D107035
WOOD
WALTER HERBE

Statement of the Service of No. D-107035 Rank Pte Sheet No. 2

Name Wood Walter H. H.

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
Military	Service	under existing standards"	Pte	5-10-40	V.C. of Canada	Westmount	D.O.89	5-10-40
Having	served 121	days and having been discharged under						
R.O. 31	(10) and	having satisfactorily shown himself						
provided	with Civilian	Clothing is granted the sum of						
$ 27.00			"	5-10-40	"	"	D.O.89	5-10-40

ORIGINAL
DUPLICATE
TRIPLICATE

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

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

Unit No.4 Vet. Home Guards Coy. CASF. Regimental Number D 107035

CANADIAN ACTIVE SERVICE FORCE

ATTESTATION PAPER

1. Surname Wood.
2. Christian Names Walter Herbert Harold
3. Present address 2010 Union Ave. Apt. 5 Mtl. Quebec, Canada.
4. Date of birth 21 August 1891
5. Place of birth Canada (Country) NEW BRUNSWICK (County or Province) ST JOHN (Town or Township)
6. Religion (state denomination) Church of England.
7. Trade or Calling Waiter.
8. Married, Widower or Single Married
9. Name of next of kin Mrs. Margaret Mary Wood.
10. Relationship Wife
11. Address of next of kin 2010 Union Ave. Apt. 5, Montreal, Que. Canada.
12. Have you served in any Naval, Military or Air Force? yes
13. If previous war service, state arm, force and regimental particulars Regt'l No.44066, 1st CDAC. CEF from August 1914 to May 1919.
14. Do you now belong to or have you served in the Active Militia of Canada? RCR, Halifax about 1906, 2yrs

(Give unit and date of attestation)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, WALTER HERBERT HAROLD WOOD do solemnly declare that the above particulars are true, and I hereby engage to serve in the Canadian Active Service Force so long as an emergency, i.e., war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization after said emergency ceases to exist, and in any event for a period of not less than one year, provided His Majesty should so require my services.

Date 7 June 1940. Walter H H Wood (Signature of recruit)

S. F. Hfane - Witness

OATH TO BE TAKEN BY MAN ON ATTESTATION

I, WALTER HERBERT HAROLD WOOD do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Walter H H Wood (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 Montreal, Que this 7th day of June 19 40

S. F. Hfane Major — Signature of Magistrate, Justice or Attesting Officer.

COMMANDING No. 4 DISTRICT DEPOT, C. A. S. F. — Office or Rank and Unit or appointment.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT

Record of Service of WOOD (Surname) WALTER HERBERT HAROLD (Christian Names) Regimental Number D- 107035

QUALIFICATIONS

Military: Q/Sgt. (1st DAC)

Business or Professional: no

Trade or Civil: Waiter, Master Baker

Technical: Dental Mechanic

Languages: English and little French

EDUCATIONAL QUALIFICATIONS

High School or Collegiate: 2 Yrs H S. (years completed)

Graduation or Matriculation: no / no (specify)

*College: no

*University: 1 year Kerr's Business College, St John N.B. 1903

7 years Public Schooling

*(Name of institution, courses or years completed, and degrees obtained to be shown).

All enlisted personnel will be taken on as Private soldiers, appointments and promotions to higher rank to be shown as provided in the space below.

Report		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		Joined on appointment						
7 Jun 40	D.R.O.	No. 4 DISTRICT DEPOT C.A.S.F.	Pte	7 June40	4 DD	Montreal	4 DD Pt II, 145	7 June 1940
19 Jun 40	4DD	Transferred to his Unit	"	19 Jun 40	4DD	"	4DD Pt.11 D.O.155	19 Jun40
20.6.40	J.O.S.	#4 Coy V.H.G.	"	20.6.40	V.H.G.	"	" " " 8	20.6.40
5-10-40	S.O.S.	Veterans Guard of Canada CASF.	Pte.	5-10-40	V.G. of C.	"	Pt.II D.O. 89	5-10-40
		Ro. 37 (10) Authority M 1 C-415						
		"Physically unfit for military service under existing standards"						

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

ARE YOU RECEIVING OR HAVE YOU IN THE PAST RECEIVED, DISABILITY OR COMPENSATION. IF SO GIVE DETAILS..... ~~XXX~~ $26.25

Yes. ~~$26.25~~ per month for bronchitis.

