PETERS, ALFRED WILLIAM

Surname PETERS Rank Capt

Christian Names Alfred William

Corps or Dept. R.C.A.S.C. No.

Born 1902 Ht. 5'9" Wt. 165

Hair Brown Eyes Blue

Marks, Scars, etc.

Nil

Signature of Holder

Signature of Issuer

Place Overseas Date 20-5-43

Right Index M.F.M. 182

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TRIPLICATE

M.F.M. 1
56M—8-39 (1695)
H.Q. 1772-45-18

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

Unit: ~~3rd DIVISIONAL R.C.A.S.C. NPAM.~~ No. 4 District Depot

Rank: 2/Lieutenant

Personal No.:

Name: PETERS Alfred William

WSG COMPLETED

RCASC

ACTIVE SERVICE
CANADIAN [redacted] FORCE

OFFICER'S DECLARATION PAPER

Also applicable to Nursing Sisters

1. Surname: PETERS
2. Christian Names: ALFRED WILLIAM
3. Present Address: 255 St James Street, Montreal, P. Que. Canada
4. Date of birth: 2 September 1902
5. Place of birth: Canada (Country) Quebec (County or Province) Montreal (Town or Twp.)
6. Religion (state denomination): Church of England
7. Profession or occupation: Stock Broker
8. Married, widower or single: Married
9. Name of next of kin: Mrs. Margaret Hall Peters
10. Relationship: Wife
11. Address of next of kin: ~~255 St James Street, Montreal, P. Que. Canada~~ Changed
12. (a) State unit of Active Militia in which you are serving or have served: 3rd Div'l. R.C.A.S.C. NPAM.

    (b) Present rank: 2/Lieutenant
13. State particulars of former war service: NO.

I, ALFRED WILLIAM PETERS do solemnly declare that the above particulars are true, that I hold His Majesty's Commission in the Canadian Militia and I am willing to serve in the Canadian [redacted] Force if, when and so long as required.

Active Service

Date: 4 October 1940

(Signature and rank)

CERTIFICATE OF OFFICER COMMANDING

The application of 2/Lieutenant Alfred William PETERS (Rank and name) for appointment to the 2nd Div'l. R.C.A.S.C. CASF? (Unit) with the rank of 2/Lieutenant CASF. and appointment as Reinforcement Officer 2 Div. R.C.A.S.C. (was) (is) recommended, appointment has been approved. is recommended for approval.

to date from 4 October 1940

Authority: H.Q.S. 3498-5 (Org. 2a) Dated 10September 1940
~~H.Q. 54-27-20-143 (Pers. 2b) Dated 1 October 1940~~

(Signature of O.C.) (G. ECHENBERG) Colonel (Rank)

Date: 4 October 1940

COMMANDING No. 4 DISTRICT DEPOT, C. A. S. F.
(Unit)

Record of Service of PETERS ALFRED WILLIAM
(Name)

Active Militia Unit 3rd DIV'L. R.C.A.S.C. NPAM.

Rank 2/Lieutenant Date of Rank 2 March 1940

Highest rank for which qualified by examination 2/Lieutenant

Staff College NIL.
Militia Staff Course NIL.
Advanced Course NIL.

Languages English

University or College Degrees NIL.

Civil Technical Training or qualifications (specify) NIL.

Other military qualifications or special courses (specify) NIL.

Report		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date of appointment to Field Force	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
4Oct.40	DRO.	Joined on appointment NO 4 DISTRICT DEPOT C.A.S.F.	2/Lieut.	4 Oct.40	4 DD	Montreal	4 DD PtII No 251	4 Oct. 40
4Oct 40		Attached for all purposes to C. I. (R) T. C. Valcartier Military Camp, Valcartier, Que.....	"	4Oct40	"	"	" " 251	4Oct 40
		The above entry is corrected to read "RCASC ~~Training Centre, Camp Borden, Ont"~~, and not as shown			"	"	" " 255	9 Oct 40
R0819		To be Lieut	Lt	13 Jan 41				
		T.O.S. R.C.A.S.C. T.C. Camp Borden, Ont.	"	5-10-40	RCASC TC	CampBorden	Pt. II Or. 267	18-10-40
		Qualified Driving and Maintenance Class III (I.C.)	"	27-12-40	" "	" "	#4	4-1-41
		Change of Address of next of kin to 1490 Fort St.Apt.,16 Montreal Que.	"	29-1-41	"	" "	Pt II Or# 25	29-1-41
		S.O.S. on posting to General Holding Unit.			"	"	" 29	
		SOS CASF (CANADA) ON EMBARKATION AT Halifax ON 17.2.44						
		TOS CASF(OVERSEAS) ON TRANSFER ON 18.2.44 AND DISEMBARKED AT Gourock ON 28.2.44						
		T.O.S. I R.C.A.S.C. H.U. FROM 1.3.41 DATE	"		RCASC H.U.	England	DO 25	5.3.41
		Landing leave 21.3.41.	"	26.3.41	"	"	DO.37.	26.3.41

FEB 2 - 1941

FEB 2 - 1941

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

M.F.M. 1 & 2A
40/P & S/119

Statement of the Service of No..... Rank Lieut. Sheet No.....

Name Peters A.W.

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
SOS		S.O.S. to Corps. AmmmPark.	2/Lieut	29 Mar 41	RCASCHU	Borden	39	29 Mar 41.
	TOS	T.O.S. fromRCASC HU	Lieut	28 Mar41.	1CAP	U.K.	24	4 Apr 41.
SOS		S.O.S. to 13. Troop Carrying Coy.	Lieut	17 Apr 41.	1C.A.P.	U.K.	29	25 Apr 41
	TOS.	T.O.S. from 1 C.A.P.	Lieut	18 Ap41	13 T.C.C.	U.K.	1	9 May 41.
		Priv. Leave 1. W.O.W. to 26 Aug 41.	Lieut	19 Aug 41	1 ResMT Coy	U.K.	20	31 Aug 41.
		Priv. Leave 2. W.W. to 5 Jan42	Lieut	29 Dec 41.	1R.M.T.Coy	U.K.	2	9 Feb 42.
SOS		S.O.S. to Comd 1 Cdn Div R.C.A.S.C.	Lieut	28 Feb 42	61 GTC	U.K.	15	31 Mar 42.
	TOS	T.O.S. from 61 Gen Trans Coy..	Lieut	1 Mar 42	Comd 1Div RCASC	U.K.	14	31 Mar 42.
		Att f.a.p. to 1 Cdn Div. Supp.Coy RCASC	Lieut	19 Mar 42.	Comd 1Div RCASC	U.K.	20	8 May 42.
SOS		S.O.S. to 1 Cdn Div Supp. Coy. and ctba.	Lieut	12 Apr 42.	Comd 1 Div RCASC	U.K.	20	8 May 42.
	TOS.	T.O.S. from Comd 1 Cdn Div. R.C.A. S.C.	Lieut	13 Apr 42.	1Div Supp.	U.K.	20	8 May 42.
R.O.	2018	To be Capt.	Capt.	1 Mar 42	1 Div Supp	U.K.	34	14 Aug 42.
SOS		S.O.S. to 61 G.T.C. R.C.A.S.C.	Capt.	25 Jun 42.	63 GTC	U.K.	28	2 Jul 42.
	TOS	T.O.S. from 63 Gen Tpt. Coy.	Capt	26 Jun 42.	61 G.T.C.	U.K.	30	11 Jul 42.
		Priv. Leave	Capt.	17/ 24 Aug 42.	1 Div Supp	U.K.	36	28 Aug 42.
		Priv. Leave	Capt.	1/ 8 Sep 42.	61 G.T.C.	U.K.	43	9 Oct 42.
		Priv. Leave to 16 Nov. 42.	Capt.	9 Nov. 42.	1 Div Supp	U.K.	49	20 Nov. 42
		Att f.a.p. to C.T.C.	Capt	28 Nov.42.	61 GTC	U.K.	5	29 Jan 43.
		Cease tobe att to C.T.C. f.a.p.	Capt.	3 Feb 43.	61 GTC	U.K.	7	12 Feb 43.

Statement of the Service of No. ..... Rank Lieut. ..... Sheet No. .....

Name PETERS A.W.

