~~ZACK~~ LEWIS
MANUEL ZACK
D128590

Received ORIGINAL DUPLICATE TRIPLICATE ... Checked ... Card ... Observations ... Revised

M.F.M. 2
A.F.B. 271
20M—8-41 (9720)
H.Q. 1772-39-1645

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

Unit R.C.O.C. C.A. Regimental Number D-128500

WSG COMPLETED

ACTIVE FORMATIONS AND UNITS OF THE CANADIAN ARMY

ATTESTATION PAPER

1. Surname LEWIS
2. Christian Names MANUEL ZACK
3. Present address 5466 Park Ave.,Apt.33,Montreal.,Que.,Canada
4. Date of birth 8 August 1909
5. Place of birth Canada (Country) Quebec (County or Province) Montreal (Town or Township)
6. Religion (state denomination) Hebrew
7. Trade or Calling Stock-Keeper
8. Married, Widower or Single Single
9. Name of next of kin Mr. Bernard ZACK
10. Relationship Father
11. Address of next of kin 5466 Park Ave.,Montreal.,Que.,Canada (Apt.33)
12. Do you belong to, or have you served in a Reserve Formation or Unit of The Canadian Army? NO
(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, Manuel Zack LEWIS, 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 11th December, 1941 Manuel Zack Lewis (Signature of recruit)

Witness G. T. Lemaguerez Capt

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Manuel Zack Lewis (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 11th day of December, 1941 19

G. T. Lemaguerez Capt — 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

FINGERPRINTED UK

Record of Service of LEWIS (Surname) Manuel Zack (Christian Names) Regimental Number D128590

Qualifications		Educational Qualifications			
Military	Nil	High School or Collegiate	4 Yrs. (years completed)	Graduation or Matriculation	Grad. (specify)
Business or Professional	Nil				
Trade or Civil	Stock-Keeper. (Clothing)	*College	Business College, 1 1Yr. (Commercial)		
Technical	Nil	*University	Nil		
Languages	English, French, Jewish		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
12-12-41	D.R.O.	Joined on appointment 4 District Depot, C.A.	Pte	11-12-41	4DD.	Mtl.Sth.	4DD.Pt11.No.298	12-12-41
JAN 9 '42		PROCEEDED ON COMMAND AND ATTACHED FOR ALL PURPOSES TO, C.A.(B)T.C. 41. HUNTINGDON, QUE.		JAN 9 '42	4 DD	MTL. SOUTH	D.O. NO. 7	9 JAN 1942
12.1.42	TC 41	TOS TC 41 FOR ALL PURPOSES	"	10.142	TC 41	HTINGDON	TC 41 Pt II-5	12.1.42
006-026-3								
7-4-42	"	S.O.S on transfer to A.21 Barriefield	"	8-4-42	"	"	Pt. II NO. 44	9-4-42
1-4		TOS CoCTC from #4 BTC Huntingdon	Pte	9/4/42	CoCTC	Barriefield	Do 82	10/4/42
		Cease to be attd to A-21 TC from #91 LAD + attd TOS A21 TC	"	22-5-42	"	"	118	22-5-42
		on posting from #91 L.A.D.	"	30-5-42	"	"	125	30-5-42
		Certificates to be attached C.O.C. RQDMD T/C for all purposes. attd T/O #3 DD to 31-5-42 PMG	"	31-5-42	"	"		
		T.O.S. DDMD#3 on transfer from C.O.C. T/C (A-21) Barriefield Ont., for all purposes, for R.C.O.C. concentration.	Pte.	1-6-42	DDMD#3	Ottawa	Pt. 11, 155-42	4-6-42
		TOS amended to read "Posted to Trade School" and not as shown	"	10-7-42	"	"	191-42 156-42	16-7-42
		S.O.S. D.D.M.D.3 on transfer to R.C.O.C. T.C. Barriefield, Ont.		11-7-42		TC Barriefield	163	13-7-42
		TOS A-21 TC for AP from DDMD3 granted furlough from 20-7-42 to 3-8-42		20-7-42			169	20-7-42

For additional entries use M.F.M. Form No. 2

Soldiers Qualification Card

CONFIDENTIAL

CODED

Regt'l. Number	Last Name	First Name	Middle Names
D-128590	LEWIS	MANUEL	ZACK

CARDS PUNCHED

Unit 1 C.O.R.V.

1 Corps R.C.O.C.

2 Nationality	By Birth	By Naturalization	Country of Birth
Can. 08	✓		Canada.

3 Racial Origin: Jewish

4 Language spoken in home: French ..... Other ..... English ✓

5 Age 34/8 Aug. 8. 1909 6 Height 5'7½" 7 Weight 160 8 Silhouette [1] 2 3 4

9 Eyes: 4 Colour of Brown 10 Acuity [1] 2 3 /10 Glasses reading 11 Colour Vision 1 2 3 4

12 Hearing: Acuity [1] 2 3 13 Speech Defects .....

14 Handedness R [L] A 15 Med Category A

Cause .....

Attitude to own health anxious about post To Medical attention .....

Health History normal

16 Education Level: Illiterate ..... E ..... S 12 (11) (Grade completed)

Conduct during school life .....

17 University or 18 Professional	Course Taken	Years Completed	Degree
	✓		

19 Post Graduate	Course	From—To	Degree
	✓		

Specialized Training:

20 1. Bookkeeping ..... O'Sullivans Business College ..... (Course)
128 At Montreal, Que. From—To 1926-1927 Completed yes

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, French, Yiddish
02 11 30 Written well English, French.

24 Main occupation: Description Stock Keeper
8502
Estimate of skill skilled
Duration (from—to) 1927-1941 Weekly Wage $25.00
Employer's Name and Address W. O'Donnell Ltd, Montreal, Que. / Comfort Kimona, Montreal, Que.

CARD COMPLETE

50 "M" Test	Score		
			Can 5 16-1-42
1	18		S. Tot. 49
2	16		SM
3	15		
4	19		S. Tot 38
5	19		SM
6	17		S. Tot. 74
7	25		SM
8	32		
Tot.	161	SM	Grade B.

9

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 .....

25 Second Most Important Occupation: Description:

Estimate of skill .....
Duration (from—to) ..... Weekly Wage .....
Employer's Name and Address .....

26 Third Most Important Occupation:

Estimate of skill .....
Duration (from—to) ..... Weekly Wage .....
Employer's Name and Address .....

Trade Union or Professional Society ✓

Vehicles: 27 Heavy Truck ..... 28 Light Truck ..... 29 2 Auto W ..... 30 Motorcycle .....
31 Farm Tractor ..... 32 Tracked Vehicle ..... 33 Power Launch ..... 34 Aeroplane .....
35 Accident Prone no (held drivers licence 12 yrs.)

Farming Experience: Wide ✓ Limited nil.
District ..... Type .....

Job promised after discharge no By whom? Name .....
Address .....
Other provision for post-discharge occupation think he can go back to Comfort Kimona
(feels equal) Type of work desired own bus. clothing line.
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 1 No. Sisters 2
Position in family 2 38 No. Dependents 1
Relationship of Dependents father.
Status of home in childhood normal.

Relig. Hebrew

39 Hobbies: Photography M ..... S ..... Radio ..... Engines .....
9 Mechanics ..... Other Stamps. Reading.

40 Sports: (1) Swimming (2) ..... (3) .....
P Team Games and Position (1) Basketball (Defence)
3 (2) ..... (3) .....

41 Ability to Entertain: Music: String ..... Brass .....
Woodwind ..... Percussion ..... Piano ..... Vocal .....
Theatrical ..... Other .....

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
	~				

43 CURRENT SERVICE: Date Enlisted Dec. 11. 1941 Place Enlisted Montreal South, Que.

Date From—to	Country	Corps	Unit and Sub-unit	Rank 44	Principal Duty	Performance
11 12/41 - 10 1/42	Can.	RCOC	Montreal, Que.	Pte.	Gen. Training.	
11 1/42 - 8 4/42	"	"	CABTC. 41	"	Basic "	
9 4/42 - 30 5/42	"	"	Barriefield, Ont	"	Course.	
31 5/42 - 10 7/42	"	"	Ottawa. Ont.	"	"	
11 7/42 - 29 3/43	"	"	Barriefield. Ont.	"	Clerk in QM. Stores.	106
30 3/43 -	G.B.	"	1 C.O.R.U.	"	Tong (RI)	
				A		

45 COURSES ATTENDED

	PLACE	Date: From—to	Qualified as	Rating
Ord. Proceedure.	Barriefield Ont	9 4/42 - 15 5/42		891

46 Crime: Number Courts Martial Convictions ..... Hospitalization 2/52 fainted (observation)
Number Civil Convictions ..... Minor Offender ..... Occasional Offender .....
Chronic Major Offender ..... Chronic Minor Offender ..... Occasional Offender .....

49 Psychiatric ☑ ☐ ☐ ☐ ☐

C.M.H.Q. 1000:1.8
40/P & S/1246

47 Classification: Military Specialties and Trades

Designation	Degree of Proficiency	Date	Authority
Clerk. 106	Group C	2-10-42	D.O. 234

55 Type of Service Desired (1) Storeman 2. M. 433 (2) .....

Remarks re Outstanding or Limiting Factors

dep.
dis: pleasant, talkative
app: neat
phys: well built
map.
mil.
mech.

civil exp in clothing stores. Knows mens clothing. High learning ability, talks a lot. Should be good storeman.

Attitude to Interview: Antagonistic ..... Overanxious ..... Co-operative ✓ ..... Indifferent .....
Reason for Joining Cdn. Army (if ascertainable) ..... duty .....

48 Suggested Possibilities for Employment (1) Storeman 2. M. .....
..... (2) .....

Tests Indicated: 2nd Mental ..... Mech. Apt. ..... Clerical Apt. .....
Other Apt. ..... Pers. ..... Trade Test as .....

Interviewed by H Bourdeau Lieut. Date 19-4-43.
Reviewed by ..... Date .....

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

MEMORIAL BAR

DATE DESP

REGN. NO 1566

(1) MEDALS

PERSON ENTITLED TO: Mr. Bernard Zack (Father)

ADDRESS: 5466 Park Avenue,
Apt. 33,
Montreal, P. Q. Oct. 46

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(2)

(3) MEMORIAL CROSS

MOTHER DECEASED (MFM5)

ADDRESS:

(3)

8-3-45

AWARDS—CANADIAN ARMY (ACTIVE)

M

C.B.

500M—1-44 (3467)
H.Q. 1772-45-8

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
LEWIS	Manuel Zack	D-128590	Sgt.	n/l

FILE NO. 405-L-23,918

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star Italy Star War Medal 1939-45 C.V.S.M. & Clasp	7196. 1/4/50

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

M.F.M. 14A
200M-1-42 (2934)
H.Q. 1772-39-1562

CARD SEQUENCE NO._____

NO. 5-128590 RANK PTE NAME LEWIS-M.J.

CASUALTIES, ETC.

