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ATTESTATION

H.Q. 1772-39-1545

NON-PERMANENT ACTIVE MILITIA OF CANADA

UNIT 179 D. F. R.CH- REGTL. No. 1062
1. Surname? (Block letters). DAMANT
2. Christian names? ROBERT CEC14
3. Present address? 721 Lacasse S1.
Phone No. HONE.
4. Date of Birth?* 9/19/20 5. British subject? $\times 5$
6. Occupation? SKIPPER 7. Religion? PROT.
8. Next of Kin E. DAMANT 9. Relationship? MOTHER
Address Same
10. Previous Naval, Military or Air Force Service
3 YEARS VICTORIA RIFLES
CACTING LANCE CORPORAL
CERTIFICATE OF MEDICAL EXAMINATION
Height 677 Weight 157 Chest max 3974 min 3674
Descriptive marks scar left rist - mole 2" to right of right nippe I have examined the above named man in accordance with instructions laid down in Instructions for
the R.C.A.M,C. and C.A.D.C. 1937 Appendix V and find him // / Category // -V
Date June 20/40 Signature Man magio December
DECLARATION TO BE MADE ON ATTESTATION
I, the undersigned
OATH TO BE TAKEN
I, do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.
M. W. Baker. 12 Wanded
Dated this Signature of Witness Dated this Signature of Man day of the 1970 at Monthe al
CERTIFICATE OF 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 by law. The above questions 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 and replied to, and the said recruit has made and signed the declaration and taken the oath. Signature of Magistrate, Justice of Peace, or Attesting Officer
M.F.B. 235d 20M—1-40 (3608) *To be shown day, month, year—Example:—25-8-39.

Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from	25/6/40	R.O.35 Elawadm	Officer Commanding
A. 0 A.	4/1/40	Ro. 4 V	Andreece
Medals and Decorations			
1. L'aminon			

NOTE.—These entries are to be made from time to time as they occur and certified by the Officer making the entry.

Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc

Statement of Services

M.F.B. 235d 20M—1-40 (3608) H.Q. 1772-39-1545

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from			
			Officer Commanding
			Unit
	•		
	La Land		

NOTE.—These entries are to be made from time to time as they occur and certified by the Officer making the entry.

Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc.

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

Unit...Victoria Riflas of Canada

Regimental Number.NPA.M....VR.C.....1816.

CANADIAN ACTIVE SERVICE FORCE ATTESTATION PAPER

2.	
	Christian Names Robert Cecil
3.	Present address 721 Lacasse St. Montreal
4.	Date of birth 39 Sep 20
100000	Place of birth Canada Quebec Montreal (Country) (Country or Province) (Town or Township) Religion (state denomination) Anglican
	Trade or Calling Shipper
	Married, Widower or Single Single
	Name of next of kin. Charles Damant
10.	Relationship
11.	Address of next of kin 721 Lacasse St. Montreal
12.	Have you served in any Naval, Military or Air Force?
13.	If previous war service, state arm, force and regimental particulars
	DECLARATION TO BE MADE BY MAN ON ATTESTATION
i.e.,	ticulars are true, and I hereby engage to serve in the Canadian Active Service Force so long as an emer war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization lemergency ceases to exist, and in any event for a period of not less than one year, provided His M
i.e., said sho	ticulars are true, and I hereby engage to serve in the Canadian Active Service Force so long as an emer war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization lemergency ceases to exist, and in any event for a period of not less than one year, provided His Muld so require my services. This soldier was attested on N. P. A. M. attestation form and consequently was not
i.e., said sho	ticulars are true, and I hereby engage to serve in the Canadian Active Service Force so long as an emer war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization lemergency ceases to exist, and in any event for a period of not less than one year, provided His Muld so require my services. This soldier was attested on N. P. A. M.
i.e., said sho	ticulars are true, and I hereby engage to serve in the Canadian Active Service Force so long as an emer war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization demorphisms are true, and in any event for a period of not less than one year, provided His Muld so require my services. This soldier was attested on N. P. A. M. attestation form and consequently was not deattested on M. F. M. 2. (Signature of recruit) OATH TO BE TAKEN BY MAN ON ATTESTATION I,
i.e., said sho	ticulars are true, and I hereby engage to serve in the Canadian Active Service Force so long as an emer war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization I emergency ceases to exist, and in any event for a period of not less than one year, provided His Muld so require my services. This soldier was attested on N. P. A. M. attestation form and consequently was not entested on M. F. M. 2. (Signature of recruit) OATH TO BE TAKEN BY MAN ON ATTESTATION I,
dec.	ticulars are true, and I hereby engage to serve in the Canadian Active Service Force so long as an emer war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization I emergency ceases to exist, and in any event for a period of not less than one year, provided His Muld so require my services. This soldier was attested on N. P. A. M. attestation form and consequently was not ceattested on M. F. M. 2. OATH TO BE TAKEN BY MAN ON ATTESTATION I,
dec.	ticulars are true, and I hereby engage to serve in the Canadian Active Service Force so long as an emer war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization I emergency ceases to exist, and in any event for a period of not less than one year, provided His Muld so require my services. This soldier was attested on N. P. A. M. attestation form and consequently was not settlested on M. F. M. 2. (Signature of recruit) OATH TO BE TAKEN BY MAN ON ATTESTATION I, do sincerely promise and swear (or soldare) that I will be faithful and bear true allegiance to His Majesty. (Signature of Recentificate 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 sections 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
dec.	ticulars are true, and I hereby engage to serve in the Canadian Active Service Force so long as an emer war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization in the emergency ceases to exist, and in any event for a period of not less than one year, provided His Muld so require my services. This soldier was attested on N. P. A. M. attestation form and consequently was not ceatfested on M. F. M. 2. OATH TO BE TAKEN BY MAN ON ATTESTATION I,

Record o	f Service of DAMANT (Surname)	Christian Nam	Cecil		Regir	nental Number.	NPAM :	VRC. 1816
	QUALIFICATIONS			EDUCAT	TIONAL QUALI	FICATIONS		
Military	NIL	High Sch	ool	NIL		Graduation)		
Business or Profes	sional /\!L	Collegia	te	(years completed)		or Matriculation	(sp	ecify)
Trade or Civil	NIL	*College		1414				
Technical	NIL	*Universi	ty	NIL	,			
Languages	English	*(Name of ins	Public titution, courses or ye	School ars completed, and d	7. years	e shown)		
All enlisted person	nel will be taken on as Private soldiers, appointments and promotions to							
Report Date From whom	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Rank Shown	Effective Date	Unit	Place	Part II D.O. No. (Authority Cas. List. etc.	Dated
29 Aug Trom whom	Joined on appointment 7.0.5.	Rh.	26 Bag	v.Re	Leek	Ro		27 Rug
4 Row.	S. O.	11	3 200.		mel.	Ro	70	4 hu
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		•••••••••••						• • • • • • • • • • • • • • • • • • • •

Are you reseiving or have you in the past received, disability pension or compensation. If so.

