D15543
HOULE
JEAN

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

11-10-44

AWARDS—CANADIAN ARMY (ACTIVE)

M

C.B.
500M—1-44 (3467)
H.Q. 1772-45-8

FILE NO. 405-H-21,527

SURNAME (IN BLOCK LETTERS) / CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
HOULE Jean Paul	D-15543	Pte.	Fus.Mont-Royal

WAR SERVICE
BADGE
(CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star ~~France & Germany Star~~ Defence Medal War Medal C.V.S.M. & Clasp	9462 19/11/49

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON
ENTITLED TO Mrs. Amable Houle (Father)

ADDRESS: 38 Poitras St., Victoriaville, P.Q.

(2) MEMORIAL CROSS
WIDOW Single

ADDRESS:

(3) MEMORIAL CROSS
MOTHER Deceased (MFM5)

ADDRESS:

MEMORIAL BR
(1)
DATE DESP
REGN. NO 14/11

(2)

(3)

Houle J. P.
D-135643

(XIV) PARTICULARS OF DENTAL TREATMENT

Date	Required	Completed	Specification — Use authorized Abbreviations and Symbols	Signature of Dental Officer
13/4/44		✓		J. M. Zmattini
11. Aug. 44	✓		S. F.	S.F. Rader
18/9/44	✓	✓	2 F.	R Brown Capt

(1) SOLDIER'S NAME AND DESCRIPTION ON ATTESTATION

Regtl. No. D-155#3

Surname (in capitals) HOULE

Christian Names (in full) JEAN PAUL

Date of Birth 22nd NOV. 1921

Place of Birth Victoriaville, Quebec Can.

Trade on Enlistment Upholsterer

Nationality of Father at birth Canadian

Nationality of Mother at birth Canadienne

Religion R. C.

Enlisted at Montreal South, Que. Can.

Date 20-6-41

Particulars of former service (if any) i.e. Regtl. No., Corps and period. 4th A. Troops Co. RCE (AF) 15 Aug. 1946 to date. D-430059

Signature of Soldier Jean Paul Houle

Signature of Officer A W Mulroy Maj

Place In The Field Date 7 Apr. 1943

Houle J. P.

D-135643

(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	Latest known Address in full
1st	Wife			
	Children			
2nd	Father	Amable Houle	20-6-41	32 Portias St, Victoriaville, Que. Canada.
	Mother	Deceased.		
3rd	*Brothers and Sisters	Maurice Houle		32 Portias St. Victoriaville, Que. Canada
		Marcel "		" " " " "
		Maria Rose "		" " " " "
		Germaine "		" " " " "
4th	Other Relations (stating) relationship)			

*State whether brothers are older or younger.

NOW LIVING

D-135643 Houle J.P.

(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
20-6-41	Sgt.		4 dd. 149	Swindlehurst

(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:—**

Basic Training Complete

Adv. " "

RCE. CAOS.

Qualified in addition as under :—

Date.....

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

D-13543 Houle J.P.

(V) PARTICULARS OF TRAINING

Courses and Schools. Specialist Qualifications. Swimming, etc., show'g result	Date	Signature of Officer
N.V. TEST POOR		G. Polem Lt

(VI) SMALL ARMS RANGE COURSES

Year	Classification	If Table not completed, state parts fired	Signature of Officer
5-Sep-44	Rifle Zeroed		R. Asselin Capt
1944	Q	Rifle	[illegible] Capt
1944	Q	Bren	
1944	Q	2" M.	
1944	Q	Grenade 36-69	
1944	Q	Sten M/c.	

D-135543 Houle J. P.

(VII) EDUCATIONAL QUALIFICATIONS

Certificate, Specialist Qualifications, etc.	Place	Date	Signature of Officer
Typo Public Sch.	Victoriaville	1936	[signature]

10

15 AUG 1944

TRADE TESTED
S.T.T.B.

(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
Carpenter Helper	"C"		P.O. 18-	13-8-41	[signature]
Failed Painter C.	C	Failed	ERV. P.O. 195 d 17/8/44	23/8/44	[signature]

11

D-15543 Houle J. P.

(IX) EMPLOYMENT WHILST SERVING

Period		Nature of Employment	Remarks and Signature of O.C. Coy., etc.
From	To		
13-8-41		Gunner "C"	[illegible] Maj

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
17-6-41	17	Victoriaville Med. Board	
11-9-41	A	Confirmed.	[illegible] Maj
		Y.O.B. P U L H E M S	
18-9-44		20 1 1 1 1 1 1 1	
18-9-44		Pulheems Conf.	Capt P. Tanneau

D-135443 Houle J. P.

(XIV) PROTECTIVE INOCULATIONS

Nature of Vaccine, "T.A.B." Cholera, Plague, etc.	Date	Signature of Medical Officer
TABT		
3	Jan 25-41	
	1-11-41	
TABT 3	25-3-42	
T.A.B.T. ½	1-5-43	
+AB+½	2-5-44	
TYPHUS ¼ cc	11-1-44	
" ½ cc	18-1-44	
" 1 cc	24-1-44	
" 1 cc	8-6-44	

(XV) VACCINATION

Date Vaccinated	Signature of Medical Officer
25-6-41	
9-11-42	
17-2-44 Nil	
24-2-44 Immediate	

(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. 82457-N	23-6-41	
"M" Test + "D" Card Complete.	29-12-43	
Rifle H962958 Bayonet	8-4-43	
Issued MFM 182		
7 P.L.	25-1-44	
AWARDED CUSM 1 CLASP ON 17-6-44		
ELIGIBLE 3 RED SERGE	19-7-44	
TOS as 18/5/42	23/8/44	
MBM. OPIII 1500+00	1/5/44	
[illegible]	20.44	

FINGERPRINTED—CAIB

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. NDHQ

No. D-15543 Rank Spr. Name Houle

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

at

E. Palmer Lt.
Signature of Officer.
Rank or Appointment.

Date 41

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./0...received and forwarded to the Officer i/c Records at NDHQ

E. Palmer Lt.
.....
Signature of Officer.
Rank or Appointment.

Date Certificate or Will extracted.....

Signature of Officer.....

To whom sent.....

Dept.....

Date Certificate or Will extracted.....

Signature of Officer.....

To whom sent NDHQ

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.

D-15543 Houle J. P.

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

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

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

WSG COMPLETED

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

Unit ~~2nd Battalion~~ ~~19th Field Coy R.C.E.~~ CA C/C Regimental Number D-~~1~~543

ACTIVE FORMATIONS AND UNITS OF THE CANADIAN ARMY

ATTESTATION PAPER

1. Surname HOULE
2. Christian Names Jean Paul
3. Present address 32 rue Poitras, Victoriaville P.Q., Canada
4. Date of birth 22 novembre 1921
5. Place of birth Canada (Country) Quebec (County or Province) Victoriaville (Town or Township)
6. Religion (state denomination) Catholique Romain
7. Trade or Calling Remboureur
8. Married, Widower or Single Celibataire
9. Name of next of kin M. Amable Houle
10. Relationship Pere
11. Address of next of kin 32 rue Poitras, Victoriaville P.Q., Canada
12. Do you belong to, or have you served in a Reserve Formation or Unit of The Canadian Army? Oui
    4th A. Troops Co., RCE., RF.,
    (If Yes, Give Unit and Dates of Service)
13. Have you served in (*a*) an Active Formation or Unit of The Canadian Army? Non (Yes or No)
    ..... (If Yes, Give Regimental No. and Unit) (*b*) Any other Naval, Military, or Air Force? Non (Yes or No) (If Yes, specify Unit and Period of Service)
14. Did you serve during the Great War 1914-1918? Non
    ..... (If Yes, specify Regimental No., Unit and Dates of Service)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, Jean Paul HOULE, 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 20th June, 1941 X Jean Paul Houle (Signature of recruit)

witness alf Jarrett Pte

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

X Jean Paul Houle (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 Sth, Que. this 20th day of June 19 41

Lucien Gauvreau 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

Record of Service of HOULE, Jean Paul (Surname) (Christian Names) Regimental Number D-15543