PART II D. O. No.	PART II D. O. DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
40	16-2-43	AWL FROM 0100 HRS 15-2-43 (1ST ENTRY)	
44	20-2-43	D.O. 40 CANCELLED	
67	19.3.43	emb. leave 16-3.43-23-3-43	
74	26-3-43	SOS COCTC A-21 on Special Duty Overseas eff. 26-3-43	
86	7-4-43	TOS CON ARMY O/S 28-3-43 & TOS #2 CIRU 3-4-43	
~~88~~	~~9-4-43~~	~~cease to draw T.P. as M.M. GRP "B" wef 28-3-43~~	
88	9-4-43	cease to draw T.P. as clerk GRP "C" wef 28-3-43	
110	4-5-43	S.O.S. #6 / C.O.R.U X 1. dpot Base depot wef 3-5-43	
5	4/6/43	GRANTED TRADES PAY (GROUP "C") W.E.F. 4-5-43.	
2	22-5-43	T.O.S / R.B.R.D wef. 4/5/43	
4	29-7-43	TOS C. Adm) 30-6-43 Discemb. 11-7-43	X-U.K.
11	8-4-44	To be A/Cpl 15 Mar 44	
21	19/6/44	Confirmed Cpl. 15-6-44.	
33	30-9-44	To be. A/SGT with pay	11 Sept 44
~~33~~	~~30-9-44~~	~~To be. A/SGT with pay~~	
33	30-9-44	Ceases to draw. Trades pay clerk "C"	10 Sept 44
CR	9-3-45	confirmed in the rank of Sgt-	24 Feb 45

CASUALTIES, ETC.

PART II D. O. No.	PART II D. O. DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
CR	7-3-45	S OS Cdn Army (Deceased) Killed accidentally 8 Mar 45	

LOWE-MARTIN CO. LIMITED D83960

M.F.M-14
489M-10-40 (7443-4)
T.S.O. 17-39-1662

Occ. Hist form filled Montreal South Que.

No. D-128590 RANK ~~Pte~~ NAME LEWIS MANUEL ZACK *MARRIED *WIDOWER *SINGLE PLACE OF ENLISTMENT AND DATE 11-12-41

RATE OF PAY

D. O. No.	DATE	RANK	GROUP	P. F. OR A. S.	DAILY RATE	IF LIABLE PEN. DED.	REMARKS
298	12-12-41	~~Pte~~		AS	1.30		eff. 11-12-41
240	9-10-42	Pte.	"C"	AS	1.55		eff. 1-9-42
26	30-1-43	~~Pte~~	"C"	AS	~~1.55~~ 1.75		" 1-1-43
11	8/4/44	A/Cpl.	"C"		1.95		15-3-44
21	19/6/44	Cpl.	C		1.95.		15-6-44 comp.
33	38/9/44	A/Sgt	—		2.20		

ASSIGNMENTS

ASSIGNEE	EFFECTIVE DATE	AMOUNT	TOTAL
Mr. Bernard Zack 5466 Park Ave., Apt. 33, Montreal, Que.			
	~~1-1-42~~	~~20.00~~	
	~~1-2-43~~	~~23.00~~	~~23.00~~
	1-4-43	~~23.00~~ 33.85	1-1044
J.U.L. Bond	Mou-Mdy	8 40	

DEPENDENTS' ALLOWANCES

DATE APPLICATION FORWARDED	RELATIONSHIP	AMOUNT AWARDED	EFFECTIVE DATE
13-12-41	Father	20 00	11.12.41

OUTFIT ALLOWANCE $ PAID ON

*DELETE WORDS WHICH ARE INAPPLICABLE

LC

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

PART II D. O. NO.	DATE	
298	12-12-41	TOS DD4, "B"Wing. Eff. 11-12-41.
3	5-1-42	Gr.X'mas leave from 23-12-41 until 29-12-41.
7	9-1-42	On com.att.all purp.#41 Huntingdon Eff,9-1-42.
5	12.1.42	TOS TC#X 41 for all purp wef 10.1.42
		R. & A. LED. AGR'LES MAR 20 '42
39A	26.3.42	Posted to "E" Coy.
44A	9.4.42	Trans. to A.T.C. A-21 Barriefield,wef.8.4.42
82	10-4-42	TOS RCOCTC FROM #41 BTC HUNTINGDON EFF 9-4-42
125	30-5-42	Ceases to be att'd to A21 TC for all purp on attachment to #3 DD Ottawa eff 30-5-42 for RQD&D. Eff 31-5-42 for pay
155	4-6-42	Sosm Tos DD MD#3 Ottawa, Ont. on tfr eff. 1-6-42.
191	10-7-42	Sos DD MD#3 Ottawa, Ont. on tfr to RCOC T/C ~~(A-1)~~ A21 Barriefield, Ont. eff. 10-7-42.
163	13-7-42	T.O.S. A-21 T.C. for all purp. from D.D.M.D. #3. Ottawa. Eff. 11-7-42
169	20-7-42	Granted furlough 20-7-42 - 3-8-42.
208	2.9.42.	Admit K.M.H. 31-8-42.
209.	3.9.42	Disch K.M.H. eff 3-9-42.
234	2.10-42	Sp.L. 22-9-42 to 26-9-42.
240	9.10-42	Granted Trades Pay Group "C" Eff. 1-9-42
301	18-12-42	GRTD NEW YRS. L. FROM 29-12-42 TO 2-1-43
28	30-1-43	Del Pay 150 eff 1-1-43.

No D.128590 Rank Sergeant Name LEWIS, Manuel Zack

Unit R.C.O.C. Date of death 8th March, 1945.

Died at Italy

Cause Killed accidentally as result of road accident.

Death occurred on strength of Forces.H.Q. 405-L-23918

N/K Mr. Bernard Zack
~~c/o Maxwell Lewis~~ Relationship Father

Address ~~5423--Hutchison St.,~~ 5466 Park Ave, Apt. 33,
~~845 Dollard Avenue~~, Montreal, P.Q.

Remains buried in Caserta Military Cemetery
Caserta, Italy.

CHK

Grave location Plot 8, row C, Grave 1

BURIAL REPORT TO N.K.

AUG 21 1945

RETURN TO BUR. OF STAT.

DEC 10 1946

ROYAL MESSAGE DESP'D. APR 11 1945

CAN. MESSAGE DESP'D. APR 10 1945

H & CR Form Despd. NOV 28 1946

PHOTOS DESPATCHED 21-10-48.

5M-10-44 (M-4414)

FORMULE D'ANTÉCÉDENTS PROFESSIONNELS

LA PRÉSENTE FORMULE DOIT ÊTRE REMPLIE POUR CHAQUE MEMBRE DES FORCES ARMÉES. LES RENSEIGNEMENTS DEMANDÉS SONT DESTINÉS À L'USAGE DU COMITÉ CONSULTATIF GÉNÉRAL DE DÉMOBILISATION ET DE RÉTABLISSEMENT, INSTITUÉ PAR LE GOUVERNEMENT CANADIEN POUR ÉTUDIER DES PLANS DE RÉTABLISSEMENT DANS LA VIE INDUSTRIELLE DES MEMBRES DES FORCES ARMÉES APRÈS LEUR LICENCIEMENT. L'EXACTITUDE ET L'INTÉGRALITÉ DES RÉPONSES SERONT TRÈS UTILES AU COMITÉ.

PRIÈRE DE LIRE ATTENTIVEMENT LES INSTRUCTIONS AU VERSO DE LA COUVERTURE DU FORMULAIRE AVANT DE REMPLIR LA FORMULE

LAISSEZ EN BLANC

Partie A—RENSEIGNEMENTS GÉNÉRAUX

1. (a) Nom et prénoms (lettres moulées) LEWIS MANUEL ZACK (b) N° matricule D-128590
2. (a) Arme ARMY (b) Unité R.C.O.C. CA. (c) Rang PTE.
3. (a) Date de naissance 8 Aug.,1909 (b) Avez-vous des personnes à votre charge? NO (c) Domicile au moment de l'enrôlement MONTREAL P.Q.
4. (a) Lieu d'enrôlement MONTREAL SOUTH P.Q. (b) Date d'enrôlement 11-12-41

Partie B—INSTRUCTION ET FORMATION

5. (a) Âge à la sortie définitive de l'école 18 Years (b) Fréquentiez-vous l'école ou le collège au moment de l'enrôlement? No
6. Indiquez exactement où vous en étiez dans vos études à l'école publique, technique ou secondaire (par exemple—"école publique, 4 ans," "école secondaire, 2 ans;" "immatriculation junior" ou "cours technique en imprimerie, 4 ans," etc.) Business College 4 Years High School (Comm. Course)
7. Si vous avez fréquenté une université, indiquez-en le nom ainsi que la classe atteinte ou le grade obtenu No
8. (a) Êtes-vous déjà entré en apprentissage? NO (b) Si oui, dans quel métier? NONE (c) Avez-vous complété votre apprentissage? (d) Si vous ne l'avez pas complété, combien de temps y avez-vous passé?
9. (a) Quelles langues parlez-vous couramment? ENGLISH FRENCH JEWISH (b) Quelles langues lisez-vous facilement? ENGLISH FRENCH JEWISH

Partie C—SITUATION AU MOMENT DE L'ENRÔLEMENT

10. (a) Indiquez si vous étiez EN EMPLOI ou EN CHÔMAGE au moment de l'enrôlement. (Inscrivez simplement "En emploi" ou "En chômage", selon le cas; les détails sont demandés plus bas) WORKING/ (b) Au moment de l'enrôlement de quel syndicat ouvrier ou société professionnelle étiez-vous membre? NO

Partie D—DÉTAILS CONCERNANT CEUX QUI CHÔMAIENT AU MOMENT DE L'ENRÔLEMENT

LES QUESTIONS 11 À 17 NE S'APPLIQUENT QU'À CEUX DONT LA RÉPONSE À LA QUESTION 10 (a) INDIQUE QU'ILS ÉTAIENT EN CHÔMAGE

11. Aviez-vous déjà été employé assez régulièrement depuis votre sortie de l'école?
12. (a) Si la réponse à (11) est "oui", indiquez exactement l'occupation ou le métier effectivement exercé (b) Durée d'emploi dans cette occupation ou métier?
13. Si la réponse à (11) est "non", indiquez exactement l'occupation ou le métier pour lequel vous vous estimez compétent
14. Si vous avez été employé après votre sortie de l'école, indiquez quand vous avez travaillé assez régulièrement pour la dernière fois avant l'enrôlement
15. Donnez des détails concernant votre dernier patron, le cas échéant: Nom Adresse
16. Genre d'affaires du patron (par exemple, "culture" ou "construction de bâtiments" ou "fabrique de chaussures" ou "fonderie de fonte" ou "magasin de détail", etc.)
17. (a) Si vous travailliez à votre propre compte lors de votre dernier emploi, indiquez la nature et l'adresse de votre entreprise (b) Quand l'avez-vous abandonnée?

