LA BRANCHE
HENRI ANTONIO
C40242

405-L-10980

THE CANADIAN PENSION COMMISSION

MEMORANDUM

To Deputy Minister,
Department of National Defence,

From The Canadian Pension Commission

OTTAWA, February 6, 1947.

ATTENTION - Director of Records.

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

~~C~~

C-40242 C.S.M. - Henri A. LaBranche.

DEPARTMENT OF VETERANS' AFFAIRS
SEP 13 1949
RECEIVED
OTTAWA - CANADA

FEB 10 1947
Ottawa, Canada

The marginally named died at Ottawa, Ontario. on February 14, 1946.

Cause of Death Coronary thrombosis.

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

Next of Kin Mrs. Marjorie LaBranche (widow),
1182 Wellington Street,
Ottawa, Ontario.

noted
D R 4(b)

M. B

for
Canadian Pension Commission.

MB
Not on strength

men (widow)
(mistress)
DR3(d)
18-2-47

M-38 5M—2-46 Req. 267

To be made out in duplicate

M.F.M. 5
90M—3-40 (4225-6)
H.Q. 1772-39-1651

PARTICULARS OF FAMILY OF AN OFFICER OR OTHER RANK OF THE C.A.S.F. OR R.C.A.F. (SPECIAL RESERVE)

DISTRICT PAYMASTER
RECEIVED
JUL 9 1940
M.D. 3 Kingston, Ont.

INSTRUCTIONS.

(*a*) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the C.A.S.F. or R.C.A.F. (Special Reserve.)

(*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.

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(1) Name of Officer or Other Rank LABRANCHE, Henri Antonio
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank C 40,242

(3) Unit Governor General's Foot Guards

(4) Are you married? Yes

(5) If married, state,

(*a*) Full name of your wife Marjorie LaBranche

(*b*) Present postal address of wife 101 Norman St., Ottawa, Ont.

(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 1 Girl

Also their names and ages Ina Dorothy 16 years old.

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

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

Name No.

Postal Address N.A.

[SEE OTHER SIDE]

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife for at least 12 months immediately prior to enlistment?.....

If so, state her full name and Postal Address No.

(11) Is your father alive? No.

If so, state name and address, occupation N.A.

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

(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 joining C.A.S.F. or R.C.A.F. (Special Reserve) N.A.
Also state reason he has no other means of support if partially supported by you, what is your reason for not providing full support? N.A.

(14) Is your mother alive? No.

If so, state name and address N.A.

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

(16) If sole or partial support of widowed mother—state what amount per month you have given her prior to joining C.A.S.F. or R.C.A.F. (Special Reserve) N.A.
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? N.A.

(17) Are you contributing to the support of any dependents, other than those shown above? N.A.
If so, state the following particulars:—

Relationship No.

Full Name N.A.

Postal Address N.A.

Amount contributed monthly during the past six months

N.A.

(18) Have you any Brothers 16 years of age or under or Sisters 17 years of age or under solely supported and maintained by yourself as Bona Fide members of your household before your enlistment or appointment? No.

(19) Are you insured? Yes

If so, in what Company? Metropolitan Life Insurance.
(Give number of policy)

Have you made arrangements for payment of your Insurance Premium? No
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.

H. A. Labranche
(Signature of officer or man)

Date 18-6-40

H. Brooks Lemoine Lieut.-Col.
Officer Commanding Lieutenant Colonel Commanding, Governor General's Foot Guards.

Date 18-6-40

N.B. In the above form the term Father includes Foster Father; the term Mother includes Foster Mother, the form should, however, be changed to read accordingly and applicable.

500M-10-44 (5754-5) (ENG.)
H.Q. 1064-81-3

6
ARMY

DEPARTMENT OF NATIONAL DEFENCE
NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

NAME [redacted] Henri Antonio LAMRANCHE
(CHRISTIAN NAMES) (SURNAME)

ADDRESS 1182 Wellington St., OTTAWA Ont.

REGISTER NO. 146551
FILE NO. 405-1-10980
DATE 16-8-45
SERVICE NO. C-40242
FINAL RANK OR RATING SSM.
DATE OF DISCHARGE 21-7-45

DATE OF TERMINATION OF OVERSEAS SERVICE

		$	¢
A. TOTAL QUALIFYING SERVICE	NO. OF DAYS 1863/30 EQUAL TO 62 COMPLETE PERIODS AT $7.50	465.00	
B. QUALIFYING OVERSEAS SERVICE	No OF DAYS LESS INELIGIBLE DAYS, EQUAL TO (SEE PAR. 2 OVERLEAF FOR EXPLANATION) DAYS @ 25c. PER DAY		
	SUB TOTAL	465.00	
C. SUPPLEMENT FOR OVERSEAS SERVICE	DAILY RATES AT DISCHARGE		
	PAY $		
	SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $		
	ADDITIONAL PAY $		
	$		
	$		
	DEPENDENTS' ALLOWANCE 1/30 OF $ ____ $		
	TOTAL $ X7 = $		
	NO. OF DAYS ____/183 X$		
D. WAR SERVICE GRATUITY		465.00	
E. DEDUCTIONS	OVERPAYMENT OF PAY AND ALLOWANCES $		
	DEPENDENT'S ALLOWANCE AND ASSIGNED PAY $		
	OTHER DEDUCTIONS $		
F. AMOUNT PAYABLE	(THIS AMOUNT IS PAYABLE IN 3 MONTHLY INSTALMENTS OF $ 155.00 EACH)	465.00	

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 $ 5.49 X30 $ 164.70

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

PREPARED BY	CHECKED BY
[redacted]	

TREASURY	
CHECKED BY	DATE
L. LeCraw	23/8/45

SERVICE REPRESENTATIVE

ΔTR

Dept. of Veterans Affairs
War Service Records
Referred To 3d
SEP 27 1949
File
Charged To

DEPARTMENT OF VETERANS AFFAIRS
(War Service Records)

Regimental Number C-40242 (C.S.M.) File No. C-40242 (R.3d) D.V.A.

Name Henri A. LaBRANCHE Ottawa 23 September 1949.

For the purpose of record and in the event of there being any Medals or Memorials available for distribution on account of the ex-soldier marginally noted, it is necessary that the following information regarding the deceased and his relatives be furnished.

DEPARTMENT OF VETERANS' AFFAIRS
SEP 27 1949
RECEIVED 3D
OTTAWA CANADA

It is essential that the ages of any surviving children brothers, or sisters be shown.

