D46602
JENNE
LLOYD MELVIL

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8-8-44

AWARDS—CANADIAN ARMY (ACTIVE)

(1701) M

MJA
500M—1-44 (3467)
H.Q. 1772-45-8

FILE NO. 405-J-7988

SURNAME (IN BLOCK LETTERS) CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
JENNE, Lloyd Melville	D.46602	Cpl.	C.A.C.

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

MID

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
France & Germany Star	6783 4-11-49
Defence Medal	
War Medal	
CVSM & Clasp	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO Mrs. Isabel E.W. Jenne (Widow)

ADDRESS: c/o Mr. H. Woolley, 17 Paragon St., ~~R.R. #2, Compton, P.Q.~~ WORTHING, Sussex, England. (8-12-51)

MEMORIAL BOOK

(1) DATE DESP 17-12-51

REGN. NO 4361 Cancelled

(2) MEMORIAL CROSS

WIDOW Mrs. Isabel E. W. Jenne, (ENGLISH)

(1701) WRN, Quarters HMS Tormentor,

ADDRESS: Warsash NR Southampton, Hants, ENGLAND.

(2) DESP. NOV 8 1944 REGN No. 5728

(3) MEMORIAL CROSS

MOTHER Mrs. Arabel Naus, (ENGLISH)

(1701)

ADDRESS: R.R. #2, COMPTON, P.Q.

(3) DESP. NOV 8 1944 REGN No. 5729

AUG 1 - 1943 PERIOD JAN 31 1944

From ..... 19 .... To .....

VERIFIED
12. 4. 44
DATE ..... BY TH

MILITIA BOOK M. 1

PART II

40/P&S/279 (11/42)

6

CANADIAN ARMY

Soldier's Pay Book

(For use on Active Service)

Regt'l Number D.46602

Surname (Capitals) JENNE

Christian Names in full

Lloyd Melville

27th CDN. ARMD. REGT. (Sher. Fus. R.)

PARTICULARS OF SOLDIER

Regimental Number D46602

Name in full (Surname first) Jenne, Lloyd Melville

Date of Attestation 4 September, 1940

State whether married, widower or single Single

If married after enlistment, state date of marriage

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

Mrs Arabelle Mauss - Mother
R.R. #2, Compton, Que., Canada

PARTICULARS OF ASSIGNED PAY, ETC.

Assignment of pay:	Effective date:
(a) $ 29.00	Feb/43
(b) $ 1.00	Mar/41
~~(c) $ 8.40~~	~~May-Oct 43~~
(d) $	

Name, address and relationship of assignee:

(a) Mother

(b) Rec Gen - W.S.B.

(c) ~~Rec Gen - 4 Victoria~~

(d)

Dependents allowance, payable to: (state relationship)

CASUALTIES AFFECTING DAILY RATE OF PAY AND ALLOWANCES

Date effective	Particulars	Part II Order	Signature of Paymaster
3.9.42	Conf Cpl.	135 3.9.42	Previous book
15/9/42	Dr. oper "C"	152	" "
26.10.43	Ceases t/p "C"	40 17.11.43	[illegible]
15-12-43	A/L/Sgt.	1 7.1.44	[illegible]

DAILY RATE OF PAY

Rate of Pay in Issue		Date Effective	Signature of Paymaster
$	c.		
1	70	17.11.41	Previous book
1	95	15/9/42	[illegible] "
1	70	26.10.43	[illegible]
1	90	15-12-43	[illegible]

Soldier's Signature L M Jenne

Book opens on AUG 1 - 1943 Balance Cr. or Dr. $ As below.

