D26689
WESHLER
FRANK

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~~ORIGINAL~~
DUPLICATE
~~TRIPLICATE~~

M.F.M. 2
A.F.B. 271
450M—5-40 (5237)
H.Q. 1772-39-1645

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

Unit CANADIAN GRENADIER GUARDS C.A.S.F. Regimental Number D 26689

CANADIAN ACTIVE SERVICE FORCE
ATTESTATION PAPER

01
PTE

1. Surname WESHLER
2. Christian Names Frank
3. Present address 5368 St. Urbain Street, Montreal, P.Q.
4. Date of birth 22 March, 1910.
5. Place of birth Rumania (Country) ---------- (County or Province) Shotz (Town or Township)
6. Religion (state denomination) Hebrew
7. Trade or Calling Salesman, chauffeur.
8. Married, Widower or Single Single
9. Name of next of kin Mary WESHLER (Mrs.)
10. Relationship Mother.
11. Address of next of kin ~~5368~~ 5119 St. Urbain St. Montreal, P.Q.
12. Do you belong to, or have you served in the Active Militia of Canada? No
(If Yes, Give Unit and Dates of Service)
13. Have you served in (*a*) The Canadian Active Service Force? No (Yes or No) (*b*) Any other Naval, Military, or Air Force? No
(If Yes, Give Regimental No. and Unit) (Yes or No)
14. Did you serve during the Great War 1914-1918? No
(If Yes, specify Regimental No., Unit and Dates of Service)

WSG COMPLETED

C.A.A.

DECLARATION TO BE MADE BY MAN ON ATTESTATION

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

Date 24 July 1940. Frank Weshler
(Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Frank Weshler (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, P.Q. this 24th. day of July 19 40

Malcolm Kelly Capt. {Signature of Magistrate, Justice or Attesting Officer.

CANADIAN GRENADIER GUARDS C.A.S.F. {Office or Rank and Unit or appointment.

WITNESS

J.C. Glassl Lieut

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—CAIB

P

Record of Service of WESHLER (Surname) Frank (Christian Names) Regimental Number D 26689

6401 —

Qualifications

— Military: Nil

— Business or Professional: Nil

046 Trade or Civil: Salesman, chauffeur

Technical: Nil

1 Languages: Jewish, French, English.

Educational Qualifications

High School or Collegiate: 1 year (years completed) — Graduation or Matriculation: Nil (specify)

*College: Nil

*University: Nil

*(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 Field Force	Rank Shown	Effective Date	Unit	Place	Authority: Part II D.O. No. Cas. List, etc.	Authority: Dated
24-7-40	n/a	Joined on appointment CANADIAN GRENADIER GUARDS C.A.S.F T.O.S.	Gdsm.	24-7-40	C.G.G.	Montreal	Pt. 2 No 34	25/7/40
14/8/40		A.W.L	Gdsm.	31/7/40	C.G.G.	"	Pt II No 44	6/8/40
20/8/40		A.W.L	"	15/8/40	"	"	Pt II No 55	19/8/40
13/8/40		A.W.L.	"	30 Aug 40	"	"	Pt II No 69	3 Sep 40
14 Sep 40		A.W.L.	"	9 Sep 40	"	"	Pt II No 77	13 Sep 40
23 Sep 40		A.W.L.	"	18 Sep 40	"	"	Pt II No 83	21/Sep 40
11/12/40		Admitted to C.B.M.H.	"	9/12/40	"	C. Barracks	Pt II No 136	9/12/40
18/12/40		Disch. from C.B.M.H.	"	14 Dec 40	"	"	Pt II No 146	16 Dec 40
26/2/41		Furlough W.D. 699 15 Feb 41 - 3 Mar 41	"	—	"	"	Pt II No 35	14/2/41
5/3/41		Returned from Furlough 3 Mar 41	"	—	"	"	" No 47	4/3/41
7/10/41		Trans to #1 L/AA See RCASC J/S-1171-10-1-2/10/41	"	7/10/41	"	Larsen	" No 189	7/10/41
8-10-41		T.O.S. #1 Lt. A.A. Regt. See R.C.A.S.C.	Pte.	8-10-41	1st Lee. A.A. RCASC	St. John	Pt II D.O. # 5	8-10-41

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

Name

1. A
a. I
b.
c. I
d. I
e.
f. C
g.
h.
i.
j.

2.
4.
6.
7.
9.
10.

1.

Spe
and

CERTIFICATE OF MEDICAL EXAMINATION

Name in full ..... WESHLER, FRANK ..... Date ..... 22/7/40.

Part 1. Information obtained from the recruit.

1. Age ..... 30 ..... 2. Have you ever suffered from any of the following diseases?

a. Rheumatism ..... NO
b. Tuberculosis ..... NO
c. Bronchitis or asthma ..... NO
d. Heart disease ..... NO
e. Kidney or bladder disease ..... NO
f. Gastro-intestinal ..... NO
g. Rupture ..... YES
h. Varicose veins ..... NO
i. Flat or deformed feet ..... NO
j. Nasal trouble ..... NO
k. Ear disease ..... NO
l. Eye disease ..... NO
m. Epilepsy ..... NO
n. Nervous or mental disease ..... NO
o. Syphilis ..... YES (UNDER TREATMENT)
p. Gonorrhoea ..... YES
q. Have you ever worn glasses? ..... NO
r. Are you now or have you in the past received disability pension or compensation? If so, give details ..... NO

Frank Weshler
Signature of Applicant

Normal reflexes. Ears N. Colour vision N.

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

URINE: Neg.
XRAY : Neg.

1. Identification marks or scars. (If operative obtain history.)
Scar on chest near skerumm - scar past oper. for left hernia - Vac. scar L. arm.

2. Height ..... 5 ..... feet ..... 8½ ..... inches.
3. Weight ..... 170 ..... pounds.
4. Complexion ..... Med. ..... Eyes ..... Brown ..... Hair ..... Brown
5. Development ..... Good ..... (Good / Fair / Poor)
6. Chest measurement—Girth on full expansion ..... 38 ..... inches.
Range of expansion ..... 2 ..... inches.
7. Vision, right ..... 20-20 ..... left ..... 20-20 .....
8. Hearing, right ..... W.V.20 ..... left ..... W.V.20 .....
9. Condition of mouth and teeth ..... Good .....
10. The abnormalities (congenital and pathological) found on examination are as follows .....

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 .....

W. Tremblay, Capt. — President
Dr. A. Lawson — Member
Lieut. [illegible] — Member

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
5-8-40	T. A. B. 1	30-10-41	Category Confirmed A Fmn
26-8-40	T. A. B. 3		
4-9-40			
5-8-40	Tetanus Toxoid 1cc		
13-9-40	Tetanus Toxoid 1cc		
5-8-40	Vacc Insc		
12-7-41	T. A. B. T/ 1/2		

Regtl. No. 26689 Rank Guardsman Surname WESHLER Christian Name Frank

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				
Camp Borden Mil Hosp	7-12-40	7	12	40	14	12	40	Lumbago	7		

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

Statement of the Service of No. D26689 Rank Pte. Sheet No. 2

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

Name WESHLER, Frank

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
		S.O.S. C.A. (CANADA)	Pte.	10-11-41	1st, LtAA	HMT "Andes"	2 PtII DO.#1	24-11-41
		T.O.S. C.A. (O/S) (ON TRANSFER)	"	11-11-41	Do	Do	Pt II DO #1	24-11-41
		Disembarked	Pte				Do	24-11-41
		On Course to #1 CORU & Att'd FAP	Pte	30 Jan 42	1 Lt AA Reg Sec CORU	UK	9	29 Jan 42
	Cert. 13/4/42	Returned from On Course to 1 CORU & ceases to be att'd FAP	Pte	27 Feb 42	1 Lt AA Reg Sec CORU	UK	51. 19	28 Feb 42 27 Feb 42
		Qual Dvr 1/c Sup "C" Class II	Pte	5 Mar 42	1 L A/A R.P	UK	66. 2	18 Mar 42 5 Mar 42
		Leave (P1) to 2 Apl 42 FTW	Pte	26 Mar 42	1 L A/A RP	UK	6	26 Mar 42
	3	Forf. 3 days' pay F.R. & J. 149(2)	Pte	18 Apl 42	1 L A/A RP	UK	13	21 Apl 42
		Qual. & draw T. Pay as Driver - Mech Class "C"	Pte	1 Mar 42	1 L A/A RP	UK	17	29 Apl 42
amended P027 d. 25 June 42		Att'd FAP except Pay from 1 Cdn Lt AA Regt PL to 21 June 42 RCASC	Pte	12 June 42	1 CTA 31 Coy	UK	26	18 June 42
	2	Forfeits 2 days pay F.R. & J. 149(1)(a) AWL 1 day 4 hrs 30 mins	Pte	2 July 42	82 CAA Bde Coy	UK	3	14 July 42
		Ceases to draw T. Pay D/M Class "C"	Pte	10 July 42	82 AA Bde	UK	7	12 Aug 42
		P/Leave to 22 July 42	Pte	15 July 42	82 AA Bde Coy	UK	7	12 Aug 42
		Admitted to 14 Gen Hosp	Pte	24 Sept 42	82 AA Bde Coy	UK	CL	29 Sept 42
		Disch from 14 Gen Hosp	Pte	5 Oct 42	82 AA Bde Coy	UK	CL	8 Oct 42
		Adm to Red Hill Cdy Hosp	Pte	22 Sept 42	1 L A/A RP	UK	CL	1 Oct 42
		Disch from " " "	Pte	24 Sept 42	1 L A/A RP	UK	CL	1 Oct 42
S.O.S.		S.O.S. to ASC RU on adm to Hosp	Pte	24 Sept 42	82 AA Bde	UK	14	30 Sept 42
	T.O.S.	T.O.S. from 82 AA Bde	Pte	25 Sept 42	ASC RU	UK	234	1 Oct 42

Statement of the Service of No. D 26689 Rank ..... Sheet No. 2 3

Name Wesbler, F.