Relatives required to account for	Name in full of relatives	Ce	Address in Full	(or date of death)
Widow of soldier	Marjorie La Branche	46	1182 Wellington St Ottawa, Ont.	
Children of soldier and ages	Mrs Ina Nichol	26	1182 Wellington St. Ottawa ont.	
Father of soldier	Samuel La Branche			deceased.
Mother of soldier	Josephine La Branche			deceased.
Brothers of soldier and ages	Joseph La Branche Charles La Branche	56 60	257 Somerset St E. Ottawa	deceased.
Sisters of soldier and ages	Clem La Fleur	58	560 Lansdowne St Toronto.	
	Mrs Henry Bedard	45	560 Lansdowne Toronto	
	Mrs May La Francis	(deceased)		

If the soldier was married, please state exact place and date of marriage.
the Ottawa July 21st. 1922.

If soldier left a Will it is essential that the same or a Certified true copy be forwarded for examination and returned.

No Will left.

DECLARATION

I HEREBY DECLARE that the above particulars are correct, that the particulars given in this Statement are a true and complete statement of all the relatives that the soldier ever had in the degrees enquired for, and that I am the # Widow of the deceased.

Insert degree of relationship: for example:-"Widow", "Father", "Mother", "Brother", etc..

DATE Sept 24th 49 Mrs Marjorie La Branche
(Signature of Applicant)

1182 Wellington St. Ottawa, Ont.
(ADDRESS)

Please complete and return as soon as possible to: Director, War Service Records, (R.3d) No.8 Temporary Bldg., OTTAWA, Ont.

adopted Son.
D.R.3.161 Pierre La Branche age 37 - Finter - Rockliffe Barracks Ont.
address.

21627

FORM No. 1

Register No. 141551 Nominal Roll No.

H.Q. File No. 405-2-10980

To: P.M.G.

CANADIAN ARMY (ACTIVE)

Computation of Service

WAR SERVICE GRANT

Regt. No.	Rank when S.O.S.	Surname	Christian Name in Full
C 40242	SSM	LABRANCHE	HENRI ANTONIO

REASON FOR TERMINATION OF SERVICE:

1st Enlistment Return to civil life CARO 1029 (5(B))

2nd Enlistment CARO ( )

3rd Enlistment CARO ( )

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. 13 Jun 40	T.O.S.	T.O.S.
S.O.S. 21 Jul 45 MD 3	S.O.S. MD	S.O.S. MD
Total Days 1863	Total Days	Total Days

Total Service 1863 DAYS

	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere	1863	NIL	1863
Overseas Service	NIL	NIL	NIL
Totals	1863	NIL	
Add Non-qualifying Service			NIL
Total Service			1863

EMBARKATION DETAILS:

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

REMARKS:

Computer's Signature J Maronese

Checker's Signature H Clarke

Date Computed 6 Aug 45

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

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

500M—11-44 (6012)
H.Q. 1772-45-8

Details of Non-Qualifying Service

Western Hemisphere—

Forfeits for	From	To	Effective Date	Days	Total

H.Q.405-L-10980
(Records HAI)

Registered

October 4th, 1943.

Mrs. Marjorie Labranche,
101 Norman Street,
Ottawa, Ontario.

W.O.CL.I(S.S.M.) Henri Antonio LABRANCHE, M.B.E.

Dear Madam:

I am directed to forward to you for safe-keeping, a Warrant of Appointment of your husband to the Most Excellent Order of the British Empire.

The Honourable, the Minister of National Defence extends his sincere congratulations on the honour thus conferred.

It would be appreciated if you would complete, detach and return to the Secretary, Central Chancery of the Orders of Knighthood, St. James's Palace, London, S.W.1, England, the enclosed form of receipt.

It would also be appreciated if you will kindly advise this Department of safe receipt of the Warrant in question, an addressed envelope which requires no postage being enclosed for that purpose, please.

Yours truly,

(A.C. Chadwick) Major,
Secretary, Sub-Committee Awards Board,
for Adjutant-General.

WCL/GEAB.

17

To be submitted to N.D.H.Q. in duplicate

Promotion, Appointment, Confirmation, Relinquishment, Warrant Officers, Class I

PART I—

Name LABRANCHE HENRI ANTONIO
(Surname) (Christian Names)

Regtl. No. C.40242 Unit No.33 C.A.(B).T.C.

Present Rank: Squadron S.M. (W.O.II) 10 March 42
Confirmed ..... Date .....
Acting R.S.M. (W.O.I) Date 1 Jun. 43

Medical Category "A" Date of Birth 11 Feb.00

*Qualifications C.S.M. for 2 yrs. 11 mos. on Active Service
C.S.M.-N.P.A.M. for 5 years-

*Statement of Service 21 years N.P.A.M. with G.G.F.G. Ottawa
plus Active Service 2 yrs. 11 mos.

Recommended for:

(a) ~~Promotion to~~		
(b) ~~Appointment to~~		Effective Date
(c) ~~Confirmation in rank of~~		
(d) Relinquishment of	A/RSM(WOI)	31 Jul. 43

(SEE ROUTINE ORDER 1561)

How was vacancy caused? (Stating Regtl. No., Rank and Name of former appointee; also manner of his disposal.)

Replaced C.32443 Pte.(A.R.S.M.-W.O.I) G.P. Howard who relinquished acting rank and app't 1 May 43.

Quote Establishment Reference No. Cdn V/124/3 dated 1 Nov 42

This column for N.D.H.Q. use only

N.D.H.Q. File No. .....

District H.Q. File No. .....

Unit File No. .....

A.H.Q.
A.H.Q.
A.H.Q. 6-8-43

PART II—

Recommended and Certified Correct:

Date 26 Jul. 43

(x) O.C. Unit (A.R. Macnab) Major
A/Commandant NO.33 C.A.(B).T.C. Ottawa.

Date

(x) Bde. Comdr. .....

Date

(x) G.O.C. or D.O.C. (F.L. Armstrong) Brigadier,
District Officer Commanding,
N. D. H. Q. Military District No.3.

PART III—

Concur:

Date

Approved:

Date

Directorate or Corps .....

Major-Genera
Adjutant-General.

Part I will be completed by the Unit concerned.
A copy of M.F.M. 2 is *not* required with this recommendation.
*Separate sheet to be used if necessary.
(x) To be completed by O.C. Unit, by Bde, or other Comdr. where applicable and finally by the G.O.C. or D.O.C. concerned.

M.F.M. 152
7M—500—10-42 (6726)
H.Q. 1772-39-1871

4

M.F.M. 14A
200M-1-45 (6409)
H.Q. 1772-39-1662
K.P. 25687

CARD SEQUENCE NO._____

NO. C.40242 RANK SSM NAME LABRANCHE, Henri Antonio

CASUALTIES, ETC.