Paymaster's Signature: K R Bryce Lieut

Date	Particulars	Credits	Cash Payments and Other Charges: Local Currency	Cash Payments and Other Charges: Canad'n Currency	Assigned Pay	Deferred Pay and/or Restricted Pay	Balance: Debit	Balance: Credit	Signature of Paymaster or Officer Making Award
1943 Aug 1	Bals. Br't. Forward	37 73				30 00		7 73	K R Bryce Lieut
Aug	Pay	60 45 58 8?			38 40			29 78	K R Bryce Lieut
AUG 14	A.R. 29		2/10/0	11 18				18 10	K R Bryce Lieut
AUG 30	A.R. 32		2/10/0	11 18				6 92	K R Bryce Lieut
Sept	Pay	58 50			38 40			27 02	K R Bryce Lieut
aug 31	AR 31		3.0.0	13 41				13 61	K R Bryce Lieut
SEP 13	A.R. 34		1/10/0	6 71				6 90	K R Bryce
16	9 days RA 00 12.43	6 03						12 93	K R Bryce
SEP 30	A.R. 37		2.10.0	11 18				1 75	K R Bryce
Oct	Pay	60 45			38 40		x	23 80 ~~33 40~~	K R Bryce
14/10/43	14		2-10-0	11 18				12 62 ~~22 62~~	H A Secord
~~27~~	~~AR 45~~		~~4-11-0~~	~~20 34~~				28	No entry
	Totals	222 66		~~[illegible]~~ 64.84	115 20	30 —		12 62	

Balances only will be carried forward.

Date	Particulars	Credits	Cash Payments and Other Charges: Local Currency	Cash Payments and Other Charges: Canad'n Currency	Assigned Pay
	Bals. Br't. Forward	42 62			
Oct 27	AR45		2-11-0	11 40	✓
Nov	Pay	58 50	✓		30 —
" 15	AR48		2-10	11 18	✓
" 25	Canada+14 DO40/43			9 00	✓
NOV 30	A.R. 50		2.0.0	8 94	✓
Dec	Pay	57 70			30
24	AR55		2-	8 94	✓
30	A.R. 56		3.0.0	13 41	✓
Jan	Pay	57 70			30
	Alk S47 DO. 1/44	9 60 ✓			
12	AR58		7-	31 29	✓
CR Jan 19	9 days 12 AA DO 2/44	6 03 ✓			
	Totals	227 15		94 16	90

Balances only will be carried forward.

Deferred Pay and/or Restricted Pay	Balance: Debit	Balance: Credit	Signature of Paymaster or Officer Making Award
30 —		12 62	[signature]
		1 22	[signature]
		29 72	[signature]
		18 54	[signature]
		9 54	[signature]
		60	[signature]
		33 30	[signature]
		14 36	[signature]
		95	[signature]
		33 65	[signature]
		33 25	[signature]
		1 96	[signature]
		7 99	[signature]
30			

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

12 APR 1944

Feb. 15		Aug. 15	2-10-0
Feb. 28		Aug. 31	2-10-0
Mar. 15		Sep. 15	1-10-0
Mar. 31		Sep. 30	2-10-0
Apr. 15		Oct. 15	2-10-0
Apr. 30		Oct. 31	2-10-0
May 15		Nov. 15	2-10-0
May 31		Nov. 30	2-10-0
Jun. 15		Dec. 15	
Jun. 30		Dec. 31	
Jul. 15		Jan. 15	
Jul. 31		Jan. 31	

447) 2330
2235

15
20
3006
4,47) 2680
26.82

Received..................Checked...E...........Card...✓...........Observations..................