Partie E—DÉTAILS CONCERNANT CEUX QUI TRAVAILLAIENT AU MOMENT DE L'ENRÔLEMENT

LES QUESTIONS 18 À 23 NE S'APPLIQUENT QU'À CEUX DONT LA RÉPONSE À LA QUESTION 10 (a) INDIQUE QU'ILS ÉTAIENT EN EMPLOI. VOUS ÊTES PRIÉ DE LIRE EN ENTIER CES QUESTIONS ET DE NE RÉPONDRE QU'À CELLES QUI S'APPLIQUENT À VOTRE CAS AU MOMENT DE L'ENRÔLEMENT

SI VOUS ÉTIEZ À L'EMPLOI D'UN PATRON AU MOMENT DE L'ENRÔLEMENT, PRIÈRE DE RÉPONDRE AUX QUESTIONS 18 À 21

18. Nom du patron MR. COMFORT KIMOUR CO. LTD Adresse MONTREAL
19. Genre d'affaires du patron (par exemple, "culture" ou "construction de bâtiments" ou "fabrique de chaussures" ou "fonderies de fonte" ou "magasin de détail", etc.) DRESS MANUFACTURING
20. (a) Genre précis de votre occupation STOCK KEEPER (b) Nombre d'années d'expérience dans ce travail pour le compte de tout patron 10 Years
21. (a) Votre patron vous a-t-il formellement promis de vous reprendre à son service à votre licenciement? NO (b) Votre patron a-t-il refusé de promettre de vous reprendre à son service à votre licenciement? NO (c) Désirez-vous retourner à votre ancien emploi? YES

SI VOUS TRAVAILLIEZ À VOTRE PROPRE COMPTE AU MOMENT DE L'ENRÔLEMENT, C'EST-À-DIRE, SI VOUS EXPLOITIEZ UNE FERME, UN MAGASIN, UNE AGENCE ,OU SI VOUS EXERCIEZ UNE PROFESSION, OU SI VOUS ÉTIEZ ASSOCIÉ DANS L'UNE DE CES ENTREPRISES, PRIÈRE DE RÉPONDRE AUX QUESTIONS 22 ET 23

22. (a) Indiquez la nature du commerce ou la profession (b) Où était-il situé?
23. (a) Nombre d'années dans ce commerce? (b) Avez-vous fait ou vous proposez-vous de faire des plans pour reprendre à votre licenciement votre commerce ou un commerce d'une nature semblable?

Partie F—DÉTAILS DE L'EXPÉRIENCE EN AGRICULTURE

24. (a) Désirez-vous vous livrer à la culture de la terre après la guerre? NO (b) Vous croyez-vous apte à exploiter une ferme? NO (c) Si oui, dans quel genre de culture? NO
25. (a) Êtes-vous né sur une ferme? NO (b) Nombre d'années d'expérience effective dans la culture? NO (c) Dans quelles provinces avez-vous acquis votre expérience? NO

Partie G—DIVERS

26. Avez-vous pris des arrangements autres que ceux indiqués ci-dessus au sujet de votre rétablissement dans la vie civile après votre licenciement? NO
27. Si oui, indiquez la nature de vos projets (par exemple, vous proposez-vous de reprendre vos études, ou vous a-t-on assuré une position, etc.) N.A.
28. Indiquez toute préférence pour un certain emploi ou toute ambition que vous pourriez avoir, autres que celles indiquées ailleurs sur la présente formule NONE

DATE 12-12-41 194.....

SIGNATURE Manuel Zack Lewis

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 LEWIS
(Surname first—Christian names in full—Block capitals)
MANUEL ZACK

(2) Regimental or Official Number and Rank D-128590 Pte.

(3) Unit R.C.O.C.V. C. A.

(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 NIL

[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. BERNARD ZACK, ...retired;

.....5466 Park Ave. Apt.33- Montreal,Que.....

(12) If your father is a widower and is totally incapacitated from earning a living—are you his sole or partial support?..... ~~Sole~~ Partial Support .....NO.....

(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.....

.....$60.00 per month.....

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?.....NO.....

If so, state name and address.....

.....NIL.....

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

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

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?.....NIL.....

(17) Are you contributing to the support of any dependents, other than those shown above?.....NIL.....
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 .....NIL.....

Postal Address .....NIL.....

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

.....

(18) Are you insured? .....YES.....

If so, in what Company?.....Prudential Life Ins. Co.Ltd.....
(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 Manuel Zack Lewis.....
(Signature of officer or man)

Date.....11-12-41.....

.....

.....
Officer Commanding.....

Date.....11-12-41.....

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

NO. 4 DISTRICT DEPOT, A.F.

This form will accompany the soldier's regimental documents at all times.

DEPARTMENT OF NATIONAL DEFENCE
(Army)

R. C. O. C.
Arm or Corps

O' CARD COMPLETE

Trade (if Tradesman or Trade Trainee)

Personnel Selection Record

Work in Arm (if Non-Tradesman)

I.

D-128590	Pte.	LEWIS, Manuel	A	32	A
Regt. No.	Rank	Name (surname first)	A or R	Age	Med. Cat.

English	French Jewish	Montreal, Quebec	16-2-42
Main Language	Other Language(s)	Place (Unit) Interviewed	Date Interviewed

II. Revised Examination "M"

Montreal	16-1-42	H.C. Shaw, Lt.
Place Tested	Date Tested	By Whom

161	II	Subtests	18	16	15	19	19	17	25	32	Subtotals	49	38	74	English
Total	Group		1	2	3	4	5	6	7	8		1-3			English or French

Other Tests

III. Educational Background

Completed Grade XI.
9 months O'Sullivan's Bus. Col. --bookkeeping - diplomas
Speaks good French.
At school for 11 years, left at age 17.

IV. Occupational Background

15 years Ladies Dress Mfrs. -- shipping and stock room work.

Has been in charge of shipping room with 12-15 men under him.

V. Military Background

Enlisted DD #4, 11-12-41.
Attached to BTC #41, 9-1-42.

VI. Other Personal History and Appraisal

Soldier is very stable and of good appearance. Category "A".

Hobbies: Good books, geography.
Sports: Basketball.

Mother is dead, father is retired merchant.

Has driven his own car for about 12 years, and has travelled all over the continent.

Is very well adjusted to Army life -- sleeping well, but is not eating too well just now, as he has had all his upper teeth extracted.

Very interested in learning welding.

Can read and write French.

VII. Recommendations

Trade Training -- welding.

(Signed) H.C. Shaw, Lieut.
Army Examiner

M.F.M. 196
100M—8-42 (5847)
H.Q. 1772-39-1916

See reverse side for further information and follow-up

Further Information and Follow-up

Re-interviewed at A-21 ,C.O.C.T.C. Barriefield, 5-2-43.

Was evidently sent for Ordnance Procedure course. Employed in Q.M. Stores. To date a Qualified Storeman, now being placed on fatigues. Cat. "A", no Advanced Military training. Send for Adv. Mill Training, then use as Storeman.

W.A. DEWAR
(W.A. DEWAR) Capt.
Army Examiner

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

WILL

M.F.M. 10
200M—6-41 (693)
H.Q. 1772-39-1656

(1) I, Manuel Zack LEWIS, of the City
(Name in Full) (City, Town, Village, Township)

Address in civil life.

of Montreal, in the County District of Hochelaga

Province of Quebec, Stock-keeper
(Civil Occupation)

Regimental No D-128590, Unit R.C.O.C. C.A., 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" Mr.Bernard Zack,

residing at: 5466 Park Ave., Apt-33,

Montreal,Quebec,Canada.

All my estate both real and personal.

M.Z.L.

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

M.Z.L.

(4) I appoint .....
(Name) (Address)

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

IN WITNESS WHEREOF I have hereunto set my hand this 12th day of December 19 41

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.

Manuel Zack Lewis
(Signature of soldier)

First witness sign here.

(5) Signature Leon D. Hiebert, pte
Civil Address 4300 Chamberland St. Montreal. P.Q.
Civil Occupation Salesman

Second witness sign here.

Signature W. J. White P.V.
Civil Address Villa St Laurent Que.
Civil Occupation Student

(Witnesses are not to be beneficiaries.)

[OVER]

1

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 with Commanding Officer for transmission to the Records Office for safe custody.

GENERAL

The laws of all but one of the Provinces of Canada provide that marriage subsequent to the date of the Will revokes that Will. Therefore, a soldier immediately upon his marriage must make a new Will in order that, in the event of his death, his estate may be distributed in accordance with his wishes as set out in such new Will.

D. R. 10

RECEIVED
D OF RECORDS
MAR 15 1046
WILL SEC.
N. D. H. Q.

ESTATES
BRANCH
APR 5 1945
H. Q.
OTTAWA.
NATIONAL DEFENCE

(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
			MAR 27 1943				
			EMBKD FOR O/S				
			S.O.S. CDN ARMY (CAN) MAR 27 1943				
			DIS'EMBKD APR 4 - 1943				
			T.O.S. CDN ARMY (O/S) MAR 28 1943				
		1 CORU	~~REPORTED FOR DUTY AT~~ att 2 C I RU	U.K.	5 apr 43	Pte	86 1 apr 43
		1 CORU	Ceases T.P. Clerk C	U.K.	~~5 apr 43~~	Lt	88 - 9 apr 43
	error	1 Coru	~~Rgt rate of pay 1.50 per diem~~	~~U.K.~~	~~38 May 43~~ 1 Jun 43	~~Pte~~ 100.93	~~77 29 Mar 43~~
		1 Coru	Att to 2 C I RU	U.K.	28 Apr 43	Pte	106 - 29 Apr 43
		1 C.O.R.U.	SOS to 1 Gd Base Depot	U.K.	3 May 43	Pte	110 - 4 May 43
4 May 43		1 CSB.D	TOS from 1 C.O.R.U	Fd	4 May 43	"	2 d/ 14 May 43
		1 CORD	Ceases T.P. Clerk C	do	4 May 43	"	5 d/ 4 Jun 43
24 June 43	O.C.	16 BR Bn	Ctd to 1 Bn 16 BR Bn	Fd.	20 June 43	"	8 24 June 43.
"	1 Bn 16 BR Bn	"	TOS from 16 BR Bn (Clerk C)	"	21 June 43	"	1 24 June 43.
		"	Embarked C.A. (UK)	U.K.	29 Jan 44	"	4-29 Jan 44
		"	T.O.S. C.A. (M)	M	30 Jan 44	"	" "
		"	Disembarked	M	11 Jul 44	"	" "
		"	Awd Val Medal and Clasp	"	18-1-44	"	2/44
		"	T o/e A/Cpl	"	15 Mar 44	"	11/44
		"	Confirmed in the rank of Cpl	"	15 Jun 44	Cpl	21/44
26 Sept 44	C.R.		Reverts to Regtl Rate of Pay		26 Sept 44	"	33/44
"	"		T o/e A/Sgt	"	11 Sept 44	"	33/44
9 MAR 45	C.R.	"	Confirmed in the rank of Sgt		24 Feb 45	A/Sgt	11/45
"	C.R.	"	SOS Deceased (Killed Accidentally)	"	8 MAR 45	Sgt	11/45

SERVICE AND CASUALTY FORM

PART I (For all ranks)

M.F.M. 4 (Part I)
A.F.B. 103 (Part I)
150M—5-41 (512)
H.Q. 1772-39-1649

Unit R.C.O.C. CA. Regimental Number D-128590

1. Surname	LEWIS	(17) Regiment or Corps	Unit (Battn., etc)
2. Christian Names	MANUEL ZACK	R.C.O.C.	
3. *Substantive Rank and Appointment			
*Acting Temporary or Local Rank	Sgt		
giving date			
*To be entered in pencil to facilitate alteration.			
4. Place of birth	MONTREAL P.Q. CAN.	(18) Medical	
5. Date of birth as declared on attestation	8 Aug., 1909		
(A)		Category	Date / Authority
6. Date of enlistment	11-12-41	A-	10-12-41 / MFM-2
7. Place of enlistment	MONTREAL SOUTH P.Q.		
8. Residence at time of enlistment	5466 Park Ave., Apt., 33, Montreal, P.Q.		
9. (B) Special conditions (if any) of enlistment or rate of pay			
10. (C) Any subsequent variations of conditions of service			
11. Religion	HEBREW		
12. If married, state date	SINGLE "	(19) Next of kin (entries to be made in pencil)	
13. Trade on enlistment	STOCK-KEEPER	Mrs. Bernard Zack (Father)	
14. Corps, trade and grade		5466, Park Ave Apt 33	
15. (D) Qualifications	Clerk "C" (Appt. 7.12.)	Montreal, P.Q.	
16. (E) Miscellaneous entries			
		(20) E.	
		(21) E.	
		(22) E.	