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
SOS		S.O.S. to H.Q. Comd 1 Div. R.C.A.S.C.	Capt.	18 Jan 43	1 Div Supp.	U.K.	4	25 Jan 43.
	TOS	T.O.S. from 1 Div. Supp:	Capt.	19 Jan 43	Comd 1 Div.	U.K.	4	26 Jan 43.
				19/	to Comd 1 Div	UK	24	11 June 43
		Att f.a.p. from Comd. 1 Div.	Capt.	25 Jan 43	1 Div Supp	U.K.	4 Supp A	25 Jan 43.
SOS		S.O.S. to 1 L.A.A. Regt Pet. RCASC	Capt.	21 Feb 43	47 G.T.C.	U.K.	10	5 Mar 43.
	TOS	T.O.S. from 47 G.T.C.	Capt.	22 Feb 43	1 LAA	U.K.	6	5 Mar 43.
					H Q Comd 1 CD	UK	16	16 apr 43
		Att'd from H.Q. Comd 1 Cdn Div	Capt.	3 apr 43	1 C I B Coy	UK	13	16 Apr 43.
		C I B to 1 Cdn Inf Bde for Pty Rcase	Capt.	11 May 43	H Comd 1 Div	UK	25	18 June 43
		S.O.S. C.A. (U.K.) on embarkation 27 June 43						
		T.O.S. C.A. (M) 28 June 43						
		Disembarked 13 July 43	Capt.	—	HQ Cdn. Div	N.A.	30	6 Aug 43
SOS		SOS to RCASC x-3 List on edn to 9th Qub.	Capt.	25 July 43	HQ Cdn. Div	N.A.	31	13 Aug 43
	TOS	TOS RCASC X3 List from HQ Comd. Div on edn to 9 F.A. sick	Capt	26 July 43	RCASC X3 List	H.Q.	13 A.	20 Aug 43
					RCASC X3 List.	H.Q.	13 A.	20 Aug 43.
		Dispd. from 9th Qub.	Capt	29 July 43	HQ Cdn. Div	N.A.	31	13 Aug 43
SOS		SOS RCASC X3 List to HQ Comd Div. ASC	Capt.	28 July 43	RCASC X3 List	H.Q.	13 A	20 Aug 43
	TOS	TOS from RCASC X-3 List	Capt	29 July 43	HQ Cdn. Div	N.A.	31	13 Aug 43
	ERROR	~~Att to 8 Bde Sig. Bde. Coy.~~	~~Captain~~	~~9 Sep 43~~	~~HQ Coy.~~			

Regimental No. ..... Rank .....

Sheet No. 4

MFM 1 & 2a
40/P & S/119 (3913)

Name Lieut. A. W. Peters

	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc—	Rank Shown	Effective Date	Unit	Place	Authority DO Number	Authority Dated
CL3	SOS SOS to 2 C/B Coy.	Capt.	3 Nov 43	HQ Cdn Div	N.A.	45	19 Nov 43
CL3	TOS TOS from HQ Cond. 1 Cdn Div. RCASC	Capt.	4 Nov 43	2 C/B Coy	N.A.	42	19 Nov 43
	KILLED. (Cm FORCE.)		8 JAN 44		NA.	CN 381 13 Jan 44	
	AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP			2 C/B Coy	CMF	2	21 Jan 44
SOS	SOS Deceased. Killed in action	Capt.	8 Jan 44	2 C/B Coy	CMF	4	22 Jan 44

SER[illegible] FORM

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

PART I (For all ranks)

Unit REINFORCEMENT OFFICER 2ND.DIV'L R.C.A.S.C. CASF Regimental Number [illegible] Lieutenant

1. Surname PETERS
2. Christian Names ALFRED WILLIAM
3. *Substantive Rank and Appointment Captain
   *Acting Temporary or Local Rank
   giving date 1/3/42

*To be entered in pencil to facilitate alteration.

4. Place of birth MONTREAL, QUEBEC, CANADA
5. Date of birth as declared on attestation 2nd. September 1902
   (A)
6. Date of enlistment 4th. October 1940
7. Place of enlistment Montreal, Quebec, Canada
8. Residence at time of enlistment 255 St. James Street, Montreal, Quebec, Canada
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion Church of England
12. If married, state date 5th. September 1935
13. Trade on enlistment Stock Broker
14. Corps, trade and grade
15. (D) Qualifications
16. (E) Miscellaneous entries

(17) Regiment or Corps: RCASC

Unit (Battn., etc): 10th Sup. Coy (3 Coy)

(18) Medical

Category	Date	Authority
A	3/10/40	Med Board MFM "1"

(19) Next of kin (entries to be made in pencil) wife
Mrs. Margaret Stacey Peters
1490 Ford St. apt 16
Montreal Que

(20) E
(21) E
(22) E ~~CMHQ form 1000:92 Completed 15 Oct 42~~

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.

ON HIS MAJESTY'S SERVICE

FASTEN Envelope by gumming this Label across Flap.
OPEN by cutting Label instead of tearing Envelope.

FULL NAME TO BE QUOTED IN PT. II ORDERS i.e. –

ALFRED WILLIAM PETERS

(CMHQ REC/34/DO.2/1 d/12 Mar 43)

C.M.H.Q. 40:1.
40/P & S/52 (8/42)

SER

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

Unit REINFORCEMENT OFFI ... ber B/M Lieutenant

1. Surname PETERS
2. Christian Names ALFRED W
3. *Substantive Rank and Appointment
   *Acting Temporary or Local Rank
   giving date

*To be entered in pencil to facilitate alteration.

Unit (Battn., etc) 1 Div Sup Coy (3 Coy)

4. Place of birth MONTREAL, QUEBEC, CANADA
5. Date of birth as declared on attestation 2nd. September 1902
   (A)
6. Date of enlistment 4th. October 1940
7. Place of enlistment Montreal, Quebec, Canada
8. Residence at time of enlistment 255 St. James Street, Montreal, Quebec, Canada
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion Church of England
12. If married, state date 5th. September 1935
13. Trade on enlistment Stock Broker
14. Corps, trade and grade
15. (D) Qualifications
16. (E) Miscellaneous entries

(18) Medical

Category	Date	Authority
A	3/10/40	Med Board MFM "1"

(19) Next of kin (entries to be made in pencil) wife
Mrs. Margaret Hall Peters
1490 Ford St. apt 16
Montreal Que

(20) E
(21) E
(22) E CMHQ form 1000:92 completed 15 Oct 42

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	Army rank as at (e)	(g) Army Form or other authority for entry to be shown
			SOS CASF (CANADA) ON EMBARKATION AT Halifax ON 17.2.41				
			T.O.S. CASF (OVERSEAS) ON TRANSFER ON 18.2.41 AND DISEMBARKED AT Gourock ON 28.2.41				
			T.O.S. I.R.C.A.S.C. H.U. FROM 1.3.41 DATE				
			Landing leave 21.3.41.	Borden	26.3.41.	Lt.	Do 25 5.3.41
			SOS to Corps Ammun Park	"	29.3.41	"	DO 37. 26.3.41.
							DO 39 29.3.41.
31 Mar 41	O.C.	C.C.A.P.	T.O.S. from No. 1 RCASC Holding Unit	U.K.	29 Mar 41	Lieut	#24 - 4 Apr 41
9 Apr 41	"	"	S.O.S. to No 13 C.T.C.C.	"	17 Apr 41	Lieut	#29 - 25 Apr 41
19 Apr 41	3010: OC	13 T.C.C.	T.O.S. 13TCC from CCAP (auth admns. O#61)	"	18 Apr 41	"	#1 - 9 May 41
	"	"	Att'd to 12 TCC for rations & qtrs	"	22 May 41	"	#4 - 31 May 41
	"	"	Ceases to be att'd to 12TCC for rats	"	20 June 41	"	#10 - 4 July 41
	"	"	Att'd 1 Cdn Corps for rations	"	24 June 41	"	O.O. 28/41
	O.C.	RES. M.T.	Leave 19 Aug 41 7 days (P1) Warrant	England	19-8-41	"	20. d/31 Aug 41
19.9.41	"	"	Leave to be att'd to 3TCC for Rations		4-9-41	"	23. d/19 Sep 41
19.9.41	"	"	Crew Leave to read W.O.W. amendment -		31.8.41.	"	23. d/19 Sep 41
			13TCC REDESIGNATED 1 RES MT COY				
	Lt.	Res M.T.	Leave (P2) 7 days Warrant	"	29.12.41	Lieut	No. 2. d/9 Jan 42
1 Cdn	Reserve	M.T.	Leave is ~~[illegible]~~ 61 Cdn. Gen. Trans. Coy		1 Mar 42	Lieut	NO. 10 d/6 Mar 42
	O.C.	61 G.T.C.	S.O.S. to Comd 1 Cdn Div. Recce	Eng.	18 Mar 42	Lieut	NO. 15. d/31 Mar 42
	Comd 1 Div	RCASC	TOS on taking from 61 Gen Transpt Coy RCASC	England	19 Mar 42	Lieut	13/27 Mar 42
"	"		Attd for t. 1 Div Sup Coy 3 Coy 19 Mar	t.	12 Apr 42	"	20 8 May 42
"	"		SOS to 1 Div Sup Coy 3 Coy Recce	"	12 Apr 42	"	20 8 May 42
OC	1 Div Sup Coy		T.O.S. from Comd 1 Cdn Div. R.C.A.S.C.	"	13 Apr 42	"	20 8 May 42
"	"		(P-3) 7 days leave FTW	"	5 May 42	Lieut	OO 30/17 Jul 42
"	"		To be Captain (Auth: O's RO 2018)	"	1 Mar 42	Capt.	OO 34/14 Aug 42
"	"		7 days Pl. (P4)	"	17 Aug 42	Capt.	OO 36/28 Aug 42
✓	✓		7 days Pl. to 16 Nov 42 with F.T.W. (P5)	✓	9 Nov 42	Capt	49 - 20 Nov 42
			S.O.S. to Comd 1 Cdn Div RCASC	UK	18 Jan 43	Capt	4 - 25 Jan 43
HQ Comd 1 Div	RCASC		T.O.S. from 1 Div Sup Coy	"	19 Jan 43	"	✓ 26 Jan 43
"	"	"	Re-designated HQ Comd 1 Div RCASC	"	25 Jan 43	"	✓ 26 Jan 43
"	"	"	Att'd for rats to 1 C/B Coy RCASC	"	3 Apr 43	"	13 - 16 Apr 43
		"	~~Comd att'd for rats to 3 C/B Coy RCASC~~	"	12 Apr 43	"	
		"	Att'd for rats to 1 Div Sup (3) Coy RCASC to 25 Jan 43	"	19 Jan 43	"	24 - 11 Jun 43
		"	C/Adj for rats to 1 C/B Coy	"	11 May 43	"	25 - 18 June 43