~~ORIGINAL~~
DUPLICATE
~~TRIPLICATE~~

Occupational History Form -

M.F.M. 2
A.F.B. 271
480 M—8-39 (1696)
H.Q. 1772-45-18

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

Unit THE SHERBROOKE FUSILIER REGIMENT C. A. S. F. Regimental Number D46602

CANADIAN ACTIVE SERVICE FORCE 05

ATTESTATION PAPER

HWL

1. Surname JENNE
2. Christian Names LLOYD MELVILLE
3. Present address MOE RIVER QUEBEC CANADA
4. Date of birth FEB. 27 1917
5. Place of birth U.S.A (Country) VE MONT (County or Province) MONTPELIER (Town or Township)
6. Religion (state denomination) PROTESTANT
7. Trade or Calling TRUCK DRIVER
8. Married, Widower or Single SINGLE
9. Name of next of kin ~~MRS. ROY DENVER NEUS~~
10. Relationship MOTHER
11. Address of next of kin ~~RMD #2 COMPTON, QUE, CANADA~~ } See change
12. Have you served in any Naval, Military or Air Force? SHERBROOKE REG'T M.G.
13. If previous war service, state arm, force and regimental particulars NO
14. Do you now belong to or have you served in the Active Militia of Canada? NO
NO
(Give unit and date of attestation)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, LLOYD MELVILLE JENNE 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 18/9/40 J. Clavson Lloyd Melville Jenne (Signature of recruit)

WITNESS

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Lloyd Melville Jenne (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 SHERBROOKE P. QUEBEC this 18 day of SEPTEMBER 1940

I. Echenberg Capt {Signature of Magistrate, Justice or Attesting Officer.

RECRUITING OFFICER {Office or Rank and Unit or appointment.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT

P

FINGERPRINTED — CAIB

Record of Service of Jenne (Surname) Lloyd Melville (Christian Names) Regimental Number D 46602

QUALIFICATIONS

Military: None

Business or Professional: None

Trade or Civil: Truck-Driver

Technical: None

Languages: English

EDUCATIONAL QUALIFICATIONS

High School or Collegiate: 3 years (years completed)

Graduation or Matriculation: N/A (specify)

*College: None

*University: None

N/A

*(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
1227—		Joined on appointment THE SHERBROOKE FUSILIER REGIMENT C.A.S.F.	Private	18/9/40	S.F.R.	Sherbrooke	Part 2 No 34	4/9/40
		~~granted 14 days furlough from 17-3-41 to 30-3-41 Pt 2, R.O. 699~~						
186—3 4 Sep 40	S.F.R.	T.O.S. this unit and posted to "C" Coy	"	4 Sep 40	"	"	Part 2 No. 34	18 Sep 40
27 Dec. 41.	"	Occupational History Form	"	21June41.				
		Entrain: 20 Aug. 41 Ottawa Disembark: St John's, Nfld. 24 Aug. 41					Supp. Pt II- 270	27 Dec. 41.
14 Oct. 41	"	Promoted to the rank Of L/Cpl.	L/Corporal	14 Oct. 41	"	NFLD	Part 2 No. 214	14 Oct. 41
18 Nov. 41	"	Promoted to the rank of A/Corporal on authority of his Commanding Officer	A/Cpl.	17 Nov. 41	"	"	Part 2 No. 241	18 Nov. 41
31 Dec. 41	S.F.R.	Proceeding on Embarkation Leave is granted Transportation Warrant number A-45472	A/Cpl.	7 Aug. 41	S.F.R.	Nfld.	Part II No. 273	31 Dec. 41
8 Feb 42	"	Embark St. Johns Nfld. w.e.f. 8 Feb 42 Disembark Debert N.S. w.e.f. 11 Fbe 42	"	8 Feb 42	"	Debert	Part 2 No. 9	2 Mar 42
4 Mar 42	"	Proceeding on furlough is issued with Transport Warrant No. A-105606 w.e.f. 4 Mar 42	"	4 Mar 42	"	"	Part 2 No. 13	9 Mar 42
9 Mar 42	"	Granted 14 days furlough from 9 Mar 42 to 22 Mar 42	"	9 Mar 42	"	"	Part 2 No. 13	9 Mar 42
14 Mar 42	27 CAR	SFR disbanded TOS 27 CAR(SFR) & posted to Regt'l H.Q. Sqn.	"	14 Mar 42	27 CAR	Debert	Part 2 No 1	14 Mar /42
3 Jun. 42	"	Was on 3 Jun. 42, reprimanded for Neglecting Camp Standing Orders Para 54 (d)	"	~~10xFebx4~~	"	"	Part 2 No. 62	3 Jun. 42

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

ARE YOU RECEIVING OR HAVE ... THE PAST RECEIVED, DISABILITY OR COMPENSATION. IF SO GIVE DETAILS. No

CERTIFICATE OF MEDICAL EXAMINATION

Name in full JENNE LLOYD MELVILLE Date SEPT.4 1940

Part 1. Information obtained from the recruit.