Qualifications

Military: 4th A. Troops Co RCE RF Aug 40 to date

Business or Professional: Nil

Trade or Civil: Upholsterer

Technical: Nil

Languages: French

Educational Qualifications

High School or Collegiate: Nil (years completed)

Graduation or Matriculation: (specify)

*College: Nil

*University: Nil

7 Yrs. Public Schooling

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

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

Report 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
		Joined on appointment						
20Jun41	DRO	No 4 District Depot CA	Spr	17Jun41	4 DD	Mtl Sth	4 DD Pt II No149	25Jun41
28-JUN-41		PROCEEDED ON COMMAND AND ATTACHED FOR ALL PURPOSES TO CA.(B)T.C.40 ST.HYACINTHE	"	28-JUN-41	"	"	" " " " 152	28-JUN-41
		att. to 4 Div. Training Area, from 19th Jul. Eng., R.C.E. for all purposes	"	29-6-41	H.Q.T.A.	St Hyacinthe	Pt. II No. 3	30-6-41
9-7-41	4 DD	Transferred for Pay & Records purposes only	"	9-7-41	4 D.U.A.	St Hyacinthe	D.O.9	9-7-41.
12-7-41	QUE &	TOS FROM NO.4.DIV TRAINING AREA ST HYACINTHE PROCEEDED ON COMMAND TO NO.4. DIV T.A.	"	10-7-41	4.DD MTL SOUTH		4.DD PT II NO 163	11-7-41
11-8-41	4DD	CEASES TO BE ON COMMAND TO 4 DIV'L.INST. SCHOOL AND PROCEEDED ON COMMAND AND IS ATTACHED FOR ALL PURPOSES TO C.A.(B)T.C. NO.45 SOREL,QUE.	"	2-8-41	"	"	" " " 189	9-8-41
15-8-41	C.I. 45	(TOS)Sur com't &"ATT"ttes fins sur trft du DD4,Mtl,Sud.(DD4,PtII, 189,d/9-8-41)	"	3-8-41	C.I. 45	Sorel.Q.	CI45,PtII, 169A	15-8-41
22-8-41	"	Cesse d'être Att. pour ttes fins sur transfert à son unité SorelQ. & Att. pour rations logement & disc. pendant qu'il est absent sans permission.(AutDD4,PtII,198,d/20-8-41)	"	19-8-41	" "	"	" " " 175A	22-8-41
5-9-41.		T.O.S. 19th Field Coy. R.C.E. (C.A.)	"	20-8-41.	19th Field	Sorel.Q	19th Fd. Pt. II No1	22-8-41.

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

~~21-1-42 " S.O.S. on transfer to 3rd.Bn. R.C.E. " 21-1-42 3rd.Bn. Petawawa Pt II no.9 21-1-42~~

see additional MFM 1 and 2 a.

21-1-42 3rd. Bn. Petawawa Pt 1 and 2 (a) 21-1-42 S.O.S. on transfer to 3rd. Bn. R.C.E. 21-1-42

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

CERTIFICATE OF MEDICAL EXAMINATION

Name in full HOULE JEAN PAUL Place Victoriaville, Que.

Place ..... Date June 17th 1941

Part 1. Information obtained from the recruit.

1. Age 19 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?	no
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		

Ears, nose & throat neg. (J.C.C.) Reflexes normal. Urine normal.

Jean Paul Houle
Signature of Applicant

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

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

2. Height 5 feet 6 inches. 3. Weight 125 pounds.

4. Complexion Clair Eyes Brins Hair Bruns 5. Development Bon (Good / Fair / Poor)

6. Chest measurement—Girth on full expansion 33½ inches. JUN 23 1941 URINE
Range of expansion 2½ inches. X-RAY 82457

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

9. Condition of mouth and teeth 2 caries en haut, caries en bas a gauche, le reste en bonne condition.

10. The abnormalities (congenital and pathological) found on examination are as follows
Teeth poor, systolic pulmonary murmur. Scattered rhonci chest. (recent cold)

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.CALHOUN.MAJOR. President — C.W.VIPOND.LT.COL. Member — I.E.BRUNEAU.CAPT. Member

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
JUN 25 '41	T.A.B.T. H Pharacy Capt		
JUN 25 '41	3 Vaccine H.M.		
11-9-41	Berry Cat A. Conf. Enlistment		
1-11-41	T.A.B.T. C.E.E.		
25-3-42	T.A.B.T. Pte. Capt.		

Regtl. No. D-15543 Rank P Spr Surname HOULE Christian Name Jean Paül

STATION	Date of Arrival at the Station	Dates of Admission into Hospital – Day	Month	Year	Dates of Discharge from Hospital – Day	Month	Year	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

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

OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full HOULE JEAN PAUL (b) Reg'l. No. D-15543
2. (a) Arm of service Army (b) Unit 19th Fd Coy R.C.E. CA (c) Rank Spr
3. (a) Date of birth 22 Nov 1921 (b) Have you any dependents? Nil (c) Place of residence at time of enlistment Victoriaville, Que.
4. (a) Place of enlistment Mtl South, Que, Can. (b) Date of enlistment 20-6-41

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 18 (b) Were you attending school or college up to the time of enlistment? Nil
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) 7 Yrs Public Schooling.
7. If you attended a university, give name of university and standing or degree secured Nil
8. (a) Did you ever enter upon a trade apprenticeship? Nil (b) If so, for what occupation? Nil (c) Did you finish it? Nil (d) If you did not finish it, how long did you serve at it? Nil
9. (a) What languages do you speak fluently? French (b) What languages do you read well? French

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

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

Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

11. Had you ever been employed fairly regularly since leaving school?
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked (b) State how long you had worked at this trade or occupation
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment
15. Give details of last employer, if any: Name Address
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)
17. (a) If your last employment was in a business of your own, state nature and address of business (b) Date of discontinuing it

Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21

18. Name of employer Mr. Oscar HOULE (Uncle) Address Victoriaville
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) mattress Manufacture
20. (a) Your specific occupation Stuffer (b) Number of years' experience at this occupation with any employer 3 Yrs
21. (a) Did your employer promise definitely to give you employment on discharge? Nil (b) Did your employer refuse to promise you employment on discharge? Nil (c) Do you wish to return to your former employment? Yes

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

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

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? Yes (b) Do you feel competent to operate a farm? Yes (c) If so, in what kind of farming? Mixed
25. (a) Were you born on a farm? Yes (b) How many years' actual farming experience have you had? 10 Yrs (c) In what provinces did you have experience? Quebec

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? Nil
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.) Nil
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form Mechanic

DATE 20-6-41 194..... SIGNATURE Jean Paul Houle

JUN 9 - 1944

CONFIDENTIAL

42 Previous Experience in Armed Forces

ARM or CORPS	Type (C.E.F., N.P., etc.)	Years	Highest Rank	Last Discharge (Yr.)	Special Training Received
RCE	NP.	1	Spr	1941	Annual Trng E

43 CURRENT SERVICE: Date Enlisted 20 June 1941 Place Enlisted Montreal P.Q.

Date From—to	Country	Corps	Unit and Sub-unit	Rank 44	Principal Duty	Performance
20.6.41/4.10.41	Can	RCE	BTC 46	Spr	Basic Trng	
5.10.41/20.1.42	"	"	19 Fd Coy	"	Painter Helper A 1/7	367
21.1.42/15.5.42	"	"	3rd Bde	"	Sen Dvr Opr. A 1/8	
16.5.42	GB	"	do.	"	do.	123
24.7.44 - 12.8.44	"	"	41 C.E.R.U.	"	Serving sentence at Aldershot Military Prison	
				A		

45 COURSES ATTENDED

COURSES ATTENDED	PLACE	Date: From—to	Qualified as	Rating

46 Crime: Courts Martial Convictions ..... Major Offences 2/28 Days. Minor Offences 1/7 C.B.

Civil Convictions ..... Fines ..... Hospitalization .....

49 Psychiatric ☐ ☐ ☐ ☐ ☐ MFM.6

47 Classification: Military Specialties and Trades

Designation	Degree of Proficiency	Date	Authority
Painter Helper. 367	Group C	13.8.41	Pay Book

55 Type of Service Desired (1) Painter. (2) .....

Remarks re Outstanding or Limiting Factors — Satisfied in the army.