CERTIFICATE OF MEDICAL EXAMINATION

Name in full ..... Wood. Walter Herbert Harold ..... Date June 4/40 .....

Part 1. Information obtained from the recruit.

1. Age ... 48 .....

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	YES	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		

Walter H.H. Wood
(Signature of Recruit)

Examiner's remarks re above ..... Ears normal Lt Gerry.

Urine X Ray Normal.

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

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

2. Height ... 5 ... feet ... 8½ ... inches.

3. Weight ... 155 ... pounds.

4. Complexion ... Fair ... Eyes ... Blue ... Hair ... Auburn ...

5. Development ... Good ... (Good / Fair / Poor)

6. Chest measurement—Girth on full expansion ... 38 ... inches.
   Range of expansion ... 2½ ... inches.

7. Vision, right ... 20-60 ... left ... 20-80 ...

8. Hearing, right ... WV 20 ... left ... WV 20 ...

9. Condition of mouth and teeth ... Edentulous wears dentures.

10. The abnormalities (congenital and pathological) found on examination are as follows ...
Slight varicocele Bilateral Potent rings Large
Some cardiac enlargement. June 7/40 X Ray no enlargement
$26.25 per month for bronchitis. No bronchitis noted at examination

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 ... C ...

Special remarks when category lower than A .....

President — Lt Col — Member — Member — Capt.

ARE YOU RECEIVING OR HAVE YOU IN THE PAST RECEIVED, DISABILITY OR COMPENSATION ... No ... Yes. ~~$26.25~~ $26.25 per month for bronchitis.
IF SO GIVE DETAILS .....

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
27/8/40.	Vaccination Smallpox T.A.B ¼ cc Tetanus Toxoid — Capt Cohen H.		

Regtl. No. D-107035 Rank Pte Surname WOOD Christian Name WAL TER HERBERT HAROLD

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)

M.F.M. 7 A
10M—11-39 (3129)
H.Q. 1777-39-1653

CANADIAN FIELD FORCE

DISCHARGE CERTIFICATE

This is to Certify that No. D-107035 (Rank) Private

Name (in full) Wood, Walter Harbert Harold enlisted in

the No. 4 Company Veterans Guard of Canada, C.A.S.F.

CANADIAN FIELD FORCE at Montreal, P.Q. on the 7th

day of June 19 40.

He served in No: 4 Company, Veterans Guard of Canada C.A.S.F.

and is now discharged from the service by reason of being physically unfit for Military Service under existing Standards R.O. 37 (10)

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

Age 49 years 1 month

Height 5 feet 8¼ inches

Complexion Fair

Eyes Blue

Hair Auburn

Marks or Scars

Walter H H Wood
Signature of Soldier

VETERANS GUARD OF CANADA C.A.S.F.
— M. D. No. 4 —
Issuing Officer Lt. Col.
Officer Commanding

Date of Discharge

5th October 1940

Montreal, P.Q.

Rank

Date 5th October 19 40

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.)

M. F. D. 930 A
250M—4-40 (4606-7)
H.Q. 1772-39-1548

C.A.S.F. & R.C.A.F.

CANADA

LAST PAY CERTIFICATE

Regtl. No. D-107035 Rank and Name Pte. Wood Walter Herbert Harold

of ..... Company, etc. Veterans Guard of Canada CASF, M.D. 4 Regiment, etc., on .....

(Transfer, Posting or Discharge) ..... to ..... on October 4th 1940.
(Unit and Station)

Reason for discharge R.O.37 (10) Authority: MiG 358 D.O.89

On TRANSFER OF OFFICER or WARRANT OFFICER, Class I

Outfit alowance of $ N.A. has been paid by the Treasury Officer, Military District No. ..... or ..... Air Command.