PART II D. O. No.	DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
28	21.7.45	S.O.S. Canadian Army (A) "To return to civil life (his physical condition precluding his serving advantageously in the army)" CARO 1029 (5) (b) Eff: 21 Jul. 45. Granted Clothing Allowance $100.00. Granted Rehabilitation Grant. Address: 1182 Wellington St., Ottawa, Ontario.	

M.B.E.

No C- 40242 Rank R.S.M. Name LaBRANCHE? Henri A.

Unit R.C.A.C. Date of death 14th Febr. 1946

Died at Ottawa, Ontario.

Cause Coronary thrombosis.

Death ~~Not~~ Due. CPC. d ~~1-10-46~~ 6-2-47. HQ 405-L-10980 d

Mrs. H.A. LaBranche, Relationship Widow

Address 1182 Wellington Street, Ottawa, Ontario.

Remains buried in Pinecrest Cemetery

Britannia Heights, Ontario.

CHK

Grave location Plot 134, Section L.

CONTRACTOR'S ROLL FOR THIS SOLDIER'S GRAVE DESPATCHED SEP 18 1947

10M-2-45 (M-4640)

14-2-46 P.D. AWARDS—CANADIAN ~~ARMY~~ (ACTIVE) 2015 M EMG

				FILE No. 405-L-10980
LaBRANCHE, Henri Antonio M.B.E.		C.40242	C.S.M.	CIC
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE ELIGIBLE

BADGE (CLASS) GSC No. 244139 (21-7-45)DD9 DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
CVSM War Medal 1939-45	2305 25/10/49

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

REM. RAND LTD. 100M-9-46 (9565) H.Q. 1772-45-8 KARDEX SYSTEMS DIV. CAT. NO. K. 15332*

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

MEMORIAL BAR

(1) DATE DESP

REGN. NO 1123

(1) MEDALS

PERSON ENTITLED TO: Mrs. M. LaBranche, (widow)

ADDRESS: 1182 Wellington Street, Ottawa, Ontario.

(2) MEMORIAL CROSS

WIDOW: Mrs. Marjorie LaBranche (English)

2015 ADDRESS: 1182 Wellington St., OTTAWA, Ont.

(2) DESP. MAR 18 1947

REGN No. 22640

(3) MEMORIAL CROSS

MOTHER: Deceased (MFM 5)

ADDRESS

(3)

K. 15352*

CASUALTIES, ETC.

PART II D. O. No.	DATE	NATURE AND PARTICULARS — IF IN HOSPITAL NOTE NAME
228.	16.12.42	Granted leave of absence from 1200 hrs. 22.12.42 until 1200 hrs. 27.12.42 & is authorized 4 days rations allow.
140.	24.6.43	Do promoted & ranks acting W.O.1 pro tem appointment Do R.S.M. eff. 1. June 43. (vice reversion A/R.S.M. Howard) Auth. K.55-6-3284 (Pers.) d/19 June 43.
168.	2-8-43.	Relinquishes appointment of a/RSM. W.O.1. eff. 31. July 43. auth. Supp. C.A.R.O. 33.74.
173.	9.8.43.	attached to AA#3. Ottawa for quarters & Rations. eff. 9.8.43.
174	10.8.43	cease " " " " S.O.S. #33 CA(B)TC, OTTAWA, ONT. Eff. 10.8.43. ~~to O.T.C. Brockville~~ and to AA#3. Ottawa.
224	12.8.43	TOS #3DD on tfr from #33 CA(B)TC Ottawa Ont. eff. 11.8.43.
228	16.8.43	Gr. furlo from rev. 16.8.43 to tat 29.8.43
242	30-8-43	**Rtd from Furlo eff. 29-8-43**
264	21.9.43	SOS #3DD on tfr to A-21 COCTC Barriefield Ont eff. 21.9.43.
231	24.9.43	TOS A.21 TC. Eff. 22.9.43.
297	8-12-43.	Spec. Leave ~~(8-11-43)~~ 10-11-43 to 13-11-43.
9	12.1.44	New Years Leave 30-12-43 to 3-1-44
34	10-2-44.	Spec. Leave 6-2-44 to 9-2-44.

LOWE-MARTIN CO. LIMITED D83960

M.F.M. 14A
200M-1-42 (2934)
H.Q. 1772-39-1662

CARD SEQUENCE NO. _____

NO. RANK NAME

CASUALTIES, ETC.

PART II D. O. No.	DATE	NATURE AND PARTICULARS — IF IN HOSPITAL NOTE NAME
111	8-5-44.	Accumulated leave 22-4-44 to 25-4-44
162	4-7-44.	Accum. leave 22-6-44 to 25-6-44 & Furlough 26-6-44 to 9-7-44.
224	15-9-44.	Granted Acc. Leave from 10-9-44 to 13-9-44.
283	23-11-44.	Grtd. ration allce. 20-11-44 to 23-11-44 while on leave.
2	3-1-45.	Ration allce 30-12-44 to 3-1-45.
51	1-3-45	Rat allce 1.2.45 to 4.2.45
86	11-4-45	SOS A21 TC to #32 C.I.B.T.C. eff 10-4-45
58	13.4.45	TOS #32 CI(B)TC eff. 11.4.45
78	24.5.45	Granted 14 days privilege leave with R.A. from 28.5.45 to 10.6.45
CR.44	3.7.45	SOS. to DD 9. for discharge. 3. Jul. 45
19	9-7-45.	T.O.S. from # 32 C.I.B.T.C. 4 JUL 45.

M. F. M. 14
300M-8-41 (323-4)
H. S. 1772-39-1662

NO. C40,242 RANK ~~C.S.M.~~ A/R.S.M. S.S.M. NAME Labranche Henri Antonio

*MARRIED
*WIDOWER
~~*SINGLE~~ XXXX

PLACE OF ENLISTMENT Ottawa, Ontario DATE 18-6-40

RATE OF PAY

D. O. NO.	DATE	RANK	GROUP	P. F. OR A. S.	DAILY RATE	IF LIABLE PEN. DED.	REMARKS
110	18-6-40	GSM		AS.	3.00		TOS G.G.F.G.
110	18-6-40	CSM		"	3.00		Pro CSM 18-6-40
140.	24-6-43	A/R.S.M.		"	4.20		EFF. 1-JUNE-43.
168.	2-8-43	S.S.M.		"	3.00		eff. 31. July 43.

ASSIGNMENTS

1182 Wellington St. Apt. 3. Ottawa Ont.

ASSIGNEE	EFFECTIVE DATE	AMOUNT	TOTAL
~~for NORMAN S. Ottawa~~ Marjorie Labranche	1.7.40	60.00	
~~R.S. 4th V.L. Mayfield~~	~~43~~	~~8.40~~	
~~5 V.L. Bord~~	1-11-43	8.40 ✓	
~~6th V.L.B~~	1-5-44	~~8.40~~	
~~7th V.L.B.~~	1-11-44	~~8.40~~	

DEPENDENTS' ALLOWANCES NO.