Deportment	Correct.
Disposition	Correct.
Appearance (grooming)	Neat
Physical appearance	Normal
Map Reading	Def.
Military Knowledge	Def.
Mechanical Knowledge	Def.

Int. by Capt. FH Potts, SPO 2, CDB
I Aug 44
Int. by Maj. E.S. Goddard, Reg. Psych.
C.D.B. 3 Aug 44
No change in Pulhems.

Attitude to Interview: Antagonistic ..... Overanxious ..... Co-operative ..... Indifferent ✓

Reason for Joining Cdn. Army (if ascertainable) Was drunk.

48 Suggested Possibilities for Employment (1) .....

(2) .....

Tests Indicated: 2nd Mental ..... Mech. Apt. ..... Clerical Apt. .....

Other Apt. ..... Pers. ..... Trade Test as .....

Interviewed by M Rennie Lt. Date 29 Dec. 1942

Reviewed by ..... Date .....

C.M.H.Q. 1000:115
40/P&S/1246 (10/42)

D15543 | HOULE | JEAN | PAUL

Regt'l. Number | Last Name | First Name | Middle Names

CARDS PUNCHED ✓ 3

CONFIDENTIAL.

Soldiers Qualification Card

2 Nationality Canadian 08 | By Birth ✓ | By Naturalization | Country of Birth Canada

3 Racial Origin 2 French Canadian | 4 Language spoken in home: French ✓ Other ... English ...

5 Age 21 1/2 22-11-1921 | 6 Height 5'5" | 7 Weight 128 | 8 Silhouette 1 2 3 4

Eyes 4 | 9 Colour of Brown | 10 Acuity 1 2 3 | 10 Glasses ... | 11 Colour Vision 1 2 3 4

12 Hearing: Acuity 1 2 3 | 13 Speech Defects ...

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

Cause ...

Attitude to own health Reasonable | To Medical attention ...

Health History ...

16 Education Level: Illiterate ... E 4 (13) S ... (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. ... (Course)
At ... From—To ... Completed ...

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

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

Other trades papers, Diplomas Certificates or Qualifications ...

23 Languages: Spoken fluently French
11 Written well Eng.

24 Main occupation: Description Upholstery Mattress maker.
2952. road repairs Shelter Carpenter | Estimate of skill ...
7432. Duration (from—to) 1940—1941 | Weekly Wage $12.00
1544. Employer's Name and Address Various Victoriaville Que

50 "M" Test	Score	J	SM
1	12		S. Tot. 29
2	6		SM
3	11		29
4	16		S. Tot. 30
5	14		SM
6	7		S. Tot. 28
7	10		SM
8	13		
Tot.	89	SM	Grade D

9 1

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 ...

Unit 3 Bn. ✓

1 Corps R.C.E.

CODED 3--

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 Auto ... 30 Motorcycle ...
31 Farm Tractor ... 32 Tracked Vehicle ... 33 Power Launch ... 34 Aeroplane ...
35 Accident Prone ...

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

Job promised after discharge No. By whom? Name ...
Address ...
Other provision for post-discharge occupation Name.
... Type of work desired ...
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 2 ... No. Sisters 2
Position in family 3 | 38 No. Dependents 0
Relationship of Dependents ...
Status of home in childhood Religion R.C.

39 Hobbies: Photography M ... S ... Radio ... Engines ...
Mechanics ... Other Card.
40 Sports: (1) ... (2) ... (3) ...
Team Games and Position (1) ...
(2) ... (3) ...
41 Ability to Entertain: Music: String ... Brass ...
Woodwind ... Percussion ... Piano ... Vocal ...
Theatrical ... Other ...

Statement of the Service of No. D. 13543. Rank ..... Sheet No. .....

Name Hinds, J. P.

M.F.M. 1 & 2 (a)
700 M—8-39 (1697)
H.Q. 1772-45-18

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
	3403	A.W.L. Tol. 20 days Pay FR+1 wg. transfer to 3 Bn. RCE.	Pte.	6.1.42.	DDMD3.	OTTAWA	6-42.	6.1.42
	—	Leave Attchd Army Trade School OSOS DDMD3 on						
	—	Petawawa Ontario.	Pte.	11.2.42	DDMD3.	OTTAWA	42-42.	11.2.42
	184	28 dys F.P. Tol. 28 dys pay FR+1 wg. AA 9(2)	Spr.	10 July 42	3 Bn RCE	U.K.	6	24 July 42
	1	Attn. to 1 F P camp.	Spr.	13 July 42	3 Bn RCE	U.K.	7	31 July 42
	—	Leave Attd Tap. 1 F P camp.	Spr	7 Aug 42	3 Bn RCE	U.K.	11	21 Aug 42
		4 months Prof Service Pay $1.40	Spr	1 Jan 43	3 Bn	U.K.	12A	30 Mar 43
	✓	AA 15 (1) + AA 40. Forfeit 5 days pay	Spr	4 Aug 43	3 Bn	U.K.	34	13 Aug 43
	28.	AAW (1) forf. 2 days pay.	Spr.	24 Feb 44	3 Bn	U.K.	6.	11 Feb 44.
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
	X29	AA Sec 15 (1) Total forf. 3 days pay	Spr.	12 Apr 44	3 Bn RCE	U.K.	18	22 Apr 44
	6105	Forf 10 days pay AA 15(1) AA 11	Spr.	15 June 44	3 Bn RCE	Q.I.A.G.	28	24 June 44
M147		Awd. 28 days Det. Forf. 31 days pay AA 15 (1)	Spr	21 Jul 44	3 Bn RCE	21 A Gp	36	29 Jul 44
M147	S.O.S.	S.O.S. X2 list to Y2 list 1 CERU	Spr	29 Jul 44	X L RCE	21 A Gp	38	5 Aug 44
M-147	T.O.S.	T.O.S from X2 list RCE while in 1 Cdn Det Bks	Spr	30 Jul 44	1 CERU	U.K.	174	11 Aug 44
	SOS							
M147	T.O.S.	T.O.S from Y2 list on rel. from 1 Cdn Det Bks.	Spr	13 Aug 44	1 RCE RU	U.K.	192	14 Aug 44
M147		Failed to qual as Painter	Spr.	15 Aug 44	1 CERU	U.K.	195	17 Aug 44

Statement of the Service of No. D-15543 Rank Spr. Sheet No. 2

M.F.M. 1 & 2 (a)
700 M—8-39 (1697)
H.Q. 1772-45-18

Name HOULE, Jean Paul.

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
19-9-41	19thFd.	A.W.L. 8 days Deduction 9 days pay.	Spr.	25-8-41	19th Fd.	Petawawa	Pt.II No. 2	25-8-41
29-9-41	"	Was qualified "PAINTER" (Helper) Aut. MD3	"	13-8-41	"	"	Pt.I, No. 18	26-9-41
6-12-41	"	Proceeded on command to DD MD3 OTTAWA for all purposes including pay.	"	8-12-41	"	"	Pt. II 66	6-12-41
8-12-41	"	D.D. M.D.#3 on transfer from 19th Cdn Fd, R.C.E. Petawawa, Posted to Army Trade School (Carpenter's Course).	"	8-12-41	DD MD3	Ottawa	Pt.II 345-41	11-12-41
		Was on 6-1-42 awarded forfeiture of 12 days pay for AWL.7 days 1 hrs. Forfeits 8 days pay, Total forfeiture of 20 days pay.	"	6-1-42	"	" "	6-42	6-42
		Ceased to be att'd to Army Trade School and S.O.S. D.D. M.D.3 on transfer to 3rd, BN. R.C.E. Petawawa Ont.	"	11-2-42	"	" x	42-42	11-2-42
21-1-42	19th Fd.	S.O.S. on transfer to 3rd, Bn., R.C.E. While on command at D.D.M.D.3	"	20-1-42	19thFd.	Petawawa	Pt.II No 9	21-1-42
21-1-42	3rd, Bn.	T.O.S. on transfer from 19th Fd Coy., RCE. while on command at D.D. M.D. #3	"	21-1-42	3rd, Bn.	"	Pt.II No 1	22-1-42
22-2-42	"	Ceases to be Att'd to DDMD3 Ottawa for all purposes, and T.O.S. 3rd, Bn., R.C.E. Petawawa Ont.	"	11-2-42	"	"	Pt.II No 12	11-2-42
6-3--42.	"	Was granted a furlough of (14) days & issued transportation warrant from Petawawa to ~~Montreal~~ Victoriaville. & R.A-101448.	Spr ~~A/Sgt~~	24-2-42	3 rd, Bn.	Petawawa	Pt.11 No.17	21-2-42
2-6-42		S.O.S., C.A. Canada	"	17-5-42	"	with the field	D. O. H. 1.	25-6-42
		T.O.S., C.A. Overseas	"	18-5-42	"	"		
		Disembarked M.K.		26-5-42				
		~~T.O.S.~~						

