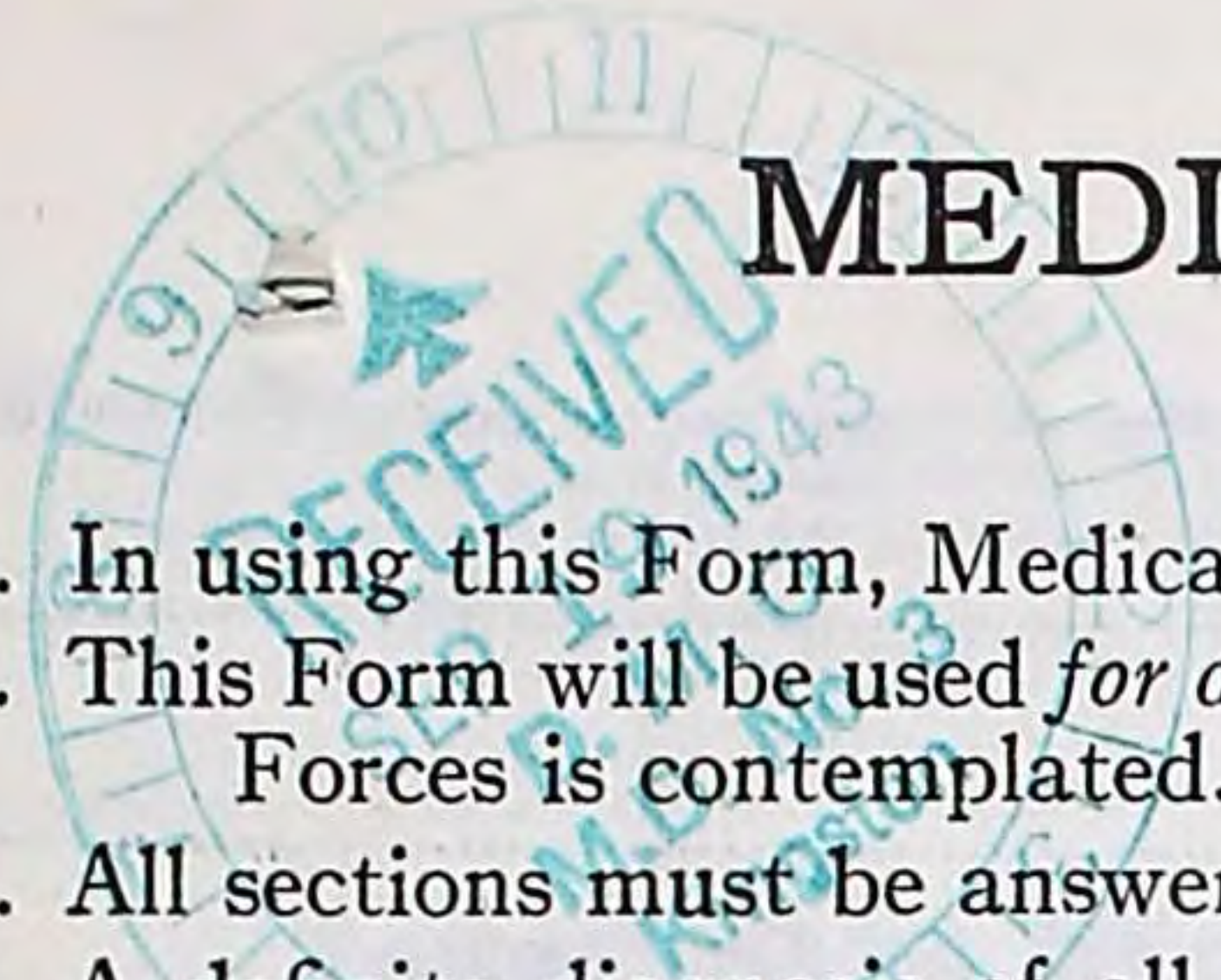
Part 2. Information obtained by medical examination. The recruit must be stripped.

1. Identification marks or scars. (If operative obtain history.)
Tattoo anchor on back of left forearm.
2. Height..... 5 feet..... 9 1/2 inches. 3. Weight..... 148 pounds.
4. Complexion..... Ruddy Eyes..... blue 5. Development..... Good Good
Fair
Poor
- Hair..... Red
6. Chest measurement—Girth on full expansion..... 38 inches
Range of expansion..... 2 1/2 inches
7. Vision, right..... 20/20 left..... 20/30 8. Hearing, right..... N.V. 20ft left..... N.V. 20ft *smP.*
9. Condition of mouth and teeth..... Satisfactory
10. The abnormalities (congenital and pathological) found on examination are as follows.....

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" ~~or~~ F
Special remarks when category lower than A..... See change

Wells President *Stuart* Member *Robinson* Member *Burhead* Member
VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
29/9/39	Inoc. & vacs. <i>E. S. Williams</i>	26/9/43	Recat E MFB 227
13/11/39	Re-examine. <i>E. S. Williams</i>		
22.11.39	Category A. <i>E. S. Williams</i>		
28-11-39	2 x ray of chest normal <i>gms</i>		
1-5-42	Rec. F.P.A.I.		
22-8-42	Re-vacc.		
2-2-43	T.A.B.T. 0.2 cc		
23-2-43	1 cc 1-cc		



MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS TO MEDICAL OFFICERS

1. In using this Form, Medical Officers will be guided by instructions issued at N.D.H.Q.
2. This Form will be used for all ranks, at home and abroad, when change in Category or discharge from His Majesty's Forces is contemplated.
3. All sections must be answered in full.
4. A definite diagnosis of all diseases or injuries recorded must be made, and the "Standard Morbidity Code for Canada" must be followed.
5. The Medical Officer in charge of the case is responsible for the completion of pages 1, 2 and 3. The President and Members of the Medical Board are responsible for the completion of page 4.