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

0

compensation. If

CERTIFICATE	OF	MEDICAL	EXAMINA	TION
		11222		

	2. Have	vou ever suffered	from any of	the following diseases?	
Rheumat	tism			al trouble	No
	losis			disease	NT-
	is or asthma			disease	NT.
	sease			epsy	
	or bladder disease			vous or mental disease	and the second s
	ntestinal			hilis	
			p. Gon	orrhoea	Yes
	veins			e you ever worn gasses?	
Flat or d	leformed feet			Coleman (Signature of Recruit)	
				(Signature of Recruit)	
aminer's i	remarks re above				
••••••					
Part	2. Information obtai	ned by medical	examinatio	n. The recruit must be st	ripped.
	ation marks or scars. (
One v	accination mark le	ft arm. A lo	ng scar on	left arm near wrist.	One mole r
side	thorax and one other	er left abdom	en.		
Height	feet	5½inches.	3. Weig	ht 155	ounds.
Complex	kion Fair Ey	ves Blue	5. Deve	lopmentGood	Good
	H				Poor
. Chest m			74 Q	2	
	easurement—Girth on fu				
	Range of e	expansion		inches.	. Morma 1
Vision, 1	Range of e	xpansion	3 8. He	inches. aring, right. Normal lef	
Vision, r	Range of earlight	xpansion	3 8. He	inches. aring, right. Normal left ecessary.	
Vision, r	Range of earlight	xpansion	3 8. He	inches. aring, right. Normal lef	
Vision, r. Condition	Range of earlight	xpansion	3 8. He	inches. aring, right. Normal left ecessary.	
Vision, r. Condition	Range of earlight	xpansion	3 8. He	inches. aring, right. Normal left ecessary.	
Vision, r. Condition	Range of earlight	xpansion	3 8. He	inches. aring, right. Normal left ecessary.	
Vision, r. Condition The abn Gla Part 3.	Range of earlight20-20leftleft	20-120 Eight ext ad pathological) for Lt. 20-20 and no evidence of	8. He ractions no ound on examination of the diseases	aring, right. Normal left ecessary. nination are as follows	art 1, except a
Vision, recondition. Condition. The abnormal Glasses of the difference of the diff	Range of earlight 20-20 left. on of mouth and teeth formalities (congenital arguments) see Rt. 20-20 We, the examiners find the remarks. We have earlier the remarks.	Eight ext ad pathological) for the 20-20 It. 20-20 And no evidence of examined the Rec	8. He ractions no ound on examination according to the diseases truit in according to the disease truit in according truit in according truit in accor	aring, right Normal left ecessary. nination are as follows	None art 1, except a
Vision, recondition. Condition. The abnormal Glasses of the difference of the diff	Range of earlight 20-20 left. on of mouth and teeth formalities (congenital arguments) see Rt. 20-20 We, the examiners find the remarks. We have earlier the remarks.	Eight ext ad pathological) for the 20-20 It. 20-20 And no evidence of examined the Rec	8. He ractions no ound on examination according to the diseases truit in according to the disease truit in according truit in according truit in accor	aring, right. Normal left ecessary. nination are as follows	None art 1, except a
Vision, recondition. Condition. The abnual and art 3. Corted in the district of the district o	Range of earlight	Eight ext ad pathological) for Lt. 20-20 Id no evidence of examined the Recommendation of recrusive and the recrusive a	8. He ractions no ound on examination according to the diseases truit in accordance its" and he is	aring, right Normal left ecessary. nination are as follows	None art 1, except a ysical standard "AV"
Vision, recondition. Condition. The abnual and art 3. corted in the district of the district o	Range of earlight	Eight ext ad pathological) for Lt. 20-20 Id no evidence of examined the Recommendation of recrusive and the recrusive a	8. He ractions no ound on examination accordance in accord	aring, right. Normal left ecessary. nination are as follows	None art 1, except a ysical standard "AV"
Vision, recondition of the abnual section of the condition of the conditio	Range of earlight	Eight ext ad pathological) for the Recurrence of	8. He ractions no ound on examination accordance in accord	aring, right. Normal left ecessary. nination are as follows	None art 1, except a ysical standard "AV"
Vision, recondition of the abnual section of the condition of the conditio	Range of earlight	Eight ext ad pathological) for the Recurrence of	8. He ractions no ound on examination accordance in accord	aring, right. Normal left ecessary. nination are as follows	None art 1, except a ysical standard "AV"
Vision, recondition of the abnual section of the condition of the conditio	Range of earlight20-20 left	Eight ext ad pathological) for the Recommendation of recruir than A	8. He ractions no ound on examination according and he is meaning the manner of the diseases ruit in according and he is meaning to the meaning meaning to	aring, right Normal left ecessary. nination are as follows	None art 1, except a ysical standard "AV"
Part 3. corted in decial remains	Range of earlight	Eight ext ad pathological) for the Recommendation of recruir than A. NOCULATIONS, BOAR	8. He ractions n ound on exam f the diseases ruit in accordance nits" and he is RDS, RECLASSIF	aring, right. Normal left. left. lecessary. Initiation are as follows	Aver Member
Vision, recondition of the abnual section of the condition of the conditio	Range of earlight20-20 left	Eight ext ad pathological) for the Recommendation of recruir than A. NOCULATIONS, BOAR	8. He ractions no ound on examination according and he is meaning the manner of the diseases ruit in according and he is meaning to the meaning meaning to	aring, right Normal left ecessary. nination are as follows	Aver Member
Vision, r. Condition The abn Gla	Range of earlight	Eight extend pathological) for Lt. 20-20 Id no evidence of examined the Recommendation of recruir than A. NOCULATIONS, BOAR Signature	8. He ractions p ound on exam f the diseases ruit in accordance nits" and he is Memb RDS, RECLASSIF	inches. aring, right Normal left secessary. mination are as follows	None art 1, except a ysical standard "AV"
Part 3. Condition The abn Gla Orted in d Instruct ecial remains	Range of earlight	Eight ext ad pathological) for Lt. 20-20 In the Recommendation of recruir than A NOCULATIONS, BOAR Signature	8. He ractions n ound on exam f the diseases ruit in accordance nits" and he is Members, RECLASSIF	aring, right Normal left secessary. Initiation are as follows	Art 1, except a ysical standard
Part 3. Condition The abn Gla Orted in decial remains	Range of earlight 20-20 left on of mouth and teeth cormalities (congenital and sees. Rt. 20-20 We, the examiners find the remarks. We have earlies when category lower vaccinations, in the Brief details and sees Brief details and sees	Eight ext ad pathological) for the samined the Recommendation of recruir than A. NOCULATIONS, BOAR Signature	8. He ractions n ound on exam f the diseases ruit in accord nits" and he is Date	aring, right Normal left secessary. Initiation are as follows	None art 1, except a ysical standard "AV"
Part 3. Condition The abn Gla Orted in decial remains	Range of earlight. 20-20 left. on of mouth and teeth	Eight ext Id pathological) for the samined the Recommendation of recruir than A. NOCULATIONS, BOAR Signature	8. He ractions n ound on exam ruit in accordance and he is Member and he is Date	aring, right Normal left scessary. nination are as follows	None art 1, except a ysical standard "AV"
Part 3. Condition The abn Gla Onted in decial remains Date	Range of earlight. 20-20 left. on of mouth and teeth	Eight ext Id pathological) for Lt. 20-20 Ind no evidence of examined the Recommendation of recruit than A. NOCULATIONS, BOAR signature	8. He ractions n ound on exam ruit in accordance and he is Member Date	aring, right Normal left ecessary. nination are as follows	None art 1, except a ysical standard "AV" Member re

Regtl. No. 1816

Rank RM

Surname JAMAN

Christian Name Robert Cecre

		DATES OF					Pamarka on nature of the diseases have induced it wild as the little of				
STATION	Date of Arrival	in	Admissio to Hospi	n tal	fre	Discharge om Hospi	e tal	DISEASE	Number of days in Hospital Remarks on nature of the disease; how induced; if mild or severe; if completely whether any particular treatment was adopted. In venereal cases state nature of primary whether mercury has been given. If an accident, state whether it occurred on duty and of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances.		Signature of Medical Officer
	Station	Day	Month	Year	Day	Month	Year		of inquiry was field. Date of issue and particulars of artificial teeth or surgical appliances supplies	of inquiry was field. Date of issue and particulars of artificial teeth or surgical appliances supplied.	Officer
											36
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AWARDS-CANADIAN ARMY (ACTIVE)



				FILE No.
AMANT, Robert Ceci:		1816 NPAM	Rfn	405-D-474
URNAME (IN BLOCK LETTERS) CH	RISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
AR SERVICE ADGE CLASS) No.	DATE DES	PATCHED:		
ADDRESS:				
CAMPAIGN MEDALS		REGISTRATION NUM	BER AND DATE DE	ESPATCHED
WAR MEDAL 1939-45				

KARDEX SYSTEMS DIV. CAT. NO. K. 15332*

ORIGINAL DUPLICATE TRIPLICATE

M.F.M. 2 A.F.B. 271 750M—5-42 (4398) H.Q. 1772-39-1645

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

Unit 3rd Can. Motorcycle Regt. CASF Regimental Number D-3385

ACTIVE FORMATIONS AND UNITS OF THE CANADIAN ARMY

ATTESTATION PAPER

1. Surname	DAMANT	
2. Christian Names	Robert	
3. Present address	721 Lacasse St., Montreal,	Que.
4. Date of birth	Sept. 19, 1920	· · · · · · · · · · · · · · · · · · ·
5. Place of birth Canada (Country)	Quebec (County or Province)	Montreal (Town or Township)
	(Of What Country are You Now a Citizen)	
7. Religion (state denomination)	Protestant, Baptist	
8. Trade or Calling	Shipper	
9. Married, Widower or Single	Single	
10. Name of next of kin	Mrs. Elizabeth DAMANT	
11. Relationship	Mother	
12. Address of next of kin	721 Lacasse St., Montreal,	Que.
13. Do you belong to, or have you	u served in a Reserve Formation or Unit of	The Canadian Army?
Yes,3. years. Victor:	La Rifles	Y.R.C. Hussars
	tive Formation or Unit of The Canadian Ar	
(Tf 37 Ol		Any other Naval, Military, or Air
Force?	Regimental No. and Unit) 10 (Yes or No) (If Yes, specify Unit and Period of Service)	
15. Did you serve during the Great	at War 1914-1918?	
	NO (If Yes, specify Regimental No., Unit and Dates of Service)	
	TION TO BE MADE BY MAN ON ATT	
above particulars are true, and I Army so long as an emergency, i. period of demobilization after sai one year, provided His Majesty sh	hereby engage to serve in any Active Fore., war, invasion, riot or insurrection, real of demergency ceases to exist, and in any expould so require my services.	mation or Unit of The Canadian or apprehended, exists, and for the vent for a period of not less than
Date July 26, 1940	(Sgd) R. Damant (Signat	ure of recruit)
OATH	TO BE TAKEN BY MAN ON ATTEST	ATION
I, Robert DAMANT declare) that I will be faithful and	l bear true allegiance to His Majesty.	ly promise and swear (or solemnly
Witness (Sgd.) J. C. Milla: (Name)	r, Lieut. (Sgd) R. Damar (Signa (Signa	ture of Recruit)
CERTIFICATE OF MAGI	STRATE, JUSTICE OF THE PEACE O	R ATTESTING OFFICER
questions he would be liable to be The above questions and answ I have taken care that he up	as cautioned by me that if he made any for punished as provided by law. wers were then read to the recruit in my prederstands each question, and that his answed recruit has made and signed the declaration.	sence.
	thisday of	
	Newroth, Major	
(Sgd.)M.L.	Newroth, Major	or Attesting Officer. Officer or Rank and Unit
3rd Can. Mo	torcycle Regt. C.A.S.F.	or appointment.
N.B.—ATTENTION IS DRAWN TO	THE FACT THAT ANY PERSON MAKING A	FALSE ANSWER TO ANY OF THE

Military	None	High School)	Graduation)or	no
Business or Professional		Collegiate (years completed)	Matriculation	(specify)
Trade or Civil	Shipper	*Collegeno		
Technical	None	*Universityno		
Languages	English	*(Name of institution, courses or years completed, and degrees ob	tained 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.

Pecord of Promotions Reductions Transfers Casualties, Reports, etc., from date taken	Rank Shown	Fiffe	Effective Date		Unit	Place	Authority		
Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Italia Ollowii		cuve Da				Part II D.O. No. Cas. List, etc.	Dated	
Joined on appointment T.O.S.	Tpr.	26.	Jul	40	3rd CMCR	Montreal	14	27 Jul 40	
Awarded 7 days C.B. and a summary forf. of 2 days pay for									
A.W.L. from 2030 hrs. to 2300 hrs. 11 Nov 40	ff	12 1	Nov		11	11	105	13 Nov 40	
Proceeded to Military District No.6 as Main Party	11	26	Feb	41	17th DYR (7th Rec	CH ce."	46	25 Feb 41	
Granted furlough from 5 May 41 to 18 May 41 incl.	11	51	May	41	regu.)	Debert M	il. 99	1 May 41	
S.O.S. on transfer to #4 D.D. w.e.f. 12 Jun 41	11	12	Jun	41	11	* 11	134	12 Jun 41	
T.O.S. on temporary attachment on posting from his Unit,									
Debert Mil. Camp, and is posted to "D Wing" pending disposal	11	13	Jun	41	#4 D.D.	Montreal	140	14 Jun 41	
Proceeded on command to HQ MD 4 & is posted to "C Wing"									
w.e.f. 0900 hrs.	11	18	Jun	41	f 1	11	143	18 Jun 41	
Trans. at his own request to R.C.C.S. and is mustered Sgmn.	Sgmn.	28	Jul	41	11	11	178	28 Jul 41	
	Tpr.		Jul	4.1	11	11	178	28 Jul 41	