DATE APPLICATION FORWARDED	RELATIONSHIP	AMOUNT AWARDED	EFFECTIVE DATE
8-40	wife 37.20	~~35.00~~	9-12-43.
	~~C.L. BONDS~~	~~1.40~~	
		~~2.10~~	~~1-12-43~~

OUTFIT OR CLOTHING } ALLOWANCE $ PAID ON

REHABILITATION GRANT $ PAID

*DELETE WORDS WHICH ARE INAPPLICABLE

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

OCCUPATIONAL FORM COMPLETED Yes

CASUALTIES, ETC.

PART II D. O. NO.	DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
110	18-6-40	T.O.S. G.G F.G. eff. 18-6-40	
110	18-6-40	Promoted CSM eff. 18-6-40	
268	30-12-40	Granted furlough 6-1-41 to 19-1-41	
73	27-3-41	Assumed duty of BSM 28-3-41 to 10-4-41	
282	5-12-41	Gr anted Furlough 8-12-41 to 21-12-41(A 7828)	
59	10-3-42	Confirmed to rank of S.S.M. Eff. 10-3-42.	
76	29-3-42	SOS on Trans. to D.D. M.D. # 3 w.e.f. 28-3-42.	
91	1-4-42	TOS DD MD #3. ON TFR for ~~O/S~~ Debert eff. 29-3-42	
138	18-5-42	Sos DD MD#3 Ottawa, Ont. on tfr to #2 CA(B) T/C Ottawa ~~Cornwall~~, Ont. eff. 15-5-42.	
76.	18-5-42	~~TOS~~ CA (B) T.C. Ottawa eff. 16-5-42	
77	19.5.42	ATTACHED FOR ALL PURPOSES. TO CA(B)T.C. EFF. 16.5.42.	
95.	15.6.42.	WAS EMPLOYED AS CONDUCTING NCO. FROM 2225 HOURS 7-6-42 UNTIL 0700 HOURS 13.6.42.	
216.	7.12.42	[redacted] Granted furlough from reveille 7.12.42. until retreat 20.12.42. He is authorized to draw SO's & cdy rations all. for 14 days.	

MEDICAL BOARD PROCEEDINGS

INSTRUCTIONS TO MEDICAL OFFICERS

A. This form will only be used in connection with the retirement of an officer or the discharge of another rank or when specially required by N.D.H.Q. If Medical Board of three members acts, all sections will be completed by them.

B. It is the responsibility of each medical officer concerned to ensure that his part of the proceedings is properly carried out, that the individual examined is correctly and completely described.

C. If space on form is insufficient, report may be carried over to an overflow sheet, which will be numbered to correspond to the section concerned, and the overflow sheet will be signed as well as the corresponding section on the form.

D. Sections 1 to 10 inclusive may be completed in Orderly Room.

E. Sections 12 to 15 inclusive will be completed by the medical officer instituting the proceedings.

F. Sections 16 to 19 inclusive will be completed by the appropriate specialists.

G. Every section is essential and each must be completed in full. Be relevant and concise. Write legibly.

FILE COPY
DO NOT REMOVE

Station Peterboro, Ont Date 29-June-45

1. State reasons and/or authority for proceedings 1029 (5B) Hq 5427-47-1 F D 131 (Org A) d)23 May 45

2. Regimental No. C42042 Rank C.S.M. Unit #32 C.I.(B) T.C. Religion R.C.

3. Name LABRANCHE (Surname in block letters) Henri Antonio (Christian Names)

4. Home Address 1182 Wellington St apt 3. Ottawa Ont. Country of Birth Canada

5. Place of enlistment or enrolment Ottawa, Ont Date 15-June-1940

6. State whether G.S., N.R.M.A., C.W.A.C., G.O. 139, P.F., etc. G.S.

7. Category or PULHEMS Profile on enlistment or enrolment "A"

YOB	P	U	L	H	E	M	S

8. Occupation in civilian life Motor Mechanic

in Army Training C.S.M.

9. Length of Service, this war:

Canada 15-June 1940. to Present.

Abroad n/a to n/a

Canada (on return) n/a to n/a

10. Length of Service, former wars: (Rank and Regimental No. if available) 207th & 139 Battalion.

Canada 1916 (about 18 months) to 1917.

Abroad n/a to n/a

Canada (on return) n/a to n/a

11. Present Diseases or Injuries (to be filled in by the President of the Board):

Cause	Present Diseases or Injuries	Place of Origin	Date of Origin	Code No.
Enlistment	Obesity	Canada	Remembered	0330

M.F.B. 227
300M—4-44 (3593)
H.Q. 1772-39-117

UNIT MEDICAL OFFICERS SECTION

12. Present complaints (in individual's own words) For the past 3 months my back and left side have ached for as much as two weeks at a time. In the past few days I have had a painful lump on my forehead and considerable headache accompanying it.

13. History of present and past disability:

This Section should outline in detail the history of the various symptoms or complaints described in Sec. 11, special consideration being given to any illness or injury suffered during army service. In the case of injuries, inquiry should be made as to whether or not M.F.M. 371 was completed or Court of Inquiry held. Give dates and other essential data such as hospitals where treated, and names of doctors or medical officers rendering treatment.

About 3 months ago he had a pain in his left knee for 48 hours accompanied by persisting pain in the muscles in the left side of his back and left chest from the scapula to slightly below the costal margin. Weather conditions did not affect it nor has any medication. For the last 4 weeks it has not troubled him. 9 days ago he noticed a bump like a bite on left forehead which swelled, and was followed by one on the scalp and a bump slightly behind left ear. There was no earache or discharge. Swellings have receded somewhat with treatment.

14. Statement of Individual being examined:

(a) I, the undersigned H.A. Labranche having had Sections 12 and 13 read to me, am satisfied that they are correct to the best of my knowledge and belief.

(b) They are correct except for the following: nil

x H.A. LaBranche Pte
(Rank) (Name)

Witness J.E.C. Cole Capt

x H.A. LaBranche Pte
(Rank) (Name)

Date 20 Jun 45

15. Objective Examination:

Individual will be completely stripped and examination will be complete in every detail, every departure from normal being noted and fully described.

