D125267
ENGLAND
DAVID FREDE

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2-4-45

AWARDS—CANADIAN ARMY (ACTIVE) 1932 M

FEB.

500M—1-44 (7467)
H.Q. 1772-45-8

SURNAME (IN BLOCK LETTERS) / CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
ENGLAND, David Frederick	D.125267	Tpr.	27th Armd.Regt.

FILE NO. 405-E-1504

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
France-Germany Star	
Defence Medal	
War Medal	
CVSM & Clasp	
	9119 20-1-50

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO: Mr. Frank ENGLAND (FATHER)

ADDRESS: 10 St. ~~Cyril~~ Cyrille Ave., OUTREMOUNT, Que. Montreal 8

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER: Mrs. Florence England (ENGLISH)

1932 ADDRESS: 10 St.Cyril Ave., Outremount, Que., (MFM5.)

MEMORIAL (1) R

DATE DESP.....

REGN. NO 4678

(2)

(3)

DESP. MAY 12 1945

REGN No. 18746

PERIOD

From 1 Feb 44 19 To 28 Feb 45 19

C

MILITIA BOOK M. 1

PART II
40/P & S/279 (3866)

CANADIAN ARMY

Soldier's Pay Book

(For use on Active Service)

Regt'l Number D-125267

Surname (Capitals) ENGLAND

Christian Names in full... David Frederick

27th CDN. ARMD. REGT. (S[illegible]. Fus. R.)

PARTICULARS OF SOLDIER

Regimental Number D 125267

Name in full (Surname first) England
David Frederick

Date of Attestation 7 November 1941

State whether married, widower or single Single

If married after enlistment, state date of marriage
N/A

If married, give full postal address of wife, or if widower, name and address of guardian of children, if any, or if single, name and address of next-of-kin, stating relationship to the soldier (see page 1—para 6).

Mr Frank England "Father"
10 St Cyril Ave., Outremont Que

PARTICULARS OF ASSIGNED PAY, ETC

Assignment of pay:

(a) $ 23.00 — Effective date: 1-11-43

(b) $ 8.40 — Effective date: Nov 41

(c) $

(d) $

Name, address and relationship of assignee:

(a) Mr. Frank England "Father"
10 St Cyril Ave., Outremont Que

(b) Victory Loan

(c)

(d)

Dependents allowance, payable to: (state relationship)

CASUALTIES AFFECTING DAILY RATE OF PAY AND ALLOWANCES

Date effective	Particulars	Part II Order	Signature of Paymaster
1-1-43	Trooper	13/43	From Grey Book

4

DAILY RATE OF PAY

Rate of Pay in Issue		Date Effective	Signature of Paymaster
$	c		
1	50	1-1-43	From Previous Book

5

Soldier's Signature 07 England

Book opens on 1 Feb 44 Balance Cr or Dr $ As below

Date	Particulars	Credits	Cash Payments and Other Charges		Assigned Pay
			Local Currency	Canad'n Currency	
1944	Bals Br't Forward	5 02			
1 Feb	Feb Pay	43 50			23 00
14 Feb	AR. 271		1-10-0	6 71	
28 Feb	AR. 285		2-1-0	9 16	
28 Feb	M.F.M. 513			7 33	
1 Mar.	Mar Pay D.O. 11 144	46 50			23 00
6 Mar	5 days for			7 50	
14 Mar	AR 296		1.0.0	4 47	
21 Mar	M.F.M. 513			04	
21 Mar	AR. 303		2-0-0	8 94	
10 April	April Pay	45 00			23 00
12 April	AR. 16		2-0-0	8 94	
	Totals	129 98		53 09	69 00

Balances only will be carried forward

Paymaster's Signature Quarter Capt

Deferred Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	
	5 02		Quarter
		15 48	Quarter
		8 77	Quarter
	39		Quarter
	7 72		Quarter
		15 78	Quarter
		8 28	Quarter
		3 81	Quarter
		3 77	Quarter
	5 17		Quarter
		16 83	Quarter
		7 89	Quarter

Date	Particulars	Credits		Cash Payments and Other Charges: Local Currency	Cash Payments and Other Charges: Canad'n Currency		Assigned Pay	
1944	Bals Br't Forward	7	89					
12 April	D.O. 16/44 13 days Lorf				19	50		
25 April	D.O. 16/44 9 days R.A.	6	03					
28 April	AR. 49			1-0-0	4	47		
3 May	May Pay.	46	50				23	00
12 May	AR 61			1-0-0	4	47		
23 May	R.A. adj.		68					
26 May	June Pay	45	00				23	00
26 May	AR. 69			2-0-0	8	94		
31/5	42			1/-/-	4	47		
12 June	AR. 85			1-10.0	6	71		
21 ✓	June 513					04		
26 ✓	AR 17			2-10-0	11	18		
July	C	46	50				23	—
	Totals	152	60		59	78	69	—

Balances only will be carried forward

Deferred Pay		BALANCE: Debit		BALANCE: Credit		Signature of Paymaster or Officer Making Award
				7	89	[illegible]
		11	61			[illegible]
		5	58			[illegible]
		10	05			[illegible]
				13	45	[illegible]
				8	98	[illegible]
				9	66	[illegible]
				31	66	[illegible]
				22	72	[illegible]
				18	22	[illegible]
				11	54	[illegible]
				11	56	[illegible]
					32	[illegible]
				23	82	[illegible]

Nov 31.40

Date	Particulars	Credits	Cash Payments and Other Charges: Local Currency	Cash Payments and Other Charges: Canad'n Currency	Assigned Pay
July	Bals Br't Forward	23 82			
7	[illegible] 513			1 55	
14	AR 27		2 –	8 94	
17JUL. AR30			F. 200	4.47	
Aug	Pay	46 50			23 –
26	AR 77		F 200	4 47	
[illegible]t	Pay	45 –			23 –
12	AR. 85		200 F	4 47	
6/10/44	AR 90		Belg 800 F	20 26	
Oct	Pay	46 50			23
19	AR 21		Belg 700 1000	25 33	
Nov	PA-1	45 –			31 40
1	AR 23		30 gldrs	12 57	
17	AR 25		40 gldrs	16 76	
	Totals	206 82		98 82	100 40

Balances only will be carried forward

Deferred Pay	BALANCE: Debit	BALANCE: Credit	Signature of Paymaster or Officer Making Award
		23 82	[illegible]
		22 27	[illegible]
		13 33	[illegible]
		8 86	[illegible]
		32.36	Jas R Holmes
		27.89	Jas R Holmes
		49.89	Jas R Holmes
		45 42	Jas R Holmes
		25 16	[illegible]
		48 66	[illegible]
		23 33	[illegible]
		36 93	[illegible]
		24 36	[illegible]
		7 60	[illegible]

Date	Particulars	Credits	Cash Payments and Other Charges: Local Currency	Cash Payments and Other Charges: Canad'n Currency	Assigned Pay
Nov 44	Bals Br't Forward	7 60	15 JAN 1945 9	8 1/2	6
Dec	PAY	46 50			31 40
3	AR 28		20 Sdg	8 38	
19	" 30		300 Sdg ~~20~~ "	12 67 ~~12 57~~	
Jan	Pay	46 50			31 40
13	AR 37		600 Sdg	15 20	
14	Feb PAY	42 —			31 40
Mar 13	AR 46		10 G		
		142 60		36 25	94 20
	Totals				

Balances only will be carried forward

Deferred Pay	BALANCE: Debit	BALANCE: Credit	Signature of Paymaster or Officer Making Award
		7 60	A
		22 70	[illegible]
		14 32	[illegible]
		1 ~~7~~ 6 5	[illegible]
		16 ~~7~~ 7 5	[illegible]
		1 55	[illegible]
		12 15	[illegible]

PTO

Balance Transferred to new Pay Book.

Date	Particulars	Credits	Cash Payments and Other Charges — Local Currency	Cash Payments and Other Charges — Canad'n Currency	Assigned Pay
	Bals 'Br't Forward				
Mch 45	Pay	46 50	✓		31 40 ✓
Apr 45	Pay	45 00	✓		31 40 ✓
21 Mch 45	AR 46			4 19 ✓	
T.P. 16 Mch		11 50	✓		
	Totals				

Balances only will be carried forward

Deferred Pay	BALANCE — Debit	BALANCE — Credit	Signature of Paymaster or Officer Making Award
	✓	12 18	Adjusted after
	✓	29 28	Treasury Audit
	✓	40 85	Adjusted after
	✓	36 66	Treasury Audit
	✓	48 16	Adjusted after Treasury Audit
	Bal	26	Sept. 45

If you do not wish to draw all pay due
PLACE THE AMOUNT DESIRED
opposite date of pay day.