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

CERTIFICATE	OF MEDICAL	EXAMINATION

1. Ag a. Rh b. Tu c. Br d. He e. Ki f. Sto g. Ru h. Va i. Fo	e19	aliseaserouble	the recruit. ered from any or no k no no m no no m no no no	of the foi Ear dis Eye dis Fits		no no no
1. Ag a. Rh b. Tu c. Br d. He e. Ki f. Ste g. Ru h. Va i. Fo	e19	2. Have you ever suffernisya	ered from any of no k no no m no n	Ear dis	seaseseaseus or mental disease	no no no
a. Rh b. Tu c. Br d. He e. Ki f. Ste g. Ru h. Va i. Fo	berculosis or pleu onchitis or asthmaticate diseasedheard or bladder donach or bowel to pture	risyaliseaserouble	no k no l no m no m no n	Ear dis	seaseseaseus or mental disease	no no no
b. Tu c. Br d. He e. Ki f. Sto g. Ru h. Va i. Fo	berculosis or pleu onchitis or asthmatic art diseasedhey or bladder domach or bowel to omach or bowel to opture	liseaserouble	no in mono no	. Fits	us or mental disease	no no
c. Brod. He e. King. Rush. Val. Fo	eart diseasedney or bladder domach or bowel to	aliseaserouble	no m no n no o	. Fits	us or mental disease	no no
d. He e. Ki f. Sto g. Ru h. Va i. Fo	dney or bladder domach or bowel to pture	liseaserouble	no n	. Nervoi	us or mental disease	no
e. King. Storage. Rush. Va	dney or bladder domach or bowel to pture	liseaserouble	noo			
f. Sto g. Ru h. Va i. Fo	omach or bowel to pture ricose veins	rouble		J. 1.		no
g. Ru h. Va i. Fo	pture ricose veins		. P	. Gonori	rhoea	
h. Va	ricose veins				you ever worn glasses?	
i. Fo						
	ot trouble		no	rece	ou now or have you in the past eived disability pension or apensation? If so, give details	
J. 1Na			no	con	ipensation? If so, give details	<u> </u>
	asai trouble					
	I hereby d	leclare that I have no	t suffered from	any dise	eases whatsoever except as sta	ited above.
					R. Damant	
			•••		Signature of Applicant	
D	art 2 Informa	tion obtained by m	edical examir	ation.	THE RECRUIT MUST BE	STRIPPED.
					reduction radius	
2. H	eight2	teet	incnes.	o. weigr	1 L	Good:
4. Co	omplexionFall	,		5. Devel	lopment	Poor
		HairB1				
6. C	hest measurement	Girth on full expan	sion3.7	inches.	Range of expansion23	inches.
7. V	ision,	right. 20/20 le				
	ith Glasses—	rightle	ft	8. I	Hearing, right.W V 2.0lef	t2.0
10. B	lood Pressure:—S	3 D	(Required if re	cruit is o	ver 35 years of age, or if other	wise indicated)
12. T	he abnormalities	(congenital and patho	logical) found	on exami	nation are as follows:—	
13. C	hest X-Ray	No	Laborator	y at whi	ch taken	
TO TO	art 3 We the	examiners, find no ex	vidence of the	diseases	mentioned in question 2, Pa	rt 1, except as
report	ed in the remarks	We have examined	d the Recruit in	accorda	ance with the pamphlet Phys	sical Standards
					found fit for Category	
Specia	al remarks when o				(Sgd)	
) L.C.	A SECULAR PROPERTY OF THE PROP	jor rank (Sgd)	Kaufmann.	Cap	trankR. Ferguson.	Ltrank
	President		Member			*
Date.		CINATIONS, INOCULATION	IS, BOARDS, RECL	ASSIFICAT	TION OF MEDICAL CATEGORY	
Date.	VAC					ture
		Brief details and signature		Date	Brief details and signat	
	ate A 1 Ca+	Brief details and signature		Date	CERTIFIED TRUE COP	Y OF MFM2
	ct 41 Cat.	11 A 11			CERTIFIED TRUE COP	Y OF MFM2
17.0	ct 41 Cat.				CERTIFIED TRUE COP	Y OF MFM2
17.0	ate ct 41 Cat.	11 A 11			CERTIFIED TRUE COP	Y OF MFM2
170	ate ct 41 Cat.	"A"			Officer having cus	Y OF MFM2
17.0	ct 41 Cat.	11 A 11			Officer having cus regimental documen the Director, War Records, DVA, Otta	tody of ts kept by Service wa, 4 Jun

NOTE: Any corrections to entries made must be initialled by the Officer making them. Such Officer will indicate his rank and corps. Corrections are not to be written over the original entry.

	Date of Arrival at the Station		- 1 .	DATE	es of					Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from;
STATION		in	Admission into Hospita		fro	Discharge m Hospit	al	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.
		Day	Month	Year	Day	Month	Year			or inquiry was need or leader and particular or an analysis of the second of the secon
					•••••					
,				•••••						
				1						
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							50			
					- 4					
	•••									

Regimental No. D-3385

Rank Sgmn.

Sheet No. 2

M.F.M. 1 & 2 (a) 50M-3-44 (4002) H.Q. 1772-39-1646

Name DAMANT, Robert

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc.—	Rank Shown	Effective Date	Unit	Place	D.O. Number	hority
Proceeded on command to his Unit, Bleury St., Montreal	Sgmn.	29 Jul 41	#4 D.D.	Montreal		28 Jul 41
Ceased to be on command to his Unit, Bleury St., Montreal	11	31 Jul 41	11	11	181	31 Jul 41
Proceeded on command and attached for all purposes to C.S.T.C., Barriefi	eld"	31 Jul 41	11	11	181	31 Jul 41
Attached to C.S.T.C., Kingston, Ont., for all purposes from #4 D.D.	11	l Aug 4]	C.S.T.C.	Kingston	180	1 Aug 41
Ceased to be attached to C.S.T.C., Kingston, Ont., on being attached						
to 4th/Div. Sigs. A.F., Barriefield, Ont.	11	4 Aug 4]		11	182	4 Aug 41
Attached from #4 D.D., Montreal, Que., f.a.p. incl. pay	11	5 Aug 4]	4th Div. Sigs.RCS	Barriefiel	27	5 Aug 41
Departed Barriefield at 0800 hrs. 20 Aug 41	17	20 Aug 4]	17	11	36	21 Aug 41
Ceased to be attached to 4th Div. Sigs. and is T.O.S.	11	25 Aug 43	11	Debert	3.7	26 Aug 41
Arrived at Debert Mil. Camp, N.S., at 1800 hrs. 25 Aug 41	11	25 Aug 4]	***	17	3.9	31 Aug 41
Granted embarkation leave from 17 Oct 41 to 21 Oct 41	17	17 Oct 41	11	11	68	20 Oct 41
Having been examined is re-classified cat."A"	11	17 Oct 41	11	11	68	20 Oct 41

Sheet No.....3......

M.F.M. 1 & 2 (a) 50M-3-44 (4002) H.Q. 1772-39-1646

Name DAMANT, Robert

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc.—	Rank Shown	Effective Date	Unit	Place	Aut	hority
			4th Div. Sigs. RCS	Doboat	D.O. Number	Dated
S.O.S. on posting to #3 D.D., Ottawa, Ont., for Serial 1300	Sgmn.	20 000 41	Digs. RUD	Debert		20 Oct 41
T.O.S. of #3 D.D. on transfer from 4th Div. Sigs. RCS	11	21 Oct 41	#3 D.D.	Ottawa	295	22 Oct 41
S.O.S. of #3 D.D. and transferred to Serial 1300	11	23 Oct 41		11	296	23 Oct 41
T.O.S. HQ Force "C" from #3 D.D.	11	24 Oct. 41	HQ FORCE "	C"	1	31 Oct 41
Embarked from Vancouver, B.C., 2100 hrs.	11	27 Oct 41	***		3	4 Nov 41
THE ADICTED CLASSED A CLASS TROUB NO. O.C.E. HOU PODOD		27 Oct 41				
EMBARKED CANADA-SAILING LIST NO 965 "C" FORCE		27 000 41				
Attached to Winnipeg Grenadiers for rations & accommodation	11	16 Nov 41			6	24 Nov 41
						7 7 ~ 4 5
Awarded C.V.S.M. & Clasp	***	25 Dec 41		Ottawa	A.O. 11	11 Sep 45
Awarded 1939-45 Star	11	8 Dec 41	***	f 9	A.O. 11	11 Sep 45
19 Dec 41 Amended by	(Between,	T) A C 4.1		A.0.31	25 Jan 46
S.O.S. killed in action between-8-and-25-Dec-41	11	25-Dec-43	DOO , -1	11	A.O. 8	8 Sep 45
						,

7-1-43 (0.C.L242)	AWARDS—CANA	ADIAN ARMY	(ACTIVE)	1431 M 100M-10-41 (2195) H.Q. 1772-45-8
DAMANT, Robert		D.3385	Sgmn.	FILE NO. 405-D-474 Headquarters
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO	RANK ON DISCHARGE	C.A.S.F. UNIT
WAR SERVICE BADGE (CLASS) NO.	DATE	DESPATCHED:		

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star Pacific Star	6083. 14/3/5-0
War Medal C.V.S.M. & Clasp	
	THE REVERSE TO BE USED FOR ESTATE PURPOSES)

PERSON ENTITLED TO Mrs. Elizabeth DAMANT (MOTHER)	MEMORIAL BAR
ADDRESS: MONTREAL, Que.	DATE DESP
(2) MEMORIAL CROSS WIDOW	REGN. NO
ADDRESS:	DECD FED 9 - 10420 15
MOTHER Mrs. Elizabeth Damant,	DESP. FEB 2 1948() 7. REGN No.
ADDRESS: 721 Lacasse St., Montreal, P.Q.	

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

INSTRUCTIONS.

- (a) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the Canadian Army (AF) or R.C.A.F. ON ACTIVE SERVICE.
- (b) All questions, etc., must be completed.
- (c) Both copies of the form are to be forwarded by the Officer Commanding the unit for each officer and other rank, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District, Command, or Camp Paymaster, to the Officer i/c Records, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster of the unit, when transferred to another unit the copy retained by the Paymaster will be sent to the Paymaster of the individual's new unit.