REMARKS:

State (1) Date of appointment or enlistment 7-6-40

(2) If individual has dependents eligible for Dependents Allowance, has application been submitted? Yes

(3) Has assignment of pay been made? Yes If so, amount 20.00 effective date July 1940

(4) In the case of Officers in receipt of a Service (P. F.) Pension state monthly deduction $.....

The folowing is a statement of the account of the above named from Oct. 1st to Oct 5th 1940. the inclusive date of transfer, posting or discharge.

DR. PARTICULARS	AMOUNT		CR. PARTICULARS	AMOUNT	
Balance Dr. from last account			Balance Cr. from last account		
First Monthly Payment			Regimental Pay 5 days at 1$30	6	50
Casual Payments			Trademen's Pay ..... days at $		
Payment on Transfer, Posting or Discharge	3	17	Additional Pay (Give particulars) ..... days at $		
Assigned Pay	3	33			
Regimental Charges			Allowances (Give particulars) ..... days at $		
Public Stoppages (Give particulars):					
Clothing Allowance	27	00	Clothing Allowance D.O.89	27	00
To Balance Cr. (To be paid by new unit)			By Balance Dr. (To be deducted by new unit)		
Total	33	50	Total	33	50

I certify that the above is a true and correct statement of the account of the above named on transfer, posting or discharge.

Montreal, Que.
(Place)

October 4th, 1940
(Date)

Paymaster. Lieut.
Accounting Officer
Veterans Guard of Canada M.D. 4

405-W-1551
(Records-3)

Ottawa, Ontario, 6th February 6

Mr. Walter H. Wood,
649 Vitre Street, West,
Apartment 3,
Montreal 3, P.Q.

Dear Sir:-

With reference to your letter of November 28th., regarding the award of the Canadian Volunteer Service Medal and which was not replied to earlier due to the fact that your statement regarding pension was referred to the Canadian Pension Commission for verification, a further letter has been received from that Department in which it is distinctly stated that you are receiving pension at the 100% rate in respect of service in the Canadian Expeditionary Force for the disability resulting from your conditions of Bronchitis, Bilateral Inguinal Hernia and Angina with Heart Enlargement. Therefore, it is regretted you are not entitled to the award of the Canadian Volunteer Service Medal.

Yours truly,

(A.C. Chadwick) Major,
for Director of Records,
for Adjutant-General.

ACC:PS

R-405-W-1551
Records H.A.1

649 Vitre St West Apt 3
Montreal 3 Que 1/11/44

A.C. Chadwick Major
for Director of Records.
Adjutant-General.
Ottawa.

Director of Records
A. G. Branch.
NOV 3 1944
Nat. Defence Hqrs
Ottawa, Canada

Canadian Volunteer Service Medal

Dear Sir

In reply to your letter of 17/7/44 Re my application for Service Medal I feel that I have complied with the regulations. I quote Paragraph (c) Have been honourably discharged from the Canadian Army (active) As a direct result of injuries sustained on Duty:
If you would draw my file you will note that as a result of my Service I was posted to St Annes Military Hospital from 18-11-40 to 26-4-41, And on discharge was awarded 15 Per Cent increase of pension and later on another 10 Per Cent.
This was all brought on through exposure while doing duty in Wet weather and being transported in open trucks with no covers for protection. Having no issue of Great Coats or rubber ground sheets. And having to sleep with Wet Blankets And wet Mattresses in damp wet huts with no fires or heat of any kind provided

If proper provision had of been made when men enlisted to provide them with great coats rubber ground Sheets. And trucks had been privided with covers when they moved mens blankets and bedding on rainy days. Chances are I may still be in the Veteran Guards.

Whereas at present time I am now 100% disability.

Trusting the board will reconsider this application. And what I have gone through and suffered to earn it.

Awaiting your reply with confidence

I Remain

Yours Very Truly

Walter H. H. Wood.