Active - Returned from Overseas STATION Kingston, Ont. DATE 12-Sept-43

1. (a) Unit No. 3 A District Depot (b) Regimental No. C-16 (c) Rank Cnr.
 (d) Surname BEHN (e) Christian names Sidney, Wynn
(Use block letters)
 (f) Home address 2 Millers Lane, Kingston, Ont.
 (g) Next of Kin Mrs. Clara Behn (h) Relationship wife
 (i) Address of Next of Kin same as (f)

2. Age last birthday 39 Date of birth 2nd. April-1904

3. Enlistment, or Appointment: (a) Place Kingston, Ont. (b) Date 6-Sept-39
 (c) Category on enlistment "A" (d) If lower than A on enlistment, give reason

4. Personal description: (a) Height 5' 9 1/2" (b) Weight 140
 (c) Complexion Fair (d) Colour of hair Red (e) Colour of eyes Hazel
 (f) Identification marks, scars, etc. Tattoo left arm - anchor.

5. Former civilian trade, profession or occupation Farmer

6. Service (The information should be secured from personal Military documents if available. If not, a statement from the member of the forces may be taken, and note made to that effect.)
 (a) Length of service. Years 4 Days 7
 (b) Periods of service: continuous
 (c) Trade on enlistment Farmer

	From	To
Former Wars	----	----
War 1939—Canada	<u>6-Sept-39</u>	<u>6-Dec-39</u>
Abroad	<u>6-Dec-39</u>	<u>11-Aug-43</u>
Canada on return from abroad	<u>11-Aug-43</u>	<u>date</u>

7. Diseases or injuries with Code Nos. (1) Mitral Stenosis 0713
(To be filled in when examination has been completed)
(2) Auricular Fibrillation 0709
 (a) Dates of origin (1) unknown (2) May 1943
 (b) Places of origin (1) unknown (2) England
 (c) Causes (1) unknown (2) unknown

8. Present Condition—(a) Subjective.....
(In the individual's own words)

"I feel weak and tired."

(b) Objective (Before completing this section, the member of the forces should be stripped and subjected to a thorough physical examination. All defects, no matter how trivial, should be recorded. Specialists' reports will be obtained when necessary to ensure a definite diagnosis. For R.C.A.F. Personnel when the category is higher than A4B, a B2 examination is to be completed and the results entered in this section.)

P.X. Tired pale soldier with eyes popping.

E.E.N.& T. Eyes - R 20/20 L.20/20

Ears - R.& L. 20 ft.

Thyroid - not enlarged.

Lungs: clear and resonant.

Heart: B.P. Enlarged apex 6th. interspace outside left mid -
 clavicular line, rate irregular, fibrillating mitral systolic
 and diastolic murmurs heard, loud in quality. Exercise tolerance
 very poor.

Abdomen: Liver is enlarged and below right costal margin and tender.

I think spleen is palpable and tender. No hernia.

Upper Extremities: normal

Lower Extremities: normal

C.N.S. & Reflexes: normal, equal and present.

E.C.G. shows auricular fibrillation.

Diagnosis: Mitral stenosis with auricular fibrillation and early
 heart failure.

R.J.Hitesman, Major

9. History (This section should contain a detailed history of the origin of all diseases and injuries described in Section 8. Date and place of treatment should be recorded, and if pre-enlistment in origin, the name and address of the attending Physician or institution, if available, should be included. Special care should be taken as to history in respect of injuries incurred during service. Copies of Medical Case Sheets, D.P. & N.H. Forms 100, and Consultant opinions should be attached.)

Indefinite history of rheumatic fever or polyarthrits.

After first of the year, 1943, began to develop breathlessness and pain on the left side. Later admitted to No. 14 Can.Gen.Hospital and diagnosed Rheumatic Heart Disease and evacuated to Canada.

SEE REPORTS

10. Were the diseases or injuries caused or aggravated:

(a) By intemperance or improper conduct: or (b) by unreasonable refusal to accept treatment?.....

(a) No

(b) No

11. What is the probable duration of the diseases or injuries?.....

Permanent

12. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?.....

Yes -

(If the answer is "yes" state nature of treatment required and probable duration)

will require constant supervision.

13. Can the former civilian trade, profession or occupation be resumed?.....

No -

(If not, briefly state why)

Prognosis is not good with auricular fibrillation and early heart failure.

14. Recommendations.....

(This section should contain only the M.O's recommendation as to treatment, convalescence, or reference to Medical Board for categorization)

Recategorization and disposal as R.O. 3151.

R.J.Hitesman, Major, R.C.A.M.C.

Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 8 (a) and 9 are to be read to the member of the forces and either "satisfied" or "not satisfied" struck out.)

I, the undersigned **S.W. Behm** having heard the contents of Sections 8 (a) and 9 read, am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.)

I complain in addition of **nothing**

S.W. Behm, Gnr.

Rank

Signature of member of the Forces.

R.J.Hitesman, Major

OPINION OF THE MEDICAL BOARD

15. Does the Board concur with the preceding report? If not, give differing opinions with reasons.....

Concur.....

16. It is certified that the invalid,—

(a) Does require treatment (give nature of treatment required and probable duration.)

Requires treatment D.P. & N.H.

(b) ~~Does not require treatment.~~

Categories hereunder are defined for information only.

(1) NAVY—

- A. General service.
- D. Temporarily unfit.
- E. Unfit for Category A.

(2) ARMY—

- A. General service.
- B1 } Service abroad (not general service).
- B2 }
- C1 } Home service (Canada only).
- C2 }
- D. Temporarily unfit.
- E. Unfit for A, B, C.

(3) R.C.A.F.—

- A1B Fit for full flying and ground duties anywhere and under any conditions.
- A1HBH Fit for full flying and ground duties in Canada.
- A2B Fit for limited flying duties and all ground duties anywhere and under any conditions.
- A2HBH Fit for limited flying duties and all ground duties in Canada.
- A3B Air Crew (other than pilots) fit for their full flying duties and full ground duties anywhere and under any conditions.
- A3HBH Ditto but Canada only.
- A4B Fit for passenger flying and full ground duties anywhere and under any conditions.
- A4HBH Ditto but Canada only.
- ATB Unfit for flying temporarily but fit for full ground duties anywhere.
- ATBH Unfit for flying temporarily but fit for full ground duties in Canada.
- ATBT Temporarily unfit for any form of duty.
- APB Permanently unfit for flying, fit for ground duties anywhere.
- APBH Ditto but only in Canada.
- APBT (Permanently unfit for flying, temporarily unfit for any form of duty).
- APBP Unfit for any form of duty.