1. Age 23   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 NO
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 NO
p. Gonorrhoea NO
q. Have you ever worn glasses? NO

Lloyd Melville Jenne
(Signature of Recruit)

Examiner's remarks re above

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

1. Identification marks or scars. (If operative obtain history.)
NONE

2. Height 5 feet 9 inches. 3. Weight I45 pounds.

4. Complexion LIGHT Eyes BLUE 5. Development Good ~~Fair~~ ~~Poor~~

Hair LIGHT

6. Chest measurement—Girth on full expansion 35½ inches.
Range of expansion 3½ 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 SMALL FILLINGS REQUIRED

10. The abnormalities (congenital and pathological) found on examination are as follows
NONE X-RAY AND URINE NEGATIVE

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

A. C. Pantin M.D. — President
R [illegible] M.D. — Member
[illegible] Rodg[illegible] — Member

ARE YOU RECEIVING OR HAVE YOU IN THE PAST RECEIVED, DISABILITY OR COMPENSATION. IF SO GIVE DETAILS. . . . No

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
4/9/40	Re Exam Urine normal		
	Ears Reflexes Cat A		
4/9/40	X – Ray N		
9/4/41	No change in Category. [illegible]		
SEPT. 29 41	TABT 3 [illegible]		
Sept 29	[illegible]		
8-6-42	Cat a confirmed A. [illegible]		
OCT 10 1942	TABT ½ cc [illegible]		

20-8-42 N.V.T. 13 points [illegible]

Regtl. No. D 46602 Rank Private Surname Jenne Christian Name Lloyd Melville

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				

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

Statement [illegible]e Service of No. D-46602 Rank CP[illegible] Sheet No. 3

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

Name JENNE, L.M.

REPORT		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	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
3 Sept 42	27 CAR	Confirmed in the rank of Cpl.	Cpl.	3 Sept42	27CAR	Debert	Part 11 No. 135	3 Sept 42.
9 Sept 42	"	Granted special leave from 8-8-42 to 12-9-4 Transportation Warrant No. A-196745 plus allowance of 50 cents per diem..	"	9 Sep 42	"	"	Suppy. Part 11 No. 128	9 Sep 42
16 Se 42	"	Granted money allowance in lieu of rations while on leave from 7-8-42 to 11-8-42	"	16Sep42	"	"	Suppy Part 11 No. 43	16 Sep42
19 Sep 42	"	Classified as an Loader Operator	"	15 Sep 42	"	"	S Part 11 No. 146	19 Sep42
1OCT.42	27 CAR	GRANTED TRADEMEN'S RATES OF PAY UNDER GROUP "C".	CPL	15 SEP.	27 CAR	DEBERT	PART 2 NO.152	1 OCT.42.
		S. O. S., C. A. Canada 27/10/42						
		T. O. S., C. A. Overseas 28/10/42						
		Disembarked Gourock: 5/11/42						
		T. O. S.	Cpl		[illegible]	[illegible]	Part 2 No 6	9/11/42
		Priv. Leave with M.A.	Cpl.	1/10 Jan 43	27 A.R.	UK	1	9 Jan 43
		Proc CMHQ we 805 AA att FAP CTS Qual. "Q" "2"	Cpl.	11 Apr 43.	27 A.R.	UK	12	24 Apr 43
		Ret. from CMHQ Case 805 SER 10, C.T.B.A. to 1 C.O.R.U.	Cpl.	24 Apr. 43	27 Army Tk R	U.K.	17	22 May 43
Address of N. of K. now		~~Arabella Maus (Mother) R.R. 2 Compton, Quebec, Canada~~			~~27 Army TR~~	~~U.K~~	~~24~~	~~17 Jul 43~~
		Reverts to Regtl R of Pay (Dr. Mech "C")	Cpl	12 July 43				
		Granted T. R of Pay (Opr C.A.C "C")	Cpl	13 July 43	27 Arm'd R.	UK	27	7 Aug 43
		Qual 75% on Field Sketching & Camouflage Cse at Brighton Sch. of Art.	Cpl.	17 Aug 43	27 Arm'd Regt	~~NA~~ UK	30	2 Sep. 43

Statement of the Service of No. D46602 Rank.................... Sheet No..........