Feb 15	£2-0-0	Aug 15	
Feb 29	FULL PAY	Aug 31	
Mar 15	£1-0-0	Sep 15	
Mar 31		Sep 30	
Apr 15	£3-0-0	Oct 15	500 F.
Apr 30	All	Oct 31	30 gls.
May 15	£2-0-0	Nov 15	30 gls.
May 31		Nov 30	15 gls.
Jun 15	Full pay	Dec 15	Full Pay
Jun 30	£2-10-0	Dec 31	
Jul 15		Jan 15	
Jul 31		Jan 31	

ORIGINAL
DUPLICATE
TRIPLICATE

2 of 4

Bruning

M.F.M. 2
A.F.B. 271
200M—3-41 (9720)
H.Q. 1772-39-1645

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

Unit No. 4 D.D. (T.S.) C.A. Regimental Number D-125267

ACTIVE FORMATIONS AND UNITS OF THE CANADIAN ARMY

ATTESTATION PAPER

1. Surname ENGLAND
2. Christian Names DAVID FREDERICK
3. Present address 10 St.Cyril.,Outremont.,Que.,Canada
4. Date of birth 21 July 1923
5. Place of birth Canada (Country) Quebec (County or Province) Montreal (Town or Township)
6. Religion (state denomination) Salvation Army
7. Trade or Calling Checker
8. Married, Widower or Single Single
9. Name of next of kin Mr. Frank England
10. Relationship Father
11. Address of next of kin 10 St.Cyril,Outremont.,Que.,Canada
12. Do you belong to, or have you served in a Reserve Formation or Unit of The Canadian Army? YES
D-53497-C66(RF)From 21 May 1941 to date (If Yes, Give Unit and Dates of Service)
13. Have you served in (*a*) an Active Formation or Unit of The Canadian Army? NO (Yes or No)
(If Yes, Give Regimental No. and Unit) (*b*) Any other Naval, Military, or Air Force? NO (Yes or No) (If Yes, specify Unit and Period of Service)
14. Did you serve during the Great War 1914-1918? NO
(If Yes, specify Regimental No., Unit and Dates of Service)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, David Frederick ENGLAND, do solemnly declare that the above particulars are true, and I hereby engage to serve in any Active Formation or Unit of The Canadian Army 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 7th, November, 1941 David Frederick England (Signature of recruit)

Witness G. T. Lanagan Sgt

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

David Frederick England (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 South this 7th day of November 19 41

[signature] Signature of Magistrate, Justice or Attesting Officer.

NO 4 DISTRICT DEPOT, A.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 ENGLAND (Surname) David FREDERICK (Christian Names) Regimental Number D-125267

QUALIFICATIONS		EDUCATIONAL QUALIFICATIONS			
Military	Nil	High School or Collegiate	No (years completed)	Graduation or Matriculation	No (specify)
Business or Professional	Nil				
Trade or Civil	Checker	*College	No		
Technical	Nil	*University	No		
Languages	English		7 yrs.		

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

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

Report: Date	Report: From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Canadian Army. (Active)	Rank Shown	Effective Date	Unit	Place	Authority: Part II D.O. No. Cas. List, etc.	Authority: Dated
7.11.41	D.R.O.	Joined on appointment No. 4 District Depot. C.A.	Pte	7.11.41	4 DD	Mtl.Sth.	4 DD Pt II-267	7.11.41.
11-11-41	4DD	PROCEEDED ON COMMAND AND ATTACHED FOR ALL PURPOSES TO CA(B)TC 41 HUNTINGDON, QUE.	"	12-11-41	"	" "	" " " 271	12-11-41
14-11-41	TC 41	ATTACHED FOR ALL PURPOSES TC 41	"	13-11-41	TC 41	Htingdon	TC 41 Pt. II-219	14-11-41
3 2 42	TC 1	S.O.S. ON TRANS TO A T C A-12 FARNHAM	"	4.2.42	TC 41	HUNT'N	PT II 17A	4 2 42
5-2-42	ATCA12	Attached for all purposes on reposting from C.A.(B)T.C. No.41 Huntingdon, Que.	m"	5-2-42	ATC A12	Farnham	Pt. 11 No.A-29	5-2-42
1-5-42	"	Transferred at his own request to the 22nd Cdn. Armd. Regt., (C.G.G.) C.A.	GDSM	14-4-42	"	"	" " "A-90	27-4-42
1-5-42	"	S.O.S. on transfer to Unit, 22nd C.A.R. (C.G.G.) C.A., Debert, N.S.	"	29-4-42	"	"	" " " A-92	29-4-42
5 May 42	ATCA12	T.O.S. 22 Cdn. Armd. Regt. (C.G.G.)	"	30 Apr 42	22 C.A.R.	Debert	Part 2, No. 57	4 May 42
18 May 42		Furlough (R.O. 699) 18-31 May 42	"	18 May 42	"	"	" No. 66	16 May 42
16 Jun 42		Qualified Driver I.C.-(W) Class III	"	6 Jun 42	"	"	" No. 84	12 Jun 42
10 Sep 42		Special Leave (R.O. 699-4a) 7 to 11 Sep 42	"	7 Sep 42	"	"	" No. 134	7 Sep 42.
3 Oct 42		S.O.S. Con Army Canada	"	25-9-42	"	At Sea	" No. 1	30 Sep 42
"		S.O.S. Con Army Overseas	"	26.9.42	"	"	" No. 1	"
16 Oct 42		Awarded 10 dys. forfts of pay for conduct to the prejudice of good order etc.	"	30 Sep 42	"	Aldershot	" No. 2	4 Oct 42.
21 Oct 42		Granted Priv. Leave (P-1) 16 to 23 Oct 42 (7 dys)	"	23 Oct 42	"	"	" No. 3	20 Oct 42.

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

CERTIFICATE OF MEDICAL EXAMINATION

Name in full ENGLAND DAVID FREDERICK Place MTL.

Place Mtl. Date Nov. 6th. 1941.

Part 1. Information obtained from the recruit.

1. Age 18-4 2. Have you ever suffered from any of the following diseases?

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

David Frederick England
Signature of Applicant

Part 2. Information obtained by medical examination. **THE RECRUIT MUST BE STRIPPED**

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

Injury 2nd. toe left foot.

2. Height 5 feet 8 inches. 3. Weight 130 pounds.

4. Complexion med. Eyes brown Hair d. brown 5. Development good (Good / Fair / Poor)

URINE 53/25 N NOV 6 1941

6. Chest measurement—Girth on full expansion 32½ inches.
Range of expansion 2½ inches.

X-RAY 97237 N

7. Vision, right 20/20 left 20/20 8. Hearing, right cv 20 left cv 20
With Glasses— right left

9. Condition of mouth and teeth Few caries.

10. The abnormalities (congenital and pathological) found on examination are as follows

COLOR VISION ISHIHARA (CN)
DEVIATED SEPTUM.
EAR DRUMS NORMAL AND REFL.
DR. H. MICHAUD.
Slight varicocele left testicle. No complaints. No disability. Hammar toe 2nd. left toe. No complaints.

Part 3. We, the examiners, find no evidence of the diseases mentioned in Question 2, Part 1, except as reported in the remarks. We have examined the Recruit in accordance with the pamphlet "Physical Standards and Instructions for the medical examination of recruits" and he is found fit for Category "A"
Special remarks when category lower than A

H. AUBRY MAJOR — President
G. R. BRAULT M.D. — Member
R. BOUCHER M.D. — Member

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
NOV 7 '41	TAB-T C.J. Charpentier Capt		
DEC 18 1941	3 A & M Maisonneuve Lt		
4 MAR '42	Attached Lt		
NOV 7 '41	VDCC C.J.C.		
	RE-EXAMINED cat A		
30 MAR '42	Attached Lt		
25-1-42	Cat A Lt		
10/6/42	Schick neg. N.S. Rhinitis Capt		
19-6-42	TABT ½cc LMO Johnson		

Regtl. No. D-125267 Rank Private Surname ENGLAND Christian Name David Frederick

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				

CONFIDENTIAL

42 Previous Experience in Armed Forces

ARM or CORPS	Type (C.E.F., N.P., etc.)	Years	Highest Rank	Last Discharge (Yr.)	Special Training Received
Inf.	N.P.A.P. (CGG)	9 mths.	Cdsm.	6 Nov 1941.	General. L

43 CURRENT SERVICE: Date Enlisted 7/11/41 Place Enlisted Montreal P.Q. Que.

Date From—to	Country	Corps	Unit and Sub-unit	Rank 44	Principal Duty	Performance
7-11-41/30-4-42	CAN.	C.A.C.	#4 S.D. (T.S.)	Pte	TRAINING	NORMAL.
30-4-42/26-9-42	CAN	C.A.C.	22 CAR (C.G.G.)	〃	— D&M School (T)	〃
26-9-42	U.K.	C.A.C.	22 CAR. (C.G.G.)	〃	— D&M school (W)	〃
				A		

45 COURSES ATTENDED

COURSES ATTENDED	PLACE	Date: From—to	Qualified as	Rating

CARDS PUNCHED

CARDS PUNCHED

CONFIDENTIAL Hq 4 C a B. Deceased

Soldiers Qualification Card

Regt'l. Number	Last Name	First Name	Middle Names
D125267 2	ENGLAND	DAVID	FRANK.