*Certified true copy
of Power of Attorney
J. Willoughby
Lt. Col.*

Y.O.B.	P	U	L	H	E	M	S
04	5	1	1	1	1	1	1

17. Recommendations of the Medical Board as to category, treatment or convalescence.

Category..... "E" R.O. 3151

Place..... Kingston, Ont.

Date..... 13-9-43

J.B. Willoughby, Lt. Col. President.

R.J. Hitesman, Major } Members.

W. Butt, Capt. }

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned..... understand the nature of the treatment recommended, and I refuse to accept it, for the following reasons.....

Witness..... Signed.....
(Should the refusal appear unreasonable, or should he decline to sign the statement, the Board of Officers should so state.)

Place..... President.

Date..... } Members.

APPROVED BY *[Signature]*
APPROVING OFFICER M.D. or D.M.O. or P.M.O.

Date..... SEP 24 1943

APPROVED BY
D.G.M.S. or D.M.S. (Air)

Date.....

No. C-18 Rank Gunner Name BEHM, Sidney Wynn.

Unit R.C.H.A. Date of death 2nd Oct. 1947

Died at Veterans' Pavilion Kingston General Hospital, Ontario

Cause Pulmonary embolism, Auricular fibrillation. Mitral stenosis and rheumatic heart disease.

Death was Due. CPC. d. 6-11-47 HQ 405-B-18, 909 d.

N/K Mrs. Clara Behm Relationship widow

Address Box 43, Napanee, Ontario.

Remains buried in Cataraqui Cemetery

Kingston, Ontario.

Grave location 10M-2-45 (M-4640)

CONTRACTOR'S ROLL FOR THIS SOLDIER'S GRAVE DESPATCHED APR 29 1948



2-10-47

PD
AWARDS-CANADIAN ARMY (ACTIVE)

C-11

M

D.F.B

BEHM, Sydney Wynn		C-18	Gnr.	FILE No. 405-B-18909 RCA
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	, 1828
Defence Medal	
CVSM & Clasp	
War Medal, 1939-45	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS-DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON

ENTITLED TO

Mrs. Clara Behm, (Widow)

145 Charles St.,
Kingston, Ont. (20-9-49)

ADDRESS

MEM

DATE DESP

REGN. NO. *A 3740*

(2) MEMORIAL CROSS

C-11

WIDOW

Mrs. Clara Lucy Behm

ADDRESS

Box 43, Napanee, Ontario.

(2)

DESP. DEC 19 1947
REGN No. *396*

(3) MEMORIAL CROSS

C-11

MOTHER

Mrs. Margaret Behm,

15 Levis Avenue, Quebec, P. Q.

ADDRESS

(3)

DESP. DEC 19 1947
REGN No. *399*

Name.....

REPORT		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2. M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		(I49-I-a-b) Awd 3 Jan 42 Awd 48 hrs det Ffts 3 days pay FRI)	Gnr	5 Jan 42	I Fld Rgt	U.K.	5	31 Jan 42
		Leave 7 days no FTW (P#3) to 22 Apl 42	Gnr	15 Apl 42	I Fd Rgt	U.K.	20	29 Apl 42
		Ffts 14 days pay off under Sec 40-A.A. FRI-I49(2)	Gnr	6 July 42	I Fld Rgt	U.K.	32	16 July 42
		Qual gun layer	Gnr	15 July 42	I Fd Rgt	U.K.	34	27 July 42
		Priv leave to 29 July 42	Gnr	22 July 42	I Fld Rgt	U.K.	37	13 Aug 42
		AWL awr'd 7 days extra drill ffts I Day pay	Gnr	31 Aug 42	I Fd Rgt	U.K.	42	18 Sep 42
		Priv leave m/a. to 10 Nov 42	Gnr	1 Nov 42	I Fd Rgt	U.K.	53	27 Nov 42
		Awarded 7 Days F.P. ffts 7 days pay Sec 40.A.A.	Gnr	4 Feb 43	I Fd Rgt	U.K.	6	11 Feb 43
		Qual driver I/C (W)	Gnr	15 Feb 43	I Fd Rgt	U.K.	9	25 Feb 43
		Increase of pay to \$1.40	Gnr	1 Jan 43	I Fld Rgt	U.K.	14	29 Mar 43
		(I)A.A.) Awd 4 days C.B. Ffts I day pay Sec 40.A.A. & Sec 65)	Gnr	24 Mar 43	I Fld Rgt	U.K.	18	22 Apl 43
	Change adress N.of.Kin	Clara Behn (Wife) 246 1/2 Montreal Street, Kingston, Ont					25	3/6 June 43
	S.O.S.	SOS to I-CARU Emergency Hospital Orprigton	Gnr	22 May 43	I Fd Rgt	U.K.	26	10 June 43
	T.O.S?	TOS from I Fld Rgt	Gnr	23 May 43	I.C.A.R.U.	U.K.	134	8 June 43
		Trans to 14 Gen Hosp	Gnr	28 June 43	1 CARU	UK	156	
		SOS to 14 Gen Hosp	Gnr	3 Aug	1 CARU	UK	186	
		T.O.S from 1 CARU	Gnr	4 Aug	2 CARU	UK	185	6 Aug 43
		S.O.S. Cdr. Army (O/S) & No. 1 N.E.T.D	Gnr	10 Aug	2 CARU	UK	127 B	9 Aug 43

Statement of the Service of No. Rank

Sheet No.