Name JENNE L.M.

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

REPORT		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	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		Proceeded on Enemy Army Crse & att'd to 1 CGRU f ap	Cpl	5 Oct 43	27 Arm'd R	UK	36	14 Oct 43
		Ret from Enemy Army Course C/ATT to 1 CGRU f ap	Cpl	24 Oct 43	27 Arm'd R	UK	41	19 Nov 43
		Reverts to regtl rate of pay Opr. CAC "C"	Cpl	25 Oct 43	27 Arm'd R	UK	40	12 Nov 43
		Qual "Q-1" comp. Enemy Army Crse	Cpl.	23 Oct 43	27 Armd	UK	42	29 Nov 43
(28)		appt'd A/L/Sgt	A/L/Sgt	15 Dec 43	27 Arm'd R	UK	1	7 Jan 44
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
(15)		granted Tradesmen's r of pay Opr ZAC "Z"	A/L/Sgt	15 Dec 43	~~27 Arm'd R~~	~~UK~~	~~15~~	7 Apr. 44
28	granted	permission to marry ISABEL WATERS WOOLLEY (O.N. 27265) (WAN)	A/L/Sgt		~~27 Arm'd R~~	~~UK~~	15 April 44	7 Apr. 44
Change N/Kin To		Wren ISABEL ESTER WATERS JENNE (WIFE)			27 Arm'd R	UK	19	4 May 44
		WRNS. QUARTERS HMS "TORMENTOR" WARSASH (NEAR) SOUTHAMTON HANTS, ENG.						
		Married with perm to Isabel Esther Waters Woolley at Southampton	L/Sgt.	16 Apr 44	27 Arm'd Regt	UK	19	4 May 44
X108		To be L/Sgt.	A/L/Sgt.	9 May 44	27 CAR	UK	23	25 May 44
		Embarked at... UK ....on. 3. Jun. 44						
		Disembarked at.. FRANCE...on. 6. Jun. 44	L/Sgt		27 A. Regt	21 A/Gp	34	17 Jul 44
M.141		SOS Killed in action	L/Sgt	8 Aug 44	27 Armd Regt	21 A Gp	47	21 Aug 44
		Killed	L/SGT.	8 Aug 44	27 A Regt	AEF	A 478	13 Aug 44

27 ARMOURED REG'T
THE S[illegible] R

SERVICE AND CASUALTY FORM

PART I (For all ranks)

27 Army Tank Regt

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

Unit THE SHERBROOKE FUSILIER REGIMENT C.A.S.F.

Regimental Number D 46602

1. Surname Jenne
2. Christian Names Lloyd Melville
3. *Substantive Rank and Appointment L/Sgt 9 May 44
   *Acting Temporary or Local Rank
   giving date

*To be entered in pencil to facilitate alteration.

4. Place of birth Montpelier, Vermont, U.S.A.
5. Date of birth as declared on attestation 27th February, 1917
   (A)
6. Date of enlistment 18th September, 1940
7. Place of enlistment Sherbrooke, P. Quebec
8. Residence at time of enlistment Moe River, P. Quebec
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion Protestant
12. If married, state date
13. Trade on enlistment Truck Driver
14. Corps, trade and grade
15. (D) Qualifications
16. (E) Miscellaneous entries of CAC "C"