Unit ~~22 C.A.R. (C.G.G.) Fld~~

CODED 131.

2 Nationality 08 Can. | By Birth ✓ | By Naturalization | Country of Birth CANADA.

3 1 Racial Origin ENGLISH (BRITISH) 4 1 Language spoken in home: French ___ Other ___ English ✓

5 Age 19 4/12 1923 6 Height 5' 7½" 7 Weight 142. 8 Silhouette 1 2 3 4

Eyes 9 1 Colour of BLUE. 10 1 Acuity ✓ 1 2 3 10 Glasses ___ 11 Colour Vision 1 2 3 4

12 Hearing: Acuity ✓ 1 2 3 13 Speech Defects ___

14 Handedness ✓ R L A 15 1 Med. Category A.

Cause ___

Attitude to own health NORMAL To Medical attention NORMAL.

Health History NONE.

16 Education Level: Illiterate ___ E 6 (14). S ___ (Grade completed)

Conduct during school life Played hockey several times. Did not start school until 8 yrs. old.

17 University or 18 Professional	Course Taken	Years Completed	Degree

19 Post Graduate	Course	From—To	Degree

Specialized Training:

20 1. ___ (Course) At ___ From—To ___ Completed ___

21 2. ___ (Course) At ___ From—To ___ Completed ___

22 3. ___ (Course) At ___ From—To ___ Completed ___

Other trades papers, Diplomas Certificates or Qualifications ___

23 Languages: Spoken fluently English. Written well English.

02

24 Main occupation: Description CHECKER, - General labourer. Estimate of skill ___

1736

Duration (from—to) 1941 - Sept - Nov. Weekly Wage $18.00

Employer's Name and Address KRAFT CHEESE LTD 40 BATES RD, MONTREAL, QUE

50 "M" Test L

Test	Score	SM	
1	19		S. Tot. 50
2	16		SM
3	15		
4	2		S. Tot. 14
5	12		SM
6	5		S. Tot. 42
7	14		SM
8	23		
Tot.	106	SM	Grade

9 M. Test. 12/1/42.

51 OTHER MENTAL

Test ___ Score ___ L. Grade ___ Date ___

52 MECHANICAL

Test ___ Score ___ Grade ___ Date ___

52 CLERICAL APT.

Test ___ Score ___ Grade ___ Date ___

53 TRADE TEST

1 Score ___ G. ___ Date ___
2 Score ___ G. ___ Date ___
3 Score ___ G. ___ Date ___
4 Score ___ G. ___ Date ___

54 OTHER

Test ___ Score ___ Grade ___ Date ___

1 Corps C.A.C.

25 Second Most Important Occupation: Description: General labourer. Estimate of skill P

3544

Duration (from—to) 1940 - 6 months. Weekly Wage $22

Employer's Name and Address Abbotts Chemical Factory. Montreal.

26 Third Most Important Occupation: Grocery store clerk & Gen labourer Estimate of skill Fair.

7578

Duration (from—to) in Belt Factory. Weekly Wage $10

Employer's Name and Address ___

Trade Union or Professional Society ___

Vehicles: 27 4 Heavy Truck W.R. 28 4 Light Truck W.R. 29 4 Auto W.R. 30 1 Motorcycle D

31 Farm Tractor ___ 32 4 Tracked Vehicle W.R. 33 Power Launch ___ 34 Aeroplane ___

35 Accident Prone No.

Farming Experience: Wide ___ Limited ✓

District MORIN HEIGHTS, QUE Type MIXED.

Job promised after discharge No. By whom? Name ___

Address ___

Other provision for post-discharge occupation ___ Type of work desired MECHANIC

Occupational history: Ambitious ___ Accidental ✓ Stable ___ Erratic ✓

36 Material Status: M ___ S ✓ W ___ D ___ Sep. ___

2 Marital Problems ___ (Remarks)

Age of wife ___ Wife's attitude to Service ___ Wife's Health ___

37 No. of Children ___ No. Brothers 4 No. Sisters 5

Position in family YOUNGEST. 38 No. Dependents 0

Relationship of Dependents ___

Status of home in childhood POOR type (?)

39 Hobbies: Photography M ___ S ___ Radio ___ Engines ✓

4 Mechanics ___ Other Stamps collection. YMCA in spare time.

9 40 Sports: (1) SKATING. (2) HUNTING (3) FISHING.

W J Team Games and Position (1) Hockey (R) Wing

F (2) Rugby. Back Field. (3) ___

1 2 41 Ability to Entertain: Music: String ✓ Guitar. Brass ___

1 Woodwind Mouthorgan Percussion ___ Piano ___ Vocal ___

3 Theatrical ___ Other ___

Statement of the Service of No. D/125267 Rank Sheet No.

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

Name ENGLAND D.F.

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
		Leave granted (P.) F.T.W + M.A. to 29 Oct 42	Gdsm	20 Oct 42	22 CAR	U.K.	5	20 Oct 42
		Disembarked in U.K.	a	7 Oct 42	22 CAR	U.K.	1	13 Nov 42
SOS		S.O.S to 3 CACRU on adm. 8 Gen Hosp	Gdsm	3 Jan 43	22 AR	UK	1	8 Jan 43
	TOS	TOS from 22 armd Regt	Gdsm	4 Jan 43	3 CACRU	UK	5	7 Jan 43
		Disch. from 8 Gen Hosp.	Gdsm	11 Jan 43	3 CACRU	UK	10 CL	13 Jan 43
SOS		SOS to 22 Colr Armd Regt	Gdsm	11 Feb 43	3 CACRU	UK.	36	12 Feb 43.
	DO11 3 Mar 43 TOS	T.O.S. from 3 CACRU	Gdsm	12 11 Feb 43	22 A.R.	UK	8	20 Feb 43
S.O.S.		SOS to HQ 4 CAB	Gdsm	24 Feb 43	22 A.R.	UK	10	6 Mar 43
DO14 30 Mar 43	T.O.S.	T.O.S. from 22 Armd. Regt.	TPR	25 24 Feb 43	HQ 4 CAB	UK	9	2 Mar 43
		Granted daily regt'l rate of pay 1.50	Tpr.	1 Jan. 43	H.Q. 4 CAB	UK	13	30 Mar. 43.
		AA 40 Awd 3 days F.P. 3 ofs 3 days pay	Tpr	6 Nov 43	HQ 4 CAB	UK	49	20 Nov 43.
	C104.	AA. 15(1) AWL 1½ day F.P. Fof. 1½ day pay.	Tpr.	3 Jan 44	HQ 4 CAB	UK.	2.	14 Jan 44
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
C57.		6 h. Case No 8. AH to 1 Spec: Div: Sch: FAP.	Tpr	15 Feb 44.	HQ 4 CAB.	UK.	9.	25 Feb 44.
C57.		Rtd from Case No 8. C/AH to 1 Spec. Div Sch. FAP.	Tpr.	19 Feb 44.	HQ 4 CAB.	UK.	10.	3 Mar 44.
C57		F.W.L. AA Sec 15(1) awarded. 5 dys. F.P. Fof 5 dys. pay.	Tpr.	29 Feb 44.	HQ 4 CAB.	UK.	11.	10 Mar 44.
C119		SOS to Reinforcement Increment	TRR.	10 April 44	HQ 4 CAB	UK	16	14 April 44

Statement of the Service of No. D125264 Rank ..... Sheet No. .....