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
		Granted 7 days Dis Mech. Lge.	Pte.	6 Oct 42	ASCRU	UK	238.	6 Oct 42
		Disch from 14 Gen. Hosp	Pte	5 Oct 42	ASCRU	UK	238	6 Oct 42
		Ceases to pay Dis Mech Lge	Pte.	15 Oct 42	ASCRU	UK	246.	15 Oct 42
S.O.S.		S.O.S. to 82 Con. Ack Bde Coy	Pte	15 Oct 42	ASCRU	UK	246	15 Oct 42
	T.O.S.	T.O.S. from ASCRU	Pte.	16 Oct 42	82 A.A. Bde	UK	17.	21 Oct 42
		Summary Jurisdiction, Ordered Surrender Fined £2.2.0. fine and £0.5.0 Costs) Court of	Pte.	2 Nov 42	82 AA Bde Coy	UK	22	25 Nov 42
		P/Leave to 19 Jan 43	Pte	5 Jan 43	82 AA Bde Coy	UK.	5.	24 Jan 43
SOS		SOS to 28 AA Regt RCASC	Pte	25 Jan 43	82 AA Bde Coy	UK	6	27 Jan 43
	TOS	TOS from 82 AA Bde Coy RCASC	Pte	26 Jan 43	11 AA Regt RA	UK	1	26 Jan 43
		AA Sec 40 Awd Stoppage Pay £5.0.0	Pte	23 Jan 43	82 AA Bde Coy	UK	7	2 Feb 43
		P/Leave 14 ~~Days~~ to 20 Jan 43	Pte	6 Jan 43	82 AA Bde Coy	UK	7	2 Feb 43
	3)	awd a forf of 3 days Pay AA Sec 40 ~~Pte day 18 Augs~~	Pte	26 April 43	32 LAA Bty	UK	20	6 May 43
Cancelled by AO 33 - 2 Sept 43		~~AWL from 1430 hrs. still absent 1430 hrs.~~ (AWL 1030 hrs 5 Aug)	Pte.	5 Augs	~~1 LAA Regt~~ RA TNA	UK	~~22~~	~~26 Aug 43~~
	10	Forfts 10 days pay & Awd 10 days F.P. - AA 150 (1)	Pte	6 Aug	11 LAA Regt TA	UK.	33	2 Sept 43
		AWL from 1430 hrs (8 days) still absent	Pte	5 Aug 43	11 AA Regt RA	UK.	35	16 Sept 43
		Returned from AWL 2100 hrs.	Pte	21 Aug 43	11 AA Regt RA	UK	37	30 Sept 43
	FGCM 100	60 days detention forf. 100 days pay AA 150 + 22.	Pte	14 Sept 43	11 AA Regt RA	UK	37	30 Sept 43
SOS		SOS to 1 CASCRO on comm. Det. Bks.	Pte	27 Sept 43	11 AA Regt RA	UK	37	30 Sept 43
	TOS	TOS from 1 Cdn. Lt. A.A. Regt. RA	Pte	28 Sept 43	1 CASCRA	UK	239	4 Oct 43

Regimental No. D26689 Rank pte Sheet No.

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

Name WESHLER F.

	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc—	Rank Shown	Effective Date	Unit	Place	Authority DO Number	Authority Dated
(C50)	(20) Released from Dept Remission 20 Days	Pte	23 Oct 43	1CASCRU	U K	260	24 Oct 43
(M-46)	SOS SOS to 35 1st C Army Tps Comp Coy	Pte	25 Nov 43	1 SCRU	UK	285	25 Nov 43
(M37)	TOS TOS from 1CASCRU	Pte	26 Nov. 43	35 1st C Army Tps Comp Coy	UK	19	3 Dec. 43
(30)	Awd 21 Days F.P. AA Sec 15(1) abs 8 days 14 hrs Total forf 30 Days Pay	pte	20 Nov 43	1CASCRU	U.K.	287	27 Nov 43
	AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
	(a) Adm to 6 CCS.	Pte	9 Mar 44	35 1A Tps C Coy	UK	11	15 Mar 44
	(a) Disch from 6 CCS	Pte	11 Mar 44	35 1A Tps C Coy	UK	11	15 Mar 44
(M.85)	A.W.L. from 2359 hrs. 17-APR-44. Still absent 2359 hrs. 25 APR 44 (8th DAY)	Pte.	17-APR-44	35 F.C.A.TPS.C.Coy.	U.K.	16	3-MAY-44
C86	Rtnd from AWL 0700 hrs.	Pte	3 May 44	35 1CA Tps C Coy	UK	17	10 May 44
C86	(44) AA15(1) Awd 28 days F.P. + forfts 44 days pay.	Pte	3 May 44	35 1CA Tps C Coy	UK	17	10 May 44
	Embarked at U.K. on 7 Jul 44						
	Disembarked at FRANCE on 12 Jul 44	Pte		35 CA C Coy	21 A Gp	26	18 Jul 44
M106	To be L/cpl.	L cpl.	31 Aug 44	35 CA TC Coy	21 A G	35	6 Sept 44
M47	Reduced to Pte - off - AA11, AA40. To draw $1.50 p.d.	Pte	19 Oct 44	35 CA Tps Comp Coy	21 A Gp	45	31 Oct 44
M39	Wounded	Pte	25 Jul 44		AEF	A506	
C86	SOS. SOS to X3 List RCASC	Pte	16 Jan 45	35 CA Tps C Coy	21 A G	4	27 Jan 45
err	Adm 7 CBH	Pte	16 Jan 45	35 CA Tp C Coy		C18051	1 Mar 45
	Disch 7 CBH	Pte	3 Mar 45	"		"	"
S16	SOS X-4 list to 35 CA Tps Comp. Coy.	Pte	7 Mar 45	XL RCASC	21 A G	62	15 Mar 45
S16	TOS from X-4 list RCASC	Pte	8 Mar 45	35 CA TPS Comp Coy	21 A G	11	17 Mar 45
	Deceased 20 Jul 45						

SERVICE AND CASUALTY FORM

(PART II)

M.F.M. 4(a) (Part II)
(A.F.B. 103) (Part II)
500M—8-39 (1701)
H.Q. 1772-45-18

Regiment or Corps ..... Regimental Number D26689

Substantive Rank ..... Surname WESHLER Christian Names F.

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

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations. Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry to be shown
16 Sep +3	O.C.	1 Lt AA Pl	AWL from 1+30 hrs 5 Aug +3 Still Abs.	Field	13 Aug +3	Pte	35 16 Sep +3
26 Sep +3	"	"	Ret'd from AWL at 2100 hrs 21 Aug +3	"	21 Aug +3	"	37 30 Sep +3
26 Sep +3	"	"	Tried by FGCM:				
			AA Sec 22 Not Guilty				
			AA 15(1) AWL from 1+30 hrs 5 Aug +3 to				
			2100 hrs 21 Aug +3 (16 days 7 hrs 30 mins)				
			Awarded 60 days detention				
			In Close Arrest from 2100 hrs 21 Aug +3 to				
			date of trial.				
			Forf. 60 days pay FR&I 1+9(1)(b)				
			Forf. 17 days pay FR&I 1+9(1)(a)				
			Forf. 24 days pay FR&I 1+9(1)(c)(1)				
			Total forf. 101 days pay	"	14 Sep +3	"	37 30 Sep +3
27 Sep +3	"	"	SOS to 1 CASCRU on adm to 1 Cdn Det				
			Barracks	"	27 Sep +3	"	37 30 Sep +3
	TOS	CASCRU	TOS from 1 Cdn LAA Regt RCPCASC	UK	28 Sep 43	Pte	239 - 4 Oct 43
		CASCRU	Released for Det, Rem - 20 days	UK	23 Oct 43	Pte	260 - 27 Oct 43
~~SOS~~		~~CASCRU~~	~~SOS to 1 Cdn Lt AA Regt Pl~~	~~UK~~	~~11 Nov 43~~	~~Pte~~	~~273 - 11 Nov 43~~
	SOS	CASCRU	SOS to 35 Cdn Army Tps Comp Coy (army)	"	25 Nov 43	"	285 - 25 Nov 43
	35 Tps	Comp. Coy	T.O.S. from 1 CASCRU.	U.K.	26 Nov 43	Pte	19, 3 Dec 43
	"	"	Awarded the Cdn. Vol. Serv. Medal & Clasp.	"	15 Jan 44	"	4, 29 Jan 44
	"	"	Adm. to 6 Cdn. C.C.S.	"	9 Mar 44	"	11, 15 Mar 44
	"	"	Disch. from 6 Cdn. C.C.S.	"	11 Mar 44	"	11, 15 Mar 44
	"	"	AWL from 2359 hrs. 17 Apr. 44. Still absent 2359 hrs 8th day	"	25 Apr. 44	"	16, 3 May 44
	"	"	AWL from 2359 hrs 17 Apr. 44. Ret. from AWL 0700 hrs	"	3 May 44	"	17, 10 May 44
	"	"	28 days F.P. - Forf. 44 days pay. (AWL - 15d, 7h, 1min)	"	3 May 44	"	17, 10 May 44
	"	"	Embarked U.K. 7/7/44 Disembarked France.		12/7/44	"	26/44
	"	"	To be L cpl.	"	31 Aug 44	L cpl.	35/44

(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
	35 Tps Comp Coy		Reduced to Pte for an off under A.A. 11	Field	19 Oct 44	~~Lept~~	45/44
	"	"	~~Awarded 14 days CB & forf of 14 days pay for an off under AA 40~~	-	~~19 Oct 44~~	~~Pte~~	~~45/44~~
		✓	SOS to X-3 List RCASC	—	16 Jan 45	Pte	4-45
25 Jan 45	X 3	RCASC	TOS from 35 Cdn A Tps Comp Coy RCASC	✓	17 Jan 45	✓	22/45
			Posted to X4 (9 Bn)	✓	4 Mar 45	✓	60/45
	X4 (9 Bn)	RCASC	SOS to 35 Cdn A Tps Comp Coy	✓	7 Mar 45	✓	67 Mar 45
		35 Comp	TOS from X-4 RCASC	—	8 Mar 45	—	11/45
			9 days PL to UK 26 Apr - 8 May 45	—	—	—	50/45
			SOS Deceased (Killed in Rd Accident)	—	20 Jul 45	—	34/45

7 ft AA Reg*

SERVICE AND CASUALTY FORM

PART I (For all ranks)

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

Unit Canadian Grenadier Guards CASF Regimental Number D 26689

	(17) Regiment or Corps	Unit (Battn., etc)
1. Surname Weshler		Can Grenadier Guards
2. Christian Names Frank	R.C.A.S.C.	1st Lt A.A. Bty
3. *Substantive Rank and Appointment	RCASC	82 CDN A.A. BDE COY
*Acting Temporary or Local Rank	R.C.A.S.C.	1 Cdn Lt A.A. Regt Pl.
giving date		

*To be entered in pencil to facilitate alteration.

4. Place of birth Schotz in Roumania
5. Date of birth as declared on attestation 22 Mar '10
(A)
6. Date of enlistment 24 Jul. 40
7. Place of enlistment Montreal, P.Q.
8. Residence at time of enlistment 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
13. Trade on enlistment Salesman
14. Corps, trade and grade
15. (D) Qualifications DRIVER MECHANIC, Group "C"
16. (E) Miscellaneous entries Diary 1/c

(18) Medical

Category	Date	Authority
A	22/7/40	M.F.M. 2
"A"	20-10-41	M.F.M. 2

(19) Next of kin (entries to be made in pencil) (Mother)

Mrs Mary Weshler
5119 St Urbain St.
Montreal, Que.
Canada.