SERVICE AND CASUALTY FORM

(PART II)

M.F.M. 4 (a) (Part II)
40/P&S/412 (11/42)

Regiment or Corps..... Regimental Number Capt.

Substantive Rank..... Surname Peters, Christian Names Alfred William

Acting Temporary or Local Rank.....
(To be entered in pencil to facilitate alteration)

(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 shown
	Hq. Comd 1 Div RCASC		Embarked - SOS CA(UK)	UK	27 Jun 43		30-6 Aug 43.
	✓		TOS CA(M)	—	28 Jun 43	Capt	
	✓		Disembarked	M	13 Jul 43		
	HQ Comd 1 Div RCASC		SOS to RCASC X-3 List for adm 9CFA(S)	M.	25 Jul 43	Capt	31-8 Aug 43.
	RCASC X-3 List		TOS from Hq. Comd. 1 Div RCASC	M	26 Jul 43	Capt	13A-20 Aug 43.
	✓		Disch from 9 Can Fd Amb	M	28 Jul 43	Capt	13A-20 Aug 43.
	✓		SOS to Hq. Comd 1 Can Div RCASC	M	28 Jul 43	Capt	13A-20 Aug 43.
	Hq. Comd. 1 Div RCASC		TOS from RCASC X-3 List	M	29 Jul 43	Capt	31[redacted]-20 Aug 43
	✓		SOS to 2 C/B Coy RCASC	M	3 Nov 43	Capt	45-19 Nov 43
	2 C/B Coy		TOS from HQ Comd 1 Can Div RCASC	M	4 Nov 43	Capt	42-19 Nov 43
		"	SOS, Deceased KILLED IN ACTION	M	8 Jan 44	"	DO 4/44

(a) Report		(b)	(c)	(d)	(e)	(f)	(g)
Date	From whom received	Unit	Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	Place of Casualty	Date of Casualty	Army rank as at (e)	Army Form or other authority for entry to be shown

2nd Lieut. (T/Capt.) Jan 14

AKW 3013/1 Jan 14

AKW 3013/1 Place of disembarkation

P. Comd. 1 Div. ASC 1 Mar 42 # 14 /#15 61 C.G.Trans Coy. R

TOS - 1 Div Sup Coy ASC 13 Apr 42 DO 20 / SOS - Cmd 1 Div ASC 12 Apr 42 DO 20

A - 1 Div Sup Coy 19 Mar 12 Apr 42 DO / DO 20 - Cmd 1 Div ASC DO 20
TOS - Cmd 1 Div ASC 19 Mar 43 DO 4. / DO 4. - 1 Div Sup Coy
A - 3 Inf Bde Coy ASC 26 Jul 43 DO / DO HQ Cmd 1 Div ASC
CA -

A - 1 C 1 Bde Coy 3 Apr 43 DO 13 / DO 16 - Cmd 1 Div ASC
CA - 1 C 1 Bde Coy ASC 11 May 43 DO. / DO 25 - Cmd 1 Div ASC

SOS

TOS. RCASC X-3 List 26 Jul 43 DO 13A / DO #31. HQ Cmd. 1. Div. RCASC.
TOS HQ Cmd. 1 Div. RCASC 29 Jul 43 DO #31 / DO 13A RCASC. X. List.
TOS - 2 C 1 Bde Coy ASC - 4 Nov - 43 DO 42 / DO 45 / Div ASC

Killed 5 Jun 44

COURSES AND QUALIFICATIONS	AUTHORITY		TRANSFERS AND POSTINGS	AUTHORITY
		P.	1.ASC.H.U. 17.2.41.	RO.633.o/s.
		P.	C.Amn.Pk.30.3.41.	RO.683 o/s.
		P.	13.Tp.Carr.Coy.18.4.41.	RO.748 o/s.
		P	HQ 1 Div RCASC. 1 Mar 42:2018 o/s.	

REMARKS

T.O.S. RCASC.H.U.(From Canada.)1.Mar.41.DO.25.
Cmb 27-6-43 and SOS Cdn army U/K 27-6-43 TOS CA(M) 28-6-43
Killed 5 Jun 44 - CAS/143 KG. (DO. 30.)

C3880

PETERS ALFRED WILLIAM. KILLED IN ACTION

SURNAME PETERS (Full names please.)

CHRISTIAN NAMES ALFRED WILLIAM.

DATE OF BIRTH 2.9.02.

RELIGION C. of E. Med Cat. A

RANK C.A. 2nd Lieut.

UNIT C.A. Sup. Coln. 3. Div. RCASC.

DATE OF APPT. C.A.S.F. 4.10.40.

UNIT C.A.S.F. RCASC. M.D. 4. (Reinf.)

DATE OF ARR. U.K. 28.2.41.

RANK ON APPT. C.A.S.F. 2nd. Lieut.

DATE OF APPT. OR PROM. C.A.S.F.

		AUTHORITY
2ND. LT.	4.10.40.	RO. 795.
LIEUT.	13.1.41. RO. 1063 &	RO. 764. o/s.
CAPT.	1 Mar 42	2018 o/s
MAJ.		
LT. COL.		

REGTL. AND STAFF APPTS.

HONOURS AND AWARDS

Civil Occ. Stock Broker

CITY OF RES. Montreal

DATE OF PROC. ON ACT. SERV. 17.2.41. RO. 633 o/s.

CASUALTIES * ALL REFERENCES FULL NAMES PLEASE.

CERTIFICATE OF MEDICAL EXAMINATION

Name in full PETERS, Alfred William Date Oct. 3rd. 1940

PART 1. Information obtained from the applicant.

1. Age 38 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?	yes
i. Flat or deformed feet	no		

(Signature of Applicant)

Examiner's remarks *re* above ears & reflexes N.
col. vis. Ishihara CN Capt. Delahaye

URINE N
X RAY N

PART 2. Information obtained by medical examination. The applicant must be stripped.

1. Identification marks or scars. (If operative obtain history.)
one vac. l. arm - appendix 1938

2. Height 5 feet 6½ inches. 3. Weight 150 pounds.

4. Complexion med. Eyes blue Hair fair 5. Development good (Good / Fair / Poor)

6. Chest measurement—Girth on full expansion 36 inches.
Range of expansion 5 inches.

7. Vision, right 20-80 left 20-40 8. Hearing, right cv 20 left cv 20

9. Condition of mouth and teeth good

10. The abnormalities (congenital and pathological) found on examination are as follows
with glasses R. 20-20 L. 20-20

nil

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 Applicant 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

LT.COL.BROWNE COL. FYSHE CAPT.ARGUE

J.G. Browne L. Coe C. Fyshe Col. Capt.
President Member Member

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
4-10-40	Vacc. Succes. ACK. McGonigle		
4-10-40	T. A. B.		
13-12-40	3		
20-12-40			
4-10-40	Tet-Tox 1cc		
10-1-41	2		

Are you receiving or have you in the past received, disability pension or compensation? If so give details No

Rank 2/Lieutenant Surname PETERS Christian Name ALFRED WILLIAM

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)**

24964

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER

RANK Captain

SERVICE UNIT 48th Highrs. of Canada. R.C.A.S.C., (C.A.).

NAME PETERS, Alfred William.

DATE OF BIRTH

DAY 2nd MONTH September YEAR 1902

MARITAL STATUS Married.

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

NAME Mrs. Margaret Hall Peters,

ADDRESS 1490 Fort St., Apt. 16, Montreal, Quebec.

ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED

ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. Canrecords 4316 4337 H.Q. 357-4-98

CASUALTY DETAILS Killed in action

DATE 8-1-44

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

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

DATE 20-1-44

OFFICER I/C RECORDS

6

COPY FOR DOCUMENT FILE

S.O.S.