No. D-15543 Name HOULE, Jean Paul Sqn., Battery, or Company Corps ~~XRXCXEx~~ CIC Date of enlistment 20-6-41 G.C. Badges Service or Proficiency Pay

M.F.M. 6 (A.F.B. 122) 500M—8-39 (1703) H.Q. 1772-45-18

Date of last entry in Company Conduct Sheet 2-7-43 No. and date of last drunk NIL Period not reckoning towards freedom from extra fine NIL Sheet No. 3 Signature O.C. Company, etc. [signature] Character

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
	Sheet No. 2 destroyed on completion of two years service. 20-6-43. LAST ENTRY 2-7-43.								
Ottawa	29-12-41	Spr.		AWL from 1100 hrs 29-12-41 till 1200 hrs 5-1-42 Total absent 7 days 1 hrs.	Cpl. Gibson	12 days summ FR&I 149(2)	6-1-42	LTCol. Gillie	Forf 8 days pay FR&I 149 (1)(a)
Petawawa	10-4-42	Spr.		AWL from 0700 hrs 1-4-42 till 0700 hrs 9-4-42. Total 8 days	CSM, Masse Cpl. Gaelin	16 days Summ FR&I 149 (2)	10-4-42	LT Col. GW Smith	8 days auto forf FR&I 149 (1)(a)
Field	10-7-42	Spr.		AA Sec 9 Disobeying a lawful command given by his superior officer.	Cpl. Beaudry L/C. Bourgie Spr. Gamelin	28 days FP.	12-7-42	LT Col. G.W. Smith	
FIELD.	12 APR. 41.	SPR.		AA. SEC 15(1). AWL. FROM 0730 HRS 12 APR 41 TILL 1700 HRS 12 APR 41 (TOTAL ABSENCE 9 HRS. 30 MINS)	SGT. MARCOUX CPL. LEVESQUE SGT. BOUSSAULT.	2 DAYS. SUMMARY FORF. FR-149-2	12-4-41	[signature]	1 Day auto forf FR-149-1-(a)

(P.T.O.)

SOS DECEMBER

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
Field	21-8-43	Spr.		AA 15 (1) WOAS AWL from 1330 hrs 2 Aug 43 to 1630 hrs 2 Aug 43 (Absent 3 hrs.	CSM Nadeau Sgt. Marcoux L/S. Smith	4 days summ FR&I 149 (2)	4 Aug 43	Lt/Col. GW. Smith	
				AA 40 WOAS conduct to prejudice did not report on defaulters parade.					
				AA 15 (1) WOAS AWL from 1700 hrs to 0600 hrs 3 Aug 43 (total abs. 13 hrs)					
Field	2-2-44	Spr.		A.A. Sec 15 (1) AWL from 1200 hrs 1 Feb 44 till 2330 hrs 1 Feb 44 (Absent 11 hrs 30 mins)	CSM Nadeau Cpl.Demartino	1 day summ forf FR&I 149 (2)	2-2-44	S.W. Milnes	1 day auto forf FR&I 149 (1)(a)
FIELD	12.6.44	Spr.		AA 15(1) AWL from Duty from 1100 hrs 12.6.44 to 1300 hrs 12.6.44 (absent 2 hrs) AA 11 - WAS IN LIPHOOK TOWN knowing it to be contrary to any regulations	Sgt. MARCOUX WSgt. SMITH	forf 10 days Pay FR&I 149(2)	13.6.44	S.W. MILNES MAJOR	
FIELD	17 Jul	Spr		AA.15(1) WOAS, AWL (overstaying a leave when warned for special duty from 1800 hrs,17 Jul to 2330 hrs,19 Jul 44 (Abs.2 days,5 hrs,30 mins)	Doc.Evi.	28 days Detn	21 Jul 44	Lt Col. G.W. Smith	3 days aut. FR&I.149(1)(a) Tot.for.31 days pay

CONFIDENTIAL

SELECTION OF PERSONNEL REPORT
Canadian Detention Barracks

Regtl No. D15543 SUS No. 8639
Name. HOULE, J.P.
Date of Birth 22 Nov 22 Age 22/8
Corps R.C.E. (3 Bn) RU I CERU
Medical Category A
"M" Test Score 29/89 (Fr.)
Marital Status S.

Sentenced on 21 Jul 44 to 28 days Detn.
For AWL 2 days when warned for spec.duty.
Due for Release 14 Aug 44
Admitted to C.D.B. 24 Jul 44
Date of Enlistment 20 Jun 41
Date Overseas May 42
Time in FP I/28
Date
Intv'd I Aug 44 by M. Boulay, Sgt. (Fr).
Psych
Assess: 4 Aug 44 by E.S. Goddard, Major.

Interviewed in French by Sgt. Boulay.

Born in Warwick, P.Q. 22 Nov 22, 3rd oldest of 2 brothers and 2 sisters. Mother died of stomach ulcer in 1940. Father who had inherited money from father farmed 10 years sold it because of heavy drinking and moved to Victoriaville where he stayed unemployed for 3 yrs. then, out of money he secured employment as labourer for the city. Early in 1940 fractured both legs in canal accident - hospitalized I yr. now walks on crutches and receives pension. Older brother was discharged from army on medical grounds after I yr. service. Claims good home life although he claims his parents were too soft.

Educated in Quebec rural school and Victoriaville school, ages 7 to 15 to completion of grade 6. Quit in grade 7 to take job as delivery boy. His dislike for school, occasional truancy, and sickness impaired his progress. Repeated grade 4 and rated below average in classes. Got along well with pupils and teachers and was fairly active in school sports.

1½ yrs. - delivery boy in grocery store.
8 m. to I yr. - carpenter's and painter's helper for a contractor averaged $10. a week. - also a short employment as mattress maker.
Spent spare time in pool rooms; not interested in sports. Had friends of both sexes but felt shy with other people. No civilian record.

N.P.A.M. 4th Army Troop Jun 40 to Jun 41 - I month summer camp training at A-12, Farnham. Happened to be in Montreal for a week end; after celebrating, friends and he decided to enlist on 20 Jun 41, 19th Fld. Coy R.C.E. Trained in Canada. 2 mos carpenter's course broken by 9 day AWL Dec 41 posted to 3rd Bn. R.C.E. O/S with unit 27 May 42 and served as carpenter's and painter's helper in construction work to date. No trades pay - refused to take trade test because could not speak English.
M.F.M. 6 records 5 entries - 5 charges for AWL and I charge for refusing to obey lawful command since coming overseas - longest absence (AWL) in Canada. While on week end leaves at home says was arrested 3 times by civilian police, for drunkenness - never in court, simply escorted home.

Single, good-humoured but rather worried looking young Fr. Cdn. with an imperfect command of English. Had a girl friend in Canada but shortly after he proceeded overseas he got tired of writing and discontinued correspondence with her. Only writes to his sister two or three times a month; he assigns $20. to her. Feeling homesick and shy because of inability to speak English and meeting people, when he arrived in this country he resorted to drinking to forget his loneliness and shyness and thus enjoy living; has kept this habit until the present time and this explains his AWL charges in spite of the fact that he was never charged for drunkenness. Feels at ease and happy when he has a drink and only then does he meet girls and enjoy sexual intercourse. Has never contracted any V.D. Complains of burning pains and disturbed sleep.
Likes army when employed in manual work as in building construction but dislikes army when compelled to undergo training. Likes his unit, gets along well with men and N.C.O.'s and officers and is anxious to return to his former employment as painter's and carpenter's helper on completion of sentence. Shows cooperative attitude and good volition. "M" score and school record indicate below average ability (M:2) but appears suitable to carry on in the army.
Refer to Psych for establishment of M and S ratings.
Return to Unit for employment as carpenter's and painter's helper.