Name England David F

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

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
	c119	awarded 12 dys F.P. 4 forf 13 dys pay AA 15(1)	TPR	8 Apr 44	HQ 4AB.	UK	16	14 Apr. 44
	c119	TOS from HQ 4 Cdn. Armd. BDE	TPR	11 Apr 44	HQ 4AB	UK	16	14 Apr 44
SOS.		SOS to X 4 list CAC. "C"	Tpr.	16 June 44	HQ 4CAB.	21 A Gp.	26.	24 June 44.
m/06		Embarked at.....U.K.....on..17 Jul 44			See X list CAC	21 A Gp	28	28 Jul 44
	ex	Disembarked at..Francon..18..Jul 44	Tpr					
ex SOS		SOS X 4 list (CSqn 25 CADR to 27 Cdn Armd Regt	Tpr	8 Oct 44	X L CAC(C)	21 AG	65	18 Oct 44
Ch	TOS	TOS from X 4 L CAC(C) CSqn 25 CADR	Tpr	9 Oct 44	27 Armd R	21 AG	64	19 Oct 44
Ch SOS		SOS to X 4 List CAC (C)	Tpr	20 Dec 44	27 Armd R	21 AG	84	28 Dec 44
Ch	TOS	TOS from 27 Armd R	Tpr	21 Dec 44	X L CAC(C)	AP.		
C1st SOS.		S.O.S X 4 List CSqn 25 (CADR) to 27 CAR. (Sherf) Gen Oper C.	Tpr.	30 Dec 44	X List CAC(C)	21 AG	4.	10 Jan 45
	TOS.	TOS from X 4 list CAC (C)	Tpr	31 Dec 44	27 a'd Rgt	21 a gp.	3.	10 Jan 45
		Killed 2 Apr 45						
		Qual Driver Mech Th "C"	Tpr.	16 Mar 45	27 a'd Rgt	21 a gp.	24.	25 Mar 45
		Granted tradespay Dvr Mech Th "C"	Tpr.	16 Mar 45	27 a'd Rgt	21 a gp	24.	25 Mar 45
	SOS.	S vs. Killed in action	Tpr.	2 Apr 45	27 a'd Rgt	21 a gp	31	15 Apr 45
		Killed.	Tpr	2 Apr 45	27 Armd Rgt		CL A 563.	8 Apr 45
		Killed	Tpr.	2 Apr 45	27 Armd Rgt		CAS List A 563	8 Apr 45

22 CDN. ARMD. REGT. (C.G.G.) 2 SQN

M. F. M. 14

300M-5-41 (323-4)

H. Q. 1772-39-1662

NOFK: FRANK ENGLAND (FATHER) 10 St CYRIL AVE OUTREMONT P.Q.

Card No. 2

NO. D-125267 RANK Gdsm. NAME ENGLAND, D. F. DAVID FREDERICK.

*MARRIED ~~*WIDOWER~~ *SINGLE

PLACE OF ENLISTMENT Montreal South, P.Q. DATE 7 Nov 1941

RATE OF PAY

D. O. NO.	DATE	RANK	GROUP	P. F. OR A. S.	DAILY RATE	IF LIABLE PEN. DED.	REMARKS
267	7-11-'41	Gdsm.		A.S.	1.30		
13	30-3-43	TPR			1.50		WEF 1-1-43
24/145			C		1.75		16.3.45

ASSIGNMENTS

ASSIGNEE	EFFECTIVE DATE	AMOUNT	TOTAL
~~ENGLAND, Florence~~	~~1-11-43~~	~~23.00~~	~~23.00~~
10 St. Cyril Ave,	~~June~~		
Outremont, Que.	~~1942~~		~~20.00~~
Frank England (F)	11-43	23.00	
7 V 2 - 8.40			

DEPENDENTS' ALLOWANCES NO.

DATE APPLICATION FORWARDED	RELATIONSHIP	AMOUNT AWARDED	EFFECTIVE DATE
~~7-5-43~~	~~Mother~~		
7-5-42	Mother	2	

OUTFIT OR CLOTHING } ALLOWANCE $ PAID ON

REHABILITATION GRANT $ PAID

*DELETE WORDS WHICH ARE INAPPLICABLE

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

OCCUPATIONAL FORM COMPLETED ✓

CASUALTIES, ETC.

PART II D. O. NO.	DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
5	20-10-42	Gted 7 days' P/L with F.T.W. & money allce in lieu of rations eff 23-29 Oct 42	
C.R.	4 Jan 43	S.O.S. 22 Cdn Armd Regt to #3 CACRU on adm 8 Cdn Gen Hosp. eff 3 Jan 43	
5	7/1/43	TOS 3 CACRU from 22 CAR on adm. to No. 8 G.H. eff 4/1/43.	
10	13/1/43	Duck from 8 G.H. 11/1/43	
36	12/2/43	SOS to 22 CAR. eff 11/2/43	
CR	25-2-43	SOS 22 Cdn Armd Regt (CGG) on transfer to H.Q. 4 Cdn Armoured Brigade w.e.f 24-2-43	
9/2-3-43		T.O.S. from 22 Cdn. Armd Regt. w.e.f. 25-2-43	
13	30-3-43	GTD INC PAY 1.50 WEF 1-1-43	
18	27.4.43	7 DAYS P.L. w R.R. 12.4.43 - 19.4.43	
38	3.9.43	Gtd 7 days P.L. & 48 hr pass with R.A. wef 13-22.8.43.	
49	20-11-43	On 6.11.43 awarded 3 days F.P. under A.A 40 For 3 days pay under F.R.O. 149(2)	
51	4-12-53	Gtd 7 days P.L. plus 48 hr pass (9 days). with money allce w.e.f. 14 to 22-11-43	
82	14-1-44	On 3-1-44 awarded 14 days Fd. pun. for A.W.L. from 2145 hrs 31-12 to 2330 hrs 31-12-43 (14 days Pay)	
35	29.1.44	awarded C.V.S. M&C. w.e.f. 15-1-44	
9	25-2-44	attd fap to No 1 Cdn Spec Purs School w.e.f. 15-2-44	
10	3-3-44	Cease attd fap to No 1 Cdn Spec Purs School w.e.f 19-2-44	

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

CARD SEQUENCE NO.

NO. RANK NAME

CASUALTIES, ETC.

PART II D. O. No.	DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
11	10-3-44	On 29-2-44 awarded 5 days forf. of pay for AWL from 1013 hrs to 1115 hrs 27-2-44	
16	14-4-44	Gtd 7 days P.L. & 48 hr pass with RA. w.e.f. 23-3 to 1-4-44	
16	14-4-44	S.O.S. HQ 4CAB to HQ 4CAB Spec In Aft. w.e.f. 10-4-44	
16	14-4-44	T.O.S. spec Incr from HQ 4CAB. w.e.f. 11-4-44	
16	14-4-44	On 8-4-44 awarded 12 days F.P. and aut forf 1 days pay for a.w.l. 2359 hrs 2 to 0940 hrs 3-4-44	
		S.O.S. Spec Inc to X4 List w.e.f. 16-6-44	
		Ses 12 Bn to Ser C-1651 In JUCH wef 17-7-44	
		T.O.S. 9 CBR Bn from 12 Bn wef 18 July 44	
		SOS 9CBR Bn to 25 Cdn Armd Regt wef 28-7-44	
		TOS X-4 List (D) F Sqn 25 Cdn Armd Del Regt wef 29-7-44	
		SOS X-4 List.D.F Sqn 25CADR wef AUG 3 194	
		TOS X-4 List.D.E Sqn 25CADR wef AUG 4 194	
		Cease att X-4 list E Sqn 25CADR wef 4 Aug 44	

CR 10/10/44 TOS 27 CAR (SFR) from X-4 List CAC eff 9/10/44.