Height 5'5" 1/2 Weight 189 Weight on enlistment 177 B.P. Syst. 132 Dias. 86

General: robust, slightly obese man, no acute ill

H+N: small lumps over L) eye c abrasion of skin, mod fluctuant, scalp clear

E+NT normal but for slightly injected tonsils, edentulous

Chest: large, expanded chest: moves well on inspiration, breath sounds normal

Heart: pulse 82 regular, AP 82 heart sounds normal

Abdomen: NAD

E+D: moves both arms and shoulder muscles through full range freely

Glands: normal Skin: dark, hairy, no rashes

Neurological: cranials intact, reflexes very sluggish all over

Statement of Medical Officer: (Diagnosis with recommendations as to disposal)

Physically fit

Not discharged on medical grounds

I believe present PULHEMS Profile should be:

YOB	P	U	L	H	E	M	S
00	2	1	1	1	1	1	1

0330 obesity

J.E.C. Cole Capt R.C.A.M.C.
(Signature of Medical Officer)

CONSULTANTS SECTION

16. This Section will be completed by E.E.N. and T. SPECIALIST.

(a) History ..... nil.

(b) Examination: Vision O.D. 20/20 O.S. 20/20 Corrected O.D. ..... O.S. .....

Hearing A.D. C U 20 A.S. C U 20 Drums Intact.

Fundi & Media Normal.

Nose & Throat Normal

(c) Disabilities with Morbidity Code numbers, treatment advised, if any, remarks, etc.:

NAD 1898

Recommended Grades: P. 1 H. 1 E. 1

Commandg Major R.C.A.M.C.

(Signature of E.E.N. and T. Specialist)

---

17. This Section will be completed by the SURGEON.

(d) History ..... as noted

(b) Examination ..... hegatus pr surgery

(c) Disabilities with Morbidity Code numbers, treatment advised, if any, remarks, etc.:

NAD 1898

Recommended Grades: P. 1 U. 1 L. 1

R.C.A.M.C.

(Signature of Surgeon)

---

18. This Section will be completed by INTERNIST.

(a) History Pneumonia & pleurisy - left - 1937.

(b) Examination Obese male. Blood Pressure, Sys. 130 Dias. 84

N.D. physical abnormalities other than Obesity

(c) Disabilities with Morbidity Code numbers, treatment advised, if any, remarks, etc.:

age

Obesity 0330.

Recommended Grade P. 4 S. 1 M. 1

R.C.A.M.C.

(Signature of Internist)

19. This Section will be completed by the PSYCHIATRIST.

(a) History .....

.....

.....

(b) Examination .....

.....

.....

(c) Disabilities with Morbidity Code numbers, treatment advised, if any, remarks, etc.

.....

.....

.....

.....

.....

.....

.....

.....

.....

Recommended Grades: P.....M.....S.....

.....R.C.A.M.C.

(Signature of Psychiatrist)

---

20. This Section will be completed by the PRESIDENT of the Medical Board.

(b) Recommendations of Medical Board as to treatment and disposal .....

Nil.

Ist specimen of urine over heavy for the sugar but he has been eating large amts of molasses previously. Urinalysis repeated next A.M. - req.

W. R. Aitken

STANDING MEDICAL BOARD
[redacted]
LANSDOWNE PARK
OTTAWA

(a) Approved PULHEMS Profile

YOB	P	U	L	H	E	M	S
00	4	1	1	1	1	1	1

.....R.C.A.M.C.

President, Medical Board

---

21. Approved by:

.....

A.D.M.S., D.M.O., C.M.O. 703

Date 18 July 45

Confirmed by
(when indicated)

.....

D.G.M.S.

Date.....

---

22. Certified True Copy of the Original Proceedings:

.....

Date..... Signature.....R.C.A.M.C.

---

23. Re-examined and PULHEMS Profile confirmed.

YOB	P	U	L	H	E	M	S

FOR THE INFORMATION OF: AUG 17 1945
CANADIAN PENSION COMMISSION,
DALY BUILDING,
OTTAWA, CANADA.
THE SUBJECT OF THIS "BOARD" HAS NOW BEEN STRUCK OFF STRENGTH THE CANADIAN ARMY WITH EFFECT FROM
21 July 45 AUTH. C.A.R.O. 1029 (5-B
CHECKED BY K.P. DISCHARGE SECT., O. OF R., NDHQ.

Remarks.....

.....

.....

Date.....R.C.A.M.C.

(Signature of Examining Officer)

M.F.M. 7 (PAPER)
500M—2-45 (6061)
H.Q. 1772-39-1653

CANADIAN ARMY (ACTIVE)

DISCHARGE CERTIFICATE

This is to Certify that No. C-40412 (Rank) Major

Name (in full) Lamarche Henri Antonio enlisted ~~or was~~

~~enrolled~~ in the Canadian Infantry Corps.

the **CANADIAN ARMY (ACTIVE)** at Ottawa, Ontario on the 19th

day of June 19 40.

~~She~~
He served in Canada.

and is now discharged from the service under Routine Order 1020 (8) (B) by reason of "To return to civil life (his physical condition precluding his serving advantageously in the army)".

Medals, Decorations, Mentions, awarded in respect of service during this war: Canadian Volunteer Service Medal — Canadian Efficiency Medal — Two Clasps. — O.B.E.

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

Age 45 years 8 months.

Height 5 • 6 •

Complexion Dark

Eyes Grey

Hair Brown

Marks or Scars Two left arm. Hole under right arm.

Other Active Army Service (This War)

H. A. Lamarche
Signature of Soldier

Date of Discharge ORDERLY ROOM No. 9 District Depot (CA) Ottawa, Ont. JUL 20 1945 LANSDOWNE PARK Ottawa, Ontario.

Issuing Officer

N.F. Tinsley, Captain
Rank

Date 20th July 1945

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 Director of Records (Army), Department of National Defence, Ottawa, Canada.

VIII. Summary

An old soldier, very anxious to serve when he c[illegible] but realizes he is not for Armd Regt.

IX. Suggestions

Instructor in T.C. - To Depot for reallocation

X. Signature of Interviewer	N.C.O.	Officer
		P. select staff

XI. Action Taken — Date of Action

Follow-up

A-21 COCTC Barriefield, Ont. 30-6-44
Qualified Night Vision Test, Group "A" 16-6-44

Reinterviewed at A-21 CO & EMETC Barriefield, Ont. 14-2-45
Military Background: Enlisted 12 June 1944 at D.D. 3 with G.G.F.G. as C.S.M. until spring of 1942. Returned to Depot for two months because of age, and employed at #33 CA(B)TC for 9 months as C.S.M. and instructor. A/R.S.M. for two months. Transferred to A-21 in October 1943 and employed to date as C.S.M.. in M.T.W. Confirmed in rank of S.S.M. since 1942.

Remarks: This is an N.C.O. of solid build and frank co-operative manner. Due to his long Army experience, he proved capable and dependable in his work of man management and is anxious to continue as long as his services are required. Is in good health and has no problems.