(1)	Name of Officer or Other Rank DAMANT, Robert. (Surname first—Christian names in full—Block capitals)
(2)	Regimental or Official Number and Rank D 3385 Trooper.
(3)	Unit 3rd. Can. Motorcycle Regt. C.A.S.F.
(4)	Are you married?
	If married, state,
	(a) Full name of your wife
	(b) Present postal address of wife
	If married, have you been regularly supporting your wife? If not—state reasons
(0)	If married, have you been regularly supporting your where it not—state reasons
(7)	Are you a widower?
(8)	Have you any children?
	Names and ages
(9)	If Dependents' Allowance is claimed in respect of children-state whether you have been
	regularly supporting them
	Give particulars of Guardians to whom Dependents' Allowance should be paid—if authorized.
	Name
	Postal Address
	[SEE OTHER SIDE]

(10)	Have you a common-law wife—whom you have been regularly supporting and publicly repre-
	senting as your wife for at least 2 years immediately prior to appointment or enlistment?
	If so, state her full name and Postal Address
	•••••••••••••••••••••••••••••••••••••••
	T Voc
11)	Is your father alive? Yes.
	If so, state name and address, occupation Charles Edward Damant.
	721 Lacasse St., Montreal, Que., No occupation
(12)	If your father is a widower and is totally incapacitated from earning a living—are you his sole
	or partial support?
(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
	Also state reason he has no other means of support if partially supported by you, what is you
	reason for not providing full support?
(14)	Is your mother alive? Yes.
	If so, state name and address Elizabeth Damant.
	721 Lacasse St., Montreal, Que.
(15)	If your mother is a widow, are you her sole or partial support?
	If sole or partial support of widowed mother—state what amount per month you have given her
	prior to appointment or enlistment.
	Also state reason why she has no other means of support, if partially supported by you wha
	is your reason for not providing full support?
(17)	Are you contributing to the support of any dependents, other than those shown above?
	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
	Full Name
	Postal Address
	Amount contributed monthly during the past six months
	Are you insured? Yes
	If so, in what Company? Metropolitan Life (Give number of policy)
	Have you made arrangements for payment of your Insurance Premium? Yes. If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.
	I hereby certify that the information given by me on this form is correct in each and every particular.
	R. Damant
	Date July 26, 1940 (Signature of officer or man)
	1/auC

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 FACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COM-MITTEE 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

	Section A—GENERAL INFORMATION	PLEASE
	. (a) Print name in full	BLANK
2	(a) Arm of service	
	. (a) Date of birthany dependents?	All I
_	Section B—EDUCATION AND TRAINING	
5	(a) State age on (b) Were you attending school finally leaving school or college up to the time of enlistment?	7
6	Clate delinitery inchest stationed reached at infinite technical by night control	
7	(for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.)	
	university and standing or degree secured	
	apprenticeship?	
9.	(a) What languages do you speak fluently?	14
	Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT	
10.	(a) State whether you were WORKING or NOT WORK- (b) At time of en-	
	ING at time of enlistment. (Enter here only "Work-	
	ing" or "Not Working", as case may be; particu- trade union or professional society	
p.5.0	lars are asked for below) were you a member?	
	Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME	
. 790	OF ENLISTMENT QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)	
	Had you ever been employed fairly regularly since leaving school?	
12.	(a) If answer to 11 be "Yes", state exact trade or occupation (b) State how long you had worked at this	
	at which you actually worked tradeor occupation	
	If answer to 11 be "No", state exact trade or occupation for which you feel qualified	
	when you last worked fairly regularly before enlistment	
16.	Give details of last employer, if any: Name	
	contractor", or "boot factory", or "iron foundry", or "retail store", etc.)	
ig it	in a business of your own, state nature and address of business	A THE W
	Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME	
C	OF ENLISTMENT	
	DUESTIONS 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 Name of employer	
N. X	The state of the s	
19.	Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)	
20.	(a) Your (b) Number of years' experience at specific occupation with any employer	
21.	(a) Did your employer promise (b) Did your employer (c) Do you wish definitely to give you refuse to promise you	
	employment on discharge?	
	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	
23.	(a) Number of years (b) Have you made, or will you make plans to engaged in this businessreturn to the same or a similar business on discharge?	
ll _a	Section F—PARTICULARS OF FARMING EXPERIENCE	
24.	(a) Do you wish to engage in farming after the war? (b) Do you feel competent (c) If so, in what to operate a farm? kind of farming?	
25.	(a) Were you (b) How many years' actual (c) In what provinces born on a farm?	
	Section G—MISCELLANEOUS	
26.	Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?	
07	If on whate making of the state	
28.	to return to school, or have you been assured of a job, etc.). State any employment preference or ambition you may have, other than indicated elsewhere in this form.	
- 6-		
	April 9th.	
DA	TE SIGNATURE (1-X) Cernant	

No D. 3385 Rank Signalman Name DAMANT, Robert	
Unit Headquarters "C" Force Date of death 8/25/12/41.	
Died at Hong Kong.	
Cause Killed in action.	
Death occurred on strength of Forces.HQ 405-D-474	d
N/K Mrs. Elizabeth Damant Relationchip	Mother
Address 721 Lacasse St., Montreal, P.Q.	
Remains buried in	Cemetery
Grave location	
CHA	VER-

DEATH CERT. TO N.K.

BURIAL REPORT TO N.K. SEP 18 1947 RETURN TO BUR. OF STAT. 24-5-43 ROYAL MESSAGE DESP'D. JAN 25 1943 CAN. MESSAGE DESP'D.

JAN 2 3 1943

MAR 1 9 1948 Despatched

Photographs

Grave 12, row C, plot 6.

GC Quest Form Desp. dun 17

REBURIAL

Stanley Military Cemetery, Hong Kong.

Mrs. Elizabeth Damant,
721 Lacasse Street,
Montreal, P.Q.

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

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

and the following number quoted:-

H.Q. 405-D-474 FD 343

DEPARTMENT OF NATIONAL DEFENCE OTTAWA, ONT.

January 23, 194.3.

For the purpose of record and in the event of there being any balance of pay, medals or memorials available for distribution (according to law) on account of the late

DAMANT, Robert, Sigmn.

No. D. 3385, Headquarters "V" Force.

it is necessary that the requisite information regarding the deceased and his relatives should be furnished on the inside of this form in strict accordance with the printed instructions. The particulars required are to be carefully filled in and the Declaration on the back should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths or Notary Public, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

ONLY IF NO RELATIVES IN THE DECILES ABOVE ARE NOW LIVING, THE POLLOWING

PERTICULAR DESIGNATION OF THE PROPERTY OF THE

(R.G. Phelan) Lieut.,
for(L.M. Firth) Lt.-Col.,
Administrator of Estates.

NATIONAL DEFENCE

M.F.W. 77 5M—9-41 (1669) H.Q. 1772-39-972

JINTEN HERROLLA ... SIA

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.

of ship			INFORMANT'S STATEMENT					
Degrees of Relationship	required to be		NAME IN FULL of any Relative, if any, in each degree inquired for	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							
2	Children of the I dates of their	Deceased and Births						
3	Father of the De	ceased	CHARLES EIWARD I AMANT	63	721 LACASSE			
4	Mother of the Deceased		ELIZABEH ZIAMANT	62	7211ACASSE			
5	Brothers of the Deceased	Full Blood	DAMAN.	,	721 LACASSE 721 DO			
		Half Blood						
6	Sisters of the Deceased	Full Blood						
	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			
	GORDON /TENNETH DIED. SEPT. 27-1942							

ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

,		NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
8	Grand-Parents of the Deceased			
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage)		Age	
Aunts by marriage)				

ne deceased FULL ive, opposite his ite of death relative ASSE RSSE ACASSE LOWING FULL

What is the full name of the deceased?	ROBERT DAMANT.
Give the month and year of his birth.	SEPT. 19 1920 STJUDES ANGLICAN CHURCH
Where and when were his parents married?	STJUDES ANGLICAN CHURCH MONTREAL - SEPT. 16 1914
If deceased was married, state place and date of marriage.	
Did he leave a Will? If so, a copy should be attached hereto.	NO
Did he leave a bank account? If so, give full particulars.	No
Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	NO
State your own postal address in full.	721LACASSE St MONTREAL
	Give the month and year of his birth. Where and when were his parents married? If deceased was married, state place and date of marriage. Did he leave a Will? If so, a copy should be attached hereto. Did he leave a bank account? If so, give full particulars. Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?

PARTICULARS OF DOMICILE

18	Where was deceased born?	MONTREAL
19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	MONTREAL. WHOLE LIFE
20	What was the nature of his employment?	SHIPPER.
21	Did he own the premises in which he lived? If so, where?	No
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	No

OTHER PARTICULARS

23	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.				
24	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.				
	(Note:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)				

DECLARATION

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

I hereby declare that the foregoing particulars are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees inquired for; and that I am the

FATHER

....of the deceased.

N.B. To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public.

LIVE HITTE RE-ITELL

Charles Edward Damant Signature of Informant

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Participates.

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"sapproved" and sign same, if believed incorrect, give

*See above	hereby certify that, to the best of Name of Informant	CERTIFICATE of my knowledge and belief of the * father	Charles Elwa
	described, and I believe the abo		tatement of Relatives made b
	ant and signed in my presence to an anti-anti-anti-anti-anti-anti-anti-anti-	to be complete and correct.	
Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public	Jacielle Address 4080 =	Qualification.	Enstrict de Mondress

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 enquired after is stated in its proper place in the Statement opposite.