NOTES—

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

Statement of the Service of No. D-12-8590 Rank pte Sheet No. 2

Name Lewis M. Z.

M.F.M. 1 & 2 (a)
250M—7-41 (1151)
H.Q. 1772-39-1646

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
		Admitted to K.M. Hospital	pte.	31-8-42	COCTC	Farnefield	208	2-9-42
		Discharged from K.M. Hospital	"	3-9-42	"	"	209	3-9-42
		Qualified Clerk RCOC grade C	"	15-5-42	"	"	234	2-10-42
		granted Special Leave from 22-9-42 to 26-9-42	"	22-9-42	"	"	234	2-10-42
		granted Index Reg Clerk grade C	"	1-9-42	"	"	240	9-10-42
		granted New Years Leave from 29-12-42 to 2-1-43	"	29-12-42	"	"	301	18-1-43
		Auth. to draw $1.50 per diem (GO 486 d/28-12-42)	"	1-1-43	"	"	25	30-1-43
		Granted Embarkation Leave from 16-3-43 to 23-3-43 & issued with Transport Warrant # 387233	"	16-3-43	"	"	67	16-3-43
		S.O.S Adl COCTC on Proceeding Overseas	"	26-3-43	"	"	74	26-3-43
		E'MBKD FOR O/S MAR 27 1943						
		S.O.S. CDN ARMY (CAN) MAR 27 1943						
		DIS'EMBKD APR 4 - 1943						
		T.O.S. CDN ARMY (O/S) MAR 28 1943						
		~~PORTED FOR DUTY AT~~ [illegible]	Pte	5 Apr 43	1 CCRC	UK	86	7 Apr 43
		Leave T/P Class "C"	Pte	5 APR 43	COCTC	UK	88	8 Apr 43
		Leave Cancelled to 2 CIRU	Pte	28 Apr 43	COCTC	UK	106	29 Apr 43
SOS		S.O.S to 1 S.A. Base Depot	Pte	3 MAY 43	COCTC	UK	110	4 MAY 43
	TOS	Arm 1 COMD	Pte	14 May 43	1 Spec Base Dep.	UK	3	22 May 43

Statement of the Service of No. D128590 Rank Sheet No.

M.F.M. 1 & 2 (a)
250M—7-41 (1151)
H.Q. 1772-39-1646

Name LEWIS MANUEL ZACK

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
amended	DO 6. 12 Jun 43	granted temporary Clerk 'C'	Pte	4. ~~1~~ Mar 43	1CBRD	UK	5	4 ~~Jan~~ Mar 43
SOS		SOS to 1 Bn 1CBRD	Pte	20 Jun 43	1CBRD	NA	8	24 Jun 43
amended DO 1 of 4 Aug 43	TOS	TOS from 1CBRD. (Clerk C)	Pte	21 Jun 43	1 Bde 1CBRD	UK	1	24 Jun 43
		SOS Cdn Army (UK)	Pte	29 Jun 43	1CBRD	NA	4	29 Jul 43
		To a Cdn Army (M)	Pte	30 Jun 43	1CBRD	NA	4	29 Jul 43
		Disembarked	Pte	11 Jul 43	1CBRD	NA	4	29 Jul 43
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
119		To be A/Cpl	PTE	15 Mar 44	1CBRD	AAI	11	8 Apr 44
M106		Conf. in Rank. Cpl.	Cpl.	15 Jun 44	Bn 1CBRD. 1CBR.	AAI	21	18 Jun 44
		To be A/Sgt.	Lcpl.	11 Sep 44	1CBR 2Bn	AAI	33	30 Sep 44
		c/t draw T. Rate Clerk C	Lcpl.	10 Sep 44	2CBR	AAI	33	30 Sep 44
CK		Case to draw T/Pay Clerk 'C'	Cpl	10 Sep 44	2 CBRB	AAI	33	30 Sep 44
		Conf. Sgt.	Sgt.	24 Feb 45	1 CBRB Bn (A)	AFHQ	11	13 Mar 45
		Ad. Deceased	Sgt.	8 Mar 45	1 CBRB Bn (A)	AFHQ	11	13 Mar 45
		- Died	Cpl	8 Mar 45	1CBRD - GL 61495.			10 Mar 45

CERTIFICATE OF MEDICAL EXAMINATION

Name in full LEWIS, Zack ~~Manuel~~ Manuel Place Montreal

Place Date 10th Dec 41

Part 1. Information obtained from the recruit.

1. Age 32 2. Have you ever suffered from any of the following diseases?

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

Manuel Zack Lewis
Signature of Applicant

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

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

2. Height 5 feet 6¼ inches. 3. Weight 156 pounds.

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

Unit 5/7128 N
DEC 1 [illegible]
+Roy 102039 N

6. Chest measurement—Girth on full expansion 36 inches.
Range of expansion 2 inches.

7. Vision, right 20/40 left 20/40 8. Hearing, right CV20 left CV20
With Glasses— right left

9. Condition of mouth and teeth teeth poor

10. The abnormalities (congenital and pathological) found on examination are as follows
Ear drums - Nose - Normal - Dr. H. Michaud, MD

Color Vision CN Reflexes normal. Rings large - no hernia.

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

J.C. Wickham, Maj.	C.P.Leveque, MD	A.E. Young, MD
J.C. Wickham Maj.	Cp Leveque MD	Arthur E Young
President	Member	Member

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
DEC 12 '41	TAB.T 1 mo. Lt Lunenburg Capt	14.9.42	Cat A Confirmed J.P.N. Williams Capt
AUG 11 1942	TABT (2) Green Capt	MAR 15 1943	Re-Examined Category A E J Brackett Lt
DEC 12 '41	VDCC 1 2R		
16-10-42	T.A.B.T. (3)		

Regtl. No. D-128590 Rank Pte Surname LEWIS Christian Name Samuel Zack

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				
Kingston Mil Hosp.		31	8	42	3	9	42	Syncope (0709)	4	Unchanged. P.U. Duty. Recommend Graded B.P.	Wilton/Capt.

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

28th March, 1945.

Mr. Bernard Zack,
c/o Maxwell Lewis,
845 Dollard Avenue,
Montreal, Quebec.

Dear Mr. Zack:

It was with deep regret that I learned of the death of your son, D128590 Sergeant Manuel Zack Lewis, who died while in the Service of his Country in the Mediterranean Theatre of War on the 8th day of March, 1945.

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.

Yours sincerely,

A. E. WALFORD
Major-General
Adjutant-General

MAR 28 1945

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

mem x- mother deceased.
3-4-45.

/mla

12

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER D-128590 RANK Sergeant SERVICE UNIT

NAME LEWIS, Manuel Zack

DATE OF BIRTH DAY 8th MONTH August YEAR 1909 Date Enlisted: 11-12-41

MARITAL STATUS Single Religion: Hebrew

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

ADDRESS c/o Maxwell Lewis, 845 Dollard Avenue, Montreal, ADDRESS D.A.B. Que.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. Canrecords - 6965A H.Q. 405-L-23,918

CASUALTY DETAILS Killed accidentally as result of road accident. DATE 8-3-45

MEDITERRANEAN

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? MM YES/NO M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO DATE 23-3-45

O/S with Ord S/L 2550

OFFICER I/C RECORDS

5

COPY FOR C.R. FILE

Dupln. with A.G. 4a - 17 Apr 45

1453

INSTRUCTIONS

1. Presidents and Members of Courts of Inquiry or Boards of Officers will familiarize themselves with the Overseas ROs dealing with the subject of Courts of Inquiry and Boards of Officers.

2. The rank, name, appointment and unit of the Convening Officer must be given.

3. The unit of all Members of the Court must be indicated.

4. The signature of each officer composing the Court or Board must be affixed at the end of these Proceedings, together with the date and place of the sitting of the Court.

5. Unless otherwise required by the Convening Order, only one copy of these Proceedings will be prepared.

Passed R3 re Desert

PROCEEDINGS of a Court of Inquiry

assembled at Headquarters 1 Cdn Base Reinforcement Group

on the Fifteenth day of March, 1945

by order of Col. S. A. Lee, Comd 1 Cdn Base Rft Gp

for the purpose of inquiring into and reporting upon the circumstances surrounding an accident on 8 Mar 45 in which D128590 Sgt LEWIS, M. Z. met his death and Capt. B. X. VON DZIEGIELEWSKI was injured.

PRESIDENT

Major A. M. Russell, CIC - HQ 1 CBRGp

MEMBERS

Capt. D. G. Munro CAC - 2 Cdn NETD

Lt. M. J. Cloney CIC - HQ 1 CBRGp

The Court having assembled pursuant to order, proceed to take evidence upon oath.

SHORTHAND REPORTER: K68696 Sgt BROWN, F. O., CMSC, Clerk, HQ 1 Cdn Base Rft Gp, is duly sworn to take shorthand notes of the evidence, a transcript of which follows:

MF B.303
(Overseas Revision)
40/P & S/267 (3479)

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FIRST WITNESS

Capt. B. X. VON DZIEGIELEWSKI, Hast & PER, 1 Cdn Inf Base Rft Bn, AVELLINO, having been duly sworn states:

I am Capt. B. X. VON DZIEGIELEWSKI, Hast & PER, CI of 1 Cdn Inf Base Rft Bn, presently a patient at 65 (Br) Gen Hosp, NAPLES.

