C63355
COOPER
NELSON

Do not remove documents from this folder. Prepared for digitization project. Ces documents seront numérisés. Ne pas les déplacer.

405-C-10227

The Deputy Minister,
Daly Bldg., OTTAWA, Ont.

Aylmer Building,
OTTAWA, Ontario,
February 1st, 1947.

ESTATES BRANCH
FEB 17 1947
H.Q. OTTAWA
NATIONAL DEFENCE

Chief Adminis. Assistant
(E.C. Forrest, Esq.)

Re:- C.63355 - COOPER, Nelson (Dec'd.)

File

Name	COOPER, Nelson C.
Rank	Pte.
Reg. No.	C.63355
Unit	C.F.C.,C.A.S.F.
Date of Death	January 22nd, 1947.
Place of Death	St. Laurent Sanatorium, Hull, P.Q.
Cause of Death	Pulmonary Tuberculosis - Complicated with laryngitis; ischio rectal abscess; rt. hemiplegia.
Name of next of kin	Mrs. Marie Cooper
Address of next of kin	20 Derwin St., Aylmer, P.Q.
Relationship of next of kin	Wife
Will of deceased	None
Personal effects	None
Disposal of articles of clothing	None
Cash found upon patient	None
Funeral & Burial expenses incurred	- Funeral $75.00. Burial $10.00.
Name & Address of Funeral Director	Gauthier & Co., Hull, P.Q.
Party paying additional expenses	None
Place of Burial	Cooper private plot, Aylmer Cemetery, Aylmer, P.Q. Lot 434, Roman Catholic Cemetery.

Noted Estate 11/2/47

Director of Estates
The above and attached for your information, please.

/MS
15-2-47

J.C. Gough
for Chief Administrative Assistant.

GSM/DT

G.S. McGillivray,
Administrative Assistant (Med.)
"C" District, Dept. Veterans Affairs.

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

THE CANADIAN ARMY (AF)
CANADIAN FIELD FORCE

DISCHARGE CERTIFICATE

This is to Certify that No. C-65500 (Rank) Pte.

Name (in full) COOPER, Nelson enlisted in

the Canadian Infantry Corps

THE CANADIAN ARMY (AF)
CANADIAN FIELD FORCE at Ottawa, Ontario on the 5th

day of August 19 40

He served in Canada and Overseas

and is now discharged from the service by reason of PERSONALLY UNFIT
AUTHORITY: C.A.R.O. 1099 (10)

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

Age 39

Height 5' 7"

Complexion Ruddy

Eyes Brown

Hair Brown

Marks or Scars Scar R. Leg.

Conduct - good

H Cooper
Signature of Soldier

Date of Discharge

2nd September, 1942

Ottawa, Ontario

District Depot M.D. No. 3
SEP 1 194
Orderly Room

Issuing Officer

Lieutenant Colonel
Rank

District Depot M.D. 3 (AF)

Date 1st September 19 42

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.

DUPLICATE FOR FILE

(P.T.O.)

No. C-63355 Rank Private Name COOPER, nelson

Unit C.F.C. Date of death 22nd Jan 1947.

Died at St. Laurent Sanatorium, Hull, P.Q.

Cause Pulmonary Tuberculosis, Etc.

Death was Due. CPC. d 1-3-47 HQ 405-C-10,327. d

N/K Mrs. Marie Cooper, Relationship Widow

Address 20 Derwin Street, Aylmer, P.Q.

Remains buried in ~~Aylmer R.C.~~ St. Paul's R.C. Cemetery

Aylmer, P.Q.

Grave location Cooper private Plot, Lot 434.

CMK.

CONTRACTOR'S ROLL FOR THIS SOLDIER'S GRAVE DESPATCHED APR 21 1947

10M-2-45 (M-4640)

22-1-47

AWARDS—CANADIAN ARMY (ACTIVE)

M

BC

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
COOPER,	Nelson C.	C-63355	Pte.	FILE No. 405-C-10,327 3 D.D.