NAME PETERS, ALFRED WILLIAM. H.Q. File 357-4-98.

RANK 2ND LT. (SUPY.) 2ND LT. ~~1ST~~ CAPT.

C.A.S.F. UNIT R.C.A.S.C. (P.R.) #4 D.D.

N.P.A.M. UNIT 3RD DIV. SUPPLY COL., R.C.A.S.C.

Appt. R.O. No. 795 Date 21-11-40. Effective date of appt. 4-10-40.

CANADA GAZETTE

TRANSFERS, PROMOTIONS and REVERSIONS

TO BE LT., R.C.A.S.C. (REINF.) No 4 D.D. 13-1-41 {R.O. #1063, 22-5-41.

EMBARKED CANADA - SAILING LIST NO. 5705 FEB 16 1941

DISEMBARKED ENGLAND

T.O.S. CDN. ARMY O/S & POSTED TO #1 A.S.C. HOLD. UNIT 17-2-41 O.S/R.O #633, 25-3-41

POSTED TO CDN. CORPS AMN. PK. FROM. No. 1 A.S.C. HOLD. UNIT. 30-3-41, O.S/R.O. #683, 23-4-41

TO BE LT. 13 Tps. CARRY. COY. 13-1-41 (AUTH. A.C. CABLE 945.) {O.S/R.O. #819, 10-7-41 O.S/R.O. #764, 6-6-41

TO BE CAPT. H.Q. R.C.A.S.C. 1ST CDN. DIV. 1-3-42. FROM 61 GEN TPT. COY. O.S./R.O. #2018, 22-5-42.

5M—9-40 (7205)
H.Q. 1772-45-8

KILLED IN ACTION 8 JAN. 1944 CABLES #4316 #4337} d. 20 JAN. 44.

R.C.A.S.C. 2 Hold Unit as at 8/3/41

8-1-44
(O.C.L.-427)

(M.J.A.)

AWARDS—CANADIAN ARMY (ACTIVE)

100M—10-41 (2195)
H.Q. 1772-45-8

(1548) M

FILE NO. 357-4-98

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO	RANK ON DISCHARGE	C.A.S.F. UNIT
PETERS,	Alfred William		Capt.	R.C.A.S.C.

Jokob

WAR SERVICE BADGE

(CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 STAR.	8340 1/5/50
ITALY STAR.	
DEFENCE. MEDAL.	
WAR MEDAL.	
C.V.S.M.&.CLASP.	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS
PERSON
ENTITLED TO National Trust Co., Ltd. Executors

ADDRESS: 225 St. James St., Montreal Que.

(2) MEMORIAL CROSS

WIDOW Mrs. Margaret H. Peters,

(1548)

ADDRESS: 1490 Fort St., Apt. 16, Montreal, P.Q.

1421 Bishop St. Apt 11 Montreal PQ 3.10.47

(3) MEMORIAL CROSS

MOTHER Mrs. Margaret Peters, (M.F.M.5)

(1548)

Hold-till applied for.

ADDRESS: 3490 Cedar Crescent, Vancouver, B.C.

424 East 52nd St. New York N.Y. U.S.A.

Est.-No further address 23-3-45

Memorial Bar to:

Mrs. Margaret H. Peters,
Three Mile Harbor Road,
Box 1736, East Hampton,
Long Island, N.Y., U.S.A.

(2) DESP. FEB 28 1944
REGN No. 4998

(3) DESP. FEB 29 1944
REGN No. 4999

Rejd 22-3-44

MEMORIAL BAR

DATE DESP

REGN. NO 973

No _____ Rank Captain Name PETERS, Alfred William

Unit 48th Highrs.of Can. Date of death 8th January, 1944.

Died at ITALY.

Cause Killed in action

Death occurred on strength of Forces.HQ 357-4-98 d20-1-44

N/K Mrs. Margaret Hall Peters Relationship Widow

(1955) 1421 BISHOP ST.

Address ~~1490 Fort St., Apt.16~~, Montreal, P.Q.

Remains buried in _____ Cemetery

CHK

Grave location _____

OVER —

DEATH CERT. TO N.K.

BURIAL REPORT TO N.K. JUN 8 1945

RETURN TO BUR. OF STAT. JUN 12 194

ROYAL MESSAGE DESP'D. FEB 2 1944

CAN. MESSAGE DESP'D. 1-2-44

REBURIAL

Morro River Cemetery,
Ortona, Italy.

Grave 7, row D, plot 10.

HI & CR Form Despd. JAN 3 1947

Photographs
Despatched
JUN 20 1947

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40

MED THEATRE: KILLED 8 Jan 44.

1. H.Q. File No. INDEX CARDS MADE ~~XXXX~~ REMOVED

OFFICERS INFORMATION CARD

2. Date Completed 20 APR 43

3. Name (use block letters.) PETERS (surname) ALFRED WILLIAM (given names)

4. Rank CAPTAIN

5. Unit RCASC H.Q. COMD 1 CON DIV

6. Present Employment & Location D.T.S.O. H.Q. COMD. 1 CON DIV

7. Permanent Home Address APT 16 1470 FORT ST. MONTREAL QUE

8. Med. Cat. A-V

9. Decorations

10. Date of Birth 2 SEPT 02

11. Place of Birth MONTREAL QUE

12. Nationality CANADIAN

13. Adapt'y Test

14. Total Commiss'd Service 3 YRS 2 MTHS

15. Date of Appmt. to A.F. 3 OCT 40

16. Rank (Militia) 2ND LIEUT

17. Unit or Corps (Militia) 3 ~~AD~~ DIV RCASC NPAM

18. TOS. O/S. 17 Feb 41

(signature of officer)

8-5-43

Civilian Education

19. School	20. No. of Years	21. Name of Institution	22. Courses or Subjects	23. Graduated Yes	23. Graduated No	24. Degree or Diploma	25. Year Finished	26. Professional Memberships	27. Hobbies (see note)
High School	4	MONTREAL HIGH	Jr. Matric. ☑ Sr. Matric. ☐	YES		X X X X X			
Coll. or Univ.									
Post Grad.									

Civilian Occupation

28. Name of Firm (Last three)	29. Location	30. Nature of Business or Profession	31. Employed From	31. Employed To	32. Positions Held (Mention major responsibilities)
1. HANSONS & MACAULAY	MONTREAL QUE	STOCK BROCKER	MAY 19	OCT 40	PARTNER 1937-40
2.					CLIENTSMAN 1928-37
3.					MANAGER 1921-28 ACC'T 1919-21

Languages

33.	English	French	German	Russian	Spanish	Other
Spoken	Fluently					
Written	Fluently					
Translated						

34. Marital Status: Single ☐ Married ☑ Separated ☐ Divorced ☐ Widower ☐ No. of Dependents /

35. Religion: Prot. ☐ R.C. ☐ Other (specify)

36. Racial Origin: Anglo-Saxon ☑ Fr. Can. ☐ Other

37. Special Service or Appointments: NIL

38. Service Schools and Courses

Year	Months	School	Course	Grade
40-41	4 3/4	CAMP BORDEN CON	O.T.C. A.S.C.	
39-40	12	3 DIV RCASC	BUSINESS MEN'S GEN'L A.S.C.	

39. War and Military Service

Year	Months	Service
1941-43	25	Present War (Overseas only) YES
		Great War (Any Service)
		P.F. Officer
		P.F. Other Rank
1939-40	12	N.P.A.M. or R.F. Officer
		C.O.T.C.
		Other (Specify)

40. Staff Employment or Command (last six)

Year	Months	Location	Appointment
1943	3 3/4	H.Q. COMD 1 CON DIV RCASC	D.T.S.O
1942	6	3 C.I.B. COY	Q.M.-MESSING.
1942	3	3 C.I.B. COY (1 DIV. SUP. COY)	TPT PL CMDR
1941-2	12	13 T.C.C. / RES. M.T. COY	ADJ'T.
1941	2	(13 T.C.C.) C.A.P.	Sec. CMDR.

NOTE:—HOBBIES SHOULD INCLUDE ACTIVITIES WHICH MIGHT HAVE AN APPLICATION IN WARTIME, E.G., TRAINING DOGS, PIGEONS, ETC. OR ADVANCED PHOTOGRAPHY.

THIS SIDE ONLY FOR N.D.H.Q. OR C.M.H.Q.

NAME PETERS, Alfred William
SURNAME FIRST. USE BLOCK LETTERS.

SUMMARY OF CONFIDENTIAL REPORTS

Entry Made at N.D.H.Q. C.M.H.Q.									
Date of Report									
1. Reliability									
2. Leadership									
3. Sense of Responsibility									
4. Stability									
5. Alertness									
6. Administrative Ability									
7. Energy and Persistence									
8. Group Value									
9. Appearance									
10. Speech									
11. Writing Facility									
12. Basic Knowledge of Arms									
13. Tactical Aptitude									
14. Teaching Ability									
RATING									

RECOMMENDATIONS

Staff Appointment									
Accelerated Promotion									
Normal Promotion									
Retarded Promotion									
Transfer to Other Arm									
Retirement or Reclassicat'n									
Civil Occupation									
Other									

POSTINGS, ETC.