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 Walter Herbert Harold WOOD
(CHRISTIAN NAMES) (SURNAME)

ADDRESS 649 Vitre St., W., Apt. # 3, MONTREAL 3, Que.

REGISTER NO. 30664
FILE NO. 405-W-1551
DATE 13-2-45
SERVICE NO. D-107035
FINAL RANK OR RATING Pte.
DATE OF DISCHARGE 5-10-40

DATE OF TERMINATION OF OVERSEAS SERVICE

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 121 / 30 EQUAL TO 4 COMPLETE PERIODS AT $7.50 — 120 — $ 30.00

B. QUALIFYING OVERSEAS SERVICE

No. of Days LESS INELIGIBLE DAYS, EQUAL TO DAYS @ 25c. PER DAY
SEE PAR. 2 OVERLEAF FOR EXPLANATION

SUB TOTAL 30.00

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY $
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $
ADDITIONAL PAY $
$
$
DEPENDENTS' ALLOWANCE 1/30 OF $ _____ $ _____
TOTAL $ X7 = $
NO. OF DAYS _____ / 183 X$

RECEIVED
FEB 14 1945
WAR SERVICE GRATUITY DIVISION, ARMY TREASURY

D. WAR SERVICE GRATUITY 30.00

E. DEDUCTIONS

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

F. AMOUNT PAYABLE

(THIS AMOUNT IS PAYABLE IN 1 MONTHLY INSTALMENTS OF $ 30.00 EACH) 30.00

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

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

G. MONTHLY INSTALMENT NOT TO EXCEED DAILY RATE OF PAY AND ALLOWANCES $ 3.32 X30 $ 99.60

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
FPD	

TREASURY	
CHECKED BY	DATE
J E Logan	15 2/45

SERVICE REPRESENTATIVE

ΔTR

St Annes Hospital Ward C 2
St Annes De Bellevue Que 11.28.45

A.C. Chadwick. Major
For Director of Records
for Adjutant-General.
Ottawa Ont.

405- W. 1551. "Records 3"
Canadian Volunteer Service Medal

Dear Sir

In reply to your letter of 9th Nov And that The Canadian Pension Commission has stated that the whole of my pension is in respect to my Canadian Expeditionary Force disability. I have three documents at home one of which Contradicts that statement very much. What I have reference to is the Statements that they issue to Pensioners when awards are made. Last year in November when my Pension was increased from 60 to 100 Per Cent They sent one two distinct Statements One for the Award of 60 Per Cent disability and Charged to

THE CANADIAN RED CROSS SOCIETY
(PLEASE USE BOTH SIDES)

when you refered to them for information. And I know myself that when the Pension Commission increased my Pension in 1941 from 35 to 50 Per Cent it was because my disability had increased due to aggravation caused during my service with Veteran Guards.

I dont expect you will have any trouble to verify these documents as they are always made out in duplicate and the Chief Treasury Officer

my Canadian Expeditionary Force Service
The Second one was for 40 Per Cent
and made out to D.107035 and Service
for 1940. Pension Checks accompanied
them one for $45.00 made out in my
regular Pension No 190.883 The other
for $30.00 made out for D.107035
which I eventually cashed
The following month after they had
committed themselves. They sent
me the third Statement which
Cancelled the $30.00 per month paid
for the Veteran Guard Service and
Combined the two on the Canadian
Expeditionary Force Pension
No. 190.883 with one Check $75.00
to cover the 100 Per cent disability
There is no doubt but that they
overlooked that incident

has the Cancelled Checks
I think when you have examined
those three papers that I have
refered to That they should
remove all the obstacles
that have been blocking my
Progress in the past-

I Beg to Remain
Yours Truly

D.107035 Walter. H. H. Wood.
4 Coy Veteran Guards of Canada

405-W-1551.

D.107035. Private Walter H.H. Wood
No 4 Coy Veteran Guards of Canada

Director, Records
A. G. Ernst
OCT 22 1945
Nat. Defence HQ
Ottawa - Canada

To Chairman of Awards Committee
Ottawa. Ont.