WAR SERVICE BADGE (CLASS) G.S.C. No. 020878 ELIGIBLE

DATE DESPATCHED: Sep 29, 1942 Regn No. 20524

ADDRESS:

T. of S. Can & Eng. - 39 - 5'7" - Brown - Brown-

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
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

MEMORIAL D. R.

(1) DATE DESP.

REGN. NO. 2117

(1) MEDALS

PERSON ENTITLED TO: Mrs. Marie Cooper, (Widow)

ADDRESS: 20 Derwin St., Aylmer, Que.

12-11-49

(2) MEMORIAL CROSS

WIDOW: Mrs. Marie Cooper (ENGLISH)

ADDRESS: 20 Derwin St. Aylmer, P.Q.

(2) DESP. MAY 28 1947 REGN No. 111

(3) MEMORIAL CROSS

MOTHER: Mrs. Galamine Cooper,

ADDRESS: AYLMER, P.Q.

(3) DESP. MAY 28 1947 REGN No. 112

1370.

K 15332*

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

~~ORIGINAL~~
~~DUPLICATE~~
~~TRIPLICATE~~

M.F.M. 2
A.F.B. 271
450M—5-40 (5237)
H.Q. 1772-39-1645

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

Unit No.8 Coy. Canadian Forestry Corps Regimental Number C63355

CANADIAN ACTIVE SERVICE FORCE

ATTESTATION PAPER

C-10,321

1. Surname: Cooper
2. Christian Names: Nelson
3. Present address: Aylmer Quebec
4. Date of birth: 15 th March 1903
5. Place of birth: Canada (Country) ~~XXXX~~ Quebec (County or Province) Aylmer (Town or Township)
6. Religion (state denomination): R.C.
7. Trade or Calling: Teamster
8. Married, Widower or Single: Married
9. Name of next of kin: Marie Cooper
10. Relationship: Wife
11. Address of next of kin: Aylmer Quebec
12. Do you belong to, or have you served in the Active Militia of Canada? nil
(If Yes, Give Unit and Dates of Service)
13. Have you served in (*a*) The Canadian Active Service Force? nil (Yes or No)
(If Yes, Give Regimental No. and Unit)
(*b*) Any other Naval, Military, or Air Force? nil
(Yes or No) (If Yes, specify Unit and Period of Service)
14. Did you serve during the Great War 1914-1918? nil
(If Yes, specify Regimental No., Unit and Dates of Service)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, Nelson Cooper 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.

Witnessed by Cpl. W. Stidworthy

Date Aug. 5 1940 Nelson + Cooper (Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Nelson + Cooper (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 ~~Ottawa~~ Ontario this 5 day of Aug. 19 40

J. F. Cuang Capt. (Signature of Magistrate, Justice or Attesting Officer.)

(Office or Rank and Unit or appointment.)

No. 8. For. Coy. C.F.C. C.A.S.F.

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 Cooper (Surname) Nelson (Christian Names) Regimental Number C63355

Qualifications

Military: nil

Business or Professional: nil

Trade or Civil: Teamster

Technical: nil

Languages: French & English

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 TOS On Enlistment	Pte.	5.8.40	No.8Coy. C.F.C.	Ottawa	No. 1	11.8.40
		TOS CASF (CANADA) ON EMBARKATION AT Halifax ON 15 Feb 41.						
		TOS CASF (OVERSEAS) ON TRANSFER ON 16 Feb 41. AND DISEMBARKED AT Lowmoor ON 1 Mar 41.			No. 867 CFC	Canada	Del. 26	1 Mar 41.
		Granted Landing Leave	Pte.	30 Apr 41	No. 8 Coy	UK	53	30 Apr. 41.
		Ret'd from L/ leave	Pte	7 May 41	No. 8 Coy	UK	57	9 May 41
		Adm to M.R.H.	Pte	17 Sept 41	No. 8 Coy	UK	115	18 Sept 41
		Disch from M.R.H.	Pte	19 Sept 41	No. 8 Coy	UK	116	19 Sept 41
		Privilege Leave 1-10-41 to 31-10-41	Pte	24 Oct 41	8 Coy	UK	130	24 Oct 41
S.OS		S.OS posted to Reinf Sect adm to Raigmore	Pte.	16 Mar 42.	8 Coy CFC	UK.	28	17 Mar 42
TOS.		T.O.S. posted from 8 Coy. CFC	Pte.	17 Mar 42.	Reinf Sect	UK	34	20 March
		Adm to Raigmore Hosp	Pte.	15 Mar 42.	8 Coy CFC	UK	28.	17 Mar 42.
		Trans from Raigmore Hosp to Auchnagairn Hosp.	Pte	25 Apr 42.	Reinf Sect	UK	Casualty 54	11 May 42
		Disch. Auchnagairn Hosp	Pte.	23 May 42	R.I.C & C	UK	73 Casualty	5 May 42 10 June 42.