A.P. AND R. OR OTHER ENTRIES	EFFECTIVE DATE	UNIT	AUTHORITY: MIN. APPROVAL	AUTHORITY: R.O.
Med Theatre: Killed 8	Jan 44			CAS/4316
2nd Lieut	4 Oct 40			
Lieut	13 Jan 41			
Capt	1 Mar 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.

---

(1) Name of Officer of Other Rank PETERS Alfred William
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank 2/Lieutenant

(3) Unit 2 Div'l. R.C.A.S.C. C.A.S.F.

(4) Are you married? YES.

(5) If married, state,

(*a*) Full name of your wife Mrs. Margeret Hall Peters

(*b*) Present postal address of wife 255 St James Street, Montreal, P. Que.

(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? NO. Number of boys N/A Girls N/A

Names and ages N/A

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

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

Name N/A

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 2 years immediately prior to appointment or enlistment? NO.

If so, state her full name and Postal Address N/A

(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 appointment or enlistment 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? YES.

If so, state name and address Mrs. Margaret Peters
3490 Cedar Cresent, Vancouver, B.C. Canada

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

(16) If sole or partial support of widowed mother—state what amount per month you have given her prior to appointment or enlistment $35.00 a Month.

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? a Brother Helping.

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

If so, state the following particulars:—

Relationship N/A

Full Name N/A

Postal Address N/A

Amount contributed monthly during the past six months N/A

(18) Are you insured? YES.

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

Have you made arrangements for payment of your Insurance Premium? Yes.
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.

(Signature of officer or man)

Date 4 October 1940

Officer Commanding

Date 4 October 1940

NO. 4 DISTRICT DEPOT, C. A. S. F.

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.

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 PETERS, Alfred William (b) Reg'l. No.
2. (a) Arm of service Army (b) Unit R.C.A.S.C. (c) Rank Capt.
3. (a) Date of birth 8 Jun 01 (b) Have you any dependents? Yes (c) Place of residence at time of enlistment Montreal Que
4. (a) Place of enlistment Montreal P.Q. (b) Date of enlistment 8 Oct 40.

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school Not Stated (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.) 12 Grade
7. If you attended a university, give name of university and standing or degree secured
8. (a) Did you ever enter upon a trade apprenticeship? Yes (b) If so, for what occupation? Accountancy Commercial (c) Did you finish it? Yes (d) If you did not finish it, how long did you serve at it? Yes
9. (a) What languages do you speak fluently? English (b) What languages do you read well? English

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) (b) At time of enlistment of what trade union or professional society were you a member?

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 Address
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)
20. (a) Your specific occupation (b) Number of years' experience at this occupation with any employer
21. (a) Did your employer promise definitely to give you employment on discharge? (b) Did your employer refuse to promise you employment on discharge? (c) Do you wish to return to your former employment?

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 Stockbroker (b) Where was it located? Montreal. Que
23. (a) Number of years engaged in this business 20 Years (b) Have you made, or will you make plans to return to the same or a similar business on discharge? Yes

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? (c) If so, in what kind of farming? Harvesting.
25. (a) Were you born on a farm? (b) How many years' actual farming experience have you had? Ltd (c) In what provinces did you have experience? Sask.

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 Stockbroker

DATE 6 Jul 1943 SIGNATURE [signature]
For Officer i/c Records CMHQ.

CANADIAN TRAINING SCHOOL

NO. 4 WING

(CONFIDENTIAL REPORT)

The undermentioned officer

Capt. A.W. PETERS (#C.3C/#63 Gen. Transpt. Coy.)

has completed C.M.H.Q. Course # 817 Ser. 4 at this School.

His grading is P +/ G - (RCASC)

He has shown special ability in ////////

In Map Reading he is graded as P +

In Organization & Administration P +

In Verbal Orders P +

In Tactics P

REMARKS:

A capable officer of sound judgment. He has not had time to become wholly familiar with Infantry Tactics, but his treatment of Infantry problems has been logical and constructive. He is keen and enthusiastic and with further experience should make a good company commander.

RECEIVED MAY 16 1942

SCHOOL GRADING - EQUIVALENT AT BRIT. SCHOOL

P	approx	40%	N.G.
F-	"	45%	D.
F	"	50%	C.2
F+	"	60%	C.1
G-	"	70%	B.2
G	"	80%	B.1
G+	"	90%	A.2
E	"	100%	A.1

(J.G.K. Strathy) Major,
A/Officer Commanding,
No.4 Wing - Cdn.Trng.School.

(C.W. DEVEY) Lieut-Col.
Commandant,
Canadian Training School.

23 Jan 42

.....
(Students Signature)

CANADIAN RECORDS C.R. 16 MAY 1942 ACTON, W.3.

257-4-98

This material is for publication after mention has been made in press despatches from Overseas of the officer or soldier named herewith. In the interests of security no additional data identifying the unit or specific employment or location of this personnel should be used.

D.P.R. (ARMY) N.D.H.Q.

CAPTAIN ALFRED WILLIAM PETERS

Captain Alfred William Peters, Royal Canadian Army Service Corps, was born in Montreal, September 2, 1902, and prior to enlistment lived at 5275 Cote St. Cote Ste. Luc Road, in that city. His wife, Mrs. Margaret Hall Peters, lives at 1490 Fort St., Apt. 16, Montreal.

Educated at Mount Royal School and Montreal High School, Captain Peters was a stock broker in civilian life.

He enlisted with the rank of second lieutenant in October, 1940. Going overseas early in 1941, he was promoted to the rank of captain in March, 1942.

(30) August 1943.

Form No. 1

2544

Register No. D-6883

Nominal Roll No. D-143

H.Q. File No. 357-4-98

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
D901084	CAPT.	PETERS	ALFRED WILLIAM

Reason for Termination of Service:

1st Enlistment KILLED IN ACTION CARO ( )

2nd Enlistment CARO ( )

3rd Enlistment CARO ( )

TOTAL SERVICE

1st Enlistment	2nd Enlistment	3rd Enlistment
T.O.S. 4 OCT 40	T.O.S.	T.O.S.
S.O.S. 8 JAN 44 MD O/S	S.O.S. MD	S.O.S. MD
Total Days 1192	Total Days	Total Days

TOTAL SERVICE 1192 DAYS

	Total Service	Less Non-qualifying Service	Net Service
WESTERN HEMISPHERE	137		
OVERSEAS SERVICE	1055		
Totals	1192		
Add Non-qualifying Service			
TOTAL SERVICE			

EMBARKATION DETAILS:

1. TOS O/S 15 FEB 41
Date S.O.S. Overseas 8 JAN 44

2. Date S.O.S. Overseas

REMARKS:

KILLED IN ACTION 8 JAN 44

Computer's Signature C. Filon

Checker's Signature H. W. Cox

Date Computed 13 Mar 45

All Days Above Above Dates TOS and SOS. Above

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.

DETAILS OF NON-QUALIFYING SERVICE

WESTERN HEMISPHERE

Forfeits for	from	to	Eff.Date	Days	Total
				TOTAL	

OVERSEAS

T.O.S. .... T.O.S. .... T.O.S. ....

S.O.S. .... S.O.S. .... S.O.S. ....

				TOTAL	

5M-1-46 (8548)
H.Q. 1064-81-3

4
ARMY

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Alfred William PETERS
(CHRISTIAN NAMES) (SURNAME)

REGISTER NO. D-6883
FILE NO. 4 357-4-98
DATE 7-3-48
SERVICE NO. D-901084
FINAL RANK OR RATING Capt.
DATE OF DISCHARGE 8-1-44

PAYEE Mrs. Margaret PETERS,
ADDRESS 424 E., 52nd St., Apt. 8A.,
New York 22, N.Y. - U.S.A.