I Aug 44

W.E.L. Hitchins Capt.
W.E. Hitchins, SPO(I), C.D.B.

(TUMBLE)

PSYCHIATRIC ASSESSMENT: This is a tall, healthy looking young man of 22. He is fairly alert, at first refused to talk in English, but later completed the interview speaking and understanding everything quite well. He reads and writes French, but cannot read or write English. He complains o of pain in his stomach (pointing to his heart) and states that it burns Aside from this no other symptoms are given. [redacted] is not grossly unstable, bu claims that he is nervous. This was told to him by his R.M.O.

Diagnosis - N.A.D.

Recommendation: No change in Pulhems.

4 Aug 44

.....Major
E.S. Goddard, Reg. Psych.,
Cdn. Detn. Bks.

INTERIM RECOMMENDATION: Normal Detention. Return to Unit.

4 Aug 44

.....Capt.
W.E. Hitchins, SPO (I),
Cdn. Detn. Bks.

Distribution: C.O. (Pers)
H.Q. C.R.U.
D.M.S. (Cons. Psych)
S.P.O. (File)
R.U. (On Release)

SUGGESTION FOR DISPOSA ON RELEASE: Recommended for posting as a carpenter's or Painter's helper in a French-speaking unit. To be released 12 Aug 44.

.....Capt.,
W.E. Hitchins, SPO 1.

P.A.

File No 405-H-21527

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. D 15543 Name Houle Jean Paul

Rank on Discharge Pte. Date of Discharge 11-10-44

Deceased

Authority for Discharge or Retirement _____

Served in:

				Non-qualifying service
Canada	from 17-6-41.	to	17-5-42.	
	from _____	to	_____	_____
United Kingdom	from 18-5-42.	to	22-9-44.	
	from _____	to	_____	_____
Italy	from _____	to	_____	_____
Northwest Europe	from 22-9-44.	to	11-10-44.	K/A.
---------	from _____	to	_____	_____
---------	from _____	to	_____	_____

Eligible for award of:

1939 - 45 Star OK ✓

---------- _____

~~Italy Star~~ _____

France-Germany Star OK ✓

Defence Medal OK ✓

War Medal OK ✓

Canadian Volunteer Service Medal OK ✓

with clasp O.K. ✓

M

NO RIBBON DESPATCH

Verified by W R Legault

Date JUL 19 1946

Carded JUL 23 1946

HA 165

File Copy

Quote No. H.Q.405-H-21,52...
Records (C)

DEPARTMENT OF NATIONAL DEFENCE

ARMY

Ottawa, Canada.
27th Oct., 1944.

Commissioner of Income Tax,
Department of National Revenue,
Ottawa, Ontario.

National Registration Division,
Department of Labour,
Ottawa, Ontario.

The undermentioned Canadian Army Casualty is forwarded for your information, please:

Regimental No.	H-59413
Rank	Pte
Surname	HOULE
Christian Names	Jean Paul
Nature of Casualty	Killed in action
Date of Casualty	11-10-44
Address at time of enlistment	Victoriaville, Que.
Date of enlistment	20-6-41
Date of Birth	22-11-21
Marital Status (On enlistment)	Single
Marital Status (Present)	Single
Occupation	Upholsterer
Name and address of Next-of-Kin	Mr. Amable Houle, 58 Poitras St., Victoriaville, Que.

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

Gr.

F.T.

6th November, 1944.

Mr. Amable,Houle,
38 Poitras Street,
Victoriaville, Quebec.

Dear Mr. Houle:

It was with deep regret that I learned of the death of your son, D15543 Private Jean Paul Houle, who gave his life in the Service of his Country in the Western European Theatre of War on the 11th day of October, 1944.

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

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

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

A. E. WALFORD
Major - General
Adjutant - General

NOV 3 1944

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

/EMA

405-H-21527

FIELD SERVICE

MBR

Army Form B. 2090A.

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

REGIMENT OR CORPS: Fusiliers Mont Royal. — Squadron, Troop, Battery or Company:

Officer's Personal No. (if known) / Soldier's Army No.: D15543 — Rank: Pte.

Surname: Houle. — Christian Names: J.P.

Died — Date: 11 Oct 44 — Place: Belguim

Cause of Death*: Killed.

Nature and Date of Report: A.F.W. 3014/145 — 23 Oct 44

By whom made: Cdn Sec GHQ 2nd Ech 21 A Gp.

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

Burial — Place: Belguim 732064 Sheet Brecht Liere — Date: 12 Oct 44

By whom reported: Capt. C.J.R. Langlois.

State whether he leaves a Will or not — (a) in Army Book 64: No.

(b) as a separate document: Not Received.

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

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

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

Station and Date: Belguim. 24 Oct 44

Signature of Officer in charge of Section Adjutant-General's Office at the Base: Eric Roberts Capt. for Officer i/c

Cdn Sec GHQ 2nd Ech 21 A Gp.

Wt. 46939/917 500M. 3/40 M. & S., Ltd. 51-6239

Director of Estates

Regimental No. D 15543 Rank... Private

HOULE Jean Paul
Surname Christian Names

Unit..... Les Fusiliers de Mont-Royal (CA).....

Date of Death. 11 Oct 44 Place of Death. Overseas (France)

Next-of-Kin. Mr. Amable Houle Relationship. Father

Address..... 38 Poitras St., Victoriaville, Que.....

.....

.....

M.F.M. 5..... Copy of M.F.M. 5 herewith.....

Will..... Wills d/ 20 Jun 41 herewith.....

Date..... 30 Nov. 44.....

JEC/MB

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

RECEIVED DEC 2 1944 DIRECTORATE OF RECORDS OTTAWA NATIONAL DEFENCE

W.S.G. 15-10-45

File No 405. H-21527

R E B U R I A L

NO D.15543

RANK Private

NAME HOULE, J.P.

NAME OF CEMETERY Bergen-op-Zoom Canadian Military Cemetery

LOCATION OF CEMETERY 4 miles N.E. of Bergen-op-Zoom, Holland.

GRAVE LOCATION Plot 12, Row D, Grave 2.

AUTHORITY 54-27-88-2 Vol. 20.
Reburial list.

H.Q 405-H-21,527 D.R. 2(C)

27th February, 1946.

Mr. Amable Houle,
38 Poitras Street,
Victoriaville, P.Q.

Dear Sir:

Information has just been received from overseas that the remains of your son, D15543 Private Jean Paul Houle, have been carefully exhumed from the original place of interment and reverently reburied in grave 2, row D, plot 12, of Bergen-op-Zoom Canadian Military Cemetery, four miles North-East of Bergen-op-Zoom, Holland. Marked map is enclosed. This is a recognized military burial ground and will receive care and maintenance in perpetuity.

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

Yours faithfully,

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

/EFH

K.G.D.

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER D-15543 RANK Pte SERVICE UNIT Les Fusiliers de Mont-Royal (CA).

NAME HOULE, Jean Paul

DATE OF BIRTH
DAY 22nd MONTH November YEAR 1921 Enlisted: 20-6-41

MARITAL STATUS Single Religion: Roman Catholic

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Father
ADDRESS 38 Poitras St., Victoriaville, Que.
NAME Mr. Amable Houle
ADDRESS
D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED
ADDRESS

PARENTS NAME
ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. 2615A H.Q.405-H-21,827
CASUALTY DETAILS Killed in action DATE 11-10-44

FRANCE

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

M.F.M.S. ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO S/L 1470 O/S with 3rd Btn. R.C.E.

DATE 28-10-44

OFFICER I/C RECORDS

6

COPY FOR DOCUMENT FILE

No D.15543 Rank Private Name HOULE, Jean Paul

Unit Fusiliers Mont-Royal Date of death 11th Oct., 1944.