(20) E
(21) E
(22) E

CFEF	1st	2nd	Mar 5	Score
No	R	0	5	137
MD	MD	MD	VD	Dup
	4		10	

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

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry to be shown
24-11-41		1st L.	A.A. S.O.S. Cdn. Army (Canada)		10-11-41	Pte.	Part II D.O.#1
24-11-41		1st L.	A.A. T.O.S. C.A. (O/S) (on transfer)		11-11-41	Pte.	do
24-11-41		1st L.	A.A. Disembarked 24-11-41			Pte.	do
30 Jan 42		1st L.A.A.	On Comm. D.M. Course, Border	U.K.	30-1-42	PTE	Pt. II D.O. #10
27 FEB 42		1st L.A.A.	Returned from on Course, #1 C.O.A.U.	Jasper Pks.	27-2-42	PTE	Pt. II D.O. #19
5 Mar 42		"	Qualified as Driver 2 C.	"	5-3-42	PTE	Pt. II D.O. #2
18 Mar 42		"	Qualified Driver Mechanic "Group C"	"	27-2-42	PTE	Pt. II D.O. #4
26 Mar 42		"	Granted P.L. #1 W.W.	"	26-3-42	PTE	Pt. II D.O. #6
2 Apr 42		"	Returned from P.L. #1	"	2-4-42	PTE	Pt. II D.O. #9
21 Apr 42		"	A.A. Sec II Gode pillion on a motorcycle without a crash helmet. (3 dy pay)	Louvertide	18-4-42	PTE	Pt. II D.O. #13
29 Apr 42		"	Granted T.O. as Driver Mech Gp "C"	"	1-3-42	PTE	Pt. II D.O. #17
6-7-42	O.C.	82CAABC	Admonished & forf. 2 days pay, F.R.&I. 149(1)(a) A.W.L. from 1700 hrs 28-6-42 until 2130 hrs 29-6-42 (Absent 1 day, 4 hrs, 30 mins)	Field	2-7-42	"	D.O. 3/14-7-42
5 Aug 42	"	"	Leave 7 days P2	"	15 Jul 42	"	Pt. II/#7 d/12 Aug 42
5 Aug 42	"	"	Ceases T.N. Driver Mech "C"	"	10 Jul 42	"	Pt. II/7/12 Aug 42
28 Sep 42	OC	82AABC	S.O.S. to 1 CASCRU on adm to 14 Cdn. Gen. Hosp.	"	24 Sep 42	Pte.	14-d/30 Sep 42
	TOS	Case/R4	TOS from 82 Cdn A A Bde Coy	U.K.	25 Sep 42	Pte	234-1 Oct 42
		"	Rise 14 Gen Hosp	"	5 Oct 42	"	238-6 Oct 42
		"	Is pay as D/M Grp "C" on quote basis	"	6 Oct 42	"	238-6 Oct 42
		"	SOS to 82 A A Bde Coy	"	15 Oct 42	"	246-15 Oct 42
TOS 16 Oct 42	O.C.	82AABC	TOS from 1 CASCRU - Dem # 8117	"	16 Oct 42	"	17-21 Oct 42
20 Oct 42	"	"					
2 Nov 42			Ordered to pay fine of £2-2-0 on Civil Court at Oxted, Surrey for an offence to Sec 12 of Road traffic Act		2 Nov 42	"	22-25 Nov 42
20 Jan 43	O.C.	"	14 days P.L. to 19 Jan 43	"	5 Jan 43	"	5 25 Jan 43
25 Jan 43	S.O.S.	"	To 1st Cdn L.A.A. Regt Pln RCASC w.e.f. 25 Jan 43	"	25 Jan 43	"	6 25 Jan 43
26-1-43	O.C.	1LtAARP	TOS from 82 AA Bde Coy	"	26-1-43	"	1/26 Jan 43
2-5-43	"	"	Granted Daily Rates of Pay of $1.50 per diem	"	1 Jan 43	"	16/7 May 43
	"	"	7 days leave	"	15 Jun 43	"	24 30 Jun 43
Cancelled	#33/43	"	~~Ass from 1430 hrs 5 Aug 43 Still Abs (8 A day)~~	"	~~13 Aug 43~~	"	~~32 - 26 Aug 43~~
	"	"	10 days F.P. 10 days pay AA 15(1) FR&I 149(2) (Absent 45 mins)		6 Aug 43	"	33 2 Sep 43

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER D26689 RANK Private SERVICE UNIT

NAME WESHLER, Frank R.C.A.S.C. (C.A.)

DATE OF BIRTH 22-3-10 DATE OF ENLISTMENT 24-7-40

MARITAL STATUS Single RELIGION Hebrew

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Mother NAME Mrs. Mary Weshler,

ADDRESS 5119 St. Urbain St., Montreal 18, Que. ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. 17B H.Q. 405-W-17626

CASUALTY DETAILS DATE 20-7-45

Died, investigating cause.

Ordinary Casualty

Western European Theatre of War.

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? JMD YES/NO M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO DATE 27-7-45

FORM NO. CAS. 6
25M-4-44 (4184)
H.Q. 1772-39-1989-1990

S/L 989
O/S With A.S.C.

Lammerman
capt for
DIRECTOR OF RECORDS

6 Roll

COPY FOR DOCUMENT FILE

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO Mrs. Mary Weshler Mother

ADDRESS: 5II9 St. Urbain St.,
Montreal I8, Quebec.

(2) MEMORIAL CROSS

WIDOW Mrs. M

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. Mary Weshler (ENGLISH)

1981

ADDRESS: 5119 St. Urbain St., Montreal 18, Que.,

MEMORIAL BAR
(1)
DATE DESP.....
REGN. NO 4552

(2)

(3)
DESP. 29 AUG 1945
REGN No. 21134

20-7-45

AWARDS—CANADIAN ARMY (ACTIVE)

1981 M FEB.

500M—1-44 (3467)
H.Q. 1772-45-8

FILE NO. 405-W-17626

SURNAME (IN BLOCK LETTERS) CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
WESHLER, Frank	D.26689	Pte.	R.C.A.S.C.

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, 1939-45 CVSM & Clasp	8162 27/10/49

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

File No 405-W-17626

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

P.A.

No. D 26689 Name Wesler, Frank

Rank on Discharge Pte Date of Discharge 20-7-45

Deceased

Authority for Discharge or Retirement

Served in:				Non-qualifying service
Canada	from 24-7-40	to	10-11-41	
	from	to		
United Kingdom	from 11-11-41	to	7-7-44	
	from	to		
Italy	from	to		
Northwest Europe	from 8-7-44	to	20-7-45 Died, road accident	
---------	from	to		
-- ------	from	to		

Eligible for award of:

M

1939 - 45 Star	OK /

~~Italy Star~~	/
France-Germany Star	OK /
Defence Medal	OK /
War Medal	OK /
Canadian Volunteer Service Medal with clasp	OK /

Verified by Edna Faure

Date SEP 19 1946

Carded SEP 21 1946

NO RIBBON DESPATCH

HA 165

D. 26689. | WESHLER. | FRANK.

Regimental Number | Last Name (Block letters) | First Name | Middle Names

DET. Soldiers Qualification Card

CONFIDENTIAL

Unit H1 CASC. RU 2 Coy.

1 Corps RCASC.

2 Nationality CANADIAN. | By Birth | By Naturalization ✓ | Country of Birth RUMANIA.

3 Father Racial Origin HEBREW / RUMANIA
Mother HEBREW / "

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

5 Age 22. MAR. 1910 347 6 Height 5 ft. 9 in. 7 Weight 160. 8 Silhouette 1 2 3 4

Eyes 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 ..... To Medical attention .....

Health History Herniotomy, GSW 41 Aug 1939 VDG 1936 VDS "

16 Education Level: Illiterate ..... El. 8 (14.) Sec. ..... ( ) Grade completed)

Conduct during school life .....

17 18 University or Professional Institution	Course Taken	Years completed	Degree	Year

19 Post Graduate	Course	From—To	Degree	Year

20 Specialized Training:
1. (Course) .....
At ..... From—To ..... Completed ? .....

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

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

Other trades papers, Diplomas Certificates or Qualifications .....

23 Languages: Spoken fluently ENGLISH. FRENCH. HEBREW.
Written well ENGLISH. FRENCH. HEBREW.

24 Main occupation: Description MERCHANT. (GENERAL)
Estimate of skill SAT.
Duration (from—to) 1927 - 1940. Weekly Wage 60.00
Employer's Name and Address WESHLER. BROS. - C'AND'F' CLOTHING REG.
MONTREAL. MONTREAL.

50 "M"

Test	Score	S.M.	Test 9 Score
1			Sub-total
2			S.M.
3			
4			Sub-total
5			S.M.
6			Sub-total
7			S.M.
8			
Tot.			Grade

No Score Action

English ..... French .....

51 OTHER MENTAL
Test .....
Score ..... Grade .....
Date .....

52a MECHANICAL APT.
Test .....
Score ..... Grade .....
Date .....

52b CLERICAL APT.
Test .....
Score ..... Grade .....
Date .....

53 TRADE TESTS

Trade and Grading	Date

54 OTHER
Test .....
Score ..... Grade .....
Date .....

25 Second Most Important Occupation: Description: CLERK. GEN STORE. Estimate of skill SAT
Duration (from—to) 1924 - 1926. Weekly Wage 20.00
Employer's Name and Address FELDHAMMER. STORE.
MONTREAL.

26 Third Most Important Occupation: MERCHANT GENERAL Estimate of skill Sat.
Duration (from—to) 1926 - 1927. Weekly Wage —
Employer's Name and Address Self.
Montreal.

Trade Union or Professional Society .....

Vehicles: 27 Heavy Truck D- 28 Light Truck D- 29 Auto D- 30 Motorcycle D-

31 Farm Tractor - 32 Tracked Vehicle - 33 Power Launch - 34 Aeroplane -

35 Accident Prone No. CIV LICENCE 1926. Teamster 2H.

Farming Experience: Wide ..... Limited ..... None ✓
District ..... Type .....

Job promised after discharge? YES By whom? Name Same as 24.
Job ..... Address: .....
Other provision for post-discharge occupation .....
Best Qual as in 24 Type of work desired MERCHANT.
Occupational history: Ambitious ..... Stable ..... Accidental ✓ Erratic .....

36 Marital Status: M ..... S ✓ W ..... D ..... Sep. .....
Marital Problems .....
Wife's or Husband' Age ..... Attitude to Service ..... Health .....

37 No. of Children ..... 38 No. of Dependents 1
Relationship of Dependents Mother
No. of Brothers 3 No. of Sisters 0 Position in family 3.
Status of home in childhood .....
Religious Denomination HEBREW

39 Hobbies: Photography M ..... S ..... Radio ..... Engines .....
Mechanics ..... Other READING.

40 Sports: (1) SKIING. (2) MOTORCYCLING. (3) SKATING
Team Games and Position (1) .....
(2) ..... (3) .....

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

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

43 CURRENT SERVICE: Date Enlisted 24.7.40. Place Enlisted MONTREAL.

Date From—to	Country	Corps	Unit and Sub-unit	Rank 44	Principal Duty	Performance
24.7.40. 10.11.40	CAN.	Inf.	Cdn Gren Gds.	Pte.	GEN TRAINING. DRIVER	C
24.11.40 — 26/9/43	UK	CASC	1st L. AA. Reg.	"	DR. D.M.	H
26/9/43 —	"	"	1 CASCRU (23/10/43	"	HEADLY	(R)

45 COURSES ATTENDED

COURSES ATTENDED	PLACE	Date: From—to	Qualified as	Rating
D.M.	BORDEN UK.	2/42	D/M.	✓

46 Crime: Courts Martial Convictions 1/60. AWL-19 days. Major Offences ..... Minor Offences .....

Civil Convictions ..... Fines £2.2.10 1/4 d.p. rdg; sore crash helmet m/c speeding Hospitalization 1/21.

49 Psychiatric ☐ ☐ ☐ ☐ ☐

C.M.H.Q. 1000:115
40/P&S/1246(2609)

47 Classification: Specialties and Trades

Designation	Degree of Proficiency	Date	Authority
DRIVER 1/c W	CL III	5.3.42	PB
D.M.		2.2.42	—
MOTOR CYCLIST.		6.4.42	—

55 Type of Service Desired (1) D/R. (2) .....

Remarks re Outstanding or Limiting Factors	
Deportment	✓
Disposition	✓
Appearance (grooming)	✓
Physical appearance	✓
Map Reading	—
Military Knowledge	—
Mechanical Knowledge	✓

Received a gun shot wound in left leg 1939 — ok at present. Auto accident 1941 spinal injury and head injury — unconscious 2 days in hosp 4 mos — complains of headaches over L eye, some backache — appears intelligent, serious natured and rather resourceful — was given 10 days f.p. & 10d. reg for going on the m/c & home some traffic-engineer that was away that for a couple days — decided & ridely go & "so that they knowed home something & change his mind." seems sincere and willing worker.