Re General Service Decoration

Dear Sir

Having served 105 Days with Veteran Guards From June 7th 1940 to Oct 6th 1940 and being discharged as medically unfit for service. Due to exposure to heavy rainstorms and not having proper clothing issued such as Great Coat and rubber ground sheet. I was admitted to St Annes Military Hospital where I was confined for a period of 160 Days. And my disability increased 15 per cent from 35 to 50. As I understand 183 days service is required in order to qualify for the medal. But if the 160 days which I had to suffer in St Annes Hospital were added I would have 265 days to my credit or 82 days over and above amount required.
In all fairness to myself I think the Board should consider time spent in Hospital as Active Service. As there is no doubt that my medical condition Chronic Bronchitis. Double inguinal Hernia was caused by Exposure and Devotion to Duty. Which is confirmed by my Medical History and increased disability.

we worked 18 hours out of 24 and we mounted Guards for weeks at a time with 2 hours on and 2 hours off.
With 105 days in the Army and the 160 days I was confined to Hospital through being a member of the Veteran Guards. I would like to have something to show for it.
With all the years Service I've had as a Soldier I have never seen anything to compare with the long tours of Guard Duty that was done with the Veteran Guards And I have seen Service with the Permanent Forces 3rd Special Service Batt R.C.R. at Halifax during the Boer War and later with the R.C.D.s Stanley Barracks Toronto And Overseas with 1st Can Div 1914 to 1919 And over 20 years in Various Militia Regts in Canada. Trusting the Board will grant this Award on its Merits

I Remain
Yours Very Truly
Walter H H Wood
649 Vitre St West Apt 3
Montreal 3 Que.

20/10/45.

My illness that sent me to St Annes Hospital was caused by being transported in an open truck through the City of Montreal in a very heavy rainstorm while on Duty for 2½ hours releiving several Guard Posts at the different Armories our clothing and our blankets got saturated wet and I had to sleep in wet blankets and next morning my clothes were still wet when I had to report for Duty again. This could have been avoided had the truck been provided with a Tarpaulin or if we had of been issued with our rubber ground Sheets and Great coats. The same thing occured at a later date when we moved from Rose De Lima Barracks to the huts in M.A.A.A. Grounds on another rainy day in open Trucks and had our clothes blankets and Straw Mattresses soaked through And had to sleep in Damp huts that had just been scrubbed with no stoves or means of drying them out in the months of September. Stoves should have been provided there. I Consider the General Service Medal was earned with lots of hard work and long hours lots of days

To be made out in duplicate

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

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

INSTRUCTIONS.

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

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

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

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(1) Name of Officer or Other Rank WOOD WALTER HERBERT HAROLD
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank D-107035 Private

(3) Unit No. 4 Veterans Home Guard Coy. CASF

(4) Are you married? Yes

(5) If married, state,

(*a*) Full name of your wife Mrs. Margaret Mary Wood

(*b*) Present postal address of wife 2010 Union Ave., Apt. 5, Montreal, Que., Canada.

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

(7) Are you a widower? No.

(8) Have you any children? Yes

If so, give number of boys and girls 1 Boy

Also their names and ages Walter Herbert James, 16 Years

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

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

Name 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 12 months immediately prior to 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 joining C.A.S.F. or R.C.A.F. (Special Reserve) N/A

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

(14) Is your mother alive? No.

If so, state name and address N/A

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

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

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

(17) Are you contributing to the support of any dependents, other than those shown above? No.
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) Have you any Brothers 16 years of age or under or Sisters 17 years of age or under solely supported and maintained by yourself as Bona Fide members of your household before your enlistment or appointment? No.

(19) Are you insured? Yes

If so, in what Company? Aetna Life Assurance Co.
(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.

Walter H. Wood
(Signature of officer or man)

Date 7 June 1940.

S. F. Hayne Major
Officer Commanding
COMMANDING No. 4 DISTRICT DEPOT, C. A. S. F.

Date 7 June 1940.