Died at ~~France.~~ Belgium

Cause Killed in action.

Death occurred on strength of Forces.H.Q. 405-H-21527

N/K Mr. Amable Houle Relationship Father

Address 38 Poitras Street, Victoriaville, P.Q.

Remains buried in Cemetery

MR 132064 Brecht Riere, Belgium

Grave location

CHK ✓

OVER-

REBURIAL

Bergen-op-Zoom Cdn. Military Cemetery,
4 miles N.E. of Bergen-op-Zoom,Holland.

Grave 2, row D, plot 12.

HI & CR Form Despd. NOV 9 1946

Photographs
Despatched
NOV 20 1947

BURIAL REPORT TO N.K. FEB 27 1946

RETURN TO BUR. OF STAT. JUN 7 1945

ROYAL MESSAGE DESP'D. NOV 29 1944

CAN. MESSAGE DESP'D. DEC 11 1944

5M-10-44 (M-4414)

THE CANADIAN PENSION COMMISSION

MEMORANDUM

To.....Pension Medical Examiner, MONTREAL

From.....Head Office.

.....Ottawa, Nov. 9th, 1944.

D-15543 PTE. HOULE, Jean P. P. & N. H. 901-J

The Department of National Defence, Army,

officially reports that the marginally named was reported -

Killed in action,

on the 11th Oct. 1944 on service Overseas.

His next of kin is reported as - Father -
Mr. Amable Houle,
38 Poitras St.,
Victoriaville, Que.

The Addressograph Stencil shows payment of Assigned Pay of

$ 20.00 a month to - Miss Marie R. Houle
36 Poitras St.,
Victoriaville, Que.
(Relationship not stated.)

CANC. 11.8.44

As no D.A. was payable the Commission will not take any action unless a claim is filed.

/AS

E. Clewes,
for
Canadian Pension Commission.

C.P.C. - C.N. 2 15M-8-43 Req. 741

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: IN THE FIELD (BELGIUM) | 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: HOULE (*Block letters*)

Given names: Jean Paul

Do not write in this space

4. RESIDENCE

Street: Portras No. 32

Official name of civil municipality or township: Victoriaville

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: November (Month) 22nd (Day) 1921 (Year)

12. AGE OF DECEASED

Years	Months	Days	If less than one day old
22			....hrs. or....min.

OCCUPATION

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

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	Amable Houle	
MOTHER (Maiden Name)		

19. Place of burial, cremation or removal: Belgium

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: October (Month) 11th (Day) 19 44 (Year)

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

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

24. CAUSE OF DEATH

I

Immediate cause Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc.: (a) Killed in action

due to

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

due to

(c)....

II

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

III If a communicable disease is mentioned on this certificate, give (a) Date of appearance....19....

(b) Duration of disease....days

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

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

State findings....Was there an autopsy?....

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

Accident, suicide or homicide....Date....19....

(State which)

Manner of injury....

(How sustained)

Nature of injury....

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

OVERSEAS CASUALTY CANADIAN ARMY

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

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

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

Director of Records

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.

Dept. National Defence

(Voir l'autre côté pour le français)

JUN 7 1945

DOIT ÊTRE REMPLIE ET RENVOYÉE PAR

Formule P. 64

[redacted]

Monsieur Amable Houle,
38, rue Poitras,
Victoriaville, Quebec.

Prière d'adresser toute communication subséquente à ce sujet au:

DIRECTEUR DES SUCCESSIONS,
MINISTÈRE DE LA DÉFENSE NATIONALE,
OTTAWA, ONTARIO

et de citer le numéro suivant:

Q.G. 405-H-21,527 FD.476

MINISTÈRE DE LA DÉFENSE NATIONALE
DIVISION DES SUCCESSIONS
OTTAWA, ONTARIO

6 decembre 1944

Afin de les consigner dans nos dossiers et au cas où il y aurait une succession militaire à distribuer (conformément à la loi) au nom de feu

HOULE, Jean Paul, Soldat,

D.15543, Armee Canadienne

il est nécessaire que les renseignements voulus concernant le défunt et les membres de sa famille soient fournis à la Division des successions. Vous êtes donc prié de lire le mémorandum ci-inclus avant de remplir les pages 2 et 3 de cette formule. Les détails exigés doivent être inscrits comme il faut et la déclaration à la page 4 doit être ensuite signée en présence d'un pasteur, prêtre, magistrat de la localité, commissaire instrumentaire, notaire public, ou officier de l'une quelconque des forces de Sa Majesté, que l'on priera de compléter et signer le certificat. Cette formule doit être ensuite renvoyée à l'adresse mentionnée ci-dessus.

Si l'espace destiné aux questions des pages 2 et 3 de cette formule n'est pas suffisant pour donner tous les détails, il faudra alors se servir de l'espace réservé aux "remarques supplémentaires", à la page 4.

ESTATES BRANCH DEC 12 1944 H.Q. OTTAWA NATIONAL DEFENCE

OG/GC

Pour Le directeur des successions,

M.F.W. 77a (French)
3M—10-44 (5704)
H.Q. 1772-39-972

RÉPONDRE AU LONG À TOUTES LES QUESTIONS APPLICABLES

ÉTAT des noms, âges et adresses, ou dates de décès, de tous les parents du défunt, à chacun des degrés spécifiés ci-dessous.

Degrés de parenté	PARENTS à signaler		TÉMOIGNAGE DU DÉCLARANT — NOM ET PRÉNOMS de tout parent de chacun des degrés mentionnés	Age	ADRESSE AU LONG de chaque parent survivant, en regard de son nom, et date du décès de tout parent décédé
	Père		Houle Amable	57	
1	Veuve du défunt.....		Made Lydias Danis Houle	49	décédée 8 mars 1941
2	Enfants du défunt et dates de naissance.....				
3	Père du défunt.....		Houle Amable	57	vivant
4	Mère du défunt.....		Danis-Houle Lydias	49	décédé 8 mars 1941
5	Frères du défunt	Frères germains	Houle Marcel Houle Maurice, Marcel	18 25	" vivant
		Demi-frères			
6	Sœurs du défunt	Sœurs germaines	Marie Rose Houle et Germaine Houle	27 20	vivant " "
		Demi-sœurs			
7	Noms des frères ou sœurs (germains ou non) du défunt, *qui sont décédés*, et date de décès de chacun d'eux		Noms et âges de leurs enfants (le cas échéant)		Adresse de leurs enfants

8	Nom
9	Date
10	Lieu
11	Lieu
12	Lieu
13	Indiq dé cha
14	Natu
15	Indiq cas
16	Indiq ma
17	A-t-i no
18	Si le ou il co
19	Avai po l'a vo
20	Mon dé
21	Mon dic qu
22	Si le no de bé
23	Décr mo be
24	Aprè (a) p les (b) p Un é for sig dé
25	Est- pa an pa
	lorsq du N du m men

RÉPONDRE AU LONG À TOUTES LES QUESTIONS SUR CETTE PAGE

DÉTAILS D'IDENTITÉ

8	Nom et prénoms du défunt.	Houle Jean-Paul
9	Date de sa naissance.	22 novembre
10	Lieu et date de son mariage.	
11	Lieu et date du mariage de ses parents.	Victoriaville 13 juin 1911

DÉTAILS DE DOMICILE

12	Lieu où le défunt est né.	Warwick
13	Indiquer, par ordre, la province, l'état et/ou le comté où le défunt a résidé avant son engagement, et la durée dans chaque cas.	(a) (b) Athabaska (c) (d)
14	Nature de son emploi avant son enrôlement.	manufacture de matelas
15	Indiquer s'il était propriétaire de la maison où il demeurait. Le cas échéant, à quel endroit?	
16	Indiquer le lieu où le défunt entendait vivre d'une façon permanente.	Victoriaville