USB 28 Oct 43 Posted 7 AA Regt on 52 AA Battery (RCASC 21 Hy) as 2nd/c. 48 hr pass.

Reason for Joining Cdn. Army DUTY.

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

Tests Indicated: 51 ..... 52a ..... 52b ..... 53 ..... Other .....

48 Suggested Possibilities (1) D/R

for employment (2) D/S

Interviewed by J. P. Lemieux Capt Date 25 OCT 43.

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

To be made out in duplicate

M.F.M. 5
100M—6-40 (5453-4)
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 ~~WESHLER~~ WESHLER FRANK
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank D-26689 GUARDSMAN

(3) Unit CANADIAN GRENADIER GUARDS C.A.S.F.

(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? NO

(8) Have you any children? NO Number of boys N/A Girls N/A

Names and ages N/A

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

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

Name WESHLER MARY

Postal Address 5368, ST URBAIN STREET. MONTREAL.QUE.

[SEE OTHER SIDE]

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

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

(11) Is your father alive? NO

If so, state name and address, occupation N/A

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

(13) If sole or partial support of father who is a widower, totally incapacitated from earning a living —state what amount per month you have given him prior to appointment or enlistment. N/A

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

(14) Is your mother alive? YES

If so, state name and address WESHLER MARY 5368, ST URBAIN STREET. MONTREAL. QUE.

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

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

Also state reason why she has no other means of support, if partially supported by you what is your reason for not providing full support? ~~N/A~~ YOUNGER BROTHER IN FAMILY ALSO SUPPORTING.

(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~~ 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
(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.

Frank Weshler
(Signature of officer or man)

Date 24 JULY 1940

JUL 31 1940

Officer Commanding
(M. F. Peiler) Lieut-Colonel
Commanding Canadian Grenadier Guards

Date

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

OCCUPATIONAL HISTORY FORM

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

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

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full Frank Walker (b) Reg'l. No. D-86189
2. (a) Arm of service Army (b) Unit 1st Field Co. R.C.E. (c) Rank Pte.
3. (a) Date of birth [illegible] (b) Have you any dependents? [illegible] (c) Place of residence at time of enlistment Montreal Que.
4. (a) Place of enlistment Montreal Que. (b) Date of enlistment July 04/1940

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 14 (b) Were you attending school or college up to the time of enlistment? No
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) 8 years 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? No (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? English French (b) What languages do you read well? English 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? No

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

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

11. Had you ever been employed fairly regularly since leaving school? Yes.
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked Merchant (b) State how long you had worked at this trade or occupation 10 Years.
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified Nil.
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment July 24/1940
15. Give details of last employer, if any: Name Nil Address Nil.
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Nil
17. (a) If your last employment was in a business of your own, state nature and address of business General Merchant (b) Date of discontinuing it July 24/40

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 Nil Address Nil
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Nil.
20. (a) Your specific occupation Merchant (b) Number of years' experience at this occupation with any employer 10 Years.
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 General Merchant (b) Where was it located? Montreal Que.
23. (a) Number of years engaged in this business 10 Years (b) Have you made, or will you make plans to return to the same or a similar business on discharge? Yes.

Section F—PARTICULARS OF FARMING EXPERIENCE

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

Section G—MISCELLANEOUS

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

DATE Oct 27th 1941 194[illegible] SIGNATURE Frank Walker

MILITIA BOOK M. 1 (Cover)

CANADIAN ARMY

SOLDIER'S SERVICE

AND

PAY BOOK

0.26689 PTE. WOSHLER, F.

(I) SOLDIER'S NAME AND DESCRIPTION ON ATTESTATION

Regtl No. D. 26689

Surname (in capitals) WESHLER

Christian Names (in full) FRANK

Date of Birth 22-3-10

Place of Birth Lynonia, Ohata

Citizenship Canadian

Trade on Enlistment Salesman & Chauffeur

Nationality of Father at birth Hebrew

Nationality of Mother at birth Hebrew

Religion Hebrew

Enlisted at Montreal, Quebec

Date 24-7-40

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

Signature of Soldier F. Weshler

Signature of Officer J. Molloy

Place Field Date 23-10-44

(II) NEXT OF KIN

Any change becoming known is to be duly noted with date of
NOTE—No entry in these pages has any legal

Nearest degree of relationship		Names	Date
1st	Wife		
	Children		
2nd	Father		
	Mother	Mary Weshler	23.10.44
3rd	*Brothers and Sisters	Samuel Weshler Irving Human " Jack "	23.10.44.
4th	Other Relations (stating relationship)		

*State whether brothers are older or younger.

NOW LIVING

such change and reported by OC Unit to the Officer i/c Records.
effect as a Will (see pages 20 to 23)

Latest known Address in full
5119 ST URBAIN ST. MONTREAL PQ.

(III) RANK and APPOINTMENT

Date	Rank and Appointment	Temporary, Acting or Local (with or without pay)	Authority of Part II Orders	Signature of Officer
24.7.40	Pte	W.P	#34	
8.10.41	Pte	W.P	#8	
31.8.44	L/Cpl	W.P	43-41/6/44	

(IV) Certificate Applicable to all Arms, to be completed and signed by the CO 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:*—*

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Qualified in addition as under :—

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.....

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
Dvr Mech Course	2.2.42	
RCOC - Inst Wing Borden	to	
Passed	28.2.42	J. Kelley Lt
Qual Dvr i/c-Lt DO 21	5.3.42	
Qualified M/c #DO 19	6.4.42	

(VI) SMALL ARMS RANGE COURSES

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

(VII) EDUCATIONAL QUALIFICATIONS

Highest Grade obtained (Degrees, Diplomas etc.)	Place	Date	Signature of Officer

(VIII) TRADE RECORD

Trade	Group	Authority School or T/T Board and Date	Signature of Officer
Draughtsman	C	1-3-42	J. Miller T

(IX) EMPLOYMENT WHILST SERVING

Period		Nature of Employment	Remarks and Signature of OC Coy, etc.
From	To		

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

(X) MEDICAL CLASSIFICATION

Pulhem's Profile or Category	Date of Exam or Entry	Signature of Medical Officer
A - Med Board Montreal	24.7.40	
A. MFM 2	30.10.41	J. Melling Capt
A - Cat Confirmed	15.12.42	

(XI) PRESCRIPTION FOR GLASSES

	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 MO.....

	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 MO.....

(XII) PARTICULARS OF SURGICAL APPLIANCES ISSUED

Particulars	Date	Signature of Medical Officer

(XIII) VACCINATIONS

Date of Vaccination	Signature of Medical Officer
5. 8. 40	
6. 10. 42 Success	J. Melby M
13. 4. 44	

(XIV) PROTECTIVE INOCULATIONS

Nature of Vaccine, "T.A.B." Cholera, Plague, etc.		Date	Signature of Medical Officer
		5.8.40	
TAB	3	26.8.40	
		4.9.40	
Tetanus tox	1cc	5.8.42	
"	1cc	13.9.40	
TABT	½cc	12.7.41	
TABT	½cc	6.7.42	
TABT	½cc	5.9.43	
Typhus	¼cc	11.1.44	
"	½cc	25.1.44	
"	1cc	1.2.44	

(XIV) PARTICULARS OF DENTAL TREATMENT

Date	Required	Completed	SPECIFICATION Use authorized Abbreviations and Symbols	Signature of Dental Officer
23.11.43	✓		P.E	
13.5.44		✓		

Sec (XVI) Bank Accounts and Personal Effects

The information requested below although not compulsory will greatly facilitate recovery and disposition of service estate in case of casualty. To be entered and signed by an officer.

Name of Bank or GPO in which account is kept

.....

Branch Address.....

Account Number.....

Personal Effects stored with ;

Name.....

Address.....

Signature and rank of Officer.....

Sec (XVII) Miscellaneous Entries

Particulars	Date	Signature of Officer
P.L #1 F.T.W.	26.3.42	
M. Test (Rev) Comp	13.4.42	
Q Card Complete		
D. M. Chamber Comp	22-4-42	
C.A.P. " "		
P.L. #2 F.T.W.	14.7.42	
P.L. #3 & 4	6.1.43	
Qual. T.O.E.T.	20-1-43 16-2-42	
P.L. #5 No T.W.	15-5-43	

(XVII) MISCELLANEOUS ENTRIES (cont'd)

Particulars	Date	Signature of Officer
FINGER PRINTED		CAIB
P.L. W.W.	17.12.43	
Awd. the Canadian Volunteer Service medal and clasp wef 15 Jan 44 - DO # 4 d/29 Jan 44	29.1.44	
P.L.	17.3.44	
Identification Card issued		
N.V. TEST FAIR		
On 24.7.43 entitled to wear 1 Silver & 2 red Service Chevrons.	30-5-44	
EMBARKED UK wef 7.7.44		
DISEMBARKED FRANCE wef 12.7.44 DO #26 d/18 Jul 44		
X-Ray chest-Neg	13.2.45	[illegible]
Awarded ONE WOUND STRIPE	24-3-45	
Realloc Quest	16-5-45	

Memorandum

Number.....Rank.....

Name.....

reports that a Will made by him is in the custody of

Name .....

Address.....

.....

Date..... Signature and Rank of Officer.

11. As a safeguard against the possibility of the loss in transit of original Wills despatched to Canada, all Wills, whether in the Short Form, on MFM 10 or 10a, or otherwise, should be made in duplicate. In the case of a Will in the Short Form, the duplicate may be on an ordinary sheet of paper. The duplicate must be signed by the soldier and, if not made on the Short Form, by both witnesses in the same way as the original. Both copies will be forwarded to the Officer i/c Records CMHQ and the following memorandum will be completed and signed by an officer :

Memorandum

*MFM 10 or ~~10a~~ } dated..... 1 .....
*~~Short Form of Will~~ }

forwarded to Officer i/c Records, ~~CMH~~Q. NOHQ OTTAWA

.....

Date..... Signature and Rank of Officer

*Delete part not applicable.

DO NOT DETACH EITHER OF THE ABOVE MEMORANDA.

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 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.

28 x 1 1/2

MILITIA BOOK M.1

PART I

40/P & S/1893 (3650)

CANADIAN ARMY

SOLDIER'S SERVICE BOOK

(For use on Active Service)

DON'T FORGET

Report immediately to your Commanding Officer any changes in name, address or relationship of your next-of-kin.
This is essential in the interests of yourself and your next-of-kin.

Reg. No. D 26689

Surname (Capitals) WEISHLER

Christian Names in full FRANK

5/7B CFA 187
40/P & S/2180 (8080)
(Pads of 100)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME ....D-26689 Pte Weshler F. (Dec'd)....

RECEIVED FROM ....Cdn 2nd Ech 21 A Gp....

CHECKED BY ....L-17349 Sgt Bailey N.S.... DATE ...18 Sept 45....

AND ....M- 7303 Pte Harvey H.C.....