TRADE CERT'D SATISFACTORY
BY O.C. - RO 3205

(17) Regiment or Corps	Unit (Battn., etc)
THE SHERBROOKE FUSILIER REGIMENT C.A.S.F.	
27 CAR (SFR) (CAC)	

(18) Medical

Category	Date	Authority
A	4.9.40	A.C. Paintin MD

(19) Next of kin (entries to be made in pencil) Wife
Wren Isabel Esther Waters Jenne
WRNS Quarters HMS Tormentor
Warsash Near Southampton Hants
England

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

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

(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
30 Sept	41.	S.F.R.	Embarkation	Ottawa	10-8-41.	Pte	
			Disembarkation	Nfld	14-8-41.		
9/11/42		27 CAR	T.o.S. Cdn Army O/S	Aldershot	28/10/42	CPL	Pt. 2 No 6
9/11/42		27 CAR	S.O.S. Cdn Army Canada	Halifax	27/10/42	CPL	Pt 2 No 6
			Disembarked 5 11 42				
	C.R.	27 CAR.	7 days P.L.	Field	1-1-43	CPL	1 d/9/1/43
			C.M.H.Q. form 1000:92 Completed	Field	2 Jan 43.		
UNIT REDESIGNATED			27 CDN ARMY TANK REGT				
11/4/43	C.R	27 CATR.	Proc. C.M.H.Q. Course No. 803 Serial 0 (A.A. & Aircraft Recognition)	Field	11/4/43	CPL	12 a/23/4/43
21/5/43	C.R	27 CATR	Ret. from C.M.H.Q. Course No 803 Serial 0 and anns att to 1 C.A.R.U. f.a.p.	Field	24/4/43	CPL	17 d/27/5/43.
21/5/43	C.R.	27 CATR	Qual "Q2"	Field	24/4/43	CPL	17 d/27/5/43
4/6/43	C.R.	27 CATR.	9 days P.L. [illegible]	Field	14/5/43	CPL	19 d/10/6/43
3/7/43	C.R	27 CATR	~~Field~~ Change W.of.K	Field	3/7/43	CPL	17/7/43
			27 ARMOURED REGT				
13 Jul 43.	C.R	27 CAR.	Reverts from [illegible] "C" to Regt'l rate of pay 13 Jul 43. Granted trades pay Gp "C" "C"	Field	13 Jul 43	CPL	14 d/7 Aug 43
17 Aug 43.	C.R.	27 A.R.	Completed Field Sketching Course at Brighton School of Art. Qual "75%"	Field	17 Aug 43	CPL	31 d/2 Sep 43.
5 Oct 43	C.R	27 A.R.	Proc. on Enemy Army Course and att to 1 C.G.R.U. f.a.p.	Field	5 Oct 43	Cpl	36 d/14 Oct 43.
25 Oct 43	C.R.	27 A.R.	Reverts to Regt'l rates of pay of $1.70 per diem of C.A.C. "C"	Field	25 Oct 43	Cpl	40 d/12 Nov 43
8 Nov 43.	C.R.	27 A.R.	Ret. from Enemy Army Crse [illegible] att to 1 C.G.R.U. f.a.p.	Field	24 Oct 43	Cpl	41 d/19 Nov 43.
12 Nov 43.	C.R.	27 A.R.	Having completed ~~[illegible]~~ Enemy Army Course Qual "Q1"	Field	29 Oct 43.	Cpl	42 d/29 Nov 43.
20 DEC 43	C.R.	27 A.R.	Apptd A/L/Sgt.	Field	15 Dec 43.	Cpl.	1 d/7 Jan 43.
18 Jan 44	"	"	Awarded Canadian Volunteer Service Medal and Clasp	"	15 JAN. 44	A/L/Sgt.	4/20 Jan 44
5 Apr 44	"	"	Granted tradesmen rates of pay Gp CAC "C"	"	15 Dec 43	A/L/Sgt	15/7 Apr 44
	"	"	Granted permission to marry Isabel Esther Waters Woolley (WRNS No 27265	"	15 Apr 44	"	15/7 Apr 44
	"	"	Married with permission to Isabel Esther Waters Woolley at Warsash Southampton	"	16 Apr 44	"	19/4 May 44

SERVICE AND CASUALTY FORM

(PART II)

M.F.M.4 (a) (Part II)
40/P&S/412 (3006)

Regiment or Corps: CAC Regimental Number: D46602.