I left AVELLINO at approx 1100 hrs Thursday morning, 8 Mar 45, to take Sgt Lewis, Canteen Sgt, 1 Bn, to NAPLES to collect a debt which he had under charged REME personnel for canteen stuff supplied them. We arrived in NAPLES, at approx 1230 hrs or 1245 hrs and contacted the necessary persons and had lunch; then I drove to the Officers' Shop, where I purchased some articles. From there, both Sgt Lewis and myself walked down the Via Roma, Sgt Lewis wishing to buy a watch. Seeing nothing satisfactory, we returned to the vehicle which was parked in the Allied Parking Lot. From there, we proceeded to leave for AVELLINO, stopping at MARIGLIANO to see some friends. Whilst in the shop, I was talking to two English ORs, one of whom I believed I had met before. His name is Davies. I was there for approx 10 or 15 minutes and Davies asked if we were going towards NOLA. I replied "Yes" and he asked if it would be possible for a ride as far as we could take him. I replied "Yes", at the same time asking him if he could drive. His reply was "Yes". I am in the Service Corps and have driven all kinds of vehicles for six years now". As I suffer from a lame back, I asked him if he would mind driving as far as I could take him. His reply was "Yes". The four of us climbed in to the jeep, Davies behind the wheel, and Sgt Lewis beside him. I sat in the back left seat with the other OR beside me. We left MARIGLIANO, travelling approx 35 or 40 mph, and had gone, I think, somewhere between 2 or 3 miles when the jeep gave a very slight swerve to the right and then swerved directly across the road to the left. I could see a truck coming directly at us on his side of the road. Then the truck hit the jeep. I picked myself up from the ground and proceeded to look for the remaining occupants of the jeep. Sgt Lewis was beside the jeep. I could not see where the other chap went. The driver was lying down on the far side of the road. The jeep, when I saw it then, was on its four wheels. The accident occurred between 1530 and 1630 hrs. A station wagon had, in the meantime, drawn up. It was driven by an ATS driver with 2 soldier passengers. They told me to get into the station wagon and that I would be taken to the Hospital and the other chaps looked after.

Q. How long were you in MARIGLIANO?
A. Not longer than 15 minutes at the most.
Q. Where were you?
A. At a little wine shop named "PONE".
Q. That is where you met the 2 soldiers?
A. Yes; in the wine shop.
Q. At this shop, had the driver Davies been drinking?
A. He was in there when I got there. I could not say whether he was drinking before; but he had one drink with us when I was there.
Q. Are you sure L/Cpl. Davies was sober?
A. Yes, In my own judgement, he was perfectly sober.
Q. Why did you not drive the jeep?
A. I asked him to drive as I was tired and have a bad back, which is the reason for my category.
Q. Could not Sgt Lewis drive?
A. I knew that Sgt Lewis wasn't a very good driver.
Q. You did not bring him along as a driver?
A. No. I did not take him as a driver.
Q. Why did you not take your own driver with you to NAPLES?
A. I have no actual driver for the vehicle.
Q. Were you given permission to go to NAPLES.
A. No. I could not find the CO at the time.
Q. Were you told <u>not</u> to go to NAPLES?
A. No
Q. On whose charge is jeep No. 4233340?
A. I could not say. It is a "buckshee" jeep which I have been driving for some little time in my capacity as CI.
Q. What do you mean by "buckshee" jeep?
A. Not on charge - but held in excess to WE.
Q. Was it a rebuilt jeep?
A. No. It was left in my care by two fellows who had gone to the front and was not on charge to the WE of the Bn.
Q. Did you know whether it was on charge to either of them?
A. I could not say.

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FIRST WITNESS (Cont'd)

Q. Did the Bn know you had the jeep?
A. Yes; definitely.
Q. How long have you had the jeep, approximately?
A. Approx 6 months.
Q. Were you told to turn the jeep in by anybody?
A. Yes; I was told.
Q. Who told you?
A. Orders came from the CO.
Q. How long ago?
A. Approx a month ago.
Q. Why did you not turn it in?
A. The jeep at this time had been stolen from 1 Bn Camp and was missing for approx 2 weeks.
Q. How long was the jeep in your possession prior to the trip to NAPLES?
A. Approx 2 weeks.
Q. Why was it not turned into the "Pool" on the order from the CO?
A. I was going to take the jeep with me.
Q. Was there any marking on it?
A. It had the necessary markings - a star and a number - painted on it.
Q. Was it given a serial number?
A. It was supposed to be painted on it. I believe it was done.
Q. Who told you to do that?
A. I was told by Major George to get the proper markings for shipment and have the marking of the star and a serial number painted on.
Q. What was the serial number?
A. Serial number 2628/1.
Q. When was the last maintenance done on the jeep?
A. It was done recently after it had been returned, having been stolen.
Q. To your knowledge, was there any mechanical defect in the vehicle?
A. As far as I could say, no.
Q. Just prior to the impact of the vehicles, do you know what caused the swerve from the right side of the road to the left?
A. No, I was talking to the fellow in the back with me.
Q. When you drove into MARIGLIANO, was the vehicle all right?
A. Yes.
Q. On this trip, prior to the accident, did you notice whether there was any defect in the vehicle; or was it functioning well?
A. There was a slight defect in the head-gasket, which did not affect the steering of the vehicle.

The stenographer's notes are read to the witness.

INTERPRETER: CHARLES WEIL, Interpreter for 12 Cdn Town Major, AVELLINO, is duly sworn as Interpreter for witness Dialetto Luigi.

SECOND WITNESS DIALETTO LUIGI, di Giovani, Via Pigna No 98, VOMERO, Civilian driver for Civilian Vehicle Pool "A", "F" Sqn, NAPLES, having been duly sworn states:

I am Dialetto Luigi, di Giovani, civilian driver for Civilian Veh Pool "A", "F" Sqn, Naples.

I was coming from NOLA to NAPLES. All at once, I saw a small truck coming towards me. The driver lost control of the car, which came over from his right hand side of the road to the left side, blocking my way. When I saw that this car was blocking my side of the road, I stopped the truck. The small car hit the curb, bounced from the curb and hit the right side of my truck.

Q. How fast were you going when the small car hit you, approximately?
A. About 20 mph.
Q. How fast would you say the small car was going, in your opinion?
A. It was going about 30 mph.
Q. Did the small car turn over?
A. No; it did not.
Q. How many were in the car?
A. There were four. I saw that one was killed and that the other three were injured.
Q. Did you see anyone of them leave the scene of the accident?
A. No.
Q. Did the small car skid or swerve over in front of you?
A. It just seemed to turn right towards me.
Q. Could you give any explanation for this turning?
A. I could not.

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SECOND WITNESS (Cont'd)

Q. Where did the front of the jeep hit your truck - on the front or the side?
A. On the right-hand side.
Q. Were you on the right side of the road; or in the centre?
A. On the right-hand side of the road.
Q. Was there any damage to your veh or injury to yourself?
A. No.

Sketch Map of the scene of the accident, marked by the Court as Exhibit "A", is produced first to Capt. B. X. Von Dziegielewski and then to the witness and is admitted by both of them to be a correct diagram of the accident.

Capt. B. X. Von Dziegielewski is present during the taking of the above witness' evidence and declines to question the witness.

The stenographer's notes are read to the witness.

THIRD WITNESS

T/75021 L/Cpl. DAVIES, D., RASC, (Br) Reallocation Centre - All Arms, CMF, BAIANO, having been duly sworn, states:

I am T/75021 L/Cpl. Davies, D, RASC, presently a patient in 65 (Br) Gen Hosp.

I was in a bar at MARIGLIANO with a friend of mine, Pte. Davies, W. We were on the point of leaving when the Capt here (indicating Capt. B. X. Von Dziegielewski), came into the bar. My friend asked him which way he was going and then turned to me and said: "He is going to NOLA; so we may as well go with him." Just before leaving the bar, the Captain asked me if I was in the Service Corps and I said: "Yes." He asked me if I could drive and I said: "Yes. I have been in the Service Corps for 6 years." We went out to the jeep. I got in the front behind the steering wheel and the Captain in the back with my friend. When we had proceeded up the road for some distance, the jeep just swerved to the left hand side of the road. I tried braking; but it was too late. I cannot remember any more until the following morning when I awoke in the hospital.

Q. What was the date of this accident?
A. Thursday, 8 Mar 45.
Q. What was the time of the accident?
A. Approximately 1630 hrs.
Q. How fast were you going when the jeep swerved?
A. I should say about 30 - 35 mph.
Q. Were you ever going over 35 mph?
A. No, Sir.
Q. Did you apply the brakes before swerving to the left?
A. No, Sir. I applied them when I felt the jeep going over to the left.
Q. What, in your opinion, would have made the jeep swerve like that from the right to the left-hand side of the road?
A. A slight touch of the wheel seemed to make it go over to the left.
Q. Did you try to bring the jeep back to the right hand side of the road?
A. I did not have a chance to do so.
Q. Did you swerve to the left to turn up a side road?
A. No, Sir. I did not.
Q. How much drinking had you done at the bar in MARIGLIANO?
A. I had approximately 4 or 5 small glasses of vermouth.
Q. Were you perfectly capable of driving the vehicle?
A. Yes.
Q. Do you hold standing orders as a driver IC?
A. Yes. I am a driver in the RASC.
Q. Where were you going, actually, from MARIGLIANO?
A. To two places. Up to OTTAVIANO; and then I intended to go to AFRIGOLA to visit my brother in the hospital.
Q. How far were you going in the jeep?
A. Back as far as NOLA to get a train to BAIANO.
Q. Did you have a pass?
A. It was my afternoon off from the Officers' Mess, where I work.

.....5/

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THIRD WITNESS (Cont'd)

Q. Have you any idea where the other occupant of the jeep might be?
A. I have no idea. He was probably shaken up, as he had had 13 weeks in the hospital previously.
Q. Have you any idea what could have happened to Sgt Lewis; or were you too occupied?
A. I know nothing about it, Sir.
Q. Do you recall where you hit the oncoming vehicle?
A. The last thing I saw was when I was looking at his left-hand wheel on the left-hand side of his truck..I cannot say where I hit him.
Q. Was Sgt Lewis, sitting beside you, perfectly sober?
A. He was sober, Sir.
Q. You don't remember anyone else touching the wheel?
A. No one else did. No, Sir.

The above witness verifies that Exhibit "A" correctly illustrates the accident.

Capt B.X. Von Dziegielewski is present during the taking of the above witness' evidence and declines to question the witness.

The stenographer's notes are read to the witness.

FOURTH WITNESS: 7688159 Cpl HOWARTH, A., CMP, 501 Provost Coy, CMP, NOLA, having been duly sworn, states:

I am 7688159 Cpl Howarth, A., presently on strength 501 Pro Coy, CMP, stationed at NOLA.

I arrived at the scene of the accident at approximately 1 715 hrs. By that time, the injured personnel had been taken to hospital. The GMC lorry was facing NAPLES on its correct side of the road. The skid marks of the rear of the GMC lorry were 12 yards in length and were very distinct. The jeep was on the same side of the road as the GMC lorry, on the sidewalk and facing NOLA. I could very plainly see the imprint which the tires of the jeep made in crossing the road. I measured and they were 27 yards in length from the right hand side of the road to the left. The body of Sgt Lewis was lying on the ground on the right hand side of the jeep. The other occupants had gone. There were a number of civilians around. An Italian Army Doctor, by the name of Capitano Ferrari, was there; and the driver of the GMC lorry, whose nerves were in pretty poor shape, was present. Itook the particulars of the truck which was a GMC Dodge 3-ton vehicle of the Civilian Vehicle Pool, NAPLES, its number being 4118676, the driver's name being Dialleto Luigi, 78 Via Pigna, NAPLES. The number of the jeep was 4233340.

Q. Was the driver of the GMC lorry sober?
A. Perfectly sober.

(At this point, the Court produces Exhibit "A", which the witness identifies as being a Sketch Map of the scene of the accident made by him from a rough sketch he drew at the scene. He verifies that the particulars of measurements, positions of vehicles and other data shown, are approximately correct.)