1	~~Writing~~ Writing case		
3	Photos		
2	Combs in cases		
1	Coin bracelet (damaged)		
1	Fountain pen		
2	Propelling pencils		
2	Wallets		
1	Ronson lighter		
1	UL lighter		
1	Metal cig case		
1	Key chain		
1	Locket		
1	Trinket		
1	Oasis wrist watch (Gold) No 2715)		
1	Jewel case		
1	Ladies ring W/15 small stones		
1	Gold snake ring W/red stone		
1	Locket on chain		
1	Case W/Ladies wrist watch(No 501725)		

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

QUADRUPLICATE—with effects.

M S Bailey Sgt
for OC 1 Cdn KSD

H.Q. 405-W-17,626

ESTATES BRANCH

23 MAY 46

Mrs. Mary Weshler,
5119 St. Urbain St.,
Montreal, P.Q.

WESHLER, Frank, Pte. (Dec'd)
D-26689, C.A.

Dear Mrs. Weshler:

We have now received an additional credit to your late son's estate in the amount of $216.39 representing the Canadian redemption on 523.68 guilders, foreign currency, found on his person.

This amount is being paid to you as the sole beneficiary named in his last Will.

The Treasury Department has been requested to forward you a cheque in the above amount and when it is received, kindly sign and return the enclosed acknowledgement form.

Yours faithfully,

Capt.,
DIRECTOR OF ESTATES.

LCM/JS
Encl.

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY GL

Name WESHLER Frank No. D.26689
Surname Christian Names

PTE C.A. O/S ~~20-7-45~~ 20-7-45
Rank Unit Date of Death

AMOUNT

L.P.C. $ 111.70

Date 16-5-46

Other Credits 216.39

Total 328.09
Prev dist. 111.70
This dist. 216.39

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs Mary Weshler 5119 St. Urbain St., Montreal, Que.	216.39
		(sole beneficiary under will)	
		DO NOT REMOVE FROM FILE	
		NR#297 24 TO TREAS. 9-7-46 QW	

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	216.39

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

30M—1-46 (8630)
H.Q. 1772-45-27

FOR COMPLETION AND RETURN BY

Form P. 64

Mrs. Mary Weshler,
5119 St. Urbain St.,
Montreal 18, Quebec.

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-W-17626 FD 31

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

9 August 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

WESHLER, Frank, Pte.

D.26689 C.A. O/S

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.

E. L. Smith Col.

FCM/JL

Director of Estates.

M.F.W. 77
6M—4-45 (7053)
H.Q. 1772-39-972

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased..... N.A.		N. A.	N.A	N. A.
2	Children of the Deceased and dates of their Births..... N.A.		N. A.	N.A.	N. A.
3	Father of the Deceased.....		Joel Weshler	62	died Jan. 27, 1937
4	Mother of the Deceased.....		Mary (Sharf) Weshler	64	5119 St. Urbain St. Montreal, Que.
5	Brothers of the Deceased	Full Blood	Samuel Weshler	40	4817 Clark St. Mtl.
			Irving Weshler	37	5119 St. Urbain St. Mtl.
			Jack Weshler	27	2904 Sorssons Ave. Mtl.
		Half Blood			
6	Sisters of the Deceased	Full Blood	Clara Weshler	22	died Aug. 10, 1926
		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
	Clara Weshler Aug. 10, 1926	—	—

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Frank Weshler
9	Date of his birth.	Sept. 1910
10	Place and date of his marriage.	N.A
11	Place and date of his parents' marriage.	Bukovine, Austria, 1899

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Austria
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Austria 1910-1913 3 years (b) Quebec, Can 1913-1945 32 years (c) (d)
14	Nature of employment before enlistment.	Salesman
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.	(5119 St. Urbain St) Montreal

PARTICULARS OF ESTATE

17	Did the deceased leave a Will other than a Service Will? If in your custody, please forward. If not, can you state where it is?	NO
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	N.A.
19	(a) Did he have a Bank, Post Office or other deposit account? (b) Give name and address of bank, etc., and the amount on deposit. (c) Do you wish it administered with the pay account? (d) If it is a joint account, state the survivor's name and relationship to the deceased.	NO — — —
20	Amount of War Savings Certificates purchased by the deceased and registered in his name. State where located.	Purchased some 7s. Amount unknown.
21	(a) Amount of Victory Loan Bonds left by deceased. (b) State whether bearer or registered. (c) State in whose name they are registered. (d) During what loan were they purchased? (1st, 2nd, 3rd, etc.) (e) In whose possession, and address, are they?	~~Unknown~~ $50.00 Registered Jack Weshler 7th Jack Weshler, 2904 Sossons Ave, Mtl.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	None
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	None

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.

(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

*.....Brother.....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.

.....Irving Weshler..... {Signature of Informant}

.....5119 St Urbain St Montreal, Can.....Address

CERTIFICATE

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

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

Dated at ....Montreal.... this ....27th.... day of ....August.... 19....45

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces. .....Louis H. Weintraub..... Qualification .....Chaplain & H/Capt

Address ....136 Villeneuve St. West Montreal, P.Q.

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

...is whole Form and Instructions ...her side before commencing to ...complete.

WILL

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

(1) I, Frank Weshler (Name in Full), of the city (City, Town, Village, Township)

Address in civil life.

of Montreal, in the County ~~District~~ of Hochelaga,

Province of Quebec, Salesman (Civil Occupation)

Regimental No. D26689, Unit 1st Bn. G.G., C.A.S.F., 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 Mother Mrs. Mary Weshler, 5368 St. Urbain Street, Montreal, P.Q., all my property, real and personal, and all my personal effects.

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 Irving Hyman Weshler, 203 Prince Arthur St. East, Montreal, P.Q. (Name) (Address)

Cutter (Civil Occupaton), to be the Executor ~~Executrix~~ of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 13 day of September

19 40

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

Frank Weshler (Signature of soldier)

First witness sign here.

(5) Signature R. Alledamson

Civil Address 4858 Melrose Ave, Montreal, P.Q.

Civil Occupation Insurance clerk.

Second witness sign here.

Signature Bernard J. Chevrier

Civil Address 486, Jeanne Mance St. Montreal P.Q.

Civil Occupation Office Clerk.

(Witnesses are not to be beneficiaries.)

[OVER]

C.D. 1993

APPLICATION FOR WAR SERVICE GRATUITY BY DEPENDENTS OF DECEASED PERSONNEL - (Canadian Army)

1. I hereby make application for payment of War Service Gratuity to which I may be entitled in respect of the under-mentioned deceased member of the Canadian Army.

(a) Surname WESHLER

(b) Christian Names Frank

(c) Regimental No. D-26689

(d) Rank at time of decease Pte.

RECEIVED MAR 11 1946 PAY MASTER GENERAL'S BRANCH

2. Please indicate below whether application is made as a dependent or otherwise by striking out the sentence which does not apply.

(a) I am applying as a person who was dependent upon the above named soldier and to whom pay was assigned by him.

(b) There being no person dependent upon the above named I request that the War Service Gratuity form part of the soldier's estate and be distributed accordingly.

3. I hereby submit the following particulars in support of my application:-

(a) Surname WESHLER

(b) Christian Names MARY

(c) Relationship to deceased MOTHER

(d) Address in full 5119 St. Urbain St.

Yours truly,

Date March 9/46

Mary Weshler

(Signature of Applicant)

3/45A M[illegible] 510
40/P&S/254 (8550)

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

District .....

Dispersal Area .....

Regtl No. D26689 Rank and Name WESHLER, F. Pte.

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

(Transfer or Discharge) ..... to ..... on 20th July.45. 19 .....

Reason Death Authority : CCL.2042. /26 July.45

The following is a statement of the account of the above-named from 1st July. to 31 July.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	30	93
First Monthly Payment			Regimental Pay 31 days at $ 1.50	46	50
Casual Payments			Tradesmen's Pay .....days at .....$		
Payments on Transfer or Discharge			Additional Pay (Give Particulars) ....days at .....$		
Assigned Pay	23	00			
Regimental Charges			Allowances (give particulars) .....days at .....$		
Public Stoppages (give particulars) :					
			C.Eff SOCR 15457 (J.V.1830)	57	27
To Balance Cr — Free	111	70			
To Balance Cr — Deferred			By Balance Dr		
Total	134	70	Total	134	70

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

Remarks

A.P. $23.00 (M) Stopped eff Aug.45.

Compiled by B.M.Wadsworth.

Checked by L Broughton

Date 4th Dec.45. 19 .....

Certified correct [signature]
for Chief Treasury Officer, Overseas

MW

405-W-17626

CANADIAN MILITARY HEADQUARTERS

OVERSEAS CDN RECORDS OFFICE P.A.

GRAVES REGISTRATION FORM

Name WESHLER, Frank Place and Date of Birth Shotz, Rumania 22 Mar 1910

Rank Pte. Regtl No. D 26689

Unit 35 Cdn A Tps Comp Coy RCASC Next of Kin Mrs Mary Weshler (Mother)

Address 5119 St. Urbain Street,
Montreal, Quebec.

PARTICULARS OF HOSPITALISATION

Date of Admission ..... Name and Location of Hospital .....

Diagnosis .....

PARTICULARS OF DEATH

Date of Death 20 July 45 Place of Death BELGIUM

Hrs .....

Cause of Death Died (Cuase Unknown)

.....

.....

PARTICULARS OF BURIAL

Date of Burial Re-buried Cemetery Bergen Op Zoom Cdn Cem. Holland

Death Cert No. ..... Location of Cemetery .....

Date of Regn of Death Cert ..... Plot No. XII Row E Grave 12

Religion Hebrew.

Date 30 Jan 46.

for (M. BLUTEAU) Captain.

For Colonel, OIC Records,
CANADIAN MILITARY HEADQUARTERS.

Extracted from Burial Records,
OVERSEAS CDN RECORDS OFFICE,
ACTON, LONDON, W.3.

8/29 CF A319
40/P & S/2987 (6705)

INSTRUCTIONS

1. Presidents and Members of Courts of Inquiry or Boards of Officers will familiarize themselves with the Overseas R.Os. 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.

PROCEEDINGS of a COURT OF INQUIRY

assembled at IN THE FIELD

on the 23rd JULY,1945

by order of CAPT.T.OLDFORD A/OFFICER COMMANDING 35 CDN.A.TPS.COMP.COY. RCASC

for the purpose of Inquiring into the circumstances of accident to motorcycle Harley Davidson CC.4225382 resulting in the death of D.26689 Pte.Wesheler,F.,35 Cdn.A Tps.Comp.Coy.RCASC

The A/Officer Commanding directs that the evidence be taken on oath.

PRESIDENT

CAPT.F.A.MANNING
35 CDN.A TPS.COMP.COY.RCASC

MEMBERS

LIEUT.R.K.SULLIVAN
35 CDN.A TPS.COMP.COY.RCASC

RAR attd to Corps
Ref:18/Pers/2/k Folio 76...
20.1.47
For A.G.4.

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

M.F. B.303
(Overseas Revision)
40/P & S/267 (3075)

The interpreter Mr.Albert Deckx of 23 Gierledreef, Turnhout,Belgium, was duly sworn.