CR. 20.3.45 Qual. & granted T.P. "C" Dvr Mech Tr wef 16.3.45 - DO 24/45

CR 194 SOS K/A 2-4-45

SERVICE AND CASUALTY 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 ~~No. 4 D.D. (TS) CA.~~ 22 bdn. Armd. Regt. (b&g) Regimental Number D-125267

1. Surname ENGLAND
2. Christian Names DAVID FREDERICK
3. *Substantive Rank and Appointment 6DSM
   *Acting Temporary or Local Rank Pte.
   giving date 7/11/41
   *To be entered in pencil to facilitate alteration.
4. Place of birth Montreal, Que., Can.
5. Date of birth as declared on attestation 21 July 1923
   (A)
6. Date of enlistment 7-11-41
7. Place of enlistment Montreal South P.Q.
8. Residence at time of enlistment 10, St-Cyril, St., Outremont
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion Salvation Army
12. If married, state date Single
13. Trade on enlistment Checker
14. Corps, trade and grade Dr Mech Lk 'C'
15. (D) Qualifications
16. (E) Miscellaneous entries
    2 real: Dower I.C (W) bl. III

(17) Regiment or Corps: 22 bdn. Armd. Regt. (b&g)

Unit (Battn., etc): HQ 4CABde

(18) Medical

Category	Date	Authority
A	6-11-41	M.F.M. 2

(19) Next of kin (entries to be made in pencil)
Mr. Frank England (father)
10 St Cyril AVE. Outremont. P.Q.
CAN.

(20) E
(21) E 1-7 Jan 44.
(22) E

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

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry to be shown
			Disembarked in U.K.		7 Oct 42		
28 Oct 42		22 C.A.R.	T.O.S. 22 Can Armd Regt (C.G.G.)	Hobart	30 apr 42	Gdsm	M.F.M. 2
"		"	Qualified Driver G.C.(W) Cl. III	"	6 Jun 42	"	"
"		"	S.O.S. Can army Canada	at Sea	25 Sep 42	"	"
"		"	T.O.S. " " Overseas	"	26 Sep 42	"	"
"		"	And 10 days forf of pay. Consent to the pref	"	30 Sep 42	"	"
"		"	7 days P.L. with F.T.W.	U.K.	23 Oct 42	"	"
5 Jan 43		"	S.O.L. to 3 C.A.C.R.U. on adm. to 8				
			Gen. Hosp.	Field	3 Jan 43		1-8 Jan 43.
		3 CACRU	T.O.S. from 22 armd. Regt. (C.G.G.)				
			on adm. to No. 8 Gen. Hosp.	U.K.	4 Jan 43	Gdsm	D.O. 5, 7 Jan 43
		"	Disch. from No. 8 Gen Hosp.	do	11 Jan 43	do	D.O. 10, 13 Jan 43
		"	S.O.S. To 22 No. C.A.R. (C.G.G.)	do	11 Feb 43	do	D.O. 36 d/12 Feb 43
7 Feb 43	2 CACRU	22 C.A.R.	T.O.A. from 3 CACRU.	Field	12 Feb 43	"	8-20 Feb 43.
25 Feb 43	C.R.	"	A.O.S. to HQ 4 Cdn. Armd. Bde.	"	24 Feb 43	"	10-6 Mar 43
26 Mar 43	C.R.	HQ 4 CAB.	Granted daily rates of Pay of $4.50 per diem	Field.	1 Jan 43	Gdsm.	~~13~~ d/ 30 Mar 43
3 Apr 43	C.R.	HQ 4 CAB	T.O.S. from 22 C.A.R.	Field.	25 Feb 43	"	~~9~~ d/ 2 Mar 43
	"	"	7 days P.L. w/A to 19 Apr 43	"	12 Apr 43	"	18-27 Apr 43
12 Nov 43	"	"	Award 3 days F.P. forf 3 days pay	"	6 Nov 43	"	49-20 Nov 43
6 JAN 44	C.R.	"	AWARDED 14 DAYS F.P. FORFS 14 DAYS				
			PAY - OFF UNDER AA40.	FIELD.	3 JAN 44	TPR.	2 d/14 JAN 44
		"	Awarded Canadian Volunteer Service Medal and Clasp	"	15 JAN 44	"	5 d/29 JAN 44.
16 FEB 44	C.R.	"	PROC. ON CASE #8 - ATT. FAP TO 1 C.S.D.S.	"	15 FEB 44	"	9-25 FEB 44.
23 FEB 44	C.R.	"	RET. FROM ABOVE CASE - CEASES ATT. FAP.	"	19 FEB 44	"	10-3 MAR 44.
29 FEB 44	C.R.	HQ 4 CAB	AWARDED 5 DAYS FP AND A FORF. OF 5 DAYS				
			PAY. AWL. (1 HR) TOT. FORF 5 DAYS PAY.	"	29 FEB 44	TPR.	11 d/10 MAR 44.
11 Apr 44	CR	HQ 4 CAB	SOS HQ 4 CAB To rein. Increment	Field	10 Apr 44	Tpr.	16 d/14 Apr 44
"	"	HQ 4 CAB	TOS Rein Inc from H.Q. 4 C.A.B.	"	11 Apr 44	Tpr.	16 d/14 Apr 44
"	"	"	AWARDED 12 DAYS F.P. AND A FORF. OF 12 DAYS				
			PAY - AWL 9 HRS. 41 MINS. TOT. FORF. 13 DAYS PAY	"	8 APR 44	"	16-14 APR 44.
EA5C/3097 Rft Inc		HQ 4CAB	SOS to X-4 List CAC(C)	UK	16 JUN 44	Tpr	26 d/24 JUN 44
	X4 CAC(C)	12 Bn	TOS from HQ 4 CAB	"	17 Jun 44	"	23-26 " "
	X4 CAC (C)	C25 CAOR	Sos to 27 Can Armd Regt.	Fd.	8 Oct 44	"	65 Oct 44
	OC	27 AR	TOS from X4 CAC(C)	✓	9 Oct 44	✓	64 Oct 44
	✓	✓	SOS to X4 CAC(C)	✓	20 Dec 44	✓	84/Dec 44
	X4 CAC(C)	C25 CAOR	Tos from 27 Armd Regt	"	21 Dec 44	"	1 Jan 45
	"	"	Sos to 27 Can Armd Regt.	"	30 Dec 44	"	7 Jan 45
	OC	27 AR	TOS from X4 CAC(C)	✓	31 Dec 44	✓	3/Jan 45

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 ENGLAND DAVID FREDERICK (b) Reg'l. No. D-126267
2. (a) Arm of service Army (b) Unit No.4 D.D.(TS)CA. (c) Rank PTE.
3. (a) Date of birth 21 July 1923 (b) Have you any dependents? YES (c) Place of residence at time of enlistment OUTREMONT
4. (a) Place of enlistment MONTREAL SOUTH P.Q. (b) Date of enlistment 7-11-41

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 15 Years (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.) 7 Years Public School
7. If you attended a university, give name of university and standing or degree secured No
8. (a) Did you ever enter upon a trade apprenticeship? NO (b) If so, for what occupation? N.A. (c) Did you finish it? N.A. (d) If you did not finish it, how long did you serve at it? N.A.
9. (a) What languages do you speak fluently? ENGLISH (b) What languages do you read well? ENGLISH

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) WORKING (b) At time of enlistment of what trade union or professional society were you a member? NO

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 KRAFT CHEESE CO. LTD. Address MONTREAL
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) CHEESE CO.
20. (a) Your specific occupation STORE CLERK (b) Number of years' experience at this occupation with any employer 3 Months
21. (a) Did your employer promise definitely to give you employment on discharge? YES (b) Did your employer refuse to promise you employment on discharge? NO (c) Do you wish to return to your former employment? YES

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

22. (a) State nature of business, or professional practice (b) Where was it located?
23. (a) Number of years engaged in this business (b) Have you made, or will you make plans to return to the same or a similar business on discharge?

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? NO (b) Do you feel competent to operate a farm? YES (c) If so, in what kind of farming? WHEAT FARMING
25. (a) Were you born on a farm? NO (b) How many years' actual farming experience have you had? 5 Months (c) In what provinces did you have experience? P.Q.

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? YES
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.) ASSURED OF A JOB
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form MOTOR MECHANIC

DATE 7-11-41 194.....

SIGNATURE X David Frederick England

File No 405-E-1504

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. D125 267 Name England David Frederick

Rank on Discharge Tpr. Date of Discharge 2-4-45.

Authority for Discharge or Retirement Deceased

Served in:

			Non-qualifying service
Canada	from 7-11-41	to 25-9-42	
	from	to	
United Kingdom	from 26-9-42.	to 17-7-44	
	from	to	
Italy	from	to	
Northwest Europe	from 18-7-44.	to 24-4-45.	Killed in Action
---------	from	to	
---------	from	to	

Eligible for award of:

1939 - 45 Star OK

Italy Star

France-Germany Star OK

Defence Medal OK

War Medal OK

Canadian Volunteer Service Medal OK

with clasp OK

M

Verified by J.M.K. Legault

Date JUL 6 1946

Carded

JUL 9 19[illegible]

NRD

HA 165

PRO FORMA FOR INDIVIDUAL TRANSFERS OF SOLDIERS FROM ONE CORPS OR UNIT ESTABLISHMENT TO ANOTHER OF THE ACTIVE FORMATIONS AND UNITS OF THE CANADIAN ARMY

1. [redacted]

VOLUNTARY TRANSFER

I, ENGLAND DAVID D
(Name in full in block letters)

hereby make application for transfer to CANADIAN GRENADIER GUARDS. C.A.
(Insert in full title of unit to which transfer is desired)

My reasons for desiring to transfer are:—

That I have a brother in the Guards and that I want to join him. I am now following a course for which I have no interest. My brother's Number is D-27194, ENGLAND, H.