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

CERTIFICATE OF MEDICAL EXAMINATION

Name in full COOPER N. Date Aug. 2/40

Part 1. Information obtained from the recruit.

1. Age 37 2. Have you ever suffered from any of the following diseases?

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

+ Nelson Cooper
Signature of Applicant

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

1. Identification marks or scars. (If operative obtain history.)
Scar Rt. leg

2. Height 5 feet 8 1/2 inches. 3. Weight 128 pounds.

4. Complexion Dark Eyes Brown Hair Dk. brown 5. Development Fair (Good / Fair / Poor)

6. Chest measurement—Girth on full expansion 37 inches.
Range of expansion 2 1/2 inches.

7. Vision, right 20/30 left 20/30 8. Hearing, right W.V. 20Ft. left W.V. 20Ft.

9. Condition of mouth and teeth Good

10. The abnormalities (congenital and pathological) found on examination are as follows
Eyes Ears Urine reflexes normal
B.P. 126/89 Illiterate

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

E.H.Wood Lt.Col. R.C.A.M.C. President — N.McLeod Major R.C.A.M.C. Member — C.Spiro Lieut. R.C.A.M.C. Member

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
5-8-40	X-RAY of chest Neg		Re-Boarded Cat E NETD NA 5-6-42
21 AUG '40	TAB		
28 AUG '40	3 J.C. Cote		
6-9-40			
21 AUG '40	VACC.		
21 AUG '40	TETANUS TOXOID		
4/10/40	TETANUS TOXOID		

Regtl. No. C63355 Rank Pte. Surname COOPER Christian Name NELSON

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				

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

ORIGINAL
DUPLICATE
TRIPLICATE

M.F.M. 2
A.F.B. 271
450M—5-40 (5237)
H.Q. 1772-39-1645

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

Unit 8 Coy. Canadian Forestry Corps Regimental Number C63355

CANADIAN ACTIVE SERVICE FORCE

ATTESTATION PAPER

1. Surname: Cooper
2. Christian Names: Nelson
3. Present address: Aylmer Quebec
4. Date of birth: 15 th March 1903
5. Place of birth: Canada (Country) ~~Ontario~~ Quebec (County or Province) Aylmer (Town or Township)
6. Religion (state denomination): R.C.
7. Trade or Calling: Teamster
8. Married, Widower or Single: Married
9. Name of next of kin: Marie Cooper
10. Relationship: Wife
11. Address of next of kin: Aylmer Quebec
12. Do you belong to, or have you served in the Active Militia of Canada? nil
(If Yes, Give Unit and Dates of Service)
13. Have you served in (*a*) The Canadian Active Service Force? nil (Yes or No) (*b*) Any other Naval, Military, or Air Force? nil
(If Yes, Give Regimental No. and Unit)
14. Did you serve during the Great War 1914-1918? nil
(Yes or No) (If Yes, specify Unit and Period of Service)
(If Yes, specify Regimental No., Unit and Dates of Service)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, Nelson Cooper 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.