FIRST WITNESS

Mr.Bastaensen Julius,45[6] Ravels Straat, Oosthoven,Belgium, having been duly sworn states:-

" I am Bastaensen Julius of 45 Ravels Straat,Oosthoven,Belgium. On the 20th July,45, at approx.0315 hrs. whilst going on the road towards Ravels,Belgium, in direction of Tilburg, Holland, I saw a truck coming from Turnhout,Belgium, at the same time as I saw a bike coming from Tilburg. I was going in the direct on of Ravels and was on the cycle path and saw the bike coming from Ravels with its light half dimmed. The same time a truck was coming from Turnhout with full lights which the driver did not dim. When the truck had passed me 100 metres, I heard a short crash but could not see the collision because it was too dark. The truck did not dim his lights and kept the same speed about 40 m.p.h. and kept going inthe direction of Tilburg. When I had passed another 100 metres in the same direction, I saw on the other side of the road a bike lying there on its right side and the rider was lying on the rear wheel of the bike. I went to No.66 Ravels Straat in order to get help as there was a telephone there. There were two soldiers there who went with me to the place of the accident. One soldier asked to get a bicycle and went on it to the Military Police in Turnhout. That same soldier came back in the truck of the Military Police and 15 minutes after the arrival of the Military Police, an ambulance arrived on the scene of the accident and took the body away to the hospital."

Q.1. "Were you able to identify the vehicle which failed to stop after hitting the motorcycle ?"

A.1. "No, as it was too dark. All I can say it was a large truck of the Military."

Q.2. "What would you say was the speed of the bike on the road ?"

A.2. "About 40 m.p.h., the same as the truck."

The above statement, questions and answers were read back to the witness.

SECOND WITNESS

F.20332 Sgt.Harris, M.E.C., 1 Cdn. Ord.Demob. Depot,RCOC, Having been duly sworn states:-

" I am F.20332 Sgt.Harris, M.E.C.,1 Cdn.Ord.Demob.Depot,RCOC. On the 20th July,45, at approx.0330 hrs., I was called from bed by the civilians in home in which I was staying on leave, No.66 Ravels Straat, Oosthoven, Belgium, and informed that a soldier had been in an accident on the road outside the house. I immediately got dressed and went to see what could be done for the soldier,whom I recognized as a Canadian from his RCASC flashes and Canadian uniform. I first checked his pulse and ascertained that soldier was dead. As far as I could see he had broken left leg, and was bleeding on right side near the shoulder. When I went to soldier I had found him lying on the back wheel of the motorcycle holding to the frame of the motorcycle as if he had been dragged along with the motorcycle. The motorcycle was lying on its right side on the right side of the road about 1 foot from the tram tracks and found front left handle bar snapped, left guard bent back and left foot rest folded up. I rechecked pulse to make sure he was dead and did not interfere with the body as I left soldier in the same position until I could get the Military Police,so I borrowed a bicycle and went to Turnhout to get Military Police and also to get an ambulance , whislt Sgt.Curtin,J.F.remained at the scene of the accident to see nothing was moved and to do traffic control. From the damage to the motorcycle and marks on the road I am convinced that motorcycle was hit by passing vehicle trav-

SECOND WITNESS CONT'D

"elling from Turnhout,Belgium to Tilburg,Holland. When I arrived at Military Police I aroused them and got them to phone for an ambulance at 10 Cdn.General Hospital. I returned to the scene of the accident with Military Police in 15-cwt at approx.0445 hrs.. The Ambulance arrived at approx.0500 hrs. and body of Canadian was taken to hospital."

The above statement was read back to the witness.

THIRD WITNESS C.94317 Sgt.Curtin,J.F.,1 Cdn.Ord.Demob.Veh.Park,RCOC,having been duly sworn states:-

" I am C.94317 Sgt.Curtin,J.F.,1 Cdn.Ord.Demob.Veh.Park,RCOC. On the 20th July,45, at approx.0330 hrs.,I was called from bed by civilians in home in which I was staying on leave at No.66 Ravels Straat, Oosthoven,Belgium, and informed that a soldier had been in an accident on road outside the house. I accompanied Sgt.Harris,M.E.C.,to scene of accident and with him determined that the soldier was dead. When we came to the scene of the accident, the motorcycle was lying on its right side on the right side of the road about one foot out from tram tracks and the body was lying over the back wheel in line with the motorcycle as though he had grabbed onto rear of motorcycle and dragged in that position with the motorcycle. The front fender of the motorcycle was bent in almost against the tyre, left handle bar snapped completely,left rubber grip was found about 10 yards to rear of bike, left crash guard was bent to rear of bike and left foot rest was also crumpled. The switch was on for lights but no lights showing as result of the impact. The left leg of the soldier, whom I recognized as a Canadian from his flashes and uniform, was broken and twisted to face in the opposite direction from normal position; blood had come from right side near shoulder from the pool of blood on road which by time I arrived had congealed. When Sgt.Harris,M.E.C. went on bicycle to Turnhout for the Military Police and an ambulance, I remained at the scene of the accident to ensure that nobody interfered with the body and to do traffic control. From a civilian who was at the scene of the accident and apparently saw a truck, military 10 ton or 6 ton vehicle, proceeding towards Tilburg immediately after a loud crash, I would be convinced that the motorcycle was hit by a passing vehicle which apparently did not stop. Sgt.Harris, M.E.C. returned to thesscene of the accident at approx.0445 hrs. with the Military Police and an ambulance arrived at approx.0500 hrs. and I saw the body of the soldier placed on a stretcher by Military Police and loaded on the ambulance and taken to No.10 Cdn.General Hospital at Turnhout."

The above statement was read back to the witness.

FOURTH WITNESS K.694 Tpr.Code,N.W., British Columbia Regt.,4 Cdn.Arm'd Div., having been duly sworn states:-

" I am K.694 Tpr.Code,N.W., British Columbia Regt.,4 Cdn.Arm'd Div., Was on the 19th July,45, on guard picquet at the gate of 35 Cdn.A Tps.Comp.Coy.RCASC lines and my tour of duty was from 2200 hrs. to midnight. My duty was to register on a board all vehicles leaving Coy.lines as to vehicle number, time out and on return of vehicle mark time in."

Q.1. "During your tour of duty did you register M/C CC.4225382 as having gone out from Coy.lines ?"

A.1. "No.sir."

Q.2. "Between 2330 hrs and midnight did you see or hear a motorcycle pass your post at the gate leading out of 35 Coy.lines ?"

A.2. "No,sir. At about this time of night there was some traffic coming and going on the road outside of my post and in the noise it is possible that motorcycle could have passed my post. Also about this time a peep and civilian carrdid stop on road opposite my post so I went over to move them as they were in

"the way and blocking the traffic as I considered it part of my duty to do traffic control."

Q.3. "Did anyone come to your post and enquire as to a motorcycle leaving the lines unauthorized ?"

A.3. " No,sir."

Q.4. " Was there a pole across the road to act as a barrier so as to halt any vehicles and allow the guard to check out vehicle before raising the pole and allowing the vehicle to proceed ?"

A.4. "No,sir."

The above statement, questions and answers were read back to the witness

FIFTH WITNESS K.37593 Tpr.Baldrey,J.H., British Columbia Regt.,4 Cdn.Arm'd Div., having been duly sworn states:-

" I am K.37593 Tpr.Baldrey,H.J.,British Columbia Regt.,4 Cdn.Arm'd Div. On the 19th July,1945, I was on guard duty with Tpr.Code,N.W. at gate of 35 Cdn.A Tps.Comp.Coy.RCASC lines and my tour of duty was from 2200 hrs. to midnight. My duty was to do traffic control and assist in checking vehicles of 35 Coy. leaving lines or returning to lines. During my tour of duty, Tpr.Code was handling book."

Q.1. " Between 2330 hrs. and midnight did you see or hear a motorcycle pass your post at the gate leaving 35 Coy. lines ?"

A.1. " No,sir, not that I can remember."

Q.2. "At this time, 2330 hrs to midnight, was there any traffic or other noise which could have detracted your attention ?"

A.2. " About this time recreation vehicles of 35 Coy. had returned to lines and there were also a number of vehicles passing on the road and a number of soldiers talking loudly on returning to lines."

The above statement, questions and answers were read back to the witness.

SIXTH WITNESS B.130818 Sgt.Armstrong, C.S., 35 Cdn.A Tps.Comp.Coy. RCASC,having been duly sworn states:-

" I am B.130818 Sgt.Armstrong,C.S.,35 Cdn.A Tps.Comp.Coy.RCASC, and am employed as M.T.Sergeant at Coy.H.Q. On 19th July,45, I was Coy. Orderly Sgt. and had returned to Coy.H.Q.at approx.2330 hrs. from Apeldoorn with Recreational lorry, I came up to my tent in H.Q.lines and was sitting reading when I heard a motorcycle start and ran out to see who would be going out as I knew there were no D.R. runs from Coy. H.Q. at that time of night. I saw motorcycle proceeding down road towards out gate and recognized rider as D.26689 Pte.Wesheler,F. I shouted as loud as I could for him to stop but he paid no attention and speeded up the motorcycle. I checked motorcycles with L/Cpl.LeBlanc and found Pte.Wesheler was driving M/C C0.42253382. As far as I know the trip was unauthorized and I had no knowledge of where Pte. Wesheler was enroute."

The above statement was read back to the witness.

SEVENTH WITNESS Lieut. J.P.Nelligan, 35 Cdn. A Tps.Comp.Coy. RCASC, Having been duly sworn states:-

" I am Admin. Officer of 35 Cdn.A Tps.Comp.Coy.RCASC and responsible for the despatch of D.R.s. Pte. Wesheler,F. had no authority to proceed anywhere on his motorcycle after 1800 hrs. 19th July, 1945."

The above statement was read back to the witness.

EIGHTH WITNESS

2186215 Cpl. Dandy, A. 73 Coy.C.M.P.(T.C.), having been duly sworn states:-

" I am 2186215 Cpl. Dandy, A., 73 Coy. C.M.P.(T.C.), Tunrhout, Belgium. On the 20th July, 1945, at approx. 1400 hrs I was informed by Sgt, Curtin, 1 Cdn. Ord. Demob, Park, that a fatal accident had occurred on the 345 Route at Oosthoven, Belgium, M.R. Sheet 23 & 35/182092. On my arrival at the scene of the accident, I saw a W.D. Motorcycle Harley-Davidson No. CC.4225382, Lying on the side of the road on its right side and near the tram tracks. Lying on the ground with his left hand holding the forks, head and chest resting on the rear mud-guard was the rider who was dead. I had the body removed to No. 10 Cdn. General Hospital, Turnhout, and was present when a Sergeant Medical Orderly searched the body for the purpose of indentification. From indentity discs worn around the man's neck and A.B.412 including work ticket, the dead soldier was D.26689 Pte. Weshler, F., 35 Cdn A Tps Composite Coy. RCASC. He had no AB 64 or PartI or Part II on his possession. Later I was shown a photograph of Pte. Weshler and indentified the man as the one we had found dead on the road in motorcycle accident and had taken to No. 10 Gen. Hosp."

The above statement was read back to the witness.

REPORT OF THE COURT

The Court report that

(1) D.26689 Pte. Weshler, F. of 35 Cdn A Tps Comp Coy. RCASC met his death on the 20th July, 1945, at approx. 0315 hrs. at Oosthoven, near Turnhout, Belgium, as the result of being hit by a vehicle driven by person or persons unknown, said vehicle failing to stop after the accident.