Recommendation: Interviewed during H.W.E. survey. Recommended to continue.

for A G Colvin Capt.
(A.H. HUMBLE) CAPT., A.E.

Reinterviewed at A-21 CO & EMETC Barriefield, Ont. 9-4-45
Since previous interview has been continuously instructing in military training Wing. Is now being S.O.S. to No. 32 CI(B)TC Peterboro, Ont. for instructional duty under Auth: K. 36-2-208-105 (G2) d/6 Apr. 45

W. H. Jackson
(W.H. JACKSON) LIEUT., A.E.

#32 B.T.C., Peterboro, Ont., 2 July 45.

T.O.S. from A-21, C.O.& E.M.E.T.C., Barriefield, Ont., 11-4-45. Employed as C.S.M. to date. Seems capable and well liked by his men. Is being despatched to D.D. 9, Ottawa, for discharge.

for (H.F. Ketchum) Capt. A.E.

Discharged under C.A.R.O. 1029 (5b).
W.D. 12 prepared.

Major
(J.R. Wilkinson)
Army Examiner

#9 D.D.
Lansdowne Park Ottawa
19 July 45.

40242

Regt. No. C-[redacted] Rank C.S.M. Unit 21 Armd Regt. Date [redacted]/42

Name LABRANCHE, Henry Antonio Age 42 Place of Birth Quebec, Canada.

Date of Enlistment 12-6-40 Place of Enlistment D.D. 3 Depot D.D. #3

Languages spoken French & English R. Recruit(A) Med. Cat. A Place Debert, N.S.

II. M. Test Date

Test	Score	S.M.	
1	14		SUB-TOTAL
2	10		S.M.
3	6		
4	15		SUB-TOTAL
5	11		S.M.
6	4		SUB-TOTAL
7	10		S.M.
8	4		
Total	74	S.M.	GRADE E
9			

Other Tests Name or Type

Y.O.B.	P	U	L	H	E	M	S
00	2	1	1	A	1	2	1

Date	Place	Score	Grade

III. Military Background

Has been with Unit 22½ yrs.
1½ yrs service in the last War.
Active sinse mobilization. GOOD reward.

IV. Educational Background

Entrance (Completed Gr. 8 in Ottawa).

V. Occupational Background

Truck ~~Unit~~ driver and mechanic (20 years).

VI. Arm Desired

Work in Arm Desired

Instructor T.C.

Ht. 5'7½" Wt. 190 lbs. Married

VII.

Anxious to be Instructor at training centre. Feel too old(42) to try to learn new Military ways now." My heart and soul is in studing and training the men."

M.F.M. 196
10M—12-41 (2710)
H.Q. 1772-39-1916

DEPARTMENT OF VETERANS AFFAIRS - W.D. 12

DISCHARGEE REPATRIATED PRISONER OF WAR MARK "POW"	IN HOSPITAL	

CONFIDENTIAL

ATTENTION: Employment

	SURNAME	FIRST NAME	INITIALS	RANK	NUMBER	SEX
1.	LABRANCHE	Henri	A.	C.S.M.	C-40242	Male

			PLACE	YR. OF BIRTH
2.	DATE OF COMMENCEMENT OF ACTIVE SERVICE:-	15 June 40	Ottawa	1900

		YES	NO	IN WHAT SERVICE ?
3.	SERVICE OUTSIDE CANADA:-		X	Army

4. CAUSE OF DISCHARGE:- 1029 (5b)

5. PRE-ENLISTMENT EDUCATION:-

Completed grade 8 Ottawa public school - left at 17 in 1917.

6. LANGUAGES:- English and French.

7. OCCUPATIONAL HISTORY:-

Truck driver and mechanic, 20 years.

8. IMMEDIATE PRE-ENLISTMENT EMPLOYMENT:- (WITH NAME AND ADDRESS OF EMPLOYER) Therien & Co., Ottawa.
Over 20 years - truck driver and mechanic.

9. SHORT ACCOUNT OF SERVICE, TRAINING AND DUTIES:-

1½ yrs. service 207 Bn. - 1916-17. Discharged under age. Joined G.G.F.G. Aug 1919 (NPAM) and has been with them to 1940. Went"A" with GGFG. Because of age was found unsuitable for Armoured Corps and in spring of 42 was returned to Ottawa, CSm at Barriefield Training Centre, then Peterboro Basic TC. Main employment, instruction work as C.S.M.

10. EDUCATIONAL COURSES WHILE IN SERVICE:-

None.

11. MEDICAL OFFICER'S STATEMENT OF PHYSICAL LIMITATIONS (IF ANY):-

Obesity may or may not prevent heavy manual labour.

12. MARITAL STATUS:- Married NUMBER OF DEPENDENTS, OTHER THAN WIFE None.

13. DISCHARGEE'S OWN STATEMENT OF FUTURE PLANS (IF ANY):-

May return to pre-enlistment employer - driver and mechanic.

14. POST-DISCHARGE MAILING ADDRESS:- 1182 Wellington St., Apt. 3,
Ottawa Ont.

15. BASIS FOR COUNSELLOR'S RECOMMENDATIONS:-

Age 45, heavily built man who has been interested in army ever since age of 16 and has served N.P.A.M. for over 20 years with G.G.F.G. Found unsuitable when unit was converted to Armoured Regt. so was employed as C.S.M. at training centres. Due to these closing up is now returning to civil life. Employed for 20 years as driver and mechanic with same firm. Reliable conscientious type of man, used to supervising and handling men, but has no special skills except as driver and mechanic. Might make a good foreman in large garage or good man in charge of fleet of trucks.

16. ACTION RECOMMENDED:-

1. Return to previous employment.
2. Seek employment in garage or trucking company.

17. OTHER POSSIBILITIES SUGGESTED BY COUNSELLOR:-

1. Would be suitable as caretaker or superintendent of large building.

18. REFERRED TO:- N.S.S. - Armed Forces Registration Unit,
Employment Services,
Dept. Labour,
268 Sparks St.,
Ottawa.

19. PLACE #9 [redacted]. Ottawa DATE 19 July 45

sc

SIGNATURE OF COUNSELLOR J.R. Wilkinson Major

RANK OR APPOINTMENT (J.R. Wilkinson) Army Counsellor

NOTE:- COUNSELLOR WILL CHECK TO SEE THAT THIS FORM HAS BEEN COMPLETED AS REQUIRED.