Q. Did the marks, made by the jeep, which you saw on the roadway, appear to be skid-marks or the marks of a turning vehicle?
A. Not skid-marks; just tire-marks.
Q. Were the marks which were made by the GMC lorry, skid-marks or tire-marks?
A. Definitely skid-marks.
Q. What damage was done to the jeep?
A. As the jeep was facing NOLA, the rear right-hand side wheel was knocked off completely, and that side was absolutely wrecked. The steering column and the steering wheel were pushed up absolutely straight. On trying to move the jeep, we found that the front wheels were locked by the steering mechanism.
Q. From the damage done to the jeep and the position of the veh, where would you say the jeep hit the GMC lorry?
A. On the right-hand side, in the vicinity of the rear right wheel.

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.....6/

FIFTH WITNESS: (cont'd)

Q. Do you know what disposal was made of the jeep?
A. I had it towed to 767 RASC, NOLA; and it is probably now in their lines. I was told that it would be collected by the Canadians. The body of Sgt Lewis was conveyed to 100 British General Hospital, AFRIGOLA.

(At this point a written and sealed Declaration made in Italian by Capt FERRARI, Director of Medical Staff, 114th Infantry Regiment "Mantova" and obtained by 501 Provost Coy, CMP, NOLA, is produced by the witness, accepted in evidence by the Court and marked Exhibit "B").

Capt. B. X. Von Dziegielewski is present during the taking of the above witness' evidence and declines to question the witness.

The stenographer's notes are read to the witness.

At this point, the Court adjourns to view the scene of the accident.

REPORT OF COURT RESPECTING VIEW OF SCENE OF ACCIDENT

The road at this point, identified in Exhibit "A", is metalled and 27' in width, with a curb at each side about 6" high. The road is smooth, level and straight at this point and is without road junctions. There is a level verge at each side. On the north side, there is a row of small trees about 6' from the curb. The area is partially built-up. There is no obstruction to visibility of any kind. From a point about 35 yards East of the point of the accident, and in the direction from which the jeep was travelling, the road surface is gravelled and rough.

The evidence of the following witness is taken down in writing by the Court in the absence of Capt. B. X. Von Dziegielewski:

FIFTH WITNESS

K45295 L/Cpl MATTENLEY, W. G., RCASC, 1 Cdn Base Tpt Pl, having been duly sworn states:

I am K45295 L/Cpl Mattenley, W.D., 1 Cdn Base Tpt Pl, presently with 1 CBRGp Base Wksp, Canada Barracks, AVELLINO. On or about 9 Mar 45, I was informed by Capt Dickson QM and Tpt Officer for 1 Cdn Inf Base Rft Bn, that a jeep from that unit was at the DID in Nola and required a wrecking truck to haul it to 1 CBRGp Wksp. I despatched B63071 L/Cpl. MULDOON, F. with the wrecking truck to recover the jeep. I instructed him to check the jeep before moving it and note any further damage which might result from towing the vehicle to the Wksp. The jeep was brought in at about 1600 hrs that day. I personally checked it and found it to be damaged as follows:

1. The right rear wheel and tire were gone and the wheel-hub and drum damaged beyond repair;
2. The right side of the body and the frame were badly dented, torn and crushed up against the right front seat;
3. The right front spring was broken and bent;
4. The headlights were missing and the right headlight bracket and right side of the radiatior grille were bent in;
5. The steering column was bent straight up against the dash-board and the steering wheel, bent and cracked;
6. The left window of the windshield was cracked and the windshield found torn from its brackets and lying in the back of the jeep;
7. The battery, with one terminal broken off, was found upside down in the battery box.

The above record is read to the witness.

SIXTH WITNESS: B63071 L/Cpl. MULDOON, F., RCASC, 1 Cdn Base Tpt Pl, having been duly sworn states:

I am B63071 L/Cpl. Muldoon, F., of 1 Cdn Base Tpt Pl, stationed at Canada Barracks, AVELLINO. On 9 Mar 45, I was detailed by L/Cpl. Mattenley to proceed to the DID in NOLA and pick up a jeep which had been involved in an accident. Following instructions, I checked the condition of the jeep before towing it back to 1 CBRGp Wksp. No further damage was caused in the towing. I reached the Wksp about 1945 hrs that evening.

Q. Did you notice whether the right rear tire and front headlights were missing?

A. Yes. They were all missing.
Q. Where was the windshield?
A. It was lying in the back of the jeep.

The above record is read to the witness.

The Court adjourns to view the damaged jeep at 1 CBRGp Wksp and reports that the damages enumerated in the evidence of K45295 L/Cpl MATTENLEY, W. G., are correct.

~~"The stenographer's notes are read to the witness".~~

SEVENTH WITNESS: Capt. W. A. ERB, Canadian Armoured Corps, having been duly sworn states:

I am Capt. W. A. Erb, presently S & TO for HQ 1 Cdn Base Rft Gp.

Q. Have you records showing what vehs are on charge to the various sub-units of 1 Cdn Base Rft Gp?
A. Yes.
Q. On whose charge is 6 cwt WD Veh No 42333407?
A. I have no record of such a vehicle. No such veh was ever issued or loaned by Group to any unit and it is not shown against the WE of any unit of Gp.
Q. Did you warn sub-units of 1 CBRGp that all surplus vehs were to be reported and registered?
A. Yes; I did. By 15 Feb 45 all units had been warned.
Q. Did 1 Cdn Inf Base Rft Bn apply to you to have a surplus jeep taken on charge?
A. No.

The above record is read to the witness.

EIGHTH WITNESS CAPT. W. J. M. MOGAN, Canadian Armoured Corps, having been duly sworn states:

I am Capt. W. J. M. Mogan, CAC, presently on strength of HQ 1 CBRGp and acting as Staff Captain. I produce from my custody two documents: first, AFB 117, being Report on Injuries respecting Capt. B. X. Von Dziegielewski, 1 Cdn Inf Base Rft Bn, dated 8 Mar 45; secondly, covering letter of 65 (Br) Gen Hosp, dated 12 Mar 45; and thirdly, Br Hospital Form No.8, being Notification of Death of D128590 Sgt. LEWIS, M. Z. on 8 Mar 45 from 100 Br Gen Hosp.

Report on Injuries submitted in evidence is marked Exhibit "C"; covering letter of 65 (Br) Gen Hosp, as Exhibit "D"; and Certificate of Death of 100 (Br) Gen Hosp, as Exhibit "E".

The above record is read to the witness.

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NINTH WITNESS: WILLIAM HENRY HUNSTON, presently Senior Interpreter for 12 Cdn Town Major, AVELLINO, having been duly sworn states:

I am William Henry Hunston, employed as Interpreter by 12 Cdn Town Major, AVELLINO. I produce an English translation of a Certificate, made in Italian by Capt. Ferrari, Director of Medical Staff of 114th Infantry Regiment, "MANTOVA" dated 14 Mar 45 and bearing the seal of the 114th Infantry Regiment, respecting the death of Sgt Lewis, who was pronounced dead on the NAPLES - NOLA highway on 8 Mar 45. I declare that this translation is correct and made to the best of my knowledge and ability.

The Court accepts Translation of Declaration in evidence and marks it as Exhibit "F".

The above record is read to the witness.

.....9/

REPORT OF THE COURT

Having examined the witnesses, viewed the scene of the accident and the damaged vehicle, the Court reports as follows:

1. At approximately 1630 hrs 8 Mar 45, a 5 cwt vehicle ("Jeep") bearing No. 4233340 was in collision with 3-ton Dodge GMC No. 4118676 on Route 7 near MARIGLIANO at MR 3958 on Sheet 19 (Italy 1:200000). (See Sketch-Exhibit "A")

2. 5 cwt veh was driven by T/75021 L/Cpl. DAVIES, D., a British soldier of Reallocation Centre - All Arms, CMF, BAIANO, at the request of Capt. B. X. Von Dziegielewski. The GMC truck was driven by DIALETTO LUIGI, of VOMERO, Italian driver for Civilian Veh Pool "A", "F" Sqn, NAPLES.

3. The occupants of the 5 cwt veh were Capt. Von Dziegielewski, D128590 Sgt. LEWIS, M. Z., L/Cpl. Davies, D. and another British soldier, named Pte Davies, W., of Reallocation Centre - All Arms - CMF, presently whereabouts unknown.

4. It would appear, from the evidence, that the 5 cwt veh was proceeding East along Route 7, at about 35 miles per hr, and had just left a gravelled road surface and entered upon a smooth metalled surface when, for some unknown reason, the veh swerved to the left side of the road into the path of the oncoming GMC truck, which was travelling at about 20 miles per hr. The 5 cwt appears to have struck the curb at the North side of the road and then came in contact with the GMC truck. The main point of impact of the 5 cwt was the rear right side just above the right rear wheel.

5. As a result of the collision, the British driver of the 5 cwt was injured and hospitalized; Sgt Lewis, sitting in the co-driver's seat, was killed instantly, as certified by Italian Army Medical officer, Capt. FERRARI. (Exhibits "B" and "F"); Capt. Von Dziegielewski was injured seriously and hospitalized; the fourth passenger disappeared from the scene of the accident and has not been located to date. Details of injuries to Capt Von Dziegielewski on ~~MFB 371~~ AFB 171 and Death Certificate by Italian Medical officer are attached to these Proceedings as Exhibits "C" and "B" respectively.

6. It would also appear from the evidence that Sgt Lewis, in his capacity as Canteen Sergeant, made the trip for the purpose of adjusting Canteen accounts. Capt. Von. Dziegielewski made the trip solely for the purpose of transporting Sgt Lewis.

7. There is evidence that some drinking was done by the occupants of the 5 cwt at MARIGLIANO just prior to the accident; but there is no evidence of drunkeness.

8. Car 5 Cwt bearing No. 423340 was in the possession of Capt Von Dziegielewski and used by him as CI of 1 Cdn Inf Base Rft Bn; but it was not on charge to that unit or to any other known Canadian Army Unit.

9. The damages caused to the car 5 cwt are listed in detail in the evidence of the Fifth Witness, K45295 L/Cpl Mattenley, W.G.

10. No injury was suffered by the driver of GMC truck No. 4118676 and there was no damage caused to the veh.

Signed in the Field this 18th day of March, 1945.

_____ PRESIDENT

_____ MEMBER

_____ MEMBER

H.Q. 405-L-23918
D.R. 2 (D)

21st August, 1945.

Bernard Zack, Esq.,
c/o Maxwell Lewis,
845 Dollard Avenue,
Montreal, P.Q.

Dear Sir:

Information has just been received from overseas that the remains of your son, D.128590 Sergeant Manuel Zack Lewis, have been buried in grave 1, row C, plot 8, of Caserta Military Cemetery, Caserta, 16 miles North of Naples, Italy. Marked map is enclosed. This is a recognized military burial ground and will receive care and maintenance in perpetuity.