DATE OF TERMINATION OF OVERSEAS SERVICE 8-1-44

	$ ¢
A. TOTAL QUALIFYING SERVICE 1170 NO. OF DAYS 1192/30 EQUAL TO 39 COMPLETE PERIODS AT $7.50	292.50
B. QUALIFYING OVERSEAS SERVICE NO. OF DAYS 1055 LESS 22 INELIGIBLE DAYS, EQUAL TO 1033 DAYS @ 25c. PER DAY	258.25
	550.75
C. SUPPLEMENT FOR OVERSEAS SERVICE	
DAILY RATES AT DISCHARGE PAY $ 6.50 SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.70 ADDITIONAL PAY $ $ $ DEPENDENTS' ALLOWANCE 1/30 OF $ 67.20 $ 2.24 TOTAL $ 10.44 X7 = $ 73.08 NO. OF DAYS 1055/183 X$ 73.08	421.31
D. WAR SERVICE GRATUITY	972.06
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $ DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $ OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE Cleared With Foreign Exchange Control Board	972.06

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ 15.00 OF $ 972.06 = $ 216.98
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $ 67.20

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

PREPARED BY	CHECKED BY
KIM	

TREASURY	
CHECKED BY	DATE
G. Petitclerc	21/3/46

SERVICE REPRESENTATIVE

5M-1-46 (8548)
H.Q. 1064-81-3

4
ARMY

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Alfred William (CHRISTIAN NAMES) PETERS (SURNAME)

REGISTER NO. D-6883
FILE NO. 357-4-98
DATE 7-3-46
SERVICE NO. D-901084
FINAL RANK OR RATING Capt.
DATE OF DISCHARGE 8-1-44

PAYEE Mrs. Margaret H. PETERS,
ADDRESS 1490 Fort St., Apt. 16, Montreal - P.Q.

DATE OF TERMINATION OF OVERSEAS SERVICE 8-1-44

	$ ¢
A. TOTAL QUALIFYING SERVICE NO. OF DAYS 1192/30 EQUAL TO 39 COMPLETE PERIODS AT $7.50	292.50
B. QUALIFYING OVERSEAS SERVICE No. of Days 1055 LESS 22 INELIGIBLE DAYS, EQUAL TO 1033 DAYS @ 25c. PER DAY	258.25
	550.75
C. SUPPLEMENT FOR OVERSEAS SERVICE	
DAILY RATES AT DISCHARGE: PAY $6.50; SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $1.70; ADDITIONAL PAY $ $ $ $	
DEPENDENTS' ALLOWANCE 1/30 OF $67.20 $2.24; TOTAL $10.44 X7 = $73.08; NO. OF DAYS 1055/183 X$73.08	421.31
D. WAR SERVICE GRATUITY	972.06
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $; DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $; OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE	972.06

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $52.20 OF $972.06 = $755.08
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $67.20

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
G. Petitclerc	21/3/46

SERVICE REPRESENTATIVE

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY HG

Name PETERS (Surname) Alfred W. (Christian Names) No.

Capt. (Rank) C.A.O/S (Unit) 8-1-44 (Date of Death)

AMOUNT

L.P.C. $ 820.23

Date 11-2-46

Other Credits

Total 820.23
Prev.Dist. 730.83
This Dist. 89.40

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All		National Trust Co., Ltd., Executor of the will of Capt. Peters, Alfred W. (dec'd), 225 St. James St., MONTREAL, Que.	$89.40

P4. TO TREAS. 22-2-46, QM.

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	$89.40

CLASSIFIED BY D

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. Firth) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

40M—8-45 (7876)
H.Q.1772-45-27

N.R-243

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

Register No. D6883

File No. H.Q.357-4-98

WAR SERVICE GRANTS ACT 1944

Ottawa March 10th 1945

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

Service No. D901084

Name A.W. PETERS
Christian Name Surname

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

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

	Name	Amount
Names of persons in receipt of D.A. and amount of monthly award	Mrs Margaret H. Peters	$ 52.20
	Mrs Margaret Peters	15.00
		67.20
If no D.A. in issue, list names of persons in receipt of A.P., who may be classed as dependents under W.S.G. Act, 1944 and amount of monthly assignment.	Nil	$
Names of persons whom assigned pay was continued by supplementary award after death.	Nil	$
Amount of overpayment of dependents' allowance and/ or assigned pay deductible from the War Service Gratuity and name of person to whom paid.	Nil	

MAR 19 1945 194

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

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

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

194

for C.T.O.

3/45A MFM 510
40/P&S/254 (7012)

CANADIAN ACTIVE SERVICE FORCE

District.....

2ND AMENDED. **OVERSEAS**

Dispersal Area.....

LAST PAY CERTIFICATE

(All Ranks)

Regtl No. 2/486043 Rank and Name CAPT. ALFRED WILLIAM PETERS.

of (Unit) 48th Highlanders of Canada. on

(~~Transfer or~~ Discharge) ~~to~~ on 8th January 1944.

Reason Killed. Authority: Cons.Cas.List "A" 381 d/13.1.44.

The following is a statement of the account of the above-named from 1st January to 31st January 1944. the inclusive date of transfer or discharge.

Dr Particulars	Amount		Cr Particulars	Amount	
Balance Dr from last account			Balance Cr from last account		
First Monthly Payment			Regimental Pay 31 days @ $ 6.50	201	50
Casual Payments			CASH IN EFFECTS: J.V.1700, MFM. ~~Tradesmen's Pay days at $~~ 504/16 d/7.3.44 - 2/6d. & $2.00,	12	85
Payments on Transfer or Discharge			~~Additional Pay (Give Particulars)~~ 720 Lire & ~~days at $~~ 200 Lire		
Assigned Pay January 1944.	92	50	~~(O.R.135526 d/~~		
~~Regimental Charges~~ Refund in respect of Officers' Chits returned "Drawer Deceased":			~~Allowances (give particulars) days at $~~ 14.7.44 (£10.0.0)	44	70
~~Public Stoppages (give particulars)~~: Ch.76441, Chit 129903 d/10.2.44 (£5.0.0)	22	35	Proceeds from Sale of Effects:- Cheque drawn by Daphne M.L. Northen (O.R.147726 d/6.10.45 (£20.0.0)	89	40
SERVICE ESTATES FORM: Ch.16572, Military Clothing, Simpson (Piccadilly) Ltd., 202 Piccadilly, London, W. 1 (£6.6.0)	28	16	BALANCE OF BANK ACCOUNT: O.R. 132226 d/19.4.44 (£127.17.11)	571	69
To Balance Cr ~~Free~~ ~~Deferred~~ FREE	820	23	O.R.137067 d/14.9.44 (£9.12.10) (Balance of Account at Lloyds ~~By Balance Dr~~ Bank Ltd., 71 Lombard Street, London, E.C. 3)	43	10
Total	$ 963	24	Total	$ 963	24

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

Remarks

$200.00 5th Victory Loan cancelled, eff. November 1943, not charged to Pay Account previous to notification of Casualty.

Paper

23

820 23
730 83
89 40

Compiled by W.E. Johnston

Checked by Buchanan

Date 15th October, 1945.

Certified correct E.W. Wilkinson
for Chief Treasury Officer, Overseas

P
9 25-10

for E

BF

ESTATES BRANCH
DEC 4 1945
H. Q.
OTTAWA
NATIONAL DEFENCE

DEPARTMENT OF NATIONAL DEFENCE

INVENTORY

357-4-98

Date .....

The Estates Branch has received the following personal effects of:

NAME ..... Capt. A.W. PETERS .....

1	Pr Anklets (webb)
1	Pr Oxfords (brown)
1	Balaclava (Wool, ribbed)
1	Winter Melton Hat
1	New Testament
1	Book "600 Questions & Answers on Military Law
1	Book "K.R. & O Can.)"
2	Swagger sticks (1 Leather covered)
1	Suit Serge Dress Uniform complete W/Trousers, 6 brass pips, brass Canadas, collar badges, cloth patches, and buttons
1	Offrs. Greatcoat w/6 brass pips cloth Canadas, cloth patches & btns
1	Shirt (khaki, cotton)
9	Pr Socks
1	Leather Case (for binoculars)
1	Pr Overshoes
1	Pr shoe rubbers
	Personal papers
	Military Precis, & Pamphlets & Maps
2	Leather Folders (large)
1	Book (Army District Court-Martial)
3	Bridge Score Pads
1	Note Book, of Notes
1	Case (for spectacles)

2 Souvenir Booklets
4 Pictures in Frames size 5'X 3'6
1 Picture of Churchill in Frame"16 X 18"
1 Picture of the King in Frame"24 X 18"
1 Picture of the Queen in Frame "24 X 18"
1 Picture of sheep on the Downs "17 X 21"
1 Key for Trunk

Received the effects as listed

SIGNATURE ..Margaret Hall Peters

DATE REC'D ..November 27. 1945—

File No 35-7-4-98

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. _____ Name Peters, Alfred William

Rank on Discharge Capt Date of Discharge 8-1-44

Authority for Discharge or Retirement Deceased

Served in:

				Non-qualifying service
Canada	from 4-10-40	to 17-2-41		
	from	to		
United Kingdom	from 18-2-41	to 27-6-43		
	from	to		
Italy	from 28-6-43	to 8-1-44		K/A
Northwest Europe	from	to		
----------	from	to		
-- ------	from	to		

Eligible for award of:

1939 - 45 Star OK ✓

Italy Star OK ✓

~~France-Germany Star~~

Defence Medal OK ✓

War Medal OK ✓

Canadian Volunteer Service Medal with clasp } OK / bP

M

Verified by _____

Date AUG

Carded AUG 1

NO RIBBON DESPATCH

IIA 165

I, ALFRED WILLIAM PETLAS, of the City of Montreal, in the Province of Quebec, Stockbroker, do make, publish and declare this to be my Last Will and Testament in the manner following:-

ARTICLE ONE I revoke all former Wills and testamentary dispositions.