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

The transfer of the boundary of the boundary of the state of the state

HALLING THE LANGE OF THE PARTY OF THE PARTY

named and the first first first out of the same within the same and sales and the land of the same of

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was demonstrated and an interest of the property of the proper

apple and of the evenue of these surborders is not paying and a forest to apple the transfer a sur to bronze

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION D. 5385 Signalman NUMBER Headquarters RANK SERVICE UNIT non Force LaMahT. Robert NAME DATE OF BIRTH September 19th 1920 MONTH YEAR DAY MARITAL STATUS Single Mother Elizabeth NEXT OF KIN AS SHOWN ON Damant NAME M.F.M. 1, 2 & 5 RELATIONSHIP ADDRESS ADDRESS 721 Lacasse Street, Montrest, Quebec. ADDITIONAL PERSON ADDRESS TO BE NOTIFIED PARENTS NAME ADDRESS IF SOLDIER MARRIED OVERSEAS SEC 303 H.Q. 405-D-474 AUTHORITY CAS. SIG. NO. Ailled in action, Hong Kong. DATE Between oth CASUALTY DETAILS & 25th Dec., 1941. M.F.M.5. ATTACHED TO LAST WILL ATTACHED TO YES/NO YES/NO NOTIFICATION TO A. OF E.? NOTIFICATION TO A. OF E.? OFFICER I/C RECORDS

COPY FOR DOCUMENT FILE

1. PLAC	E Muni- cipality Transport Transport	Official name	ali-	Place an X over the word which applies to this municipality or this territory		
OF DEAT	Li county	ty or townsh	nip	City Town Village Parish Township Hospital or		
2. LENGT	LI (a) In hospital Years Months Days (b)]	No. In munici- Years	Months	Institution Years Months Days Years Months Days		
OF STA	Y or institu- tion death	y where h occurred		(c) In Province (if immigrant)		
3. NAM	Surname	,	Do not	CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH		
DECEAS	ED Given names. (Block letters)		write in this space	The same the same to the first to the same		
E Stroot	721 Lacasse Street	No		23. I HEREBY CERTIFY that I attended deceased from		
4. O Officia	l name of nunicipali-					
ty or	township			and last saw h alive on 19		
Munic county	Provi	nce. Luedec.		24. CAUSE OF DEATH		
5. SEX	6. NATIONALITY 7. RACIAL ORIGIN 8. (Citizenship)	Single, Married, lidowed or Divorced		Immediate cause Give disease, injury or complica- (a) 111ed in action.		
2.5		(Write the word)		Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, due to		
9. If marri	ed give			asphyxia, asthenia, etc.		
name of wife band of dece	ased			Morbid conditions, if any, giving (b)rise to immediate cause (stated in		
10. BIRTHI	PLACE			order proceeding backwards from due to immediate cause).		
(Province or	Country)	7000		Other morbid conditions (if impor-		
11. DATE OF SEDICEMBET 1920. (Month) (Day) (Year)				tant) contributing to death but not causally related to immediate		
12. AGE OF Years Months Days If less than one day old				cause.		
21 ?hrs. ormin.				If a communicable disease is (a) Date of appearance		
13. Trade, profession or				give (b) Duration of diseasedays		
kind of work, as spinner, teamster, office clerk, etc.				25. If a woman, was there a puerperal conditions		
14. Kind of industry or business, as cotton-mill,				23. If a woman, was there a pued of the conditions and the conditions are conditions and the conditions are conditions.		
O lum	bering, bank, etc	ars		26. Was there a surgical operation?		
15. Date deceased last spent in this occupation occupation				State findings. O		
	17. NAME	18. BIRTHPLACE (Province or Country)		27. If death was due to external causes (violence) fill in also the following:—		
TA MILLER		Country)		Accident, suicide or homicide		
FATHE	DAMANT, Charles Edwar	d.		Manner of injury.		
MOTHEI (Maiden Nam				(How sustained)		
19. Place of				Nature of injury occurred in		
mation	or removal	- XX		Specify whether injury occurred in industry, in home, or in public place		
20. Date of burial				Signed M.D.		
L OF	(a) Name of parish or church			Address Date 19		
TION	Civil muni- cipality of			gnature of person who fills in the form urate, coroner, hospital authority, etc.) 29. Name of clergyman in charge of Register of Civil Status in which registration of this burial was made.		
ACE TRA	(c) Municipal county					
PL				10. Kaara the collector to coopt		
RI RI	(d) Date(Month) (Day)	(Year)	I his sign	this form as authentic. (Voir l'autre côté pour le français)		

H. 405-10-474

HONOURS AND AWARDS

Regt. No. D-3385 Rank Lymn
(at time of award)
Name DAMANT, Arbert.
Unit . R. C Sigs
(at time of award)
Awarded mention by Uspatches
Authority <u>CG14446-4-46</u>

H.A. 98

i/c Honours & Awards.

DVA D-3385 R-3(d)

Ottawa, Canada, August 16, 1948.

Signalman Robert DAMANT

Dear Mr. Damant:

I am directed to forward to you a Certificate to denote that your son was Mentioned in Despatches for distinguished service and that His Majesty the King has recorded his high appreciation of the services rendered.

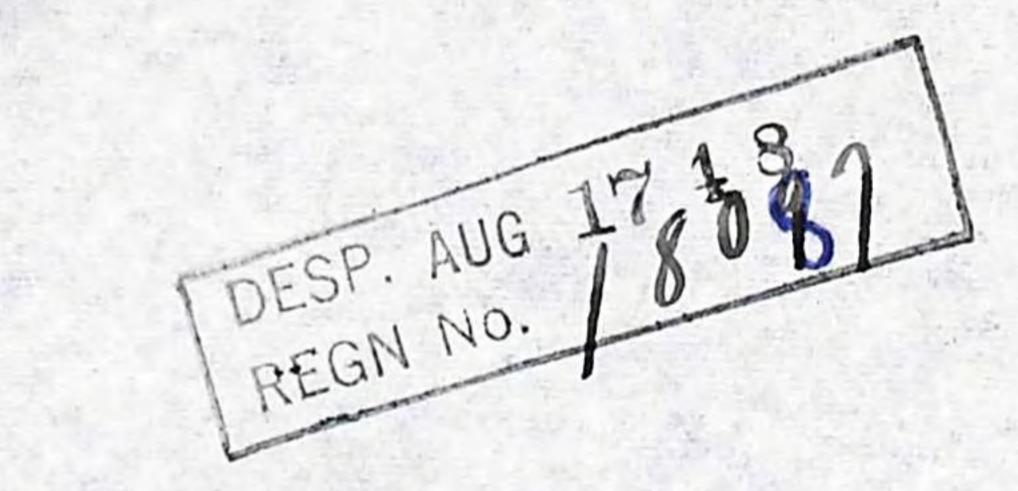
The Honourable the Minister expresses his sincere regret that your son did not survive to receive the award so gallantly earned.

would you please acknowledge receipt at your early convenience.

Yours truly,

A. C. Chadwick, for Director, War Service Records.

Charles Damant Esq., Sr., 721 Lacasse St., Montreal, P.Q.



CANADIAN ACTIVE SERVICE FORCE PROCEEDINGS ON DISCHARGE

(These proceedings should be accompanied by the documents specified on fourth page)

Regimental No. 1814 1816 Rank Refun.					
Surname Christian name Nore.—The name must agree strictly with that on enlistment unless changed subsequently by authority.					
Unit or Corps VICTORIA RIFLES OF CANADA					
Date of discharge 3 NOV 1939					
Place of discharge Monthell Rue Mil. Dist. No. 4					
1. DESCRIPTION AT DATE OF DISCHARGE					
Age years months Height feet feet inches Complexion Blue Descriptive marks Language and left are Longuage are left are mole right Six thora					
Hair Trade Slack Trade Trade					
Intended place of residence (To be given as fully as practicable; i.e., mailing address) The street and Number Province Province					
2. The above-named man is discharged in consequence of					
Authority for discharge P.O. 75-61 Para 3. a.11					
N.B.—The cause of discharge must be worded in accordance with C.A.S.F. Routine Orders as may be published. If discharged by superior authority, the number and date of the letter to be quoted.					
3. Conduct while in the service has been, according to the records, etc.					
N.B.—See K.R. Can. 385. This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company. 4. Special qualifications for employment in civil life. (Vide 384, K.R. Can.)					

5. He is in possession of the following number of G.C. Badges:			
	hone		
5A. Service Button (Class and number (If and when authorized))		
No reference to G.C. Badges is to be made on either the	he discharge or character certificate.		
		and- arch- cate.	
	7 01	Comm the po	
6. Medals and Decorations		by the	
		opied 1 Officer Discl	
		To be con ing of ment	
		.)	
7. I have impartially enquired into all	matters concerning this soldier's discharge brought	before me	
in accordance with Regulations.	I_{II}		
(Place) Creat Gu	Officer Commanding V. R. C.	=Eol.	
(Date) 3 - NOV 1939	Commanding Commanding Commanding	4	
(Place) 3 - NOV 1939 (Date) 3 - NOV 1939	he reservations of the claims noted on the third page harge certificate. (Signature of see any other cause and it is not desirable to forward to signature of the man to sign	of Soldier) Witness)	
When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.			
9. Stat	tement of Service		
(Date of enlistment—C.A.S.F.)	26 ang 9		
(Date of Cilibrate Circuit Junion	2		
(Date of discharge—C.A.S.F.)	J 400 J9		
	7		
(Total Service—C.A.S.F.)		days	
10. Confirm	mation of Discharge		
The discharge of the above-named man			
(Dlace) 10 ml 10 ml	an officer commanding	P. C.	
(1 lace)	(Signature)		
3 - NOV 1939	VICTORIA RIFLES OF CA	NADA	
(Date)			

.

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Reservations referred to at Para. 8

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

the second of the second

1. 2. 12. 1. A.

sid wither of

(Date) ... IIII

(Signature of Soldier)

I.I.-Col.

To be copied by the Command-ing Officer on to the parch-ment Discharge Certificate.

before me

demands, and that

f Soldier)

Witness)

ard these

......

......

.....days

..............

.................

List of Discharge Documents

Field Conduct Sheet (M.F.M. 6).

Certified Copies of Convictions by Civil Power.

Casualty Form (M.F.M. 4)

Proceedings Medical Board (2 copies).

Medical Case History Sheet.

Dental History Sheet.

Last Pay Certificate.

Duplicate Discharge Certificate (M.F.M. 7).

Form of Will (M.F.M. 10 or 10A).

Certified Copy of Record of Declaration of Court of Inquiry (K.R. Can. 1513).

Attestation (Duplicate and Triplicate M.F.M. 2).

Particulars of Family (M.F.M. 5).

Proceedings on Discharge.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding

V. R. C.

Officer Commanding

CANADIAN SERVICE

DISCHARGE CERTIFICATE

This is to Certify that No	(Rank)########			
Name (in full)				
the				
ACTIVE SERVICE CANADIAN FIRST FORCE at Montroll Country Country on the Rock				
day of 19. The				
HE served in				
and is now discharged from the service by reason of	是自然性性的概要 医自然性的 在			
THE DESCRIPTION OF THIS SOLDIER on	the DATE below is as follows:—			
Age	Marks or Scars			
Height###.###	一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个			
Complexion.				
Eyes				
Hair	9			
1. Damast				
Signature of Soldier				
	Litout			
Date of Discharge	Issuing Officer			
李 1110年的中央 1210年 1210年	Rank			
	Date			

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Record Office, Department of National Defence, Ottawa, Canada.