The grave will have been temporarily marked with a wooden marker in the form of the Star of David 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,

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

DCL/ET

14

FORM No. 1

Register No. D132821

Nominal Roll No. D306

H.Q. File No. 465-L-23,918

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
D128590	SGT.	LEWIS	MANUEL ZACK

REASON FOR TERMINATION OF SERVICE:

1st Enlistment ..... DECEASED ..... CARO ..... ( )

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

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

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. 11 DEC - 41	T.O.S.	T.O.S.
S.O.S. 8 Mar - 45 MD 0/S	S.O.S. nil MD	S.O.S. MD
Total Days 1184	Total Days	Total Days

Total Service ..... 1184 DAYS

—	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere	473	c	473
Overseas Service	711	c	711
Totals	1184	c	1184
Add Non-qualifying Service			c
Total Service			1184

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 8 March 45 2. Date S.O.S. Overseas .....

REMARKS:

Computer's Signature H C Lachance

Checker's Signature [illegible]

Date Computed 16 June 45

RECD WTD LST SERVICE 8 March 45

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

for 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

Total

Overseas: T.O.S. 29 Mar. 43 T.O.S. T.O.S.

S.O.S. 8 March 45 S.O.S. S.O.S.

Total

25M-12-44 (6215)
H.Q. 1064-81-3

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

4
ARMY

DECEASED MEMBER'S NAME: Manuel Zack (CHRISTIAN NAMES) LEWIS (SURNAME)

REGISTER NO. D-132/82
FILE NO. 405-L-23918
DATE 17-8-45
SERVICE NO. D-128590
FINAL RANK OR RATING Sgt.
DATE OF DISCHARGE 8-3-45

PAYEE Mr. Bernard ZACK,
ADDRESS 5466 Park Ave., Apt.33, Montreal - P.Q.

DATE OF TERMINATION OF OVERSEAS SERVICE 8-3-45

		$	¢
A. TOTAL QUALIFYING SERVICE	1170 NO. OF DAYS 1184/30 EQUAL TO 39 COMPLETE PERIODS AT $7.50	292.50	
B. QUALIFYING OVERSEAS SERVICE	No. of Days 711 LESS 14 INELIGIBLE DAYS, EQUAL TO 697 DAYS @ 25c. PER DAY (SEE PAR. 2 OVERLEAF FOR EXPLANATION)	174.25	
		466.75	
C. SUPPLEMENT FOR OVERSEAS SERVICE			
DAILY RATES AT DISCHARGE: PAY	$ 2.20		
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$ 1.25		
ADDITIONAL PAY	$		
	$		
	$		
DEPENDENTS' ALLOWANCE 1/30 OF $25.00	$ .83		
TOTAL	$ 4.28 X7 = $ 29.96		
NO. OF DAYS 711/183	X$ 29.96	116.40	
D. WAR SERVICE GRATUITY		583.15	
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES	$		
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	$		
OTHER DEDUCTIONS	$		
F. TOTAL AMOUNT PAYABLE		583.15	

G. YOUR PORTION OF GRATUITY IS— 100%

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

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

△T

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

PREPARED BY	CHECKED BY
[redacted]	[illegible]

TREASURY		
	CHECKED BY	DATE
	A.G. Bradshaw	1-9-45

[illegible] Capt
SERVICE REPRESENTATIVE

(1) SOLDIER'S NAME AND DESCRIPTION ON ATTESTATION

Regtl. No. D- 128590

Surname (in capitals) LEWIS

Christian Names (in full) MANUEL ZACK

Date of Birth 8 Aug. 1909

Place of Birth MONTREAL - P.Q. CANADA

Trade on Enlistment STOCK - KEEPER

Nationality of Father at birth ROMANIAN

Nationality of Mother at birth RUMANIAN

Religion HEBREW

Enlisted at

Date 11 Dec 1941

Particulars of former service (if any) i.e. Regtl. No., Corps and period.

Signature of Soldier Manuel Z. Lewis.

Signature of Officer

Place Field Date 1-5-43

(II) NEXT OF KIN

Any change becoming known is to be duly noted with date of such change and reported by O.C. Unit to the Officer i/c Records.

NOTE.—No entry in these pages has any legal effect as a Will (see pages 20 to 23)

Nearest degree of relationship		Names	Date
1st	Wife		
	Children		
2nd	Father	Mr. Bernard Zack	11-12-41
	Mother		
3rd	*Brothers and Sisters	Miss Anne Zack	11-12-41
4th	Other Relatives (state relationship)		

*State whether brothers are older or younger.

NOW LIVING

Latest known Address in full
5466 Park ave. apt. 33, Montreal P.Q. CANADA
as above

(III) RANK and APPOINTMENT

Date	Rank and Appointment	Substantive, Temporary, Acting or Local (with or without pay)	Authority of Part II Orders	Signature of Officer
11-12-41	Pte.		4.A.D.-298	
15-3-44	A/Cpl.	a/p. Pt. [illegible]	Org. #21	
15.6.44	Confirmed	Wd. P.	D/19-6-44	
	Corporal		S.O.33	
11-9-44	A/SGT.	W. P.	15/30.9.44.	

7

(IV) Certificate Applicable to all Arms, to be completed and signed by the C.O. Bn., etc., before a Soldier proceeds Overseas

TRAINED (passed Recruit's Course as laid down for his arm of the Service) *except that he requires further training in:—* *

T.O.F.T. Rifle
A.Tk.
L.M.G.
Gas
J.D.

} 30-4-43

Qualified in addition as under :— A-21- Trade Test
Qual. Clerk, Group C. Pt. II. 234
R.C.O.C. clerk. d/2-10-42
DDSD

Date.....

* If no further training required, strike out words in italics and initial.

(V) PARTICULARS OF TRAINING

Courses and Schools. Specialist Qualifications. Swimming, etc., show'g result	Date	Signature of Officer
D.M. Chamber Test	2-5-43.	F Fletcher Lt
L.M.G.		Bx von Dziegielewski Capt C.O. 1 Bn 1CBRD
2" MORTAR.		
GRENADES 36th 15th 77th		
T.M.C.		
RIFLE		

(VI) SMALL ARMS RANGE COURSES

Year	Classification	If Table not completed, state parts fired	Signature of Officer

(VII) EDUCATIONAL QUALIFICATIONS

Certificate, Specialist Qualifications, etc.	Place	Date	Signature of Officer
4 yrs. High School			[illegible signature] Lt.
Business College 1 yr.			

(VIII) TRADE RECORD

(For men in receipt of tradesmen's rates of pay only)

Trade	Group	Class	Remarks, e.g., On enlistment; Re-classified; Re-mustered, etc.	Date	Signature of Officer
Clerk.	'C'		authority D.O. 5-4 June. 43 1.C.B.R.D. 2nd Echelon. To Draw. trades Pay from 4 May—1943.		[illegible signature] Lt.
Clerk	'C'		Drawing Trades Pay	4/5/43	[illegible signature]

(IX) EMPLOYMENT WHILST SERVING

Period		Nature of Employment	Remarks and Signature of O.C. Coy., etc.
From	To		
9-4-42	30-5-42	Under instruction	J. McCaldlow Lt
11-7-42	26-3-43	Under instruction	
4-5-43	15-3-44	B.O.R. Club Gp 'C' (Gen Duty)	C.W. Lowmarsh
16-3-44	25-10-44	A/CQMS H.Q. Coy.	J. Nicholson Capt
25-10-44		CANTEEN SGT.	J. Nicholson Capt

To include (1) Regimental, (2) as Skilled Tradesmen, (3) as Specialist, e.g., Signaller or M. Gunner.

(X) MEDICAL CLASSIFICATION

Date	Category or Grade	Medical Examiner of Recruits, or other Medical Authority	Signature of Medical Officer
10-12-41	A	Med. board	W.S. Caldlow
14-4-42	A	Bat. confirmed	
15-3-43	A	Bat. confirmed	

(XI) PRESCRIPTION FOR GLASSES

	Vision without Glasses	SPH	CYL	Axis Standard Notation	Vision with Glasses	Ophth, Centre:	Date of Exam.:
						12 Cdn H	11-6-43
R	6/24	1.75	2.00	180	6/6	Frame No. (or measurements):	Date of Issue:
L	6/18	1.00	2.00	170	6/6	65 E	

Signature of M.O. J B Rothwell Maj.

	Vision without Glasses	SPH	CYL	Axis Standard Notation	Vision with Glasses	Ophth, Centre:	Date of Exam.:
R						Frame No. (or measurements):	Date of Issue:
L							

Signature of M.O.....

(XII) PARTICULARS OF DENTURES SUPPLIED

Particulars	Date	Signature of Medical or Dental Officer
O.U.D } MADE & INSERTED P.L.D }	16 AUG 43	E.E. Smith

(XIII) PARTICULARS OF SURGICAL APPLIANCES ISSUED

Particulars	Date	Signature of Medical Officer

(XIV) PROTECTIVE INOCULATIONS

Nature of Vaccine, "T.A.B." Cholera, Plague, etc.	Date	Signature of Medical Officer
T.A.B.T. 1	12-12-41	W/S Campbell Capt
T.A.B.T. 2	11-8-42	
T.A.B.T. 3	16-10-42	
Typhus 1	25.11.43	
Typhus 2	2-12-43	
" 3	9.12.43	
Typhus 1cc	5-9-44	
T/ABT 1/2 cc	5-9-44	
Diptth (1)	26-12-44	R.S. Lewis
Diptth (2)	18-1-45	

(XV) VACCINATION

Date Vaccinated	Signature of Medical Officer
12-12-41	W/S Campbell Capt
5-9-44	J.E.S.

(XVI) MISCELLANEOUS ENTRIES

(For entries for which space is not otherwise provided)

NOTE.—No entry on this page has any legal effect as a WILL

Particulars	Date	Signature of Officer
X-ray 102039 N.	11-12-41	W/S Campbell Capt IBn 1CBRD
"M" Tent (new) cpt.	19-4-43	CA (AF)
"G" Card cpt.	19-4-43.	
FINGERPRINTED—CAIB		
C.A.P.	20-6-43	J Beauchamp Lt.
Identification Card PW	25-10-43	DBDickson Lt. 1Bn 1CBRD 1 BNAF.
Awarded CUSM and Clasp. Auth. Pt II Gebeln Orders #2 d/26Jan44	17-2-44	DBDickson Lieut 1Bn 1CBRD C.M.F.
Blood Group A.	MAY 27 1944	
ON 11-12-44 ENTITLED TO 3 Red Service Chev.	25-9-44.	J Geyl Lieut. Capt
1 Beretta Pistol #17716	6 Oct 44	DBDickson Capt
KAHN TEST NEG.	28.11.44	Lieut R.A.M.C.

No entry is made on this page without special instructions being issued

Particulars	Date	Signature of Officer

A soldier who has made a Will is recommended to inform his Commanding Officer where such Will has been deposited and the Commanding Officer shall upon receipt of such information forthwith complete the following certificate and despatch the same to the Officer i/c Records.

No. Rank Name

states that he has executed a Will and that the same has been deposited with
at

Signature of Officer.
Rank or Appointment.

Date

Soldiers who possess real estate and who have not made a Will are recommended to make a formal Will before embarkation when action as indicated above should be taken, or to make a Will on one of the forms provided, M.F.M. 10 with one or more beneficiaries or M.F.M. 10a in the case of a soldier owning real estate, and to hand this document duly executed to their Commanding Officer for transmission to the Record Officer concerned for safe custody.