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

19-6-47 PD DJB

AWARDS—CANADIAN ARMY (ACTIVE) M C-11

SURNAME (IN BLOCK LETTERS) CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT	FILE No.
WOOD, Walter Herbert Harold	D-107035	Pte.	VG of C	405-W-1551

WAR SERVICE BADGE (CLASS) ELIGIBLE G.S.C. No. 068978

DATE DESPATCHED: Desp. July 17, 1944 Regn. No. 74446

ADDRESS: 649 Vitre St. West, Apt.3, Montreal, Que.

T. of S. Can. 49-5'8¼"-Blue-Auburn

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
CVSM ? Refused 17-7-44	
War Medal, 1939-45	2566- 10/11/49.

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO Mrs. Margaret Wood (widow)

ADDRESS ~~1121 Union Ave.~~, 522 Sherbrooke St. W., Apt 2, Montreal, Que. Jan 51 still a pensioner

(2) MEMORIAL CROSS

C-11

WIDOW Mrs. Margaret Wood

ADDRESS ~~649 Vitre Street West, Apt. 3, Montreal, Quebec~~ (same as above)

(3) MEMORIAL CROSS

Deceased

MOTHER

ADDRESS

MEMORIAL BAR

(1) DATE DESP 10-12-51

REGN No. 4300 ~~443~~

CANCELLED

(2) DESP. DEC 19 1947

REGN No. 424

(3)

K. 15332*

No D-107035 Rank Private Name WOOD, Walter Herbert H.

Unit V.G.of CANADA Date of death 19th June 1947

Died at Queen Mary Veterans' Hospital, Montreal, P.Q.

Cause Coronary thrombosis.

Death Wnss Due.CPC.d 22-11-47 HQ 405-W-1551 d

N/K Mrs. Margaret Wood Relationship Widow

Address Apt. 3, 649 Vitre St. W., Montreal, P.Q.

Remains buried in Mount Royal Cemetery
Montreal, P.Q.

Grave location Soldiers' Plot, Sect.G.944, Grave 592

CHK

CONTRACTOR'S ROLL FOR THIS SOLDIER'S GRAVE DESPATCHED APR 26 1948

10M-2-45 (M-4640)

243

AWARDS—CANADIAN ARMY (ACTIVE) M

100M—3-46 (8951)
H.Q. 1772-45-8

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
WOOD,	Walter Henry		Capt	FILE NO. C.6-W-48

WAR SERVICE BADGE (CLASS) ELIGIBLE G.S.C No. 775510

(1-7-46) #3 COY RCEME

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
C.V.S.M. & Clasp	
Defence Medal,	
War Medal, 1939-45	,
	43-34550

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

Read this whole Form and Instructions on the reverse before commencing to complete.

WILL

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

(1) I, WALTER HERBERT HAROLD WOOD (Name in Full), of the City (City, Town, Village, Township)

Address in civil life.

of Montreal, in the County/District of Hochelaga,

Province of Quebec, Waiter (Civil Occupation)

Regimental No. D-107035, Unit No.4 Vet. Home Gds., do hereby revoke all former Wills by me made and declare this to be my LAST WILL. CASF.

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

ONHOW

(2) I GIVE, DEVISE AND BEQUEATH unto "My wife, Mrs. Margaret Mary Wood, residing 2010 Union Avenue, Apt. 5, Montreal, Quebec, Canada, all my estate."

Relationship, names and address of residuary beneficiaries.

ONHOW.

(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 7th day of June

19 40.

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.

Walter H H Wood (Signature of soldier)

First witness sign here.

(5) Signature W. G. Black Pte.

Civil Address 254 Cooper St., Ottawa, Ont.

Civil Occupation Musician.

Second witness sign here.

Signature Douglas K. Bowie Pte.

Civil Address Wm C.A. Drummond St., Montreal, Que.

Civil Occupation Accountant.

(Witnesses are not to be beneficiaries.)

[OVER]