Witnessed by Cpl. H. Chadwoothy

Date Aug. 5 1940 Nelson + Cooper (Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Nelson + Cooper (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 ~~Ottawa~~ Ontario this 5 day of Aug. 19 40

J. G. McCleary Major — Signature of Magistrate, Justice or Attesting Officer.

Office or Rank and Unit or appointment.

No. 8. For. Coy. C.F.C. C.A.S.F.

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 Cooper (Surname) Nelson (Christian Names) Regimental Number C63355

Qualifications

Military: nil

Business or Professional: nil

Trade or Civil: Teamster

Technical: nil

Languages: French & English

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 TOS On Enlistment	Pte.	5.8.40	No.8Coy. C.F.C.	Ottawa	No. 1	11.8.40
		TOS CASF (CANADA) ON EMBARKATION AT Halifax ON 15/7/41						
		TOS CASF (OVERSEAS) ON TRANSFER ON 16/7/41 AND DISEMBARKED AT Greenock ON 1/3/41			#8Coy. C.F.C.	Canada	D.O. 26	5/3/41
		Granted landing leave		30.4.41	"	"	53	30.4.41
		Returned from leave	"	7/5/41	"	"	57	9/5/41
		Granted privilege leave (P.1) from	"	24.10.41	"	"	130	24.10.41
		Returned from "	"	31.10.41	"	"	133	1.11.41
		Sol. #8 Coy. C.F.C. Posted to Reinf. Sec. C.F.C.	"	16/3/42	"	"	28	17/3/42
		P.D.S. Reinforcement Section H.Q. C.F.C. admitted to Raigmore Hosp. Posted from No 8 Coy. C.F.C.	"	17/3/42	R.S.C.F.C.	Beauly	34	20-3-42.
		Trans from Raigmore to Achnagairn Hosp.	"	23.4.42	"	"	57.	11.5.42.
		Adm to N.C.M.R.D.	"	23.5.42	"	"	65	23.5.42.
		Disc from "	"	3.6.42	"	"	71.	5.6.42.

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

CERTIFICATE OF MEDICAL EXAMINATION

Name in full COOPER N. Date Aug. 2/40

Part 1. Information obtained from the recruit.

1. Age 37 2. Have you ever suffered from any of the following diseases?

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

+ Nelson Cooper
Signature of Applicant

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

1. Identification marks or scars. (If operative obtain history.)
Scar Rt. leg

2. Height 5 feet 8 1/2 inches. 3. Weight 128 pounds.

4. Complexion Dark Eyes Brown Hair Dk. brown 5. Development Fair (Good / Fair / Poor)

6. Chest measurement—Girth on full expansion 37 inches.
Range of expansion 2 1/2 inches.

7. Vision, right 20/30 left 20/30 8. Hearing, right W.W. 20Ft. left W.V. 20Ft.

9. Condition of mouth and teeth Good

10. The abnormalities (congenital and pathological) found on examination are as follows
Eyes Ears Urine reflexes normal
B.P. 126/89 Illiterate

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

E.H. Wood Lt.Col. R.C.A.M.C. President — N. McLeod Major R.C.A.M.C. Member — C. Spiro Lieut. R.C.A.M.C. Member

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
5-8-40	X-RAY of chest Neg		
21 AUG '40	T.A.B.		
28 AUG '40	3		
6-9-40	J.C. Cote		
21 AUG '40	VACC.		
21 AUG '40	TETANUS TOXOID		
4/10/40	TETANUS TOXOID		
1-10-41	T.A.B.		
13-12-41	Lt. Lord Icc Revalidated		

Regtl. No. C63355 Rank Pte. Surname COOPER Christian Name NELSON

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				
MR. W. Smith Cawdor		17	9	41	19	9	41	Ca Gingiva	2.	Good Recovery - Doing to duty	[illegible]
		16	3	42	nil	4	42	(9) Cellulitis Repaired 1-4-42 Femoral Hernia	39	Kalgoorlie Hospital	[illegible]
		nil	4	42	22	5	42	Convalescence	28	Ack Vaginal Air Hosp - Refused to Amb.	[illegible]

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

Statement of the Service of No. C65555 Rank Pte.