Name

REPORT		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		TOS 3A-DD on trans. & posted to "C" Wg.	Gnr.	11-8-43	3A-DD	K'ton	D.O. 231	25-8-43
		Granted disembarkation leave from 22-8-43 to 4-9-43 incl.	"	22-8-43	"	"	D.O. 232	26-8-43
		Awarded 5 days CB & forfeits 3 days pay FR&I for AWL: 4-9-43 to 7-9-43.	Gnr.	7-9-43	3A-DD	K'ton	D.O. 244	8-9-43
		SOS 3A-DD on discharge under RO 1029(10) and R.O. 3151 (Being unable to meet the required military physical standards.	Gnr.	28-9-43	3A-DD	K'ton	D.O. 262	28-9-43
		Auth. to draw clothing all. - \$35.00	Gnr.		3A-DD	K'ton	D.O. 262	28-9-43
		Auth. to draw rehab. grant.	Gnr.		3A-DD	K'ton	D.O. 262	28-9-43

SERVICE AND CASUALTY FORM

PART I (For all ranks)

M.F.M. 4 (Part I)
A.F.B. 103 (Part I)
43M-11-36 (9360)
H.Q. 1772-45-18

Unit "A" BATTERY, R.C.H.A., C.A.S.F. Regimental Number C18

<p>1. Surname <u>BEHM,</u></p> <p>2. Christian Names <u>Sydney Wynn,</u></p> <p>3. *Substantive Rank and Appointment <u>Sun</u></p> <p style="margin-left: 20px;">*Acting Temporary or Local Rank.....</p> <p style="margin-left: 40px;">giving date.....</p> <p style="margin-left: 20px;"><small>*To be entered in pencil to facilitate alteration.</small></p> <p>4. Place of birth <u>Quebec, Quebec, Canada.</u></p> <p>5. Date of birth as declared on attestation <u>2 Apr 04</u></p> <p style="margin-left: 20px;">(A).....</p> <p>6. Date of enlistment <u>6 Sep 39</u></p> <p>7. Place of enlistment <u>Kingston, Ontario, Canada.</u></p> <p>8. Residence at time of enlistment <u>Mount Chestney, Ontario.</u></p> <p>9. (B) Special conditions (if any) of enlistment or rate of pay.....</p> <p>10. (C) Any subsequent variations of conditions of service.....</p> <p>11. Religion <u>Church of England.</u></p> <p>12. If married, state date <u>21 Dec 28</u></p> <p>13. Trade on enlistment <u>Farmer.</u></p> <p>14. Corps, trade and grade.....</p> <p>15. (D) Qualifications <u>Prof. Test Cl.111 Driver i/c.</u></p> <p>16. (E) Miscellaneous entries <u>Driv'g. wheeled</u></p>	<p>(17) Regiment or Corps</p> <p style="text-align: center;"><u>R.C.H.A.</u></p> <p style="text-align: center;"><u>R.C.H.A.</u></p> <p>Unit (Battn., etc)</p> <p style="text-align: center;"><u>"A" Battery,</u></p> <p style="text-align: center;"><u>1 Cdn Fd Regt</u></p> <p>(18) Medical</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Category</th> <th style="width: 20%;">Date</th> <th style="width: 50%;">Authority</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"><u>"A"</u></td> <td style="text-align: center;"><u>6 Sep 39</u></td> <td style="text-align: center;"><u>Medical Board.</u></td> </tr> </tbody> </table> <p>(19) Next of kin (entries to be made in pencil)</p> <p style="margin-left: 20px;"><u>Wife: Clara Lucy Behm</u></p> <p style="margin-left: 40px;"><u>246 1/2 Montreal Street</u></p> <p style="margin-left: 40px;"><u>Kingston Ont Canada</u></p> <p>(20) E.....</p> <p>(21) E.....</p> <p>(22) E.....</p>	Category	Date	Authority	<u>"A"</u>	<u>6 Sep 39</u>	<u>Medical Board.</u>
Category	Date	Authority					
<u>"A"</u>	<u>6 Sep 39</u>	<u>Medical Board.</u>					

- 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.

B

(a) Report		(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
Date	From whom received						
			SOS CASF (CANADA) ON EMBARKATION AT <u>HALIFAX</u> ON <u>10 Dec 39</u>				
			T.O.S. CASF (OVERSEAS) ON TRANSFER ON <u>11 Dec 39</u> AND DISSEMBARKED AT <u>GOUROCK</u> ON <u>18 Dec 39</u>				
24 Oct 40	O.C.	13th Regt	Awarded 10 days 3rd Punishment for W.O.A.S. he did without orders from his Superior Officers leave his Guard	Eng.	23 Oct 40	Gunn.	Pt.II No. 30 d/28 Oct 40
10 Mar 41	"	"	Service in Theatre of War - France. Embarked Plymouth 11 Jun 40. Disembarked Great 12 Jun 40. Embarked Great 17 Jun 40. Disembarked Plymouth 18 Jun 40	France.	11 Jun 40	Gunn.	Pt.II No. 13 d/19 Mar 41
25 Jun 41	"	"	Warrants of pay \$20.00 & \$15.8(2) Sec 40 AA	Field	2 Jun 41	"	Pt.II No. 30 d/27 Jun 41
19 Jul 41	"	"	Leave 7 days Privilege 3 TW	"	23 Jun 41	"	Pt.II No. 36 d/25 Jul 41
15 Sep 41	"	"	Forfeits 1 day pay 3 R 1490(a) A.W.L	"	18 Aug 41	"	Pt.II No. 46 d/19 Sep 41
7 Jan 42	"	"	Leave 9 days 2nd Privilege 3 TW	"	22 Dec 41	"	Pt.II No. 2 d/9 Jan 42
28 Jan 42	"	"	Forfeits 3 days pay 3 R 1490(a) & (b) A.W.L 8 days	"	5 Jan 42	"	Pt.II No. 5 d/3 Jan 42
27 Apr 42	"	"	Leave 7 days P.3 No 3 TW	"	15 Apr 42	"	Pt.II No. 20 d/20 Apr 42
14 Jul 42	"	"	Forfeits 14 days pay 3 R 1490 AA Sec 40	"	6 Jul 42	"	32 d/16 Jul 42
25 Jul 42	"	"	Qualified Gun Layer	"	15 Jul 42	"	34 d/17 Jul 42
9 Aug 42	"	"	Leave 7 days P.3 3.3	"	22 Jul 42	"	37 d/13 Aug 42
27 Oct 42	"	"	Forfeits 1 day pay 3 R 1490(a) A.W.L	"	31 Aug 42	"	42 d/18 Sep 42
16 Nov 42	"	"	Play Medal with Allowances	"	1 Nov 42	"	53 d 87 Nov 42
4 Feb 43	"	"	Prof. 7 days pay FR 1490(1)(b) SEC 40 AA	"	4 Feb 43	"	6 d/11 Feb 43
18 Feb 43	"	"	Qual. Driver 1/2 (wheeled) RTTB	"	15 Feb 43	"	9/25 Feb 43
24 Mar 43	"	"	Granted Daily Rates of Pay of \$ 1.40 per day	"	19 Mar 43	"	14-29 Mar 43
29 Mar 43	"	"	Prof. 1 day pay 3 R 1490(1)(a) Sec 15(1) AA, Sec 40 AA	"	24 Mar 43	"	18-25 Mar 43
27 May 43	"	"	Adm. Emergency Hosp. Orpington Hosp.	"	22 May 43	"	26-10 June 43
27 May 43	"	"	SOS & I.C.B.T.U.	"	"	"	"
8 Jun 43	"	ICARU	T.O.S. from I.F.R. (Emerg. Hosp. Orpington)	UK	23 May 43	Gunn.	P.O. 134
30 July 43	"	"	Transf. to 14 Gen. Hosp.	"	28 June 43	"	130
17 Aug 43	"	ICARU	T.O.S. from I.C.N.E.T.D.	UK	4 Aug 43	Gunn.	D.O. 186
		WE 10	T.O.S. from ICARU on discharge UK	UK	5 Aug 43	Gunn.	125 d/6 Aug 43
		WE 10	S.O.S. Co. Army (UK) & NO. 1	UK	10 Aug 43	Gunn.	127 B 9 Aug 43