(2) On the 21st July, 1945, the Court proceeded to No. 10 Cdn Gen. Hospital at Turnhout, Belgium to view the body of Pte. Weshler, F., but on arrival at the hospital found that Pte. Weshler, F., had been buried in civilian cemetry at Turnhout on the morning of the 21st July. The body of Pte. Weshler was dead on arrival at No. 10 Cdn. Gen. Hospital at approx. 0530 hrs on the 20th July, 1945.

(3) That at the time of the accident D.26689 Pte. Weshler, F. was not on duty and was on an unauthorized trip from Coy. Lines.

(4) The Court visited and viewed the gate leading out of Coy. lines and do not consider it possible that a vehicle can leave at almost midnight and not be heard by two guards at the gate, and report that it considers the two guards at the gate both equally lax in allowing the motorcycle to leave lines.

F.A. Manning

(F.A. Manning) Capt. RCASC
President
35 Cdn A Tps Comp. Coy. RCASC

(R.K. Sullivan) Lieut. RCASC
Member
35 Cdn A Tps. Comp. Coy. RCASC

OPINION OF THE OFFICER COMMANDING

I concur. In my opinion Pte. Weshler, F. was killed as a result of the negligence of an unknown driver whose vehicle approached him from the opposite direction with bright, undimmed lights and on the wrong side of the road. There is no evidence that Pte. Weshler was negligent or guilty of any serious misconduct which contributed to the accident. He was on an unauthorized journey but this was not a cause of the accident.

(T. Oldford) Capt. RCASC
35 Cdn A Tps Composite Coy.
A/OFFICER COMMANDING

OPINION OF CRASC

I concur in the opinion of the Officer Commanding.

(P. H. Savard) Lt Col.,
HQ RCASC First Cdn A Tps.

5

"FORM C.M.H.Q. 1000: 42A PASSED TO CLAIMS OFFICER

At HQ L of C Terminal On 22 July 45 "

C.M.H.Q. 1000:42
A.F.A.3676 (Cdn. Revision)
40/P&S/337 (2551)

ROAD ACCIDENT REPORT

PART I—DRIVER TO FILL IN IMMEDIATELY AT SCENE OF ACCIDENT

Do not admit liability. Give your name and unit to other party and refer him to Canadian Claims Commission, 2 Cockspur St., Trafalgar Square, London.

Date of Accident 20 July 45 Time approx 0330 hrs
Place of Accident OOSTHOVEN, BELGIUM. MR/082092 S/25 & 35
No., Rank and Name of Driver D-26689 Pte Weshler, F.
Unit 35 Cdn A Tps Composite Coy RCASC Formation RCASC First Cdn A Tps
Vehicle, W.D. number CC 4225382 Make Harley Davidson Type Solo
Exact nature of duty Unauthorized
Journey from Loenen, Holland to unknown
Work Ticket No. Q-24 Authorized by unauthorized
Loaded or unloaded self Speed of Cdn. Vehicle approx 40 mph
Condition of Road Surface good Speed of other vehicle approx 40 mph
Visibility, (Clear, Foggy, raining, etc.) dark Density of Traffic light
Warning given, if any, and how none
LIGHTS. Left front yes State whether full or dim dim
Right front N/A mrs N/A mrs
Rear yes dim
Was reflector displayed? N/A mrs
Was the accident reported to the Police? yes Where? CMP Tfc Post, Turnhout, Belgium.

WITNESSES	NAMES	ADDRESSES (Obtain signed statements and attach)
	F-20332 Sgt Harris, M.E.G.	1 Cdn Ord. Demob Depot RCOC
	C-94317 Sgt Curtin, J.F.	1 Cdn Ord. Demob Veh Park RCOC
	Monsieur Bastaensen, Julius.	45 Ravels Straat, Oosthoven, Belgium.

OTHER VEHICLE(S) PERSONS & PROPERTY INVOLVED: (BE CERTAIN TO OBTAIN NAMES OF DRIVER AND OWNER).

Registration No. Make Type
Name of Insurance Company
State whether collision coverage with or without excess
Name of Driver Address
Name of Owner Unknown
Nature of damage claimed, if any

Persons injured or complaining of injuries	Names	Addresses
	D-26689 Pte Weshler, F.	35 Cdn A Tps Composite Coy RCASC

Damage to other property none
Owner N/A mrs Address N/A mrs

DRIVER WILL ALSO COMPLETE STATEMENT AND DIAGRAM OVER PAGE

DRIVER'S STATEMENT

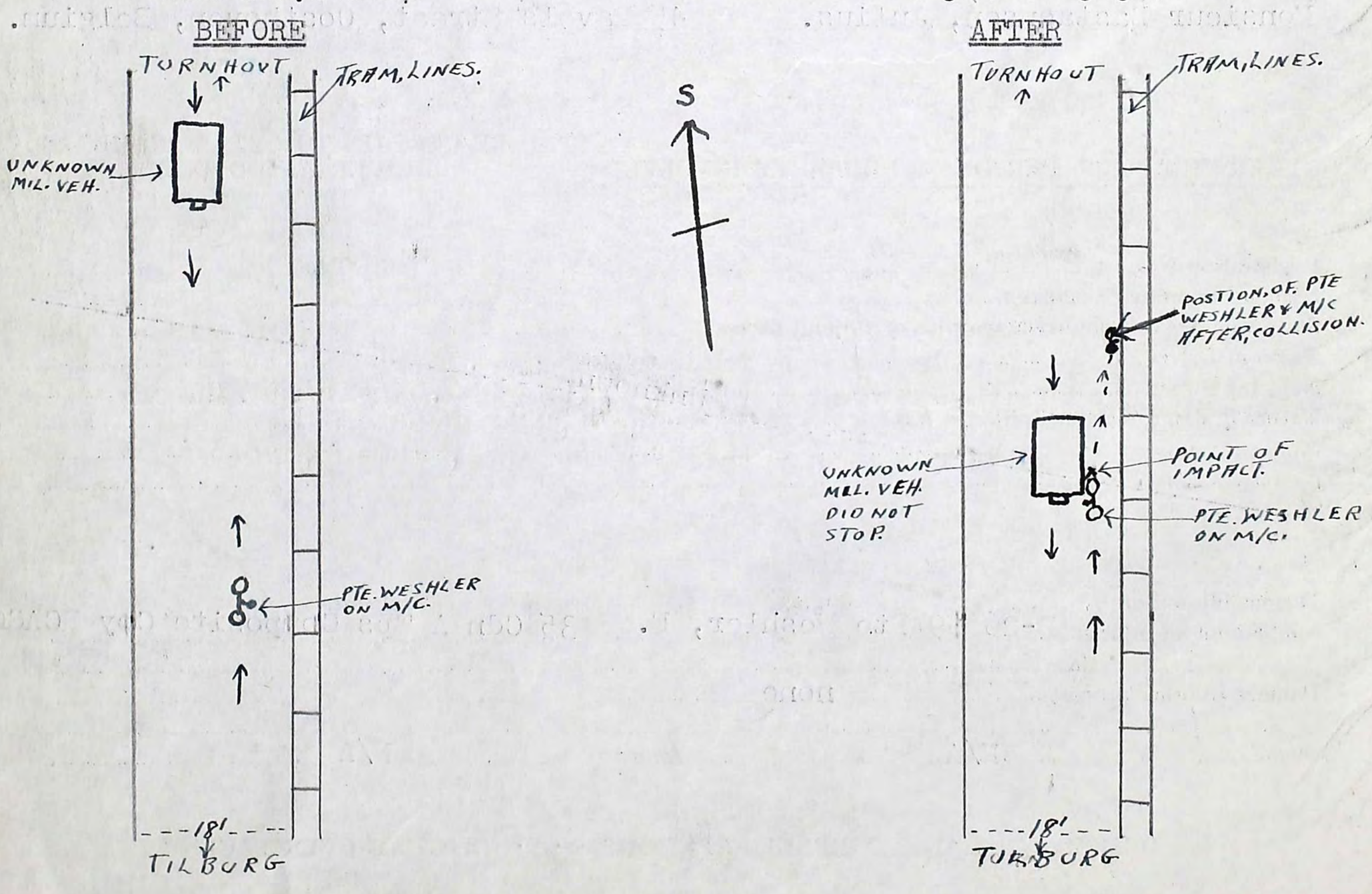
BE SURE ALL PREVIOUS QUESTIONS HAVE BEEN ANSWERED

State here fully what actually occurred

NOTE:
There is no statement from the driver as he was killed instantly as a result of the accident.

SPACE FOR DIAGRAM

Show—1. Position of vehicles before and after accident.
2. Direction of Travel.
3. Skidmarks.
4. Width of Roads.
5. Minor & Major Roads.
6. Location of traffic lights, warning signs, etc.



DAMAGE AND INJURY REPORT NOTES

PART II—DAMAGE TO CANADIAN ARMY VEHICLE

Vehicle No. CC 4225382 Make Harley Davidson Type Solo

Particulars of damage.

Fuel line missing, crash guards bent, front forks bent, front tire flat, front fender bent, front fender braces bent, handle bars broken, windshield broken, left foot rest bent, clutch foot control bent, hand brake cable broken, gear shift lever broken, back fender bent, rear stand bent, light wiring cut.

Estimated cost of repairs : Labour £3-18-0 Materials £6-0-0
(No. of hours) 26 @ 3s TOTAL £ 9 - 18 - 0

Any special remarks.

Date 23 July 45 (Signature) Leon W. Lew O i/c wksp
(Workshop, Unit or Det.) 35 Cdn A Tps Composite Coy

(i) The foregoing part must be *fully* completed and signed by an O.M.E., L.A.D., Wksp Officer or Officer as designated in Overseas R.O. 2391.
(ii) The signing Officer's appointment and unit *must* be shown in every case.
(iii) Labour costs will normally be based on the rate of three (3) shillings per hour.
(iv) In every case the total costs must be shown.

PART III—DAMAGE TO OTHER CANADIAN MILITARY VEHICLE

Vehicle No. Make Type

Particulars of Damage. (To be checked by competent officer immediately following accident.)

Estimated cost of repairs on the basis of ordinary commercial charges.

(Number of hours required to complete repairs).
Labour Materials TOTAL £

Any special remarks.

Date (Signature)
(Workshop, Unit or Det.)

PART IV—INJURY TO PERSONS.

(NOTE:-The reporting Medical Officer should state whether or not he has actually examined the injured person, or persons. If he has not, the source of his information should be given.)

Name D-26689 Pte Weshler, F. Age 35 Occupation soldier
Address 35 Cdn A Tps Composite Coy RCASC
If under age 21, Name of Parent
Address

Particulars of injury ; history of the case since the accident and present condition :

Complete fracture with avulsion of the upper cervical spine and spinal cord. Death would have been almost instataneous with the injury.

Period of actual or anticipated absence from work
Whether permanent disability is likely to result and, if so, to what extent

Any special remarks

Hospital, if any 10 Cdn Gen Hospital RCAMC
Date 20 July 45 Signature of M.O. A.J. Blanchard Major

Statement of Monsieur, Bastaensen, Julius. 45 Ravels Straat Oosthoven, Belgium.