Name Cooper Melvin

Sheet No.

M.F.M. 1 & 2 (a)
799 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
		Adm. HQ C.F.C. MRD	Pte	23 May 42	R.S.C.F.C	UK	AD 65	23 May 42
		Disch from M.R.D.	Pte	3 June 42	R.S.C.F.C	UK	71	5 June 42
SOS		SOS to #1 N.E.T.D. Cat E	Pte	4 June 42	R.S.C.F.C	UK	71	5 June 42
	T.O.S.	TOS from Reinf Sec C.F.C (Cat E)	Pte	5/6/42	1 N.E.T.D	UK	75 "A"	5/6/42
SOS	DEC 21 1942 BDC	S.O.S. CDN. ARMY (O/S) & NO. 1 N.E.T.D.	Pte	8 Jul 42	N.E.T.D.	U.K.	93B	8 Jul 42

Statement of the Service of No. C 63355 Rank Pte. Sheet No. 2

Name Cooper N.

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
		SOL Rmf Sec Hd. boarded Category "E"						
		Posted to No 1 N.E.T.D	Pte.	4.6.42	R.S.	Beauly.	71.	5.6.42.
		TOS from HQ. R.S. C.F.C.	Pte	5-6-42	NETD	UK	75	5-6-42
		S.O.S. Cdn. Army (O/S) & No. 1 N.E.T.D.	Pte.	8-7-42	"	"	93 B	8-7-42
		TOS DDMD#3 on return from Overseas	"	1-8-42	DDMD#3	Ottawa	214-42	1-8-42
		SOS DDMD#3 on being discharged from the Canadian Army (AF) as Physically Unfit for Military Service under the existing standards under C.A.R.O. 1029 (10).	"	2-9-42	"	"	246-42	2-9-42

SERVICE AND CASUALTY FORM

PART I (For all ranks)

M.F.M. 4 (Part I)
A.F.B. 103 (Part I)
500M—8-39 (1700)
H.Q. 1772-45-18

Unit: No. 8 For. Coy. C.F.C. C.A.S.F. Regimental Number: C63355

1. Surname: COOPER
2. Christian Names: NELSON
3. *Substantive Rank and Appointment: Pte.
   *Acting Temporary or Local Rank:
   giving date:
   *To be entered in pencil to facilitate alteration.
4. Place of birth: Aylmer, P.Q.
5. Date of birth as declared on attestation: Mar. 15, 1903
   (A)
6. Date of enlistment: 5.8.40
7. Place of enlistment: Ottawa, Ont.
8. Residence at time of enlistment: Aylmer, P.Q.
9. (B) Special conditions (if any) of enlistment or rate of pay:
10. (C) Any subsequent variations of conditions of service:
11. Religion: R.C.
12. If married, state date: Aug. 25, 1930
13. Trade on enlistment: Teamster
14. Corps, trade and grade:
15. (D) Qualifications:
16. (E) Miscellaneous entries:

(17) Regiment or Corps: No. 8 For. Coy. C.F.C. C.A.S.F.

Unit (Battn., etc):

(18) Medical

Category	Date	Authority
A	2.8.40	

(19) Next of kin (entries to be made in pencil)
MARIE COOPER (WIFE)
AYLMER.
QUEBEC

(20) E.
(21) E.
(22) E.