OTTAWA, Canada 8 April 1948 DVA 405-D-474 R. 3(d) Charles Damant, Esq., Sr., 721 Lacasse Street, Montreal, P.Q. Dear Mr. Damant: With reference to your letter of March 22nd regarding the King's Certificate to denote that your son was Mentioned in Despatches, I am to inform you that there are still a large number of these certificates to be received from the Overseas Authorities and it is not known when they will all be available for issue, but you can rest assured that as soon as the Certificate is received at this Headquarters, it will be forwarded with the least possible delay. You are also advised that the figures 191241 on the temporary cross marking your son's grave denote the date of death and should be read as 19-12-41 (December 19th, 1941). The religion indicated on the cross will have no bearing whatever on the engraving to be made on the permanent headstone which will ultimately be erected, as the religion will not appear on any of these permanent headstones. Yours truly, A. C. Chadwick, for Director War Service Records. ACC: HAL

g. D. Rading 721. Lacuse est Al Director Records INT OF Montreal Mar 22/8 Ottawa Onl WAR SERVICE RECORDS A. V. A. 405-D. 474 Dean Sin We are in receipt of your letter enclosing 2 Snak Chote, offorks late Dow's Grave Mamely. D. 3385. Sam Robert DAMANT for which we thank you for I for your Kind information, on ther. Icardo, it has the following 191241 you if this is supposed to be the gease of his birthor death. then it should belig 20-41 also the Manne Baptist should read ANGLICAN. as he ubas baptised & Confirme in the aughecun Church, but he was attending the Buptist audur Ichool to be will his chune. And I would be pleased to know. when & if? we all going to receive his citations wheleh was mentioned in Canada Santle tet dated April-6-1946. personally I Plain it is long over dur. tew should have it by this time, as I scertainly suce he alserved it, considering the place the Canadian boys we sent to defend on so short a notice. Kindly greply to The Freely Chas Damant So

D.V.A. 405-D-474 R 4(B)

Ottawa, 19th March, 1948.

Mrs. Elizabeth Damant, 721 Lacasse St., Montreal, P.Q.

Dear Mrs. Damant:

I am forwarding herewith a photograph of the grave and marker over the burial place of your late son, D3385 Signalman Robert Damant, the location of which is grave 12, row C, plot 6, Stanley Military Cemetery Hong Kong.

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

Yours faithfully,

Typh)

Moh.

A/Director,

War Service Records.

Mrs. Elizabeth Damant, 721 Lacasse Street, Montreal, Quebec.

Dear Mrs. Damant:

Information has just been received from military authorities in the Far East that the remains of your son, D3385 Signalman Robert Damant, have now been interred in grave 12, row C, plot 6, of the Canadian Section in Stanley Military Cemetery, Hong Kong, This is a recognized military burial ground which will receive care and maintenance in perpetuity.

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

Yours faithfully,

for H.M. Jackson, Lt.-Col., Director of Records, for Adjutant-General.

/EMA

Mg .

REBURIAL RETURN

OF

CANADIANS

No. D-3385 Rank Sgmn.	Name DAMANT	Initials
Unit Royal Canadian Signals	Location Report. 6.2	2 JAD 46
Means of Identification		
•••••••••••••••••••••••••••••••••••••••		
Date of Death19.12.41		2.47
Exhumed from #526 Coombe Road, H		
Place of Reburial: Sai Wan Military Cemeter	ry, Hong Kong.	
Remarks: Canadian Section.		
Plot	EY M.C. 6	
Row	C	
Grave		
•••••••••••••••••		
		ration //
Signed Signed Signed	Unit	
5.47.		

Ottawa, Ontario, 22nd November

Mr. Charles E. Damant, 721 Lacasse Street, Montreal, P.Q.

Dear Mr. Damant:-

With reference to your letter of October 28th., regarding the King's Certificate issuable in connection with your son's having been Mentioned in Despatches for distinguished service, I am to inform you this award is a personal gift from His Majesty the King and is therefore prepared by the Overseas Authorities, and it is expected that all these Certificates will be available for issue in the near future.

Yours truly,

(A.C. Chadwick) Major, for Director of Records, for Adjutant-General. Maj A 6. Chadwick Director of Records for Adjutant General. QUOTE NO. 405-D-474 Statese St Records 3 Oct 28/46 Deal Ris The writer of the following received a reply to my letter on may 23-416. as reglands the award to be given our son the late Robert Damant, and up till the time of writing, we have received no further details, as to when we mught ler pect to get it. and as you readily ead see he was mentioned in Despatches authority Canadian Swette# 14. dated abril 61946, and I am sure there must by a little lavily somewhere as we should withe awards by the time, and Will you be good & kind to inform me why the Oversees Authorities, has anything to do with suchawands, with the Canadian Army? of which our boy was a mem ker trucket I am sine he fustly larned by lowing his young-life land which he tave up for his country, and yours earliest kindaltegation will aflege.

VERIFICATION FORM

	WAR	ERVICE MEDALS	1939-45	
No. 2-		DAMANT.		
Rank on	Discharge 29	mu. Date	of Discharge	(9-12-4/
Authorit	y for Discharge	r Retirement	eceased	
Served i	n:		No	n-qualifying service
Canada	from 26.7	-40. to	14-10-41	
	from	*to		
United		to		
Kingdo	from	to		1
Italy	from	to		•
	west rope from 20	to	19-12-41	M/A.
Eligi	ble for award of			
Long. Kong	1939 - 45 Star Backeis			
	Italy Star			
	France-Germany	Star		
	Defence Medal			
	War Medal	01		
	Canadian Volunt		and the self	
		withcla	sp <u>U</u>	
	NO RIBBON	DESPATCH	Verified by	h. menard
			Date	20 300
			Carded	

Charles E. Damant, Esq., 721 Lacasse Street, Montreal, P.Q.

Dear Mr. Damant:-

With reference to your letter of May 3rd., which it is regretted was not replied to earlier, I am to inform you that your son, Robert Damant, was Mentioned in Despatches, authority Canada Gazette No. 14 dated 6 April 1946, but owing to the delay in the publication of orders a letter of congratulations was not forwarded to Mrs. Damant until 16 May 1946.

The award of a Mention in Despatches is made for exceptional services rendered, and a Certificate to denote this award will be forwarded to you as soon as received from the Overseas Authorities, and the War Medals for which your son qualified will be forwarded as soon as available, but I regret to say that it will be some little time before either the Certificate or Medals are received.

Yours truly,

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

Det Nat Defence 405-10-474
Obtava 405-10-474
Onto 2.4. 5/5-/46 # 72/ Lacasse St Montreal Hollay 3 = 46 Dear din would be glad, if byour department. would, Killdly supply him. with the following informalition, On april 2nd 1946 /we happened/to notice in out local paperel and up till time of writing lue have had morword or mewe from any other cource about our late don SYGMN ROBERT Damant. R.C.C.S. REG # 13385. whom was mentioned in Despatches for for bravery in action at Horlystong Uni Ithe year DEC 1944. I woned he bleased if you would flidly inform his what that award is & when well are tohear about it and any other details regarding their achievement performed by our last Don. Thanking your oharles El Damant

MRS. ELIZABETH DAMANT,
721 LACASSE ST.,
MONTREAL, QUE.

DEAR MRS. DAMANT:

WITH REFERENCE TO PREVIOUS CORRESPONDENCE

WITH REFERENCE TO PREVIOUS CORRESPONDENCE FROM THIS HEADQUARTERS CONCERNING THE DEATH OF YOUR LATE SON; I DEEPLY REGRET TO INFORM YOU OFFICIAL INFORMATION HAS NOW BEEN RECEIVED THAT D3385 SIGNALMAN ROBERT DAMANT WAS KILLED IN ACTION AT HONG KONG ON THE 19TH DAY OF DECEMBER, 1941.

PLEASE BE ASSURED THAT SHOULD ADDITIONAL INFORMATION BE RECEIVED CONCERNING YOUR LATE SON'S DEATH OR BURIAL, IT WILL BE COMMUNICATED TO YOU WITHOUT DELAY.

YOURS TRULY,

(C.L. LAURIN) COLONEL, DIRECTOR OF RECORDS, FOR ADJUTANT-GENERAL.

GR/MEB

MAR



WAR SERVICE GRATUITY STATEMENT

DECEASED MEMBER'S REGISTER NO. NAME (SURNAME) (CHRISTIAN NAMES) FILE NO. 13-11-45 Mrs. Elizabeth DAMANT, DATE D-3385. Lacasse St., SERVICE NO. Sgn. FINAL RANK OR RATING 25-12-41 DATE OF DISCHARGE DATE OF TERMINATION OF OVERSEAS SERVICE A. TOTAL QUALIFYING SERVICE NO. OF DAYS 518 COMPLETE PERIODS AT \$7.50 B. QUALIFYING OVERSEAS SERVICE 12.75 No. of Days 59 LESS INELIGIBLE DAYS, EQUAL TO SEE PAR. 2 OVERLEAF FOR EXPLANATION DAYS @ 25c. PER DAY 140.25 C. SUPPLEMENT FOR OVERSEAS SERVICE DAILY RATES AT DISCHARGE \$ 1.30 SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE ADDITIONAL PAY DEPENDENTS' ALLOWANCE 1/30 OF \$ \$2.30\ ×7 = \$ 16.10\ TOTAL 5.19 NO. OF DAYS 59 X\$ 16.10 145.44 D. WAR SERVICE GRATUITY PAY AND ALLOWANCES \$ OVERPAYMENT OF E. DEDUCTIONS DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$ 24.00 24.00 OTHER DEDUCTIONS F. TOTAL AMOUNT PAYABLE