Place FARNHAM, QUE. x D H England Signature

Date 11 March 1942. D-125267 Regtl. No. and Rank

Trades School Unit
(Insert full title of present Unit)

2. Particulars:—

Age 19 Medical Category "A" Trade NONE

Date of Enlistment 8th November 1941 Married or Single SINGLE

Other Remarks (x) from May 1941 to November 1941, I was a member of the 2nd Battalion Reserve of the C.G.G.

3. Effective date of transfer at Once Estimated cost $ Nothing

4. (A) Concur W. Howard Lt-Col Officer Commanding A-12 C.I.T.C. - FARNHAM, QUE.

O.C. (Present Unit)

(B) Concur Lt-Col Griffith

A/O.C. Commanding 22 Cdn Armd Regt. (C.G.G.) (New Unit)

5. (A) Concur/Approved (y)

Major

for D.O.C., M.D. No. 4.

(B) Concur

H Rudolf. major

~~D.O.C., M.D.~~ for GOC 4 Can Armd Div

6. (A) DEPARTMENTAL CORPS (z)

Concur

O.A.
(Signature)

Corps

(B) Concur

O.A.
(Signature)

Corps

7. APPROVED AT N.D.H.Q.

Date 13-4-42

W. M. Apr
(Signature) For Adjutant-General

(x) Insert brief details of any service prior to enlistment into the Active Formations and Units of the Canadian Army, and/or any other information considered desirable. A copy of the Field Conduct Sheet, where necessary, will be attached.

(y) When transfer is within the District, D.O.C. will approve at Section 5 (A). Section 7 will be used only when transfer is not within the district.

(z) Concurrence will be required when transfer is to or from Detachments of Corps on Home War Establishments Administered at N.D.H.Q. even when Detachments concerned are in the same District.

BEFORE SUBMISSION ENSURE THAT:—

(a) Provisions of Routine Orders 63 and 485 are strictly adhered to and pro forma completed in full.
(b) If transfer from a Training Centre state whether the applicant is a Reinforcement.
(c) If soldier applying for transfer is above rank of Private, state whether or not
  (i) soldier is willing to revert to effect transfer.
  (ii) a vacancy exists in establishment of new unit for his absorption in his present rank.

COMPLETE AND SUBMIT IN DUPLICATE

M.F.M. 99
25M—1-42 (2936)
H.Q. 1772-39-1793

10th April, 1945.

Mr. Frank England,
10 St. Cyril Avenue,
Outremount, Quebec.

Dear Mr. England:

It was with deep regret that I learned of the death of your son, D125267 Trooper David Frederick England, who gave his life in the Service of his Country in the Western European Theatre of War on the 2nd day of April, 1945.

From official information we have received, your son 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,

A. E. WALFORD
Major - General
Adjutant - General

APR 10 1945

11

(A.E. Walford),
Major-General,
Adjutant-General.

/EMA

405-E-1504
D.R. 2 (D)

CERTIFICATE OF DEATH

THIS IS TO CERTIFY that according to information received at the Department of National Defence from the overseas authorities, No. D.125267, Trooper David Frederick ENGLAND, of the Canadian Armoured Corps, Canadian Army, was killed in action on the 2nd of April, 1945.

(C.L. Laurin) Colonel,
Director of Records.

Officer authorized to sign certificates of death and/or presumption of death for the Canadian Army.

Department of National Defence,
Ottawa, Canada.
May 4th, 1945.

15.

A563

405-E-1504.

FIELD SERVICE In lieu of Army Form B. 2090A

REPORT of Death of an Officer or a Soldier to be forwarded to the War Office with the least delay after receipt of notification of death. See Table II, Appendix III, Field Service Regulations, Vol I.

MBR
REGIMENT OR CORPS 27 Cdn Armd Regt Squadron, Troop Battery or Company

Officer's Personal No (if known) D125267 Rank Tpr
Soldier's Army No

Surname ENGLAND Chistian Names D.F.

Died
Date 2 Apr 45 Place Germany
Cause of Death[x] Killed
Nature and Date of Report 3011c/799 3 Apr 45
By whom made 27 CAR

[x] Specially state if killed in action, or died from wounds received in action, or from exposure while on military duty, or from injury while on military duty.

Burial
Place Temp Cdn Mil Cem Nr Praest 2 m E of Emmerich OE3598 Date 3 Apr 45
Cleve sheet 6 1/50 000 Row 5 G"10"
By whom reported H/Capt D.R. Dyke 27 CAR

(a) in Army Book 64 No.

State whether he leaves a Will or not

(b) as a separate document Not Rec'd

All private documents and effects received from the front or hospital, as well as A.B. 64, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any report received as to verbal expressions by deceased officer or soldier of his wishes as to the disposal of his estate should be forwarded to the War Office at once, supported by a certified statement of the person who actually received the information.

In the case of a soldier a duplicate of this report is to be sent to the Paymaster at the Base, together with the deceased's A.B. 64 (after withdrawal of any will from the latter), for transmission to the Paymaster who compiles the soldier's account.

Station and Date Belgium 11 Apr 45

Signature of Officer in charge of Section Adjutant-General's Office at the Base for Officer i/c Cdn Sec 2nd Ech HQ 21 A Gp

Director of Estates ✓

Regimental No. D-125267 Rank Trooper

ENGLAND David Frederick
Surname Christian Names

Unit 27th Armoured Regt. (Sherbrooke Fusiliers) (CA)

Date of death 2 Apr 45 Place of Death Overseas (Western European)

Casualty Details
Killed in action

Next-of-kin Mr. Frank England Relationship Father

Address 10 St. Cyril Ave., Outremount, Que

Will Wills d/7 Nov 41 & 1 May 44 herewith

Date 18 Apr 45

ESTATES BRANCH
APR 20 1945
D.H.Q.
OTTAWA
NATIONAL DEFENCE

EXCERPT OF M.F.M.5 dated 7 Nov 41

(1) Are you married? No Children?

Wife's name and address) Names and Ages

(2) Is your father alive? Yes If so, state name and address
Mr. Frank England, Retired 10 St. Cyril Ave., Outremount, Que.

(3) Is your mother alive? Yes If so, state name and address
Mrs. Florence England, 10 St. Cyril Ave., Outremount, Que.
Partial Support $40.00 per month.

(4) Are you insured? Yes If so, in what company?
London Life Ins. Co.

JEC/WT

ESTATES LIAISON

BATTLE CASUALTY
CASUALTY SECTION EXTRACT FORM

This Space is for the **RED X** See Below

Message Received from 21/CAS/8057

Time Message Received.....

Date Message Received 5 APR 45

Theatre **AEF**

Regimental No.	Rank	Name	Full Christian Names
D125267	TPR	ENGLAND	DAVID FREDERICK

Unit 27 ARMD REGT

SERIAL 1044

CASUALTY PARTICULARS

KILLED 2 APR 45

"A" 563

Hospital Admitted To..... Date.....

Hospital Transferred To..... Date.....

Hospital Transferred To..... Date.....

Hospital Discharged From..... Date.....

IMPORTANT—Always Give Full Address and Relationship of all Next of Kin—IN PLAIN CLEAR PRINTING

Next of Kin FRANK ENGLAND Relationship FATHER

10 ST CYRIL

OUTREMONT QUE. CAN

Home Town OUTREMONT QUE

Cable No. 7816A

Inland Tel. No. .....

NOTE: If the Next of Kin resides in the British Isles or U.S.A. MARK RED X in UPPER LEFT HAND SQUARE

IMPORTANT

.....
Verification Clerks Signature

4/20A CFA 48
40/P & S/1568 (6847)

H.Q. 405-E-1504
(D.R. 2(C))

12th July, 1946.

Mr. Frank England,
10 St. Cyril Avenue,
Outremount, Quebec.