CANADIAN ACTIVE SERVICE FORCE

SUPPLEMENTARY DECLARATION

Name BEHM. S.W. Rank Gunner

Unit "A" Bty. 1st Fd. Bde. CASF Regimental Number C.18

I, Sidney Wynn Behm.,

having been enlisted in the Canadian Militia, and by my Declaration dated the 6th

day of Sept: 1939, having engaged to serve in the Canadian Active Service Force as set forth in said Declaration, do further declare that I hereby engage to serve on active service in the Canadian Active Service Force anywhere in Canada, and also beyond Canada and Overseas, for the duration of the present war, and for the period of demobilization thereafter, and in any event for a period of not less than one year, provided His Majesty should so long require my services.

Witness Thomas Wabunta S W Behm.
Signature of soldier.

4-10-39
Date

NOTE.—This Declaration to be completed in triplicate; one copy to be attached to each original duplicate and triplicate of Attestation Paper M.F.M. 2. If M.F.M. 2 has already been despatched to Records Office, N.D.H.Q., the original of this Declaration will be forwarded thereto for attachment.

M.F.M. 2 (x)
120M—9-39

ENTERED on
M. F. M. 2

**CANADIAN ACTIVE SERVICE FORCE
CANADIAN FIELD FORCE**

M.F.M. 7
400 M-8-39 (1704)
H.Q. 1777-45-18

DISCHARGE CERTIFICATE

This is to Certify that No. 0-11 (Rank) Private
 Name (in full) Raymond [unclear] [unclear] enlisted in
 the ROYAL CANADIAN ARTILLERY (RCA)
C. A. S. F.
CANADIAN FIELD FORCE at Kingston, Ontario on the 6th
 day of September 1943
 He served in Canada and Iceland and France
 and is now discharged from the service by reason of P.O. 1029(10) (Unable to meet the
required military physical standards)

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age <u>29 Years 5 Months</u>	Marks or Scars <u>1) Scar right thumb</u>
Height <u>5 feet 10 inches</u>	
Complexion <u>Fair</u>	
Eyes <u>Green</u>	
Hair <u>Red</u>	

[Signature]
 Signature of Soldier

[Signature]
 Issuing Officer
[Signature]
 Rank

Date of Discharge

DOCUMENT OFFICE
 NO. 3-A DISTRICT DEPOT
SEP 28 1943
 KINGSTON, ONTARIO.

Date 28th September, 1943

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Record Office, Department of National Defence, Ottawa, Canada.

PARTICULARS OF FAMILY OF AN OFFICER OR SOLDIER OF THE CANADIAN FIELD FORCE

INSTRUCTIONS.

- (a) This form is to be completed immediately an officer or soldier is appointed to, or enlisted in, the C.F.F.
- (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 soldier, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District or Camp Paymaster, to the Chief Paymaster, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster until the unit arrives Overseas, when it will be forwarded to the Chief Paymaster, Canadian Overseas Intermediate Base.

BEHM

(1) Name of Officer or Soldier..... **BEHM SYDNEY WYNN**
(Surname first—Christian names in full—Block capitals)

(2) Regimental Number..... **C.13**

(3) Unit..... **A.I. Battery RCHA**

(4) Are you married?..... **Yes**

(5) If married, state,

(a) Full name of your wife..... **Clara Lucy Behm**

(b) Present postal address of wife..... **Mount Chestney, Ontario.**

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

(7) Are you a widower?..... **No.**

(8) Have you any children?..... **Yes**

If so, give number of boys and girls..... **2 boys & 1 girl**

Also their names and ages..... **Martin Harold Age. 10 : James Alfred Age. 8
Margurite Ellen Age. 6**

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

Give particulars of Guardian to whom Separation Allowance should be paid—if authorized—

Name..... **Mrs. S.W. Behm**

Postal Address..... **Mount Chestney, Ontario.**

(SEE OTHER SIDE).

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife?..... NO.

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

(11) Is your father alive?..... NO.

If so, state name and address.....

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

(13) If sole support of father who is a widower—state what amount per month you have given him prior to joining C.F.F.....

Also state reason he has no other means of support.....

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

If so, state name and address..... Margaret Behn
..... 15 Lewis Ave. QUEBEC, Que.

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

(16) If sole support of widowed mother—state what amount per month you have given her prior to joining C.F.F.

Also state reason why she has no other means of support.....

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

If so, in what Company?.....

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.

S. W. Behn

(Signature of officer or man)

Date..... September 6th. 1939

J. H. Roberts

(J. H. ROBERTS)
Major, R. C. A.
Officer Commanding Battery ROHA

Date..... September 6th. 1939

TELEGRAM MEMORANDUM

DEPARTMENT OF VETERANS AFFAIRS

HB-9-10-47

To The Deputy Minister,
Dept. of V.A., Daly Building,
OTTAWA.

Richardson Building,
Kingston, Ontario,
October 4th., 1947.

Attention of Mr. L.M. Firth,
Estates Officer, D.V.A.

Subject Re ~~X~~ #C-18 ~~X~~ BEHM, Sidney W.
~~C.F.C.~~ 509426 - Napanee, Ontario.