DÉTAILS DE LA SUCCESSION

17	A-t-il laissé un testament? Si vous en avez la garde, veuillez nous le transmettre.	—
18	Si le défunt était marié et domicilié dans la province de Québec ou dans un état des États-Unis d'Amérique ou dans un pays où il existe communauté de biens entre les époux, existait-il un contrat se rapportant à la propriété?	—
19	Avait-il un compte d'épargne dans une banque, un bureau de poste ou autre institution? Le cas échéant, donner le nom et l'adresse de la banque, etc., et le montant déposé. Désirez-vous qu'il soit administré avec le compte de solde?	—
20	Montant des certificats d'épargne de guerre que possédait le défunt. Indiquer l'endroit où ils se trouvent.	—
21	Montant des bons de la victoire que possédait le défunt. Indiquer s'ils sont enregistrés ou payables au porteur, ainsi que l'endroit où ils se trouvent.	—
22	Si le défunt possédait des polices d'assurance-vie, donner les noms des compagnies et la somme payable en vertu de chacune des polices, ainsi que le nom de la personne qui y est nommée bénéficiaire.	—
23	Décrire les autres valeurs, le cas échéant, et en donner le montant approximatif. Se servir de l'espace à la page 4, au besoin.	—

AUTRES DÉTAILS

24	Après son engagement, le défunt avait-il contracté des dettes: (a) pour ses propres logement et pension pendant qu'il était dans les forces armées. (b) pour habits et équipement militaires. Un état détaillé de chacun de ces comptes doit être annexé à cette formule et, s'ils sont exacts, veuillez y inscrire "approuvé" et signer votre nom. Si vous les croyez inexacts, donnez des détails.	—
25	Est-ce que les frais funéraires ont été payés, entièrement ou en partie, par vous-même ou un autre parent? Le cas échéant, annexez des états détaillés indiquant les montants payés, et par qui.	Le service fut payer avec la location qu'il envoyait à sa soeur à tous les mois

(REMARQUE:—Le gouvernement paye les frais funéraires, jusqu'à concurrence de montants déterminés par les règlements, lorsque le militaire est décédé et inhumé outre-mer, de même lorsqu'il est décédé et inhumé au Canada ou ailleurs en Amérique du Nord; si un parent a déjà payé les frais funéraires, ceux-ci lui seront remboursés par le gouvernement jusqu'à concurrence du montant fixé par les règlements. Cependant, si les frais excèdent ce montant, la différence ne sera pas payée par le gouvernement ni ne sera à la charge de la succession militaire du défunt.)

(VOIR AU VERSO)

*Insérez le degré de parenté, par exemple: "veuve", "père", "frère", etc.

DÉCLARATION

Je, soussigné, déclare que tous les renseignements contenus dans cette formule sont exacts et constituent une liste fidèle et complète de tous les parents que le défunt ait jamais eus aux degrés signalés; et que je suis le/la* Père du défunt.

N.B.—A être signée au long en présence d'un pasteur, prêtre, magistrat de la localité, commissaire, notaire public ou officier de l'une quelconque des forces de Sa Majesté.

Amable Houle — Signature du déclarant

Victoriaville Rue Laitras No 38 — Adresse

CERTIFICAT

Je, soussigné, certifie que, autant que je sache, Je suis le frère de Hodel Jean-Paul à Amable Houle — Nom du déclarant

*Voir plus haut

est le/la* Père du défunt ci-dessus décrit. La déclaration ci-dessus a été faite par le déclarant et signée en ma présence.

Daté à Victoriaville ce 11 ième jour de Décembre 1944

Signature du pasteur, prêtre, magistrat, commissaire, notaire public ou officier de l'une quelconque des forces de Sa Majesté. Obil Michaud, P.C. — Titre curé

Adresse Victoriaville,

REMARQUE.—Avant d'accorder le certificat qui précède, il faut veiller à ce que le déclarant donne des détails concernant le décès de tout parent qu'il déclare être décédé et que les nom et prénoms, ainsi que l'adresse et l'âge de chaque parent survivant visé soient inscrits à l'endroit voulu dans la déclaration qui est vis-à-vis.

(Si le défunt n'a aucun parent vivant des degrés signalés à la page 2, il faudrait donner ci-après les noms et adresses, et le degré de parenté, d'autres parents.)

SE SERVIR DE L'ESPACE CI-DESSOUS SI VOUS DÉSIREZ FAIRE DES REMARQUES SUPPLÉMENTAIRES.

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

WILL

M.F.M. 10
75M—10-40 (7779)
H.Q. 1772-39-1656

(1) I, Jean Paul HOULE, of the TOWN
(Name in Full) (City, Town, Village, Township)

Address in civil life.

of VICTORIAVILLE, in the County District of ARTHABASKA

Province of QUEBEC, Upholsterer
(Civil Occupation)

Regimental No. D-15543, Unit 19 Field Co RCE CA, 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. Amable Houle, 32 Poitras St., Victoriaville, Que., Can., All my Estate both Real and Personal.

J. O. Jr.

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

J. O. Jr.

(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 20 day of June 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.

Jean Paul Houle
(Signature of soldier)

First witness sign here.

(5) Signature George Bryden, Cpl
5563 Duncan St Montreal Que

Civil Address

Civil Occupation

Second witness sign here.

Signature W. T. Whittet

Civil Address 38 St Germain St Vill St Laurent

Civil Occupation Laundryman

(Witnesses are not to be beneficiaries.)

[OVER]

H.Q.405-H-7713
H.Q.405-H-21,527 FD 476

Estates Branch

March 12th, 1945.

The Officer i/c Estates,
Canadian Military Headquarters,
2, Cockspur Street,
Trafalgar Square,
London S.W. 1, England.

Attention: Lieut. Colonel G.M. Lampard

D.15543, Private Jean Paul Houle (Deceased)
D.15542, Private Jean Paul Houle

1.- Annexed hereto are copies of memoranda exchanged between the Director of Records and myself concerning the m/n men.

2.- You will note that D.15543, Pte. Jean Paul Houle is deceased. The original and copy of his will were received on a false docket from the Director of Records on the 2nd December, 1944. Upon receipt of the P.64 from the father, who confirmed the fact that the deceased man was single, some confusion arose when another copy of a will signed by Jean Paul Houle and which apparently had been altered on the face by having No. D.15542 changed to No. D.15543, and signed by another Jean Paul Houle was forwarded to this Directorate. Both these men lived in Victoriaville and enlisted, apparently, together, as their regimental numbers are consecutive. This second will referred to a marriage contract entered into by the testator and upon the father making a search for such contract he discovered it and forwarded it to this Branch. It was then ascertained that these were two different men, one of whom was married and the other single. The single man is now deceased and bore regimental No. D. 15543.

3.- You will note that the A/Director of Records comments as to the alteration of the will.

4.- This will of D.15542, Pte. Jean Paul Houle, was apparently sent by your headquarters, according to the memorandum of the A/Director of Records, para. 3.

5.- May some information please be obtained as to why

.....2

the "2" was changed to " 3" and by whom such a change was made.

P.L.B. Lt Col

(L. M. Firth) Colonel
Director of Estates

PLB:MAD
Enc.2.

TO BE COMPLETED IN DUPLICATE

Killed 11 Oct 44

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

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

WILL

(1) I, Jean Paul HOULE, of the Town
(Names in Full) (City, Town, Village, Township)

Address in civil life.

of Victoriaville, in the County District of Arthabaska

Province of Quebec, Truck Driver
(Civil Occupation)

Regimental No. D-15342, Unit #1 CARU, ~~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 will is kept in trust at Victoriaville City Hall and is covered by a wedding contract.

Original Received
- 8 H 8
27 SEP 1944
DR283

Relationship, names and address of residuary beneficiaries.

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

(4) I appoint Mr - Marin, St-Hyacinthe, P. Qué
(Name) (Address)

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

IN WITNESS WHEREOF I have hereunto set my hand this 11 day of Sept 1944

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

Jean Paul Houle
(Signature of soldier)

First witness sign here.

(5) Signature Albert J. Cailloux
Civil Address 4226 Christophe Colomb Montreal
Civil Occupation Electrical Designer

Second witness sign here.

Signature [illegible]
Civil Address 395 Glentaloe Ave Toronto
Civil Occupation Clerk

(Witnesses are not to be beneficiaries.)

[OVER]

To be made out in duplicate

M.F.M. 5
200M—7-40 (6098-9)
H.Q. 1772-39-1651

PARTICULARS OF FAMILY OF AN OFFICER OR OTHER RANK OF THE C.A.S.F. OR R.C.A.F. (ON ACTIVE SERVICE)

INSTRUCTIONS.