Dear Sir:

Information has just been received from overseas that the remains of your son, D125257 Trooper David Frederick England, have been carefully exhumed from the original place of interment and reverently re-buried in grave 15, row E, plot 20, of Nijmegen Canadian Military Cemetery, four miles South-East of Nijmegen, Holland. Marked map is enclosed. This is a recognized military burial ground and will receive care and maintenance in perpetuity.

The grave will have been marked with a temporary cross which will be replaced in due course by a permanent headstone suitably inscribed. While it cannot now be stated when this work of permanent commemoration will begin, before any action is taken you will be communicated with and an opportunity will be given you to submit a short personal inscription of your own choice for engraving on the headstone. Therefore if you should change your address would you be good enough to inform the undersigned.

Yours faithfully,

R.

for C.L. Laurin, Colonel,
Director of Records,
for Adjutant-General.

/EMA

K.J.D.

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER D-125267 RANK Trooper SERVICE UNIT 27th Armoured Regimen (Sherbrooke Fusiliers)(CA)

NAME ENGLAND, David Frederick

DATE OF BIRTH DAY 21st MONTH July YEAR 1923 Date enlisted:7-11-41

MARITAL STATUS Single Religion: Salvation Army

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Father NAME Mr. Frank England

ADDRESS 10 St. Cyril Ave., Outremount, Que. ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. 7816A H.Q.405-B-1504

CASUALTY DETAILS Killed in action DATE 2-4-45

WESTERN EUROPEAN THEATRE OF WAR

O/S 3/L 22 Armd Regt.

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? ~~NOT~~ YES/NO

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

DATE 9-4-45

OFFICER I/C RECORDS

6

COPY FOR DOCUMENT FILE

NO D.125267 Rank Trooper Name ENGLAND, David Frederick

Unit C.A.C. Date of death 2nd April, 1945

Died at Germany

Cause Killed in action

Death occurred on strength of Forces H.Q. 405-E-1504

N/K Mr. Frank England Relationship Father

Address 10 St. Cyril Ave., Outremount, Que.

Remains buried in Temp Cdn Mil Cem n r Praest 2 m e of Cemetery
Emmerich 013598 Cleve sh 6 1/50 000 R 5 G 1

CHK ✓ Germany

Grave location

OVER

BURIAL REPORT TO N.K.

RETURN TO BUR. OF STAT.

ROYAL MESSAGE DESP'D.

CAN. MESSAGE DESP'D.

JUL 12 1946

MAY 17 1945

MAY 16 1945

APR 25 1945

Temp B R sent to N K

REBURIAL

Nijmegen Canadian Military Cemetery,
4 miles S.E. of Nijmegen, Holland.

Grave location, Sec. 15, row E, plot 20.
H.I & CR Form Despd-NOV 15 1946

Photographs
Despatched
DEC 6 1947

10M-1-45 (M-4608)

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: IN THE FIELD (GERMANY)

Official name of civil municipality or township:

Place an X over the word which applies to this municipality or this territory: 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

Surname: ENGLAND (Block letters)

Given names: David Frederick

4. RESIDENCE

Street: St. Cyril No. 10

Official name of civil municipality or township: Outremont

Municipal county: Province: Quebec

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

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

10. BIRTHPLACE (Province or Country): Quebec

11. DATE OF BIRTH: July (Month) 21st (Day) 1923 (Year)

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

OCCUPATION

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

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	ENGLAND Frank	
MOTHER (Maiden Name)		

19. Place of burial, cremation or removal: Germany

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: 21

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

Do not write in this space

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: April (Month) 2nd (Day) 1945 (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**....

OVERSEAS CASUALTY CANADIAN ARMY

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

[signature] C.S.

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)

MAY 17 1945

Director of Records, Dept.of National Defence

FOR COMPLETION AND RETURN BY

Form P. 64

Mr. Frank England,
10 Cyril St.,
Outremount, Que.

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

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

and the following number quoted:—

H.Q. 405-E-1504 FD-23

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

April 26, 1945

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

ENGLAND David Frederick Tpr.

D-125267 Can. Army

ESTATES BRANCH MAY 9 1945 H.Q. OTTAWA NATIONAL DEFENCE

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. Clark Smith Col.

Director of Estates.

EDM/HS

M.F.W. 77
16M-10-44 (5854)
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.....		None		
2	Children of the Deceased and dates of their Births.....		None		
3	Father of the Deceased.....		Frank England	66	10 St Cyr St Outremont. Quebec
4	Mother of the Deceased.....		Not Living		
5	Brothers of the Deceased	Full Blood	Walter Francis England	25	D29174 Can. Gren. Gds. #3 Squadron 21st. C.A.R Gov. Gen'l's Foot Guards
		Half Blood	n. a.		
6	Sisters of the Deceased	Full Blood	None		
		Half Blood	n. a.		
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
			None		

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	David Fredrick England
9	Date of his birth.	July 21st 1925
10	Place and date of his marriage.	N. A.
11	Place and date of his parents' marriage.	Montreal. Quebec. March 8th 1919

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal. Quebec.
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) Montreal whole life previous (c) to enlistment. (d)
14	Nature of employment before enlistment.	Labourer
15	State whether he owned the premises in which he lived, and, if so, where situated.	He did not.
16	Name place where deceased stated he intended to make his permanent home.	Montreal Quebec

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	No.
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?	N. A.
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?	No.
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.	Metropolitan Life Ins Co. War Risk policy amount paid in. Frank. England.
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	None known about here

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.	N. A.

(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

* ~~the~~ Father 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.

Frank. England — Signature of Informant

10 st Cyril Ave. Outremont Quebec — Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief Frank England

See above. ..... {Name of informant} is the Father of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at Montreal, Quebec this First day of May 1945

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

H.W. Howes Major — Qualification Officer of The Salvation Army

Address 7499 Bloomfield Ave Montreal - Quebec

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

TO BE COMPLETED IN DUPLICATE

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

MF M10
40/P & S/423 (3767) 3/18B

WILL

(1) I, David Fredrick England, of the city
(Names in Full) (City, Town, Village, Township)

Address in civil life.

of Outremont, in the County District of

Province of Quebec, Checker
(Civil Occupation)

Regimental No. D125267, Unit HQ Sqn H Can Armd Bde, do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

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

(2) I GIVE, DEVISE AND BEQUEATH unto my Father, Frank England of 10 St Cyril Ave, Outremont, P.Q. , all my estate

Relationship, names and address of residuary beneficiaries.

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

N/A

(4) I appoint Frank England, 10 St Cyril Ave. Outremont, P.Q.
(Name) (Address)

Retired, to be the Executor of this my Last Will.
(Civil Occupation)

IN WITNESS WHEREOF I have hereunto set my hand this 1 day of May

19 44

Signed and acknowledged by the Testator as and for his last will 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.

D. F. England
(Signature of soldier)

First witness sign here.

(5) Signature J. A. Sturett
Civil Address 10 (N. E. 3rd St. Oklahoma City, Okla. (U.S.A.)
Civil Occupation Clerk

Second witness sign here.

Signature J. L. Wilson
Civil Address 10594 Dalhurst St. Montreal
Civil Occupation Barrister

(Witnesses are not to be beneficiaries.)

[OVER]

NOTE

If you have already made your Will, do not fill in this Will, but mark on the front where your Will can be located or with whom it is deposited.

(1) Example: I, John Charles Jones, of the City of Marlowe, in the County of Carleton, Province of Ontario, Mechanic, Regimental No. 1234, Royal Blankshire Regiment.

(2) If only **one** beneficiary for all your estate, complete as example: "my wife, Mary Jones of 26 Cherry Ave., Ottawa, Ont., all my estate," in which event, strike out clause (3) entirely.

If **more than one** beneficiary, set out in clause (2) what each is to receive, such as

"my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont., $.....00, and my household goods and effects,"

"my brother, Thomas Jones, 80 Yonge St., Toronto, Ont., $.....00,"

"my sister, Margaret Jones, 80 Yonge St., Toronto, Ont., $.....00,"

"my friend, John Smith, 60 LaSalle St., Winnipeg, Man., $.....00,"

and any personal gift, if desired. Then complete clause (3) as to the balance of your estate.

(3) If balance of estate is to one person, complete as example: "my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont." Another example: "my father, Jack Jones, and mother, Jessie Jones, 80 Yonge St., Toronto Ont., equally," or as desired.