The Officer receiving such Will shall complete the following certificate—

Certificate

M.F.M. 10 received and forwarded to the Officer i/c Records at H.Q. MD 4

Wm Campbell Lt
Signature of Officer.
Rank or Appointment.

Date Certificate or Will extracted 1-12-40

Signature of Officer Wm Campbell Lt

To whom sent H.Q. MD 4

Dept. M.D.

Date Certificate or Will extracted .....

Signature of Officer .....

To whom sent .....

Dept .....

Solely for use on Active Service. The Will, on page 24, must **NOT** be used until you have been placed under orders for Active Service.

SHORT FORM OF WILL
(Write Will on next page)

If a soldier on active service, or under orders for active service, wishes to make a short Will, he may do so on next page. **It must be entirely in his own handwriting and must be signed by him and dated.** The full names and addresses of the persons whom he desires to benefit, and the sum of money or the articles of property which he desires to leave to them, must be clearly stated. **The mere entry of the name of an intended legatee on the next page without any mention of what the legatee is to receive is of no legal value.**

The following is a specimen of a Will leaving all to one person :—

In the event of my death I give the whole of my property and effects to my mother, Mrs. Mary Bull, 999 High Street, Toronto.

(Signature) GEORGE BULL,
Private No. 30000,

Date 5th August, 1936.

The following is a specimen of a Will leaving legacies to more than one person :—

In the event of my death, I give $10.00 to my friend, Miss Rose Smith, of No. 1, High Street, London, and I give $5.00 to my sister, Miss Maud Bull, 999 High Street, Toronto, and I give the remaining part of my property to my mother, Mrs, Mary Bull, 999 High Street, Toronto.

(Signature) GEORGE BULL,
Private No. 30000,

Date 5th August, 1936.

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY GL

Name LEWIS Manuel Z. No. D.128590
Surname Christian Names

SGT C.A. O/S 8-3-45
Rank Unit Date of Death

AMOUNT

L.P.C. $ 506.01

Date 26-9-46

Other Credits.....

Total..... 506.01
Prev dist. 230.38
This dist. 275.63

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Father	Bernard Zack 5466 Park Ave., Apt 33 Montreal, P.Q. (sole beneficiary under will)	275.63 R

NR#351

P4. TO TREAS. 24-10-46 QW

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	275.63

CLASSIFIED BY

D

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

50M—5-46 (9153)
H.Q.1772-45-27

File No. 405-L-23918

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. D/285790 Name LEWIS MANUEL ZACK

Rank on Discharge Lyt Date of Discharge 8-5-45

Authority for Discharge or Retirement Deceased

Served in:

			Non-qualifying service
Canada	from 11-12-41 to	27-3-43	
	from to		
United Kingdom	from 28-3-43 to	29-6-43	
	from to		
Italy	from 30-6-43 to	8-5-45	Killed accidentally
Northwest Europe	from to		
---------	from to		
---------	from to		

Eligible for award of:

1939 - 45 Star ok /

---------- ----------

Italy Star ok /

~~France-Germany Star~~

Defence Medal NE /

War Medal ok /

Canadian Volunteer Service Medal ok /

with clasp ok /

M

Verified by Cathie Staley

Date 1-10-46

Carded OCT 2 1946

WT

HA 165

RIBBON DESPATCH

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: IN THE FIELD(ITALY)

Official name of civil municipality or township:

Place an X over the word which applies to this municipality or 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: LEWIS, (Block letters)

Given names: Manuel Zack.

Do not write in this space

4. RESIDENCE

Street: Park Ave., No. 5466

Official name of civil municipality or township: Montreal,

Municipal county: Province: Quebec.

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

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

10. BIRTHPLACE (Province or Country): Quebec.

11. DATE OF BIRTH: August (Month) 8th, (Day) 1909. (Year)

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

OCCUPATION

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

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	BERNARD ZACK.	
MOTHER (Maiden Name)		

19. Place of burial, cremation or removal: Buried in Italy.

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

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church

(b) Civil municipality of

(c) Municipal county

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

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: March (Month) 8th, (Day) 19 45. (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) Multiple injuries.

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....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....Accident....Date....19....
(State which)

Manner of injury....Vehicle in which he was a passenger hit a jeep.
(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

DEC 10 1946

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

[signature]

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 français)

Director of Records, Dept. of National Defence.

FORM NO. 1

Register No..... Nominal Roll No.....

H.Q. File No.....

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
D128590	CPL	LEWIS	MANUEL ZACK

REASON FOR TERMINATION OF SERVICE:

1st Enlistment ..... Died ..... CARO ..... ( )

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

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

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. 11 DEC 41	T.O.S.	T.O.S.
S.O.S. 8 MAR 45 MD 0/S	S.O.S. MD	S.O.S. MD
Total Days 1184	Total Days	Total Days

Total Service ..... 1184 DAYS

——	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere	472	nil	472
Overseas Service	712	nil	712
Totals	1184	—	
Add Non-qualifying Service			—
Total Service			1184

EMBARKATION DETAILS:

1. Date S.O.S. Overseas ..... 8 MAR 45 ..... 2. Date S.O.S. Overseas .....

REMARKS:

Computer's Signature ..... Peter Morrison (Cpl)

Checker's Signature ..... [illegible]

Date Computed ..... 19 JUL 45

DIED WHILST IN SERVICE 8 MAR 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

Total

Overseas: T.O.S. 28 MAR43 ✓ T.O.S. T.O.S.

S.O.S. 8 MAR45 ✓ S.O.S. S.O.S.

Total

3/45A MFM 510
40/PAY/254 (8550)

CANADIAN ACTIVE SERVICE FORCE
OVERSEAS
LAST PAY CERTIFICATE
(All Ranks)

District .....

Dispersal Area .....

Regtl No. D128690 Rank and Name LEWIS M.Z. Sgt.

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

(Transfer or Discharge) ..... to ..... on 8th March.45. 19 .....

Reason Death Authority : CCL."C" 1795/10.Mar.45.

The following is a statement of the account of the above-named from 1st March. to 31st March.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	112	00
First Monthly Payment			Regimental Pay 31 days at $2.20	68	20
Casual Payments			Tradesmen's Pay ..... days at ..... $		
Payments on Transfer or Discharge			Additional Pay (Give Particulars) ..... days at ..... $		
Assigned Pay	35	00			
Regimental Charges			Allowances (give particulars) ..... days at ..... $		
Public Stoppages (give particulars) :					
J.V.1877	275	63	D.P.Int:		19
			C.Eff SOCR 2789	3	76
			" " " 45856	338	73
			✓ Cash Credit OR144038	17	88
To Balance Cr Free	220	13			
To Balance Cr Deferred	10	00	By Balance Dr		
Total	540	76	Total	540	76

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

Remarks

A.P. $35.00 (F) Stopped eff Apl.45.

A.P. $8.40 (7th V.L.) Can: eff Nov.44

B.P.O's No.WI/65.828465./£1 each.
to.68. Incl:

Compiled by M.Durham.

Checked by L Broughton

Date 1st Dec.1945. 19

Certified correct W.B Blackburn.
for Chief Treasury Officer, Overseas

MW

3/45A MFM 510
40/P&S/25 (8550)

CANADIAN ACTIVE SERVICE FORCE
OVERSEAS
LAST PAY CERTIFICATE
(All Ranks)

District .....

Dispersal Area .....

1st Amended

Regtl No. D128590 ...Rank and Name ..... LEWIS. M.Z. Sgt.

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

(~~Transfer~~ or Discharge) ..... to ..... on ..... 8th March. 1945 19 .....

Reason ..... Death ..... Authority : ..... CCL. "C" 1795 d/10th Mar. 45.

The following is a statement of the account of the above-named from ..... 1st Mar: ..... to ..... 31st Mar: ..... 19 ... 45. ..... the inclusive date of transfer or discharge.

Dr Particulars	Amount		Cr Particulars	Amount	
Balance Dr from last account			Balance Cr from last account	112	00
First Monthly Payment			Regimental Pay 31 days at $2.20	68	20
Casual Payments			Tradesmen's Pay .....days at ..... $		
Payments on Transfer or Discharge			Additional Pay (Give Particulars) ....days at ..... $		
Assigned Pay	35	00			
Regimental Charges			Allowances (give particulars) .....days at ..... $		
Public Stoppages (give particulars) :					
J.V.1877	275	63	D.P.Int:		19
			C.Eff SOCR 2789	3	76
			" " " 2789	338	73
			Cash Credit OR 144038	17	88
To Balance Cr Free	495	76	Cash Eff J.V. 450	275	63
To Balance Cr Deferred	10	00	By Balance Dr		
Total	816	39	Total	816	39

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

Remarks

Assnd Pay $35.00 (F) Stopped eff April.1945.

Assnd Pay $8.40 (7th V.L. Cancelled eff Nov.44.

B.P.'s No.W1/65-8.828465 £1.0.0. each.

Compiled by ..... B.M.Wadsworth.

Checked by .....

Date ..... 23rd Aug.46. ..... 19 .....

Certified correct .....
for Chief Treasury Officer, Overseas

MW

FOR COMPLETION AND RETURN BY

Form P. 64

Mr. Bernard Zack,
c/o Maxwell Lewis,
845 Dollard Ave.,
Montreal 10, 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-L-23,918 FD-411

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

April 10, 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

LEWIS Manuel Z. Sgt.

D-128590 Can. Army

ESTATES BRANCH
APR 18 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.

GEB/HS

L. Baird Capt
Director of Estates.

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	INFORMANT'S STATEMENT: 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.....				
2	Children of the Deceased and dates of their Births.....				
3	Father of the Deceased.....		Mr. Bernard Zack		
4	Mother of the Deceased.....		deceased		
5	Brothers of the Deceased	Full Blood	Max Zack George Zack		845 Dollard Ave New York City
		Half Blood			
6	Sisters of the Deceased	Full Blood	Goldie Stern Annie Garelick		109 Laurier East 5466 Park Ave.
		Half Blood			
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each.		Names and ages of their children (if any)		Address of their children

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Manny Zack Lewis
9	Date of his birth.	8 Aug 1909
10	Place and date of his marriage.	Single
11	Place and date of his parents' marriage.	Bucharest Roumania.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal, Quebec, Canada.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Montreal (All his life) (b) (c) (d)
14	Nature of employment before enlistment.	Shipper
15	State whether he owned the premises in which he lived, and, if so, where situated.	No.
16	Name place where deceased stated he intended to make his permanent home.	5466 Park Ave, Montreal, Que Apt. 33

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	No civilian Will.
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?	Not married.
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 accounts to my knowledge
20	Amount of War Savings Certificates held by deceased. Indicate where located.	None.
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	$150.00 Bearer Bonds under my care at my own bank.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Prudential Life Insurance Co. $1000.0 The estate is beneficiary
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	No.

OTHER PARTICULARS

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

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

(PLEASE TURN OVER)

DECLARATION

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

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

* 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.

X Bernard Zack ..... {Signature of Informant}

5466 Park Ave, Apt. 33 Montreal, Que. ..... Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief ..... Mr. Bernard .....

See above. ZACK ..... {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 this 16th day of April 19 45

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

S. Herschorn ..... Qualification Rabbi

Address 5365 Park ave

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