OCCUPATIONAL HISTORY FORM

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

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

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full HENRY LABRANCHE (b) Reg'l. No. C-40242
2. (a) Arm of service Army (b) Unit G.G.F.G. (c) Rank C.S.M.
3. (a) Date of birth 11-2-1900 (b) Have you any dependents? Yes (c) Place of residence at time of enlistment Ottawa Ont.
4. (a) Place of enlistment Ottawa Ont. (b) Date of enlistment 18-6-40

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 16 (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.) Primary
7. If you attended a university, give name of university and standing or degree secured N.A.
8. (a) Did you ever enter upon a trade apprenticeship? N.A. (b) If so, for what occupation? N.A. (c) Did you finish it? N.A. (d) If you did not finish it, how long did you serve at it? N.A.
9. (a) What languages do you speak fluently? French English (b) What languages do you read well? French 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? Drivers' Union

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

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 Therien Coy. Address 107 Chapel Ottawa Ont.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Cabinet Maker
20. (a) Your specific occupation Chauffeur Mechanic (b) Number of years' experience at this occupation with any employer 22 years
21. (a) Did your employer promise definitely to give you employment on discharge? No. (b) Did your employer refuse to promise you employment on discharge? No. (c) Do you wish to return to your former employment? 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 N.A. (b) Where was it located? N.A.
23. (a) Number of years engaged in this business N.A. (b) Have you made, or will you make plans to return to the same or a similar business on discharge? N.A.

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? N.A.
25. (a) Were you born on a farm? N.A. (b) How many years' actual farming experience have you had? N.A. (c) In what provinces did you have experience? N.A.

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

DATE 22 April 1941 SIGNATURE Henry LaBranche

DUPLICATE

42 Coy

ORIGINAL
DUPLICATE
TRIPLICATE

M.F.M. 2
A.F.B. 271
480 M—8-39 (1696)
H.Q. 1772-45-18

OCCUPATIONAL HISTORY FORM COMPLETED

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

Unit R Coy GOVERNOR-GENERAL'S FOOT GUARDS. Regimental Number C40,242

formerly 62 CGFG NPAM

CANADIAN ACTIVE SERVICE FORCE

ATTESTATION PAPER

FINGERPRINTED

PHOTOGRAPHED

WSG COMPLETED

1. Surname ..... LABRANCHE,
2. Christian Names ..... Henri Antonio.
3. Present address ..... 101 Norman Street, Ottawa, Ontario.
4. Date of birth 11-2-00
5. Place of birth ..... Canada (Country) Quebec (County or Province) Buckingham. (Town or Township)
6. Religion (state denomination) ..... Roman Catholic.
7. Trade or Calling ..... Chauffeur and Mechanic
8. Married, Widower or Single ..... Married
9. Name of next of kin ..... Marjorie LaBranche.
10. Relationship ..... Wife.
11. Address of next of kin ..... 101 Norman Street, Ottawa, Ontario. see change
12. Have you served in any Naval, Military or Air Force? ..... Yes.
13. If previous war service, state arm, force and regimental particulars ..... 207th.
14. Do you now belong to or have you served in the Active Militia of Canada? ..... G.G.F.G. 1919 to Date.

And as in Question 13

(Give unit and date of attestation)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, Henri Antonio LaBranche. 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 15-6-40 H.A. LaBranche
(Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

I, Henri Antonio LaBranche. do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

H.A. LaBranche (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 Ottawa, this 15 day of June 19 40

Signature of Magistrate, Justice or Attesting Officer.

Lieutenant-Colonel Commanding, Governor-General's Foot Guards.
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

Record of Service of LaBranche. (Surname) Henri Antonio. (Christian Names) Regimental Number C-40242

Qualifications

Military: Corporal
Business or Professional: Nil
Trade or Civil: Motor Mechanic and Chauffeur.
Technical: " "
Languages: English and French.

Educational Qualifications

High School or Collegiate: Nil (years completed)
Graduation or Matriculation: Nil (specify)
*College: Nil
*University: Nil

*(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 Date	Report From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
		Joined on appointment T.O.S. Governor General's Foot Guards.	Bdsn	18/6/40	C.G.F.G.	Ottawa	Pt. II orders. 110-D	18/6/40.
		Appt'd Acting C.S.M. (W.O.II)	C.S.M.(W.O.)	18/6/40	"	"	110(11)	18/6/40.
		Furlough 6-1-41 to 19-1-41	"	6-1-41	"	CB	26(8)(1)	30-12-40
		Assume the duties of B.S.M. from 0630 hrs 28-3-41 to 2200 hrs 10-4-41	C.S.M.	28-3-41	"	TORONTO	33(21	23-3-41
		Furlough (8 Dec to 21 Dec 41) issued with Special Warrent #7827	"	8 Dec 41	"	Sussex Camp	282(10)	5 Dec 41
		Confirmed in the rank of S.S.M.	S.S.M.	10 Mar 42	21 Cdn. Armd Regt	Debert	59(3)	10 Mar 42
		S.O.S. on transfer to No. 3 Dist Depot	"	28 Mar. 42	"	"	76 (2)	29 Mar. 42
		TOS D. D., M. D. # 3 ON TRANSFER FROM #21 Armd Regt (GGFG) Debert.	"	29-3-42	DDMD3	Ottawa	91-42	1-4-42
		S.O.S. D.D.M.D. 3 and attached to C.A. (B) Training Centre, Ont. for all purposes.	"	15-5-42	"	"	138-42	18-5-42
		TOS Attached on transfer from D.D.#3 Ottawa, Ont.	"	16-5-42	CA(B)TC	"	Part.II No.76	18-5-42

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

CERTIFICATE OF MEDICAL EXAMINATION

Name in full Henri Antonio LaBranche. Date 5-6-40

Part 1. Information obtained from the recruit.

1. Age 40 2. Have you ever suffered from any of the following diseases?

a. Rheumatism	No.	j. Nasal trouble	No.
b. Tuberculosis	No.	k. Ear disease	No.
c. Bronchitis or asthma	No.	l. Eye disease	No.
d. Heart disease	No.	m. Epilepsy	No.
e. Kidney or bladder disease	No.	n. Nervous or mental disease	No.
f. Gastro-intestinal	No.	o. Syphilis	No.
g. Rupture	No.	p. Gonorrhoea	No.
h. Varicose veins	No.	q. Have you ever worn glasses?	No.
i. Flat or deformed feet	No.		
Pension or Compensation	No.		

H. A. LaBranche
(Signature of Recruit)

Examiner's remarks re above
BP 128/74 Heart & lungs normal
Circumcision. Lungs 4 years. Not a cold since. Pupils equal react to L. & Acc.

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

1. Identification marks or scars. (If operative obtain history.)
Vac left arm - mole under right arm.

2. Height 5 feet 6 inches. 3. Weight 177 pounds.

4. Complexion Dark Eyes Grey Hair Brown 5. Development Good ~~Fair~~ ~~Poor~~

6. Chest measurement—Girth on full expansion 41 inches. Urine normal Reflexes normal Ears normal Eyes normal
Range of expansion 3 inches.