(4) Fill in name of Executor or Executrix, example: "John Doe, 24 Smith Street, Blankville, Ontario, Salesman," or, if Executrix, "Jane Doe" and address. A beneficiary under the Will may be appointed Executor or Executrix. It is preferable that the person appointed as Executor should not be on, or likely to be on, Active Service.

(5) The soldier will date the Will and sign same. Two witnesses must sign in the presence of the soldier, and each witness should fill in his or her full civil address and occupation. No one who is a beneficiary shall act as a witness. It is preferable, though not essential, that the witnesses be persons not on Active Service.
When completed, leave Will (both copies) with Commanding Officer for transmission to the Records Office for safe custody.

JUN 17 1944
WILL RECEIVED IN DOCUMENT SECTION
JUN 19 1944
RECORD OFFICE
NAT. DEF. H. Q.

To be made out in duplicate

M.F.M. 5
150M—7-41 (1122)
H.Q. 1772-39-1651

PARTICULARS OF FAMILY OF AN OFFICER OR OTHER RANK OF THE CANADIAN ARMY (AF) 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 Canadian Army (AF) 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 individual's new unit.

---

(1) Name of Officer or Other Rank ENGLAND
(Surname first—Christian names in full—Block capitals)
DAVID FREDERICK

(2) Regimental or Official Number and Rank B-125267 PTE

(3) Unit 4 D.D. (TS) CA

(4) Are you married? no

(5) If married, state,

(*a*) Full name of your wife nil

(*b*) Present postal address of wife nil

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

nil

(7) Are you a widower? no

(8) Have you any children? no Number of boys Girls

Names and ages nil

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

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

Name nil

Postal Address

[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 nil

(11) Is your father alive? Yes

If so, state name and address, occupation Mr. Frank ENGLAND, Retired
St
10 Cyril Ave., Outremount, Que. Can.

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

(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.

nil

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

(14) Is your mother alive? Yes

If so, state name and address Mrs. Florence ENGLAND
10 St. Cyril Ave., Outremount, Que. Can.

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

(16) If sole or partial support of widowed mother—state what amount per month you have given her prior to appointment or enlistment $ 40.00 per 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? 1 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 nil

Full Name

Postal Address nil

Amount contributed monthly during the past six months

nil

(18) Are you insured? Yes

If so, in what Company? London Life Ins. 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.

x David Frederick England
(Signature of officer or man)

Date 7-11-41

L. B. Spencer Capt.
Officer Commanding

Date 7-11-41

NO 4 DISTRICT DEPOT A.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.

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: David Frederick ENGLAND
(CHRISTIAN NAMES) (SURNAME)

REGISTER NO. D-16919
FILE NO. 405-E-1504
DATE 26-4-46
SERVICE NO. D-125267
FINAL RANK OR RATING Tpr.
DATE OF DISCHARGE 2-4-45

PAYEE Mr. Frank ENGLAND,
ADDRESS 10 St Cyril Ave.,
Outremont, Montreal, P.Q.

DATE OF TERMINATION OF OVERSEAS SERVICE 2-4-45

	$ ¢
A. TOTAL QUALIFYING SERVICE 1170 NO. OF DAYS 1198 / 30 EQUAL TO 39 COMPLETE PERIODS AT $7.50	292.50
B. QUALIFYING OVERSEAS SERVICE NO. OF DAYS 875 LESS 28 INELIGIBLE DAYS, EQUAL TO 847 DAYS @ 25c. PER DAY	211.75
	504.25
C. SUPPLEMENT FOR OVERSEAS SERVICE	
DAILY RATES AT DISCHARGE	
PAY $ 1.50	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.25	
ADDITIONAL PAY $ .25	
$	
$	
DEPENDENTS' ALLOWANCE 1/30 OF $ $	
TOTAL $ 3.00 X7 = $ 21.00	
NO. OF DAYS 875 / 183 X$ 21.00	100.41
D. WAR SERVICE GRATUITY	604.66
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $	
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $	
OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE	604.66

G. YOUR PORTION OF GRATUITY IS— 100%

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ _____ OF $ = $

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

ΔT

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
KRM	[signature]

TREASURY	
CHECKED BY	DATE
V Birmingham	1/5/46

[signature]
SERVICE REPRESENTATIVE

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY HG

Name ENGLAND David F. No. D.125267
Surname Christian Names

Tpr. C.A.O/S 2-4-45
Rank Unit Date of Death

AMOUNT

L.P.C. $ 48.16

Date 13-11-45

Other Credits

Total 48.16

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Father	Frank England, 10 St. Cyril Ave., OUTREMONT, P.Que. (Sole beneficiary under will)	$48.16

P4. TO TREAS. 6-12-45, g.m.

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	$48.16

CLASSIFIED BY

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

3/45A MFM 510
40/P&S/254 (8550)

CANADIAN ACTIVE SERVICE FORCE
OVERSEAS

District.....

Dispersal Area.....

LAST PAY CERTIFICATE
(All Ranks)

Regtl No. D125267 Rank and Name ENGLAND. D.F. PTE.

of (Unit).....on.....

(Transfer or Discharge).....to.....on 2nd Apl.45. 19.....

Reason Death Authority: CCL"A" 563 d/8th Apl.45.

The following is a statement of the account of the above-named from 1st Apl. to 30th Apl.45. 19..... the inclusive date of transfer or discharge.

Particulars	Dr Amount		Particulars	Cr Amount	
Balance Dr from last account			Balance Cr from last account	27	06
First Monthly Payment			Regimental Pay 30 days at $1.50	45	00
Casual Payments			Tradesmen's Pay 30 days at $ 25¢	7	50
Payments on Transfer or Discharge			Additional Pay (Give Particulars) ..... days at $		
Assigned Pay $23.00 and $8.40	31	40			
Regimental Charges			Allowances (give particulars) ..... days at $		
Public Stoppages (give particulars):					
To Balance Cr — Free	48	16			
To Balance Cr — Deferred			By Balance Dr		
Total	79	56	Total	79	56

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

Remarks

A.P. $23.00 (F) Stopped eff May.45.

A.P. $8.40 (7th V.L.) Stopped eff May.45.

EST. TREAS. OCT 9 1945 R. Q. OTTAWA NATIONAL DEFENCE

Compiled by B.Mc.Kercher.

Checked by J.M. Chapelle.

Date 28 Sep.45. 19.....

Certified correct A.B. Blanchard for Chief Treasury Officer, Overseas

MW

FORM No. 1

Register No. D-16919 Nominal Roll No. D-438

H.Q. File No. 405-E-1504

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
B-125267	TPR	ENGLAND	DAVID FREDERICK

REASON FOR TERMINATION OF SERVICE:

1st Enlistment ..... KILLED ..... CARO ..... ( )

2nd Enlistment ..... CARO ..... ( )

3rd Enlistment ..... CARO ..... ( )

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. 7 NOV 41	T.O.S.	T.O.S.
S.O.S. 2 APR 45 MD O/S	S.O.S. MD	S.O.S. MD
Total Days 1243	Total Days	Total Days

Total Service ..... 1243 DAYS

—	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere	323		323
Overseas Service	920	45	875
Totals	1243	45	1198
Add Non-qualifying Service			45
Total Service			1243

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 2 APR 45 2. Date S.O.S. Overseas .....

REMARKS:

KILLED IN ACTION
2 APR 45

Computer's Signature C. Leslie

Checker's Signature D. Kennedy

Date Computed 23 Aug 45

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

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

500M—11-44 (6012)
H.Q. 1772-45-8

Details of Non-Qualifying Service

Western Hemisphere—

Forfeits for	From	To	Effective Date	Days	Total

5/7B CFA 187
40/P & S/2180 (7060)

EST 5 BF 2.7.45

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

of personal effects received by
Casualty Section, No. 1 CKSD

No., RANK and NAME .....D-125267....Tpr..ENGLAND..David..F.....Decld.....

RECEIVED FROM .....Cdn..2..Ech..21..Army..Grp.....

CHECKED BY .....M-7303....Pte..Harvey..H..C..... DATE ....28..June..45.....

AND .....L-27614....Pte..Johanson..W..P.....

1	Leather case w/ snaps		
2	Leather wallets		
1	Pr swim trunks		
1	Jack knife		
1	Dictionary		
1	Comb		
1	Support belt (Leather)		
1	Letter		
1	7th VL receipt to O i/c Est.		

ORIGINAL
DUPLICATE
TRIPLICATE
} To Officer i/c Estates with original inventory, if any.

QUADRUPLICATE—with effects.

H C Harvey Pte
.....
for OC 1 Cdn KSD