The undersigned Bastaehsen, Julius dwelling Straat Ravels NO. 45 Oosthoven, Belgium. On the 20th July 1945, at 3:15 hrs whilst going on the road to Ravels, I saw a truck coming from Turnhout, at the same time a bike was coming from Tilburg. I was going in the direction of Ravels (towards Tilburg) and was on the cycle path and saw the bike coming from Ravels with his light half dimmed. The same time a truck was coming from Turnhout with full lights which the driver did not dim. When the truck had passed me 100 meters, I heard a short crash but could n not see the collision because it was too dark. The truck did not dim his lights and kept the same speed and kept going in the direction of Tilburg. When I had passed another 100 meters in the same direction I saw on the other side of the road a bike lying there on its right side and the rider was lying on the rear wheel of the bike. I went to 66 Ravels Straat in order to get help as there was a telephone there. There were two soldiers there who went with me to the place of the accident. One soldier asked to get a bicycle and went on it to Military Police in Turnhout. That same soldier came back in the truck of the Military Police and 15 minutes after the arrival of the Military Police an ambulance arrived on the scene of the accident and took the body away to hospital.

(Sgd) Bastaensen, Julius.

The above is statement of Bastaensen Julius as interpreted by: Albert Deck, 23 Gierledreef. Turnhout, Belgium.

Ta Manning Capt.
35 Can A Tps Comp Cy R CASC

Statement of F-20332 Sgt Harris, M.E.G. 1 Cdn Ord Demob Depot RCOC

On the 20th July 1945, at approx 0330 hrs I was called from bed by civilians in home in which I was staying on leave, namely NO. 66 Ravels Straat, Oosthoven, Belgium, and informed that a soldier had been in an accident on road outside the house. I immediately got dressed and went out to see what could be done for the soldier, whom I recognized as a Canadian from his RCASC flashes and Canadian uniform. I first checked his pulse and ascertained that soldier was dead. As far as I could see he had broken left leg, and was bleeding on right side near shoulder. When I went to soldier I had found him lying over the back wheel of motorcycle holding to the frame of motorcycle as if he had been dragged along with the motorcycle. The motorcycle was lying on its right side on the right side of the road about one foot from tram tracks and found left handle bar snapped, left guard bent back and left foot rest folded up. I rechecked pulse to make sure he was dead and did not interfere with the body as I left soldier in same position until I could get Military Police. I borrowed a bicycle and went to Turnhout to get Military Police and also to get an ambulance, whilst Sgt Curtin, J.F. remained at the scene of the accident to see nothing was moved and do traffic control. From the damage to motorcycle and marks on the road I am convinced that motorcycle was hit by passing vehicle travelling from Turnhout to Tilburg. When I arrived at Military Police I aroused them and got them to phone for an ambulance at 10 Cdn General Hospital. I returned to scene of accident with Military Police in 15-cwt at approx 0445 hrs. The ambulance arrived at approx 0500 hrs and the body of Canadian soldier was taken to hospital.

(Sgd)F-20332 Sgt Harris, M.E.G.

CERTIFIED TRUE COPY

?.....Capt

35 Cdn A. Tp Comp Coy RCASC

PART V—FOR COMPLETION BY COMMANDING OFFICER.

(i) RESPONSIBILITY: (Opinion must be clear cut and definite with reasons. "THE HIGHWAY CODE" will be found helpful. Fatal or other serious accidents must be reported immediately to the Formation Claims Officer).

Although the late Pte Weshler was on an unauthorised trip I recommend that he be absolved of all blame for the accident which was caused by the negligence of an unknown driver whose vehicle approached him from the opposite direction with bright, undimmed lights and on the wrong side of the road. There is no evidence that Pte Weshler was negligent.

(ii) Length of experience of driver in Canada..... In England.....

(iii) Disciplinary action taken and stoppages (if any) awarded or recommended.....

.....

.....

.....

(iv) Number of previous accidents recorded.....none.....

(v) Remarks (will Court of Inquiry be held, etc.?).....yes.....

.....

.....

.....

Date 29 July 45 (Signature) [signature] Capt RCASC

A/Offr Command and Unit 35 Cdn A Tps Composite Coy

PART VI—DECISION OR RECOMMENDATION OF BDE. COMD., CRA, OR OTHER APPROPRIATE AUTHORITY.

CRASC's Opinion

After reviewing the evidence of M. Julius Bastaensen, I am of the opinion that the failure of the oncoming vehicle to dim his lights was the cause of the accident and I concur in the opinion of the OC and I recommend that the amount of ~~£9-18-0~~ be borne by the public

.....

(R.H.Sayard) Lt Col

Date 2 AUG 45 COMD HQ RCASC First Cdn A Tps

PART VII—DECISION OR RECOMMENDATION OF CORPS OR DIV. COMD. OR OTHER APPROPRIATE AUTHORITY.

REPORT APPROVED. I direct that the amount of the damage to WD Vehicle No. CC 4225382, Harley Davidson, on charge to 35 Cdn A Tps Comp Coy RCASC, described in the within Road Accident Report, namely, the sum of £9-18-0, be borne by the public.

[signature]

(W N Bostock) Brig

COMD

In the Fd
HQ A Tps Area
First Cdn Army

A Tps Area First Cdn Army

.....

Date..... G.O.C.....

NO D.26689 Rank Private Name WESHLER, Frank

Unit R. C. A. S. C. Date of death 20th July, 1945.

Died at Belgium

Cause Died

Death occurred on strength of Forces H.Q. 405-W-17626

N/K Mrs. Mary Weshler, Relashionship Mother

Address 5119 St. Urbain Street, Montreal 18, Quebec.

Remains buried in Turnhout Civ. Cem. Gr. 20926 Cemetery

CHK

Grave location

OVER

BURIAL REPORT TO N.K. FEB 27 1946

RETURN TO BUR. OF STAT. OCT 3 1946

ROYAL MESSAGE DESP'D. AUG 25 1945

CAN. MESSAGE DESP'D. AUG 1 1945

Temp BR sent to NK & Map

REBURIAL

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

Grave 12, row E, plot 12.

CR Form Despd. FEB 3 1947

Photographs

Despatched

NOV 24 1947

10M-1-45 (M-4608)

M.F.M. 267
50M-4-44 (4185)
H.Q. 1772-39-1989

CANADIAN NATIONAL TELEGRAPHS

FL H.Q. 405-W-17-626

DAY LETTER ☐

NIGHT LETTER ☐

CASUALTY (REPORT DELIVERY)

OTTAWA 26 OCTOBER 1944

TO:- MRS MARY WESHLER
5119 ST URBAIN ST
MONTREAL 18 QUE

8658 MINISTER OF NATIONAL DEFENCE SINCERELY REGRETS TO INFORM YOU D26689 PRIVATE FRANK WESHLER HAS BEEN OFFICIALLY REPORTED WOUNDED IN ACTION TWENTYFIFTH JULY 1944 STOP REMAINING ON DUTY WITH UNIT

PREPAID

DIRECTOR OF RECORDS

4

M.F.M. 268
50M-2-45 (6587)
H.Q. 1772-39-1990

CANADIAN PACIFIC
TELEGRAPHS

FILE H.Q. 405-W-17626

CASUALTY (REPORT DELIVERY)

OTTAWA 26 JULY 1945

TO:- MRS. MARY WESHLER
5119 ST URBAIN ST
MONTREAL 18 P Q

84232

REGRET DEEPLY D 26689 PRIVATE FRANK WESHLER OFFICIALLY REPORTED TO HAVE DIED TWENTIETH JULY 1945 CAUSE OF DEATH NOT YET AVAILABLE STOP WHEN FURTHER INFORMATION BECOMES AVAILABLE IT WILL BE FORWARDED AS SOON AS RECEIVED STOP YOU SHOULD ALSO RECEIVE FURTHER DETAILS BY MAIL DIRECT FROM THE UNIT IN THE FIELD

PREPAID

DIRECTOR OF RECORDS

Ottawa, Canada,

28th July, 1945.

Dear Mrs. Weshler:

It was with deep regret that I learned of the death of your son, D26689 Private Frank Weshler, who died while in the Service of his Country in the Western European Theatre of War on the 20th day of July, 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.

Mrs. Mary Weshler,
5119 St. Urbain Street,
Montreal, 18, Quebec.

/HMA

mem + mother
30-7-45

H.Q.405-W-17626
D.R. 2 (C)

26th February, 1946.

Mrs. Mary Weshler,
5119 St. Urbain St.,
Montreal 18, Quebec

Dear Madam:

Information has just been received from overseas that the remains of your son, D.26689 Private Frank Weshler, have now been carefully exhumed from the original place of interment and reverently reburied in grave 12, row E, plot 12, of Bergen-op-Zoom Canadian Military Cemetery, 4 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 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,

R.

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

DGL/ET

H.Q. 405-W-17626
R. 4 (B)

Ottawa,

24th November, 1947.

Mrs. Mary Weshler,
5119 St. Urbain St.,
Montreal 18, Que.

Dear Mrs. Weshler:

I am forwarding herewith a photograph of the grave and marker over the burial place of your late son, D26689, Private Frank Weshler, the location of which is grave 12, row E, plot 12, Bergen-op-Zoom Canadian Military Cemetery, 4 miles North-East of Bergen-op-Zoom, Holland.

Any errors appearing in the inscription will be corrected when the permanent headstone is placed.

Yours faithfully,

A/Director,
War Service Records.

Encl.

JJ
MB

405-W-17,629

RECORDS OFFICE OVERSEAS.

CANADIAN MILITARY HEADQUARTERS.

P.A.

GRAVES REGISTRATION CARD.

NAME WHARTON, Clifford Henry. PLACE & DATE OF BIRTH 22 May 1909 Lancashire. ENGLAND:

RANK CSM REGIMENTAL NO M-7159

UNIT 34 Fd. Coy. RCE. NEXT OF KIN & ADDRESS WIFE.

Mrs, Leona WHARTON,

Gen Del. Pentiston, B.C. CANADA.

PARTICULARS OF HOSPITALISATION

DATE OF ADMISSION NAME & LOCATION OF HOSPITAL

DIAGNOSIS

PARTICULARS OF DEATH.

DATE OF DEATH 21 Oct. 44. PLACE OF DEATH BELGIUM

HRS

CAUSE OF DEATH DIED (Accidentally)

PARTICULARS OF BURIAL

DATE OF BURIAL D.N.K. CEMETERY Antwerp Belgium Schoonselhof

Civil Cem. SH 23-33 1/50,000

PLOT NO ROW U GRAVE 4

DEATH CERT.NO

RELIGION Church of England.

DATE 20 Oct 45

(M. BLUTEAU) Capt.
for COLONEL,
O i/c Records,
CANADIAN MILITARY HEADQUARTERS.

Extracted from Burial Records,
RECORDS OFFICE OVERSEAS,
ACTON, LONDON W.3.

EMP.

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: WESHLER, (Block letters)

Given names: Frank.

Do not write in this space

4. RESIDENCE

Street: St-Urbain St., No. 5119

Official name of civil municipality or township: Montreal 18,

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): Roumania.

11. DATE OF BIRTH: March (Month) 22nd (Day), 1910 (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.: Salesman - Chauffeur.

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		Deceased.
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: July (Month) 20th (Day), 1945 (Year).

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

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

24. CAUSE OF DEATH

I

Immediate cause

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

(a) 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

OVERSEAS CASUALTY CANADIAN ARMY

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

Manner of injury: Motorcycle which he was driving (How sustained)

Nature of injury: collided with a truck.

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

Signed....M.D.

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

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

[signature] C.S.

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

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

(Voir l'autre côté pour le français)

OCT 5 1946

Director of Records, Dept. of National Defence.