File No. 405-B-18909

Minister of Records
A. G. Branch
OCT 10 1947
OCT 7 1947
Nat. Archives Bldg.
Ottawa - Canada

Particulars of Death

The marginally named died October 2nd, 1947 in the Kingston General Veterans Pavilion, Kingston, Ontario. Class 1A patient.

Next-of-Kin

Mrs. Clara Behm, wife, Box 43, Napanee, Ontario.

Will

No information regarding Will.

Personal Effects

There were no personal effects.

Trust Fund, etc.

No Trust Fund balances.

Debts

No known debts.

14287

SB/MCD



S. Boswell

S. Boswell
for District Administrator,
"Kn" District.

*Noted
H. K. 4/6*

W. F. 4/6

THE CANADIAN PENSION COMMISSION

MEMORANDUM

To...Deputy Minister,.....
Department of National Defence.
From...The Canadian Pension Commission.....

OTTAWA,.....Nov. 6th, 1947.....

405-B-18909

ATTENTION - Director of Records.

~~Canadian Agency,~~
~~Imperial War Graves Commission~~

#C-18, (#8923 - Perm. Force) Gnr. Sidney W. Behm.
R.C.A.

C.P.C. 509426

The marginally named died
at Kingston, Ont.
on October 2, 1947.

Cause of Death Pulmonary Embolism, Auricular Fibrillation.
Mitral Stenosis and Rheumatic Heart Disease.

In the opinion of the Commission,
death was related to military service.

Next of Kin Mrs. Clara L. Behm (Widow),
Box 43,
Napanee, Ontario.

*Muted
W.S.R. (4B)*

VM
Died on strength

*Muted
W.S.R. (4B)*

E. Lacey

for
Canadian Pension Commission.

*Memorial Cross
made + filed
11/30/47 17-11-47*

405-B-18909 (Records-3d)

OTTAWA, Canada,

November 17, 1947.

Mrs. Margaret Behm,
15 Levis Avenue,
Quebec, P. Q.


C-18 Gnr. Sydney Wynn BEHM

Dear Mrs. Behm:

The Honourable, the Minister of Veterans Affairs, wishes to extend his sincere sympathy on learning of the death of your son, which has recently been reported to this Department.

As the death of your son was related to his service in the Canadian Army (Active), you will shortly receive a Silver Memorial Cross given by the Canadian Government as a slight token of appreciation of the sacrifice you have made.

Yours truly,



A. C. Chadwick,
for A/Director,
War Service Records.

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

6
ARMY

NAME Sydney Wynn (CHRISTIAN NAMES) BEHM (SURNAME) REGISTER NO. 24498
FILE NO. 405-B-18909
DATE 11-12-44
ADDRESS 2 Millers Lane, Kingston, Ont., SERVICE NO. C-18
FINAL RANK OR RATING Pts.
DATE OF TERMINATION OF OVERSEAS SERVICE 10-8-43 DATE OF DISCHARGE 28-9-43

A. TOTAL QUALIFYING SERVICE
NO. OF DAYS 1438 EQUAL TO 47 COMPLETE PERIODS AT \$7.50 \$ 352.50
B. QUALIFYING OVERSEAS SERVICE
NO. OF DAYS 1303 INELIGIBLE DAYS, EQUAL TO SEE PAR. 2 OVERLEAF FOR EXPLANATION DAYS @ 25c. PER DAY \$ 325.75
SUB TOTAL \$ 678.25

C. SUPPLEMENT FOR OVERSEAS SERVICE
DAILY RATES AT DISCHARGE
PAY \$ 1.40
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE \$ 1.25
ADDITIONAL PAY \$
DEPENDENTS' ALLOWANCE 1/30 OF \$ 69.00 \$ 2.30
TOTAL \$ 4.95 X7 = \$ 34.65
NO. OF DAYS 1303 X \$ 34.65 \$ 246.72
183

D. WAR SERVICE GRATUITY \$ 924.97
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES \$ 13.81
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$
OTHER DEDUCTIONS \$ 13.81

F. AMOUNT PAYABLE \$ 911.16
(THIS AMOUNT IS PAYABLE IN 7 MONTHLY INSTALMENTS OF \$ 130.16 EACH)

THE WAR SERVICE GRANTS ACT, 1944, PROVIDES FOR YOUR RE-ESTABLISHMENT CREDIT IN THE AMOUNT SHOWN IN SUB TOTAL OF A. & B. THIS CREDIT IS AVAILABLE TO YOU IN CERTAIN CIRCUMSTANCES. INQUIRY IN THIS CONNECTION SHOULD BE DIRECTED TO THE DEPARTMENT OF VETERANS' AFFAIRS.

SEE REVERSE SIDE
FOR EXPLANATION
OF ITEMS A, B & C

G. MONTHLY INSTALMENT NOT TO EXCEED DAILY RATE OF PAY AND ALLOWANCES \$ 4.95 X30 \$ 148.50

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 BH CHECKED BY [Signature] TREASURY
CHECKED BY G. M. Waserman DATE 30-1-45

SERVICE REPRESENTATIVE

- Navy
- Army
- Air Force

(Mark X opposite Force in which you last served.)

DEPARTMENT OF NATIONAL DEFENCE

M.F.M. 441
1 Mil. 9-44 (5449)
H.Q. 1772-39-2326

24498

0916

Application for War Service Gratuity

(Canadian Armed Forces)

OCT 28 1944

A complete reply must be given to every question in this application. If any question is not applicable, "N.A." is to be inserted.

1. Surname on termination of service..... BEHM..... (Print)

2. Christian Names SIDNEY WINN..... (Print)

3. Service No. C 18..... 4. Paid rank or rating at date of termination of Service 150

5. Address, in full, to which payments of gratuity are to be forwarded.....

2 Millers Lane
Kingston
Ontario

6. State below your period or periods of service in the Armed Forces of Canada during the present war.

Service (Navy, Army or Air Force)	Service No.	Final Rank or Rating	Date of Commencement of Service	Date of Termination of Service
<u>Army</u>	<u>C 18</u>	<u>Int.</u>	<u>6-9-39</u>	<u>28-9-43</u>
.....
.....

7. Have you during the present War, while a member of the Canadian Forces, been attached, loaned or seconded to any of the Naval, Military, or Air Forces of His Majesty or of any power allied or associated with His Majesty?..... N.A...... If so, state name of Force or Forces.....