ARTICLE TWO I direct that all my just debts, funeral and testamentary expenses be paid as soon as possible after my death. All succession duty or estate tax, or taxes having a like effect, including particularly any fees if any payable under the Beneficiaries' Seizin Act of the Province of Quebec, as well as any taxes payable on any insurance or any gift or benefit given by me either in my lifetime or by survivorship by this my Will or any Codicil thereto, shall be paid out of the capital of the residue of my Estate without recourse against any legatee hereunder.

ARTICLE THREE As Executors under this my Will, I name and appoint my wife, Dame E. MARGARET HALL, HENRY TOSI and NATIONAL TRUST COMPANY LIMITED, a body corporate having a place of business at Montreal, and as such I extend their powers, seizin and authority beyond the year and day limited by law and until the entire accomplishment of my wishes hereunder.

(a) I relieve my Executors from the obligation of giving security, the laws of any country notwithstanding.

(b) My Executors may make an inventory of my Estate in such form and manner as they may think proper and may omit any formalities or procedure in regard thereto.

(c) I direct that in matters of dispute or controversy a majority of my Executors shall always govern, so long as one of said majority is my corporate Executor.

(d) National Trust Company Limited shall have the custody of all securities and documents of my Estate and shall

A.W.P.
R.N.
E.O.G.

keep the accounts thereof.

(e) National Trust Company Limited shall be entitled to reasonable remuneration for acting as such Executor (and as Trustee if and when the Trusts herein created become operative) under this my Will.

ARTICLE FOUR I give and bequeath to my wife, Dame E. MARGARET HALL, all my wearing apparel and personal effects, jewellery, books, pictures, plate, provisions and consumable stores, including any automobile or automobiles which I may own at the time of my death, and I also bequeath to her all my interest in the household furniture and equipment in our residence insofar as these may not be hers already under our Marriage Contract.

ARTICLE FIVE I give and bequeath the following amounts to the persons hereinafter named: to my mother, MRS. MARGARET PETERS, widow of the late Alfred John Peters, the sum of Five Hundred ($500.00) Dollars; and to my brother, CHARLES R. PETERS, the sum of ~~Five Hundred ($500.00)~~ Fifteen Hundred ($1,500.00) Dollars.

ARTICLE SIX And all the rest, residue and remainder of my property real and personal, movable and immovable of every sort, nature and description of which I may die possessed or in which I may have any interest or over which I may have the power of appointment or disposal, I give, devise and bequeath unto my said wife, Dame E. MARGARET HALL, in absolute ownership.

Should my said wife predecease me then I give and bequeath the whole of my property real and personal, movable and immovable of every sort, nature and description of which I may die possessed or in which I may have any interest or over which I may have the power of appointment or disposal to my said Executors, in trust, whom I hereby appoint my Trustees for the following purposes.

A.W.P.
R.N.
E.O.G.

To divide the residue of my Estate into equal shares so that there shall be one of such equal shares for each child of mine in the first degree then alive with representation in favour of the lawful issue of any predeceased child, in equal shares by roots, the share of each child to be dealt with as follows:-

My Trustees shall set aside one of such equal shares for each child of mine in the first degree then alive and until each child attains the age of twenty-one years the net revenue from each child's respective share or so much thereof as in the absolute discretion of my Trustees shall be necessary, shall be applied to the maintenance, support and education of such child (accumulating and adding to the capital of such share any revenue not so applied) and upon each child respectively attaining the age of twenty-one years the capital of its share shall be made over to each child in absolute ownership.

If any such child shall have died before receiving its share in the residue of my Estate, leaving lawful issue, then its share shall pass by representation to said issue in equal shares by roots. The share of any such issue shall be made over as each respectively attains the age of twenty-one years. If any such child shall have died before receiving its share in the residue of my Estate, without leaving lawful issue, then the share of the one so dying shall accrue to my then surviving children with representation in favour of the lawful issue of any child of mine who may then be dead in equal shares by roots.

My Trustees may in their absolute discretion encroach on the capital of the share of any child of mine (or issue taking by representation) in case of any extraordinary emergency imposing upon such child (or upon such issue) expenses beyond its ordinary resources. Neither such child (nor such issue) nor my Trustees will be obliged to account further for any sums which may be so used.

A.W.P.
R.N.
E.O.G.

Should there be no children, or lawful issue thereof, alive at the death of my said wife, I direct my Trustees to pay the sum of Forty ($40.00) Dollars monthly to my mother, MRS. MARGARET PETERS, during her lifetime or until such time as the capital of my Estate is fully exhausted by the said payments, it being understood that the said monthly payment of Forty ($40.00) Dollars shall be payable out of revenue and capital insofar as the revenue may be insufficient to pay such amount. Furthermore my Trustees may encroach on the capital of my Estate for the benefit of my said mother in case of any emergencies which may arise.

After the death of my said mother, the rest, residue and remainder of my Estate shall be made over as follows: as to two-thirds thereof to my said brother, CHARLES R. PETERS; and as to the one-third balance thereof to NANCY ROBIN WRIGHT, daughter of Noel Wright, of No. 5876 Somerled Avenue, Montreal.

ARTICLE SEVEN The bequests herein made to my legatees whether of capital or of revenue are intended as an alimentary provision and so long as the property bequeathed and the revenue therefrom remain in the possession and under the control of my Executors and Trustees the same shall be exempt from seizure or attachment for the debts of any beneficiary. Likewise such property and the revenue therefrom shall be incapable of being assigned or anticipated by any beneficiary without the written consent of my Executors and Trustees. This provision shall be without effect as regards the right hereinafter granted to my Executors and Trustees to hypothecate, pledge or otherwise affect voluntarily any of my said property and Estate.

A.W.P.
R.N.
E.O.G.

It is further declared that the benefits hereby conferred shall not fall into any community of property which may exist between any beneficiary hereunder and his or her consort, but shall remain the separate property of the beneficiary hereunder free from the control of his or her consort and shall be

paid to such beneficiary upon his or her own separate receipt.

ARTICLE EIGHT In addition to all other powers vested in Executors and Trustees by law or statute my Executors and Trustees shall have and may from time to time exercise the following powers:-

(a) To hold, retain, sell, alienate and otherwise dispose of any and all property real or personal, movable or immovable for such price or other consideration and upon such terms and conditions as they may deem proper; to receive the consideration price and to grant discharges therefor;

(b) To grant discharges without the consent of the residuary legatees for any sums paid to me during my lifetime and for which I had up to the time of my death not executed a release or acquittance;

(c) To release any property affected by hypothec or mortgage in whole or in part for such consideration or without consideration as they may deem proper; to exchange property for other property of a like or different nature for such consideration and on such conditions as they may deem advisable;

(d) To continue, discontinue or wind up any partnership, business, contract or transaction in which I may be interested at the time of my death;

(e) To participate in the amalgamation, reorganisation or recapitalization of any corporation or firm in which I may have any share or interest;

(f) To borrow any sums of money upon such terms as they may agree to or to advance their own moneys for the purpose of paying any debts or other obligations at any time due or incurred by my Estate and to pay or charge interest thereon;

(g) To mortgage, hypothecate or otherwise affect any of the property of my Estate movable or immovable, as security for any moneys so borrowed or advanced (notwithstanding

A.W.P.
R.N.
E.O.G.

the foregoing provisions making my property unseizable);

(h) To compromise, settle and adjust all claims and demands in favour of or against my Estate upon such terms as they may deem proper;

(i) To renew in their discretion from time to time any endorsements, guarantees or surety contracts made by me and in force at the time of my death;

(j) To determine what sums of money and property of my Estate are to be used as capital and what as revenue and to deal therewith accordingly;

(k) Nevertheless I authorise my Executors and Trustees to deal with any stock bonus, stock dividend, stock subscription rights or any other privileges of a similar nature accruing to any securities held by them for my Estate, as either revenue or capital as in their absolute discretion they may decide, and their decision in such matters shall not be open to question by any of the beneficiaries under this my Will;

(l) To invest and reinvest all sums of money requiring investment in such securities or other investments as they may think proper without being restricted to Trustees' securities or to those mentioned in Article 981-O of the Civil Code of Lower Canada, and from time to time to sell, alter and vary investments and without responsibility for any loss which may arise by reason of such investments, or from the retention of any of the original assets of my Estate;

(m) To employ and pay for professional or other assistance as they may deem requisite in the discharge of their duties; to act on the opinion or advice of or information obtained from any advocate, solicitor or notary, valuator, surveyor, broker, auctioneer or other expert and they shall not be responsible for any loss occasioned by so acting or not acting;

A.W.P.
R.N.
E.O.G.