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

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

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

---

(1) Name of Officer of Other Rank..... HOULE, JEAN PAUL.....
(Surname first—Christian names in full—Block capitals)

.....

(2) Regimental or Air Force Number and Rank..... D-15543 Spr.....

(3) Unit..... 19 Field Co R.C.E. CA.....

(4) Are you married?..... No.....

(5) If married, state,

(*a*) Full name of your wife..... N/A.....

.....

(*b*) Present postal address of wife..... N/A.....

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

..... N/A.....

(7) Are you a widower?..... N/A.....

(8) Have you any children?..... N/A..... Number of boys..... N/A..... Girls..... N/A.....

Names and ages..... N/A.....

.....

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

.....

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

Name..... N/A.....

Postal Address..... N/A.....

.....

[SEE OTHER SIDE]

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife for at least 2 years immediately prior to appointment or enlistment? No

If so, state her full name and Postal Address

N/A

(11) Is your father alive? Yes

If so, state name and address, occupation Mr. Amable Houle

32 Poitras St. Victoriaville, Que Labourer

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

N/A

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

(14) Is your mother alive? No

If so, state name and address N/A

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

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

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

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

If so, state the following particulars:—

Relationship N/A

Full Name N/A

Postal Address N/A

Amount contributed monthly during the past six months

N/A

(18) Are you insured? No

If so, in what Company? N/A N/A
(Give number of policy)

Have you made arrangements for payment of your Insurance Premium? N/A
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.

Jean Paul Poirier
(Signature of officer or man)

Date 17 June 1941

[illegible]
Officer Commanding

Date 17 June 1941

NO. 4 DISTRICT DEPOT, A.F.

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

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

WW. 35 2
190

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE — ARMY

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Jean Paul (CHRISTIAN NAMES) HOULE (SURNAME)

REGISTER NO. D-14196
FILE NO. 405-H-21527
DATE 17-4-46
SERVICE NO. D-15543
FINAL RANK OR RATING Pte.
DATE OF DISCHARGE 11-10-44

PAYEE Director of Estates

ADDRESS

DATE OF TERMINATION OF OVERSEAS SERVICE 11-10-44

	$	¢
A. TOTAL QUALIFYING SERVICE NO. OF DAYS 1110/30 EQUAL TO 37 COMPLETE PERIODS AT $7.50	277.50	
B. QUALIFYING OVERSEAS SERVICE No. of Days 804 LESS INELIGIBLE DAYS, EQUAL TO DAYS @ 25c. PER DAY	201.00	
C. SUPPLEMENT FOR OVERSEAS SERVICE	478.50	

DAILY RATES AT DISCHARGE

PAY	$ 1.50		
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$ 1.25		
ADDITIONAL PAY	$		
	$		
	$		
DEPENDENTS' ALLOWANCE 1/30 OF $	$		
TOTAL	$ 2.75	X7 = $ 19.25	
NO. OF DAYS 804/183		X$ 19.25	84.57

D. WAR SERVICE GRATUITY	563.07
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $ / DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $	
OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE	563.07

ESTATES BRANCH MAY 6 1946 H.Q. OTTAWA NATIONAL DEFENCE

G. YOUR PORTION OF GRATUITY IS— 100%

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

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

ΔT

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

PREPARED BY	CHECKED BY
KRM	

TREASURY

CHECKED BY	DATE
G Petitclerc	18/4/46

G. L. Hamilton Capt.
SERVICE REPRESENTATIVE

DISTRIBUTION OF SERVICE ESTATES MLH

Estates Form "P. 4"

ARMY

Name HOULE (Surname) Jean, P. (Christian Names) No. D-15543

Pte. (Rank) C.A.O.S. (Unit) 11-10-44 (Date of Death)

AMOUNT

W.S.G. 563.07
L.P.C. $ 120.05

Date 10-5-46

Other Credits.....

Total..... 683.12
Prev. Dist. 120.05
This Dist. 563.07

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Father	Mr. Amable Houle 38 Poitras St. Victoriaville, P.Q.	563.07
		(Sole beneficiary under will)	

P4. TO TREAS.
MAY 17 1946

WSF

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	563.07

CLASSIFIED BY

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

T. M. F.

(L. M. Firth) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

30M—1-46 (8630)
H.Q. 1772-45-27

MFM 510
40/P & S/254 (3444)

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

District.....

Dispersal Area.....

Regtl No. D.15543. Rank and Name Houle. J.P. Spr.

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

(~~Transfer or~~ Discharge).....to.....on 11th. Oct. 19 44.

Reason Death. Authority: C.C.L. "A" 505 d/22nd. Oct. 44.

The following is a statement of the account of the above-named from 1st. Oct. to 31st. Oct. 19 44. the inclusive date of transfer or discharge.

Dr Particulars	Amount		Cr Particulars	Amount	
Balance Dr from last account			Balance Cr from last account	89	22
First Monthly Payment			Regimental Pay 31 days @ $ 1.50	46	50
Casual Payments			Tradesmen's Pay .....days at .....$		
Payments on Transfer or Discharge			Additional Pay (Give particulars) ....days at .....$		
Assigned Pay	20	00	Allowances (Give particulars) .....days at .....$		
Regimental Charges					
Public Stoppages (Give particulars):					
			Def. Pay Interest.	4	33
To Balance Cr Free	32	05			
To Balance Cr Deferred	88	00	By Balance Dr		
	120	05			
Total	140	05	Total	140	05

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

Remarks:

Assnd. Pay of $20.00 (S) stopped eff. Nov. 44.

ESTATES BRANCH MAY 28 1945 D.N.D. OTTAWA NATIONAL DEFENCE

Compiled by F. Gough.

Checked by J. Ledoux

Date 15th. May 19 45.

Certified correct R. MacGregor
for Chief Treasury Officer, Overseas

PH.

FORM No. 1

Register No. D-14196 Nominal Roll No. D-340

H.Q. File No. 405-H-21527

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
D15543	PTE.	HOULE	JEAN PAUL.

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. 17 JUN 41	T.O.S.	T.O.S.
S.O.S. 11 OCT 44 MD 2/6	S.O.S. MD	S.O.S. MD
Total Days 1213	Total Days	Total Days

Total Service ..... 1213 DAYS

——	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere	335	29	306
Overseas Service	878	74	804
Totals	1213	103	1110
Add Non-qualifying Service			103
Total Service			1213

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 11 OCT 44 2. Date S.O.S. Overseas .....

REMARKS:

KILLED IN ACTION 11 OCT 44

Computer's Signature ..... Buchan Pte.

Checker's Signature ..... Clewlow

Date Computed ..... 14 JUN 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
AWL	WP.			8	
AWARD.			25 AUG 41	1	9
AWL.	WP.			8	
AWARD			6 JAN 42.	12	20
				Total	29

Overseas: T.O.S. 18 MAY 42 T.O.S. T.O.S.

S.O.S. 11 OCT. 44 S.O.S. S.O.S.

AWL (2)	FP.		10 JUL 42		28
AWL (1)			4 AUG 43		5
AWL (1)			27 FEB 44		2
AWL (1)			12 APR 44		3
AWL (1)			13 JUN 44		10
AWL (1)				3	
UET.			21 JUL 44.	34	
REMISSION			13 AUG 44.	5	26
				Total	74

CFA 187
40/P & S/2180 (4066)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

171

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

No., RANK and NAME ..... D-15543 Pte. Houle J.P. ..... Dec'd

RECEIVED FROM ..... G.H.Q. Cdn. Section 2nd. Ech 21 Army Grp.

CHECKED BY ..... M-16018 Pte. Murdoch W.J.
B-73775 Pte. Todd F.A. ..... DATE 17 Jan 45

1	M.F.M. 182		
1	Rosary		
1	Cross		
1	Pocket Watch & Chain "Kinzle"		
1	Wallet		
	Snapshots		
1	Red"I" Disc.		
3	Souvenir Coins		

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

F.A. Todd Pte
.....
for OC 1 Cdn KSD