8. Have you during the present War, while *not* a member of the Canadian Armed Forces, been appointed to or enlisted in any of the Naval, Military or Air Forces of His Majesty (other than the Canadian Armed Forces)?..... N.A...... If so, state the Force or Forces, with dates of commencement and termination of service.

Having now ceased to serve on Active Service, I hereby apply for payment of the War Service Gratuity.

26-10-44
(Date)

Sidney W. Behm
(Signature of Applicant)

If name signed in space above represents a change from name given in question 1, insert here the name at termination of service. As cheques will be prepared in the name given in question 1, a specific address in question 5 is particularly essential.

NOV 29 1944

NOTE: When completed this form is to be mailed to the Headquarters of the Service in which you last served. Viz: Navy—The Secretary, Naval Board, Naval Service Headquarters, Ottawa. (To be accompanied by Certificate of Service in the case of ratings.) Army—The Secretary, Department of National Defence (Army), Ottawa. Attention: Paymaster-General. Air Force—The Secretary, Department of National Defence for Air, Ottawa. Attention: Records Officer.

Register No. 24498

Nominal Roll No. 916

TO: P.M.G.

H.O. File No. 405 B 18909 ✓

**CANADIAN ARMY (ACTIVE)
COMPUTATION OF SERVICE
WAR SERVICE GRANT**

Rank Genl.
When S.O.S. 18 ✓
Surname Behm ✓
Christian Name in Full Sydney Wynn ✓

Reason for Termination of Service:

1st Enlistment 10 Sept 39 CARO 1029 (10) ✓
2nd Enlistment CARO ()
3rd Enlistment CARO ()

T.O.T.A.L. S.E.R.V.I.C.E.

<u>10</u> <u>Sept</u> <u>39</u> ✓		
T.O.S. <u>28</u> <u>Sept</u> <u>43</u> ✓	T.O.S. _____	T.O.S. _____
MD <u>3</u>	MD _____	MD _____
Total Days <u>1480</u> ✓	Total Days _____	Total Days _____

TOTAL SERVICE 1480 DAYS

	Total Service	Less Non-qualifying Service	Net Service
WESTERN HEMISPHERE	<u>138</u>	<u>3</u> ✓	<u>135</u> ✓
OVERSEAS SERVICE	<u>1342</u> ✓	<u>39</u> ✓	<u>1303</u>
Totals	<u>1480</u> ✓	<u>42</u>	<u>1438</u>
Add Non-qualifying Service			<u>42</u> ✓
TOTAL SERVICE			<u>1480</u> ✓

EMBARKATION DETAILS:

1. Date S.C.S. Overseas 10 Aug 43 ✓
2. Date S.O.S. Overseas 8 Dec 39 ✓

REMARKS: Enlisted on 10 Sept 39 ✓

Computer's Signature [Signature]

Checker's Signature [Signature]

Date Computed 27 Nov 44

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

[Signature]
(C. L. Lavin) Colonel,
Director of Records.

DEPARTMENT OF NATIONAL DEFENCE.
- A R M Y -

Ottawa, Canada. 3 August 44

The Canadian Legion of the B.E.S.L.,
P.O. Box 640,
OTTAWA, Ontario.

RE: C-18 BMM, Sydney Wynn

ATTENTION: R. Hale.

Dear Sir,-

Receipt is acknowledged of your recent letter which has reference to the service, during the present war, of the marginally named ex-member of the Canadian Army. The information requested by you is as follows:-

<u>Date of Birth.</u>	<u>Date of Enlistment.</u>	<u>Theatre of service.</u>	<u>Date of discharge.</u>
2 April 1904	6 Sept 1939	Canada, United Kingdom, and France.	28 Sept 1943

Reason:

Medically Unfit.

HOSPITALIZATION.

<u>Admitted.</u>	<u>Discharged.</u>	<u>Diagnosis.</u>
21 May 43	28 June 43	Auricular Fibrillation and Pneumonia
26 June 43	5 Aug 43	Rheumatic Heart Disease
8 Sept 43	18 Sept 43	Mitral Stenosis Auricular Fibrillation.

CASF.A. 30
21-9-43.

Yours truly,
W.E.L. Coleman Major
W.E.L. Coleman) Colonel,
Director of Records,
for Adjutant-General.

DEPARTMENT OF NATIONAL DEFENCE

ARMY

"GENERAL"

APPLICATION FOR WAR SERVICE BADGE—"SERVICE" CLASS

I, Sydney Wynn B E H M hereby make application for War "General" Service Badge, "Service" Class, and do hereby declare that I have not previously been issued with a "Service Class" Badge.

I enlisted in Royal Canadian Artillery (AF) and served on Active Service in the present War as follows:—

	DATE	
	FROM	To
IN CANADA.....	6th September, 1939	7th December, 1939
IN ENGLAND.....	8th December, 1939	10th August, 1943
ELSEWHERE.....	11th August, 1943	28th September, 1943
France	11th June, 1940	18th June, 1940

and was honourably discharged or retired from the ARMY No. 3-A District Depot, CA. KINGSTON, Ontario on 28th September, 1943.
(State Unit, and whether Naval, Military or Air) (Date of Discharge)

I am in possession of Certificate of Service.
 Discharge Certificate.

Regimental No. C-18

Rank Gunner

Unit R.C.A.

S. W. Behm
(Signature of Applicant)

ADDRESS 2 Mellens Lane Kingston Ont.
(Number and Street) (Town or City) (Province)

The applicant should complete the form above this line, striking out items not applicable to his particular case. This badge may only be issued to a person who has honourably ceased to serve. ~~XXXXXXXXXXXXXXXXXXXX~~
~~XXXXXXXXXXXXXXXXXXXX~~ (Space below reserved for Departmental entries).

Qualified..... (Documents checked) Not Qualified..... (Reason)

Badge No..... Issued..... (Signature of Issuing Officer)

(Rank, Name, Appointment, Service, Naval, Militia or Air)

NOTE: This form should be completed by soldier at time of Discharge and forwarded to Officer i/c Records (Awards), National Defence Headquarters, Ottawa. Full street address must be given; "General Delivery" except where there is no Postal Delivery, is not sufficient.