G. YOUR PORTION OF GRATUITY IS-

100%

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$_ _OF \$

121.44

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

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

CHECKED BY PREPARED BY

TREASURY				
CHECKED BY	DATE			

SERVICE REPRESENTATIVE

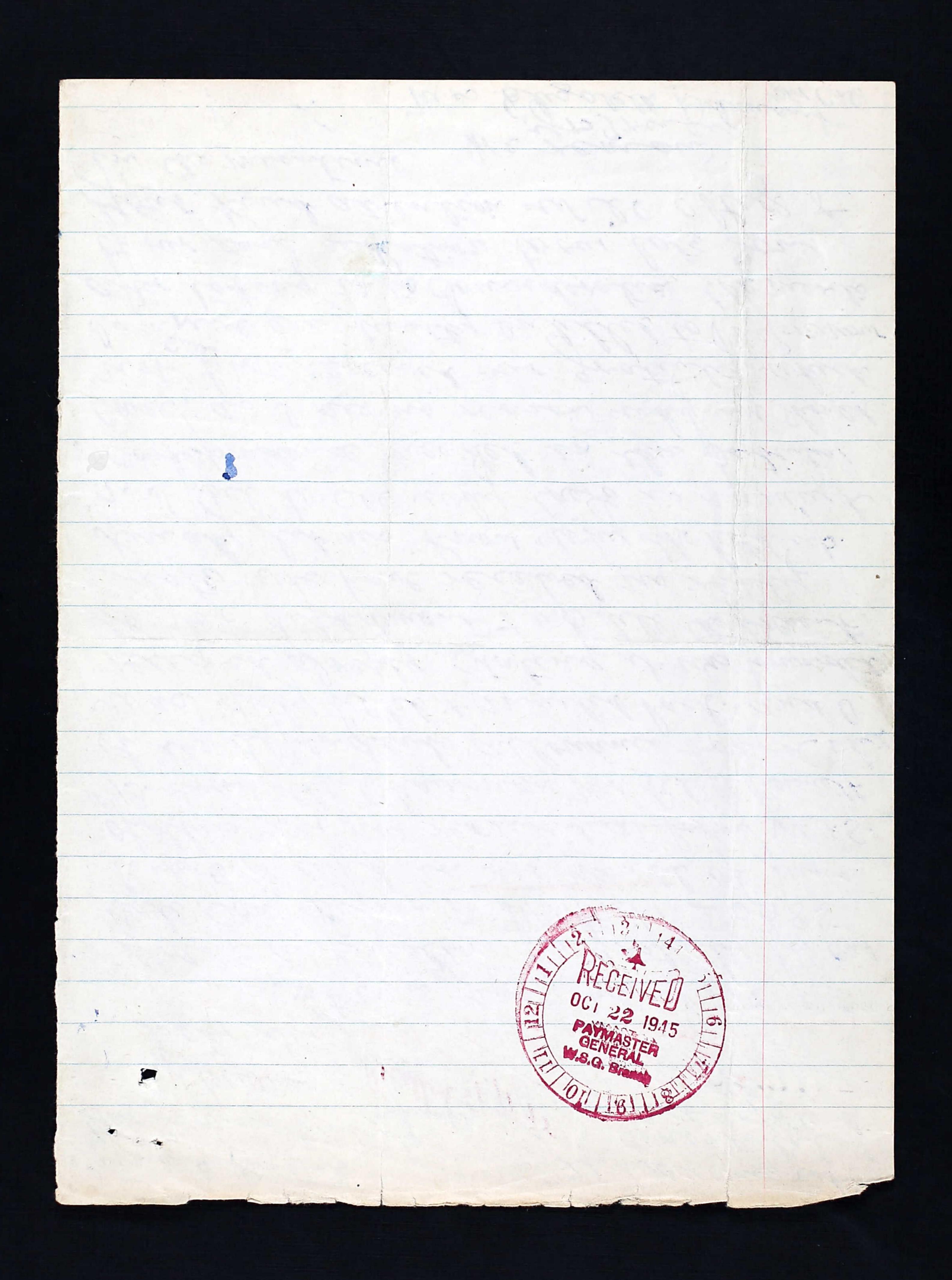
COMPUTATION OF WAR SERVICE GRATUITY

MEMBER'S NAME Register No. 2 (Christian Names) (Surname) File No. 405-	0-32
PAYEE'S NAME MRS ELIZABETH DAMANT (Christian Names) (Surname) Date 12-11	- 45
ADDRESS 721 LACASSE ST. Service No. 10	3385
MONTREAL - P.Q. Final Rank S	1811
DATE OF TERMINATION OF OVERSEAS SERVICE 2 5-12-4/ Date of Discharge	25-12-41
	AMOUNT c
A. TOTAL QUALIFYING SERVICE No. of day 5/8 = /7 Periods @ \$7.50	12750
B. QUALIFYING OVERSEAS SERVICE	
No. of days	
equal	1275
C. SUPPLEMENT FOR OVERSEAS SERVICE	14025
Daily Rate of Pay \$	
Subsistence Allowance \$	
Additional Pay \$	
Dependents' Allowance 1/30 \$	
TOTAL \$ $2.30 \times 7 = $.16.10$	
No. of Days 59 × \$ 16.70	5/10
D. WAR SERVICE GRATUITY	145 114
Computed By hantey	1////
E. DEDUCTIONS Overpayment of (1) Pay & Allowance \$	3400
Other Deductions \$	
Entered By	
F. AMOUNT PAYABLE (This amount is payable inmonthly instalments of \$each)	12144
G. Monthly instalment not to exceed daily rate of Pay & Allowances per (C)	
\$× 30 = \$	

REMARKS

Recalled V

Paymaster General 721 Lacase on montreal Oct 20/45 Har Services Gralwill Services Graludy 1911 Det 20145-Ottawe Rull 5/9/11 Oct 20/45-Dear Sin -474 Rup D 2032 Hos It is a year now. Denie we Wade application, for gratuity for our late Don Beguin R. DAMANT. IN3385 R. G. S. and in the month of June of this year we received a form W.G.S. #113. from the Chairman Wer R.O. G. Bunett of the dependents allowance board which Quas duly filled & marled back. and I received a reply, stating it was forwarded to your department & up till the present date unde have necewed no neply Kindly let us know why the hold up. as I fail to see why there is evenuch correspondence needed in this particles Case as I see no reason why we should. not have received our grativity, which Samwere are fristly entitled to before now after taking Into dousideration the merito of our case relative to our lute Son your kind attention will oflige of Lin the meantime Turo Elizabell Dalimper CA



Registe- No			Nominal Roll No			
			I.Q. File No.	405-1	2-474	
To: P.M.G.		CANADIAN ARMY (ACTIVE)			
		Computation of S	ervice			
		WAR SERVICE GE	RANT			
Regt. No.	Rank when S.O.S.	Surname		Christian Na	me in Full	
D 3385	Sigma	DAMAN	7	ROBE	RT	
	ERMINATION OF SERVI	CE:				
1st Enlistm				CARO	()	
2nd Enlistn			••••••	CARO	(
3rd Enlistn	nent			CARO	(
		Total Service				
1st Enlistment 2nd Enlistm			ENT	3RD ENL	ISTMENT	
TOS 26.	JUC40 V	T.O.S.		T.O.S		
			MDS.O.SMD			
	5/8					
					-10	
Total Service				•••••	DAYS	
			Total Serv	Less ice Non-qualifying Service	Net Service	
Woctorn H	lemisphere		4 9	-9	459	
Overseas S			5	9	50	
O VCI SCAS S	CI VICC	•••••••••••••••••••••••••••••••••••••••	,-,			
To	otals		7./	8		
Ac	ld Non-qualifying Serv	vice				
	a ron quantying our				-19	
To	tal Service					
EMBARKATION I 1. Date S.C REMARKS:	DETAILS: O.S. Overseas	- Bac (2) 2.	Date S.O.S.	Overseas		
Computer's Checker's S Date Comp	ignature	Sepres				
		Service		tlement to benefit t, 1944, has been erein.		

C. L. LAURIN, Colonel,

DIRECTOR OF RECORDS.

500M—11-44 (6012) H.Q. 1772-45-8

#72/ Lacasell Stat Allowance Board Montreal Aug 22-45 Dear Sir The writer of the following mailed to your office, on the 9 think 1945. forme wys! 118. and up till the prefent time we have heard no word I from you. How my 6 harman gas I you save aware, our quaturity form I was one of the first to the Enfuled to Ottawa, in the mouth of Outoberge and I am fust wouldring whee it takes solong. to reach addicion namely in our favour, as I see no other Reason who we should ut receive some out of gratuity after taking lulything into Constideration. and the metits of the case, which Surely Warnants Some recognition. Kindly give this little malles your askest attention Thanking wow to

Q.J. 405-2-474 044020 This Setter pertains to the Late Signed R. G Damant 13385 R.6.6.5 war good on the second of the Other teenson who are when the teens it were The test of the state of the st The state of the s

Brig A BMortimore Mymaster General Quote # 405-11- 474 Ollawa RECEIVED (W.S.G./G) APR 3 1945 Onh The witer of the following wishes to say in reply tof your letter dated much 28/45; and after reading its contents fuil te understand why, and insestigation has to be made in our application for gratuity re our late sont R. DAMANT D/3385 in your 3rd Paragraph of your letter you mention something about wholly log partially dependent, on whose Whember the gratuity is claimed, and for your kind infortuation. we were Icestainly depending on hein. wholly or pattially to no small extent before of after enlisting for active selevice, Ill am at a loss to understand why some people get t already have received some gratuity whom came under the same category class as us. they were partially supporting their parents as was the case of

our Don. whom was one of to Volunteer for active Abrocce as you will readily see bythis pervice rumber and as you aware, he was assigned later on for duties in the for Jest namely Holy Kong. and the result of this expedition is one for the books and when he was heported killed in action, his assigned pay was terminaled. I we recelied but further help. and were cut of the Hay roll. Trustering this lettle information will emlighten, as well as our efforts towards receiving This Thatuity as I still maintein uve Should Ocome under the gratuity category Class as iville as some recognition forous late sous service to his Codentry. Hoping for a forourable neply and you whell thendly aws This little, but very important bhatter your earliest, t Kind attention. as our application has been in since the early part of outober Mr) Elizabeth Dantant par CED



DEPOTMENT OF NATIONAL DE NCE

ARMY

(W.S.G./G.)

August 4th, 1945.

Paymaster-General,
War Service Gratuity Branch,
Room 1500,
New Army Building,
Ottawa, Canada.

Re: D-3385 DAMANT, Robert, Cecil

1. Reference your memorandum of March 27th, 1945.

The Dependents' Allowance Board has found that

Mrs. E. Damant was DEPENDENT on the marginally-named at the
date of casualty, as required by Section 4 of the War Service Grants Act.

DEPENDENTS' ALLOWANCE BOARD

B44/IH

For R.O.G. Bennett - Chairman.