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

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry to be shown	
		#8 Coy.						
5.8.40	O.C.	C.F.C.	T.O.S. on Enlistment	Ottawa	5.8.40	Pte.	D.O. #1	d/11.8.40
			S.O.S. (Canada) on Embarkation at	Halifax	15.2.41	"		
			T.O.S. (Overseas) on Transfer		16.2.41	"		
			and disembarked at Greenock	Cowdor	1.3.41	"	D.O. #26	d/5.3.41
			Granted landing leave	"	30.4.41	"	D.O. #53	d/30.4.41
			Returned from "	"	7.5.41	"	D.O. #57	d/9.5.41
			Granted privilege leave (P.1) from	"	24.10.41	"	130	d/24.10.41
			Returned from "	"	31.10.41	"	133	d/1.11.41
			~~SOS #8 Coy. C.F.C. Posted to R. Sect. C.F.C.~~	"	~~16/3/42~~	"	28	d/17/3/42
			P.O.S. Reinf. Section A.D.C. C.F.C. admitted to	Beauly	17-3-42	"		
			Raigmore Hosp. Posted from No. Coy. C.F.C.				34	20-3-42.
			Trans from Raigmore to Achnagairn Hosp	"	2.4.42	"	57.	11.5.42.
			Adm. to Hd. M.R.D.	"	23.5.42	"	65.	23.5.42
			Disc from " "	"	3.6.42	"	71.	3.6.42
			S.O.S. Reinf. Sec. Hd. boarded Category E					
			Posted to No. 1 N.E.T.D.	"	4.6.42	"	71.	5.6.42.
		N.E.T.D.	T.O.S. from H.Q. R.S. C.F.C.	U.K.	5-6-42	P.R.	75	5-6-42
		S.O.S.	Cdn. Army (O/S.) & No. 1 N.E.T.D.	U.K.	8-7-42	"	93 B	d/8-7-42

To be made out in duplicate

M.F.M. 5
200M—7-40 (6098-9)
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. (ON ACTIVE SERVICE)

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. (ON ACTIVE SERVICE).

(*b*) All questions, etc., must be completed.

(*c*) Both copies of the form are to be forwarded by the Officer Commanding the unit for each officer and other rank, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District, Command, or Camp Paymaster, to the Officer i/c Records, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster of the unit, when transferred to another unit the copy retained by the Paymaster will be sent to the Paymaster of the individuals new unit.

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(1) Name of Officer of Other Rank COOPER NELSON
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank C63355

(3) Unit No. 8 For. Coy. C.F.C. C.A.S.F.

DISTRICT PAY OFFICE
RECEIVED
SEP 11 1940
M. D. No. 5 Quebec.

(4) Are you married? YES

(5) If married, state,

(*a*) Full name of your wife Marie Cooper

(*b*) Present postal address of wife Aylmer, P.Q.

(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 Number of boys Two Girls Two

Names and ages Maurice Cooper 1 year. Alice Cooper 2 years. Wilfred Cooper xxx 3 years. Margarette Cooper 6 years.

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

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

Name Mrs. Nelson Cooper,

Postal Address Aylmer, P.Q.

[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 2 years immediately prior to appointment or enlistment?.....

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

.....

.....

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

If so, state name and address, occupation.....William Cooper, Aylmer, P.Q.....

.....Retired.....

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

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

.....NA.....

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

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

If so, state name and address.....Galamine Cooper, Aylmer, P.Q.....

.....

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

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

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

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

If so, state the following particulars:—

Relationship.....NA.....

Full Name.....NA.....

Postal Address.....NA.....

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

.....NA.....

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

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

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

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

+Nelson Cooper
(Signature of officer or man)

Date.....3.9.40.....

No. 8 For. Coy. C.F.C. C.A.S.F.

Officer Commanding.....

Date.....3.9.40.....

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

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

WILL

M.F.M. 10
60M—3-40 (4386)
H.Q. 1772-39-1656

(1) I, NELSON COOPER (Name in Full), of the Town (City, Town, Village, Township)

Address in civil life.

of Aylmer, in the County/District of ,

Province of Quebec, Teamster (Civil Occupation)

Regimental No. C63355, Unit No. 8 Coy. C.F.C.C.A.S.F. do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

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

(2) I GIVE, DEVISE AND BEQUEATH unto my wife Marie Cooper of Aylmer, Quebec. All my estate absolutely.

Relationship, names and address of residuary beneficiaries.

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

(4) I appoint (Name) (Address)

, (Civil Occupaton) to be the Executor/Executrix of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 3rd day of October

1940

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

his Nelson x Cooper. (Signature of soldier)
mark

First witness sign here.

(5) Signature Sgt. V. Bernard C30216
203 King Ed. ave.