CASE SHEET (SPECIALIST REPORT)

Unit: No. 3 A.D.D. Place: Kingston, Ont.

Regtl. No. C-18 Rank L. Gnr. Name: BEHM, S.W.

To-Hosp. KMH

History, Examination and Physical Findings:

Gives history of rheumatic fever in 1925, stiffness in shoulder and arms. Gives no history of Scarlet Fever. Enlisted 6-Sept-1939 at Kingston and proceeded overseas. This illness began by shortness of breath about first of January, 1943 and gradually became worse about May '43. Given leave and took pain in the left groin. Sent to Orpington Hospital in May '43 and diagnosed Auricular Fibrillation. Later transferred to No. 14 Can. Gen. Hospital in June '43 as rheumatic heart disease and evacuated to Canada.

The symptoms are now extreme - Breathlessness, and weakness on slight exertion. Shortness of breath - Heart palpitates. Gets pain under the left costal cartilage. He has been on digitalis.

Examination: Fair complexion with red hair, somewhat anaemic looking. The chest is hyper-resonant. The thyroid is not palpable.

Heart: vessels of neck show visible pulsation. The chest seems to heave and on palpation, the hands feel an irregular rhythm. The apex is in 26th. interspace outside the mid-clavicular line. B.P. 122/78. The heart is fibrillating and a systolic and diastolic murmur is heard in apex region, intensity greatest near and below left nipple. Exercise tolerance is very poor.

E.C.G. shows auricular fibrillation and low voltages and low complexes. There is no coronary involvement.

OPINION: The prognosis is poor and this soldier has marked valvular damage, and I think Myocardial damage. He is unfit for military service and requires further hospitalization under provisions of R.O. 3151.

Date: 10-9-43

R. J. Hitesman, Major, R. C. A. M. C.

CANADIAN MEDICAL SERVICES copy of M.F.M. 45A
REPORT OF RADIOLOGICAL EXAMINATION.

CHEST:

There is moderate enlargement of the heart shadows. The greatest transverse diameter of the heart is 17.5 cms. and the greatest transverse diameter of the chest is 32.5 cms.

The hilar shadows are slightly accentuated. The apices and outer lung fields are clear and there is no evidence of any parenchymal lesion of the lungs.

Station: Kingston, Ont.

Unit: Kingston Military Hospital

Date: 9-9-43

H. W. Blakely, Major, Radiologist.
R. C. A. M. C.

CERTIFICATE OF MARRIAGE

This is to Certify that I solemnized the marriage of
DNEY WINN BEHM and CLARA LUCY VANKOUGHNETT at Kingston in the
Province of Ontario on the 21st. day of November A.D. 1928.

Witnesses:
H.W. Vancoughnett
Christina McCall

Registration Cert.
1936

Denomination
Anglican

T.W. Sawary
Name of person solemnizing marriage
Kingston.

CERTIFIED TRUE COPY

(J. H. ROBERTS)
Major, R.C.A.
Commanding "A" Battery, 1st Fd Bde. C.A.S.F.

CERTIFICATE OF BIRTH

^Y
SIDNEY WINN son of Jules Behm- Electrician of Quebec. and of
Margaret his wife, was born on the second day of April in
the year of Our Lord 1904, and was baptized on the 24th
day of May in the same year.

J.N. Behm

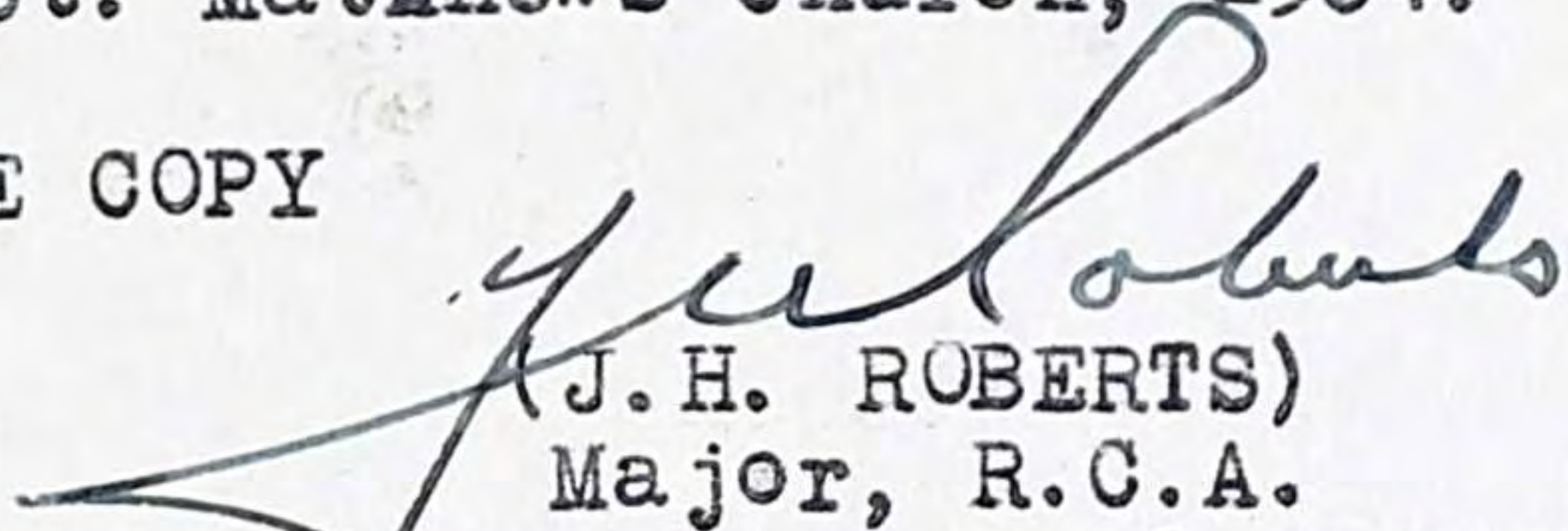
S.S. Weatherbie By me Lennox Williams

Margaret Behm

Dean of Quebec

Taken from the Register of St. Matthews Church, 1904.

CERTIFIED TRUE COPY


(J.H. ROBERTS)

Major, R.C.A.

Commanding "A" Battery, 1st Fd Bde. CASF.