M.F.A. 1326A 1,000M—1-45 (6496) H.Q. 1772-39-2009 CASUALTIES ONLY
For purposes of W.S.G.
Casualties include death
subsequent to discharge

Register No. D2032

H.Q. 405-D-474

File No. _______

WAR	SERVICE	GRANTS	ACT	1944		and the state of
				WA, December	14th	1944

TO: Chief Treasury Officer,
Dependents' Allowance and Assigned Pay Branch

Service No. DAMANT

Name Christian Name Surname

Please sup ly the following information in respect of the marginally named at the time of his discharge or death and return this form in duplicate along with the file to the undersigned.

(K.W.Rice) Lieutenant, for(A.R.Mortimore) Brigadier, PAYMASTER-GENERAL.

Names of persons in receipt of D.A. and amount of monthly award	Name Amount \$
If no D.A. in issue, list names of persons in receipt of A.P., who may be classed as dependents under W.S.G. Act, 1944 and amount of monthly assignment.	mes & lighth Hammet 20.00 Turkler Aldre 1.1.42
Names of persons to whom assigned pay was continued by supplementary award after death.	24.00
Amount of overpayment of dependents allowance and/or assigned pay deductible from the War Service Gratuity and name of person to whom paid	sa 2 745 re overfagt
JAN 1 3 1945 194	For Chief Treasury Officer, D.A. & A.P. Branch
C.T.O., D.A. & A.P.	
Overpayments of D.A. and/or A.P. re Leathoched C to letter Leathoched C to letter	covered from W.S.G. \$ 24.00
2000 10/45 2000 10/45 	M. Chillip for C.T.O.

☐ Navy
☐ Army
☐ Air Force

(Mark X opposite Force in which you last served.)

DEPARTMENT OF NATIONAL DEFENCE

D 2032 M.F.M. 441 1 Mil. 9-44 (5449) H.Q. 1772-39-2326

Application for War Service Gratuity

(Canadian Armed Forces)

A complete reply must be given to every question in this application. If any question is not applicable, "N.A." is to be inserted.
1. Surname on termination of service. DAMANT
2. Christian Names PobleRT (Print)
3. Service No. 23385 4. Paid rank or rating at date of termination of Service PRIVATE
5. Address, in full, to which payments of gratuity are to be forwarded. MRS. CHARLES DAMANT
721. LACASSE ST. MONTREAL
6. State below your period or periods of service in the Armed Forces of Canada during the present war.
Service Service (Navy, Army or Air Force) NRMY Service No. T 3385 Final Date of Commencement Termination of Service Rating of Service T 13385 NT TULY 26/1940
OFFICIALLY REPORTED RILLED
IN ACTION AT HONBIONG. JAN5-194
7. Have you during the present War, while a member of the Canadian Forces, been attached, loaned or seconded to any of the Naval, Military, or Air Forces of His Majesty or of any power allied or associated
with His Majesty? N.A. If so, state name of Force or Forces N.A
8. Have you during the present War, while not a member of the Canadian Armed Forces, been appointed to or enlisted in any of the Naval, Military or Air Forces of His Majesty (other than the Canadian Armed
Forces)?
tion of service. N.A
Having now ceased to serve on Active Service, I hereby apply for payment of the War Service Gratuity. Oct 18 / 1944 (Date) (Signature of Applicant)
If name signed in space above represents a change from name given in question 1, insert here the name at termination of service. As cheques will be prepared in the name given in question 1 a specific
pared in the name given in question 1, a specific address in question 5 is particularly essential.

NOTE: When completed this form is to be mailed to the Headquarters of the Service in which you last served. Viz: Navy—The Secretary, Naval Board, Naval Service Headquarters, Ottawa. (To be accompanied by Certificate of Service in the case of ratings.)

Army-The Secretary, Department of National Defence (Army), Ottawa. Attention: Paymaster-General.

Air Force-The Secretary, Department of National Defence for Air, Ottawa. Attention: Records Officer.

Name:	Robert G.	No.: D.	No.: D.3385		
Surn	ame Christian Names		***************************************		
Samm.	E.S. *C* Force		25-12-41		
Rank	Unit	Date	of Death		
	AN	IOUNT			
		L. P. C\$	18.30		
	Date: June 16. 1943.	Other Credits			
		Total	16.30		

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
411	Mother	Mrs. Wliseboth Moment. 721 Lacasse St Montreal, P.Q.	1.6.30
		(Sole beneficiery under will)	

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	00	001	15.30
CLASSIEIEI	BY		EXAM	INED BY	

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by N. O. SEAGRAM

(L. M. Firth) Lt.-Colonel Administrator of Estates

AUDITED FOR PAYMENT

10M-5-43 (9861) H.Q. 1772-80-2 For Chief Treasury Officer

	(1)	I,RobertD	amant(Name in Full)		, of the (City, Town,	CityVillage, Townshi	 p)
Address in civil life.		ofMontreal	, i	n the County of Hoe	helaga		,
		Province ofQue		Chinne			
				3RD CAN. MOTOF	CYCLE REGT.	C.A.S.F.	•••
		Regimental No	made and decla	re this to be my LAST	WILL		ce
Relationship,	(2)	I GIVE, DEVISE AND BE		(Jee	y woth		
names and address of benefic aries, and what			n · 1 · 1				
each is to receive.		mus El	egabeth				
		70	21. Lac	ane St.			
			2/				
			Conteal	Olice,, estate,			
		They e	utie.	estate,			
Relationship, names and address of residuary beneficiaries.	(3)	I Give, Devise and Broof whatsoever kind and		rest and residue of my suate unto	estate, both real	and persons	ol,
	(4)						
	(4)	I appoint	(Name)	(A	ddress)		• ••
				, to be the Executive	or ix of this my La	st Will.	
		(Civil Oc IN WITNESS WHER		eunto set my hand this.			
	,	19					
		ned and acknowledged					
	t l	ator, in the presence of he same time who in had is request, and in the ach other have hereus ur names as witnesses	is presence, at (e presence of to subscribed		ture of soldier)	mark	
First witness	(5)	Signature	Tionel	Poitras			
sign here.		Civil Address	445-	St- Joses	The Sac	line	O. G.
		Civil Occupation	Stee	l worke	U)		
Second witness		Signature	loyd H	ay.			
sign here.		Civil Address	335 10	Esmancha	is Bud!		
	•	Civil Occupation		e. O.P.P.			
		(Witnesses are not to b					

70311-474

104 Sparks Street,

15th January, 1943.

Mrs. Elizabeth Damant, 721 Lacasse St., Montreal, Que.

Dear Mrs. Damant:

I wish to express to you my deep sympathy in the loss of your son D-3385 Sigmn. Robert Damant who, as you have now been officially advised, has been killed in action. I know that you will derive some comfort from the fact that he laid down his life bravely for his country.

You will already have received from National Defence Headquarters a pamphlet containing information regarding pension regulations, disposal of personal effects, and other matters.

Please feel free to write to me if there is anything in connection with which you think I can be of any assistance to you.

Yours very truly,

F. W. Clarke, Lieut.-Colonel.

1 104 Sparks St. 5th Dec. 1942 Mrs. . Elizabeth Damant 721 Lacasse St. Montreal, P.Q. V15 D474 Re: D3385 Sigmn. Damant, Robert Dear Mrs. Damant: Headquarters "C" Force The official lists of the Canadian prisoners of war at Hong Kong, furnished by the Japanese Government through the International Red Cross, have been coming in at intervals by cable during the past month. Some little time has now elapsed since the last list was received and it would appear likely that few, if any, more names will be reported. The next-of-kin of all the known prisoners of war have now been officially advised, and I regret very much to see that the name of your son of whom nothing has been heard since the fall of Hong Kong, is not among them. Every effort is being made to obtain definite information regarding those who are still missing and the International Red Cross has been asked to obtain all available particulars about them from the Japanese Government. You will be advised promotly as soon as there is anything to report. I am sorry indeed that I cannot give you better news at this time, or offer any encouragement that might help to relieve your anxiety, but if there are any questions in your mind regarding which you would care to write to me, please do not hesitate to do SO. Yours very truly, F. W. Clarke, Lt.Col.

January 8, 1943.

Mrs. Elizabeth Damant, 721 Lacasse Street, Montreal, Quebec.

Dear Madam:

I deeply regret to inform you that your son, D3385 Signalman Robert Damant, gave his life in the service of his Country at Hong Kong. The official date of death has not yet been reported.

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

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

he so bravely made. We pay tribute to the sacrifice

Yours sincerely,

H. F. G. LETSON Major - General Adjutant - Ceneral

JAN 8 1943

(H.F.G. Letson), Major-General, Adjutant-General. TELEGRAPH CO.

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NIGHT MESSAGE

NIGHT LETTER

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RECEIVER'S NO.

TIME FILED

CHECK

Send the following message, subject to the terms on back hereof, which are hereby agreed to Veuillez expedier la dépêche suivante aux conditions mentionnées au verso auxquelles je consens par les présentes

OTTANA JA UMEY 5 1944

ERS ILIZABETH DAMANT 721 LACASSE STREET HOMPREAL OURBEC

REGRET DEEPLY D3385 SIGNALMAN ROBERT DAMANT HOW OFFICIALLY REPORTED KILLED IN ACTION AT HONG KONG STOP DATE OF DEATH NOT YET REPORTED STOP FURTHER INFORMATION FOLLOWS WHEN RECEIVED

Officer 1/c Records

W. L. Coleman) Lt-Col., Cas.

F.M. Clarke L+Col 1-6/1/42 #721. Lacasse St 408-D-474 montreal allaway DEC12-42 TPF II. 3385. Signin IMMANT. ROBT Headqharten "C. Force The writer of this letter would be very pleased of you dould supply him with this information I have here on my deck, a clipping I cut from a French local newspaper, here with the names of 15 montreal names in it, when Hong. Kang fell. I have checked them, by reports in locke papers here, and solfor they have all Ibelen accompted for expect him. which all were attacked to Hadquarters Staff. perhaps you could his, a rough idea, what Thappened that he should be missing When all the rest came through pafely. I for your information. I whote letters to him, some llittle while of that have not come where do you think he hecewed them. or is thesea possability there were sunk before delivery to Hough Konly. and 9 take it after reading your letter duted DEC 5/42 you are just waiting for the casualities Camony the remaining other tota heard from I I hope & trust, a lot more of the boys are Sared. from this Gunga Din which look place at Houghong. Jours Sincerly Chas. Ed Damant

Received

Received

And the second of the second o

Received	DEC.1=
For Attention of_	Mrs Coll
For Information o	f
Acknowledged	