7. Vision, right 20/15 left 20/15 8. Hearing, right W.V. 20 left W.V. 20

9. Condition of mouth and teeth D. rating 13 - Throat normal

10. The abnormalities (congenital and pathological) found on examination are as follows
Defective teeth noted attention.

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.

Special remarks when category lower than A

R. M. Carnes, President — Lt. Col. Edward Rowe, Member — Capt. R. Gagne, Member
Capt. R. Lamb

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
JUL 1940	X-ray of Chest - Neg. RMC		
29-7-40	1 AB		Y.O.B. P U L H E M S: 00 2 1 1 1 1 2 1 — Medical Inspection
5-8-40	3	JUL 20 1943	
14-8-40	Vacc.		
29-7-40	T.T. 1cc		Y.O.B. P U L H E M S: 00 2 1 1 1 1 2 1 — Inoculations Sent
29-7-40	T.T. 1cc	OCT 14 1943	
16-9-40	T.T. 1cc		
23-7-41	T.A.B.T. ½ cc A. E. Conley	29-1-44	T.A.B.T. J. Harpenau.
28-2-42	Ot A. confirmed by Board H. E. Conley	13.5.44	Typhus 1 cc
5-7-42	TABT 1 cc	19-8-44	" (2)
24-9-43	Cat A. Conf. R.M.	18.4.45	REVACC & TABT ANN - J. H. Layman Lieut.

Regtl. No. C 40,242 Rank Gdsm. Surname LaBranche Christian Name Henry Antonio

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			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
		Day	Month	Year	Day	Month	Year				

Statement of the Service of No. C-40242 Rank S.S.M. Sheet No. (2) 1.

M.F.M. 1 & 2 (a)
700 M—8-39 (1697)
H.Q. 1772-45-18

Name LABRANCHE, H.A.

REPORT Date	REPORT From whom received	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 Part II D.O. No. Cas. List, etc.	Authority Dated
		Granted furlough from Rev. 7-12-42 until tattoo 20-12-42 and is auth. to draw subs. allw. at the rate of 50¢ per diem.	S.S.M.	7-12-42	CABTC 33	Ottawa	Pt.II No.216	7-12-42
		Granted leave from 22-12-42 to 27-12-42 and is auth. to draw allw. in lieu of rations at the rate of 50¢ per diem.	"	22-12-42	"	"	Pt.II No.223	16-12-42
		Promoted to the rank of Acting W.O.1 for his appointment to R.S.M.	A/R.S.M.	1 Jun 43	"	"	Pt.II No.140	24 Jun 43.
		Relinquishes the appointment of A/R.S.M.	S.S.M.	31 Jul 43	"	"	Pt.II No168	2 Aug 43
		SOS ON TRANSFER TO D.D.#3 OTTAWA ONTARIO	"	10 Aug.43	"	"	Pt. II 174	10 Aug. 43
		T.O.S. # 3 D.D. on transfer from # 33 C.A.B.T.C. Ottawa Ont & is posted to "D" coy	"	11 Aug 43	# 3 D.D	Ottawa	224-43	12 Aug 43
		Granted furlough from Reveille 16 Aug 43 to 29 Aug 43 at Tattoo	"	16-8-43	# 3 DD	Ottawa	228-43	16 Aug 43
		Returned from furlough	"	29-8-43	"	"	#242	30-8-43
		S.O.S. No. 3 District Depot, on transfer to A-21 C.O.C.T.C., Barriefield, Ontario.	"	21-9-43	"	"	264-43	21-9-43.
		T.O.S. A 21 coc-TC. on transfer from #3 District Depot Ottawa ont.	"	22-9-43	#21 COC-TC.	B'field.	231	24-9-43
		Posted to the H.W.E. at A21 C.O.C.T.C. (Military Training Wing) to cover off vacancy of C.S.M. (C Coy)	"	1-10-43	"	"	Do 291	1-12-43,
		Granted Special leave 10-11-43 to 13-11-43	"	10-11-43	"	"	" 297	8-12-43,
		Granted New years leave from 30-12-43 to 3-1-44 & issued with transport warrant #607385	"	30-12-43	"	"	9	12-1-44

Statement of the Service of No. C-40242 Rank Lt.-Cdr. Sheet No. 2

Name La Branche

M.F.M. 1 & 2 (a)
700 M—8-39 (1697)
H.Q. 1772-45-18

REPORT Date	REPORT From whom received	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 Part II D.O. No. Cas. List, etc.	Authority Dated
		Having qualified for the award of the Canadian						
		volunteer Service medal under the provisions			42-1			
		of C.A.I.R.O 39-9, is entitled to wear the ribbon	Lt-Cdr.	18-12-41	CO&TC	B'field	34.	10-2-44
		Granted Special Leave from 6-2-44 to 9-2-44	"	6-2-44	"	"	34.	10-2-44
		Granted accumulated leave from 22-Apr-44 to 25 Apr 44	"	22-Apr-44	"	"	111.	8 May 44.
		Qual. in night vision Test. Group A	"	16 Jun 44	"	"	159.	20 Jun 44.
		Granted accumulated leave & authorized to						
		draw ration allce from 22 Jun 44 to 25 Jun 44	"	22 Jun 44	"	"	162.	4 July 44
		Granted furlough & authorized to draw ration						
		allce from 26 Jun 44 to 9 Jul. 44 (no T.u)	"	26 Jun 44	"	"	162	4 Jul. 44
		To be a member of the Most Excellent Order of the British Empire (Military Division) R.O. 3580	"	2 Sep 44	CO&EMETC	B'field	219	9 Sep 44
		Granted Accumulated Leave from 10 Sep 44 to 13 Sep 44 and authorized to draw ration allce. under F.R.&I. 196(4)	"	10 Sep 44	"	"	224	15 Sep 44

Regimental No. C.40242 Rank CSM Sheet No.

M.F.M. 1 & 2 (a)
300M—11-44 (5977)
H.Q. 1772-39-1646

Name LA BRANCHE H.A. RCOC

Record of Promotions; Reductions, Transfers, Casualties, Reports, etc.—	Rank Shown	Effective Date	Unit	Place	Authority	
					D.O. Number	Dated
T.O.S. from #32 CIBTC	SSM	4 Jul 45	9DD(Eng)	Ottawa	19	9 Jul 45
SOS on discharge "To return to civil life his physical condition precluding his serving advantageously in the army" CARO 1029(5b) Granted $100.00 C.C.A. and Rheb: Grant Address on discharge: 1182 Wellingxton St., OTTAWA, Ont	SSM	21Jul45	9DD	Ottawa	34	24 Jul 45