(n) To make such expenditures as they shall deem advisable upon the repairing, improving or rebuilding of any property of my Estate and to charge such expenditure either to the capital or the revenue of the Estate as they may consider proper;

(o) To make partitions in whole or in part of any part of the residue of my Estate subject to such valuation and other formalities or even without valuation as they may think proper; to form the lots and to attribute them to the beneficiaries entitled thereto without the intervention or consent of such beneficiaries being required;

(p) To perform any act authorised herein without the necessity of obtaining any judicial authorisation even though some of the necessary parties to such acts are incapable persons;

(q) To appoint any notary and/or representative to act for them in connection with any particular undertaking or matter in connection with the management, realization or winding up of my Estate;

(r) To determine all questions of doubt which may arise in the course of their administration, realization, partition or winding up of my Estate and generally to perform all other acts of alienation, hypothecation and other acts of ownership to the same extent and to the same effect as if they were the absolute owner of the property of my Estate and their decision whether actually made in writing or implied from their acts shall be conclusive and binding on all beneficiaries.

A.W.P.
R.N.
E.O.G.

ARTICLE NINE I declare that I am domiciled in the Province of Quebec under the laws of which Province I desire that

my succession shall devolve.

IN WITNESS WHEREOF I have hereunto set my hand at Montreal, this 10th day of August in the year NINETEEN HUNDRED AND THIRTY-FIVE.

SIGNED AND ACKNOWLEDGED by the said ALFRED WILLIAM PETERS, as his Last Will and Testament in the presence of us, present together, who, at his request, in his presence and in the presence of each other at the same time have subscribed our names as witnesses.

(Sgd.) A. W. Peters

(Sgd.) R. Neill
Name

255 St. James St., Montreal.
Address

(Sgd.) E. O. Gordonsmith
Name

225 St. James St. W., Montreal
Address

For Completion and Return by

Form P. 64

Mrs. Margaret H. Peters,
Apt. 16, 1490 Fort St.
Montreal, Que.

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

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

and the following number quoted:—

H.Q. 357-4-98-FD.10

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

Feb. 12, 1944

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

PETERS, Alfred William, Capt.

C.A.

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

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

R. G. Phelan Capt.

RGP/CF

for (R.G.Phelan)Capt.
(L.M.Firth)Lt.Col.

Administrator of Estates.

M.F.W. 77
5M—1-44 (3371)
H.Q. 1772-39-972

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT: NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....		Mrs. Margaret Hall Peters		Apt. 16, 1490 Fort Street, Montreal, Que.
2	Children of the Deceased and dates of their Births.....		NONE		
3	Father of the Deceased.....		Deceased. ?	56	?
4	Mother of the Deceased.....		Mrs. Margaret Baldwin Peters		?
5	Brothers of the Deceased	Full Blood	Charles R. Peters ?		9 E. 45th Street, New York 17, N.Y.
		Half Blood	None		
6	Sisters of the Deceased	Full Blood	None ?		
		Half Blood	None		
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each.		Names and ages of their children (if any)		Address of their children
			— ?		

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Alfred William Peters
9	Date of his birth.	2nd September, 1902.
10	Place and date of his marriage.	Ste Anne de Bellevue, P.Q. 5 Sept 1935
11	Place and date of his parents' marriage.	——— 1899 ?

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Quebec (b) Hochelaga (c) (d) During lifetime
14	Nature of employment before enlistment.	Stock broker
15	State whether he owned the premises in which he lived, and, if so, where situated.	No
16	Name place where deceased stated he intended to make his permanent home.	Montreal, Que.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	Yes
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	Yes
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	None to my knowledge
20	Amount of War Savings Certificates held by deceased. Indicate where located.	None
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	None
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	See attached slip.
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	No other assets

OTHER PARTICULARS

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

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

(PLEASE TURN OVER)

DECLARATION

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

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

*.....widow.....of the deceased.

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

.....Margaret H. Peters..... {Signature of Informant

.....Apt. 16, 1490 Fort Street, Montreal, Que.....Address

CERTIFICATE

I hereby certify that to the best of my knowlege and belief.....Mrs. Margaret Hall

See above. .....Peters..... {Name of informant} is the.....widow.....of the Deceased above described, and I believe the above Declaration and the Statement of Relatives and of Particulars made by the Informant and signed in my presence to be complete and correct.

Dated at.....Montreal.....this.....23rd.....day of.....March.....19..44

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

.....

Commissioner of the Superior Court
District of Montreal

Qualification.....Commissioner of the Superior Court for the District of Montreal.

Address.....225 St. James Street West, Montreal, Que.....

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

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

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

ITEM No. 22.

Name of Company	Amount	Beneficiary
Sun Life Assurance Co.	$1,000.00	Margaret Baldwin, mother.
- do -	8,000.00	Executors
London Life Assurance Co.	5,000.00	Margaret Hall Peters, wife.
Canada Life Assurance Co.	5,000.00	Executors
Mutual Life Assurance Co.	5,000.00	Executors.

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: IN THE FIELD (ITALY)

Official name of civil municipality or township:

Place an X over the word which applies to this municipality or (redacted): City | Town | Village | Parish | Township

Street: No.: Hospital or Institution:

2. LENGTH OF STAY

(a) In hospital or institution	Years	Months	Days	(b) In municipality where death occurred	Years	Months	Days	(c) In Province	Years	Months	Days	(d) In Canada (if immigrant)	Years	Months	Days

3. NAME OF DECEASED (Block letters)

Surname: PETERS

Given names: Alfred William

4. RESIDENCE

Street: St. James St. No. 255

Official name of civil municipality or township: Montreal

Municipal county: Province: Quebec

5. SEX	6. NATIONALITY (Citizenship)	7. RACIAL ORIGIN	8. Single, Married, Widowed or Divorced (*Write the word*)
M			Married

9. If married give name of wife or husband of deceased

10. BIRTHPLACE (Province or Country): Quebec

11. DATE OF BIRTH: September (Month) 2nd (Day) 1902 (Year)

12. AGE OF DECEASED	Years	Months	Days	If less than one day old
	41			....hrs. or....min.

OCCUPATION

13. Trade, profession or kind of work, as **spinner, teamster, office clerk,** etc.: Stock Broker

14. Kind of industry or business, as **cotton-mill, lumbering, bank,** etc.:

15. Date deceased last worked at this occupation:

16. Total years spent in this occupation:

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER		
MOTHER (Maiden Name)		

19. Place of burial, cremation or removal: Italy

20. Date of burial....19....

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church

(b) Civil municipality of

(c) Municipal county

(d) Date....19.... (Month) (Day) (Year)

Do not write in this space

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: January (Month) 8th (Day) 19 44 (Year)

23. I HEREBY CERTIFY that I attended deceased from ....19.... to ....19....

and last saw h.... alive on ....19....

24. CAUSE OF DEATH

I

Immediate cause Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc.

(a) Killed in action.

due to

Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).

(b)

due to

(c)

II

Other morbid conditions (if important) contributing to death but **not causally related to immediate cause.**

III If a communicable disease is mentioned on this certificate, give

(a) Date of appearance....19....

(b) Duration of disease....days

25. If a woman, was there a puerperal condition?

26. Was there a surgical operation?....Date of....19....

State findings....Was there an autopsy?

27. If death was due to external causes (violence) fill in also the following:—

Accident, suicide or homicide....Date....19.... (State which)

Manner of injury.... (How sustained)

Nature of injury

Specify whether injury occurred in **industry, in home, or in public place**

Signed....**M.D.**

Address....**Date**....**19**....

28. Signature of person who fills in the form (curate, coroner, hospital authority, etc.)

This signature authorizes the collector to accept this form as authentic.

29. Name of clergyman in charge of Register of Civil Status in which registration of this burial was made.

(Voir l'autre côté pour le francais)

Director of Records, Dept. of National Defence.

CANADIAN NATIONAL TELEGRAPHS

DAY LETTER [ ]

NIGHT LETTER [ ]

CASUALTY (REPORT DELIVERY)

OTTAWA

TO:-

JANUARY 12 1944

MRS MARGARET HALL PETERS
1490 FORT ST APT 16
MONTREAL QUE

974 REGRET DEEPLY CAPTAIN ALFRED WILLIAM PETERS OFFICIALLY REPORTED KILLED IN ACTION EIGHTH JANUARY 1944 STOP FURTHER INFORMATION FOLLOWS WHEN RECEIVED

DIRECTOR OF RECORDS

PREPAID

OFFICER I/C RECORDS

M.F.M. 267
50M-11-42 (7151)
H.Q. 1772-39-1989

H.Q.357-4-98 (Records-C).

31st January, 1944.

Mrs. Margaret Hall Peters,
1490 Fort St., Apt. 16,
Montreal, Quebec.

Dear Madam:

I deeply regret to inform you that your husband, Captain Alfred William Peters, gave his life in the Service of his Country in the Mediterranean Theatre of War on the 8th day of January, 1944.

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

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

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

Adjutant-General
JAN 26 1944

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

ACB:ALM