Civil Address Ottawa, Ont.

Civil Occupation Clerk

Second witness sign here.

Signature William Hugh Begley

Civil Address 5 Java St. Ottawa, Ontario

Civil Occupation Clerk.

(Witnesses are not to be beneficiaries.)

[OVER]

250M-9-44 (5562) (ENG.)
H.Q.1064-81-3

6
ARMY

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

NAME Nelson COOPER
(CHRISTIAN NAMES) (SURNAME)

REGISTER NO. 4568
FILE NO. 405-C-10327
DATE 31 Oct 44

ADDRESS Aylmer P.O. Aylmer, Que.

SERVICE NO. C-63355
FINAL RANK OR RATING Pte.

DATE OF TERMINATION OF OVERSEAS SERVICE 6-7-42
DATE OF DISCHARGE 2-9-42

	$ ¢
A. TOTAL QUALIFYING SERVICE NO. OF DAYS 759 / 30 EQUAL TO 25 COMPLETE PERIODS AT $7.50	187.50
B. QUALIFYING OVERSEAS SERVICE No. of Days 508 LESS INELIGIBLE DAYS, EQUAL TO DAYS @ 25c. PER DAY (SEE PAR 2 OVERLEAF FOR EXPLANATION)	127.00
SUB TOTAL	314.50
C. SUPPLEMENT FOR OVERSEAS SERVICE	
DAILY RATES AT DISCHARGE: PAY $ 1.30; SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.00; ADDITIONAL PAY $; $; $; DEPENDENTS' ALLOWANCE 1/30 OF $ 74.00 $ 2.47; TOTAL $ 4.77 X7 = $ 33.39; NO. OF DAYS 508 / 183 X$ 33.39	92.69
D. WAR SERVICE GRATUITY	407.19
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $; DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $; OTHER DEDUCTIONS $	
F. AMOUNT PAYABLE (THIS AMOUNT IS PAYABLE IN 3 MONTHLY INSTALMENTS OF 135.73 EACH)	407.19

RECEIVED
NOV 2 1944
WAR SERVICE GRATUITY DIVISION, ARMY TREASURY

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 $ 4.77 X30 $ 143.10

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
NL	[illegible]

TREASURY	
CHECKED BY	DATE
L. A. Thomas	6-11-44

[illegible]
SERVICE REPRESENTATIVE

ΔTR

DEPARTMENT OF NATIONAL DEFENCE

ARMY

APPLICATION FOR WAR SERVICE BADGE—"SERVICE" CLASS

I COOPER, Nelson hereby make application for War
"General" (Name in Full—IN BLOCK LETTERS)
Service Badge, "Service" Class, and do hereby declare that I have not previously been issued with a "Service Class" Badge.

I enlisted in The Canadian Forestry Corps and served on
(Unit)
Active Service in the present War as follows:—

—	DATE	
	From	To
In Canada	5th August, 1940	15th February, 1941
In England	16th February, 1941	18th July, 1942
In Canada on return from abroad.	19th July, 1942	2nd September, 1942

and was honourably discharged or retired from the—

The Canadian Forestry Corps, Canadian Army (AF) on 2nd September, 1942
(State Unit, and whether Naval, Military or Air) (Date of Discharge)

I am in possession of { Discharge Certificate.

Regimental No. C-63355

Rank Pte.

Unit C.F.C. N Cooper
(Signature of Applicant)

Address Aylmer Quebec
(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 (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.**

M.F.M. 94
50M—4-41 (204)
H.Q. 1772-39-1824

File No. 405-C-10327

War Service Badge, "Service Class"

No. C. 63355 Rank Pte.

Name in full COOPER NELSON

Unit C.F.C.

Reason for Discharge Med. unfit

Age 39 Height 5'7" Eyes Brown Hair Brown

Theatre of Service Canada & Eng.

Length of Service 2 yrs. 29 days

Address

Verified by

Remarks re doubtful cases S.O.S. R.O. 1029(10)

Researched by E.H.

Card typed by

H.A.42.