Substantive Rank: L/Sgt Surname: Jenne. Christian Names: Lloyd. Melville

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

(a) Report		(b)	(c)	(d)	(e)	(f)	(g)
Date	From whom received	Unit	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 1 of Appendix III of Field Service Regulations, Volume I	Place of Casualty	Date of Casualty	Army rank as at (e)	Army Form or other authority for entry shown
	CR.	27 AR.	Change of N-of-K.	Field	16 Apr 44	L/Sgt	19/4 May 44
	CR	"	To be L/Sgt	"	9 May 44	L/Sgt	23/25 May 44
27 AR	Embarked U.K. 3 Jun 44		Disembarked France 6 Jun 44		—	—	34/15 Jul 44
	"		SOS killed in action	—	8 Aug 44	—	47/21 Aug 44

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 LLOYD MELVILLE JENNE (b) Reg'l. No. D-46602
2. (a) Arm of service ARMY (b) Unit SHERBROOKE FUSILIER REGT. (c) Rank PTE.
3. (a) Date of birth M 27-2-1 7 (b) Have you any dependents? No (c) Place of residence at time of enlistment MOE RIVER, QUE.
4. (a) Place of enlistment SHERBROOKE? QUE. (b) Date of enlistment Sep. 18th, 1941

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 1 4 (b) Were you attending school or college up to the time of enlistment? NO
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) 7 years publi c, 5 yrs. h i gh
7. If you attended a university, give name of university and standing or degree secured N/A
8. (a) Did you ever enter upon a trade apprenticeship? NO (b) If so, for what occupation? N/A (c) Did you finish it? N/A (d) If you did not finish it, how long did you serve at it? N /A
9. (a) What languages do you speak fluently? ENGLISH (b) What languages do you read well? ENGLISH

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) PROSPECTING
    (b) At time of enlistment of what trade union or professional society were you a member? NONE

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 TRANSPORT DRIVER (b) State how long you had worked at this trade or occupation 5 YEARS
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified N/A
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment 2 YEARS
15. Give details of last employer, if any: Name C.C. WARNER Address LENNOXVILLE, QUE.
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) TRUCKING
17. (a) If your last employment was in a business of your own, state nature and address of business N one (b) Date of discontinuing it N/A

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 N/A Address N /A
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) N/A
20. (a) Your specific occupation N/A (b) Number of years' experience at this occupation with any employer N/A
21. (a) Did your employer promise definitely to give you employment on discharge? N/A (b) Did your employer refuse to promise you employment on discharge? N/A (c) Do you wish to return to your former employment? N/A

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

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? N/A
25. (a) Were you born on a farm? N) (b) How many years' actual farming experience have you had? 2 Yrs. (c) In what provinces did you have experience? Quebec.

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? No
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.) No
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form Prospector

DATE May 8th, 1941 194....... SIGNATURE L. M. Jenne.

No. D-46602 RANK L/SGT NAME JENNE Lloyd Melville

*Married *Widower *Single

Place of {*Appointment *Enlistment} Sherbrooke P.Q. Date of {*Appointment *Enlistment} 18 Sept 1940

RATE OF PAY

D. O. No.	Date	Rank	Group	P. F. or A. S.	Daily Rate	If Liable Pen. Ded.	REMARKS
34	18/9/40	Pte		A.S.	1.30		TOS on enlistment
214	14/10/41	L/Cpl		"	1.50		Promoted to L/Cpl
241	18/11/41	Cpl		"	1.70		Promoted to A/Cpl
135	3/9/42	Cpl		AS	1.70		Confirmed in rank
152	1/10/42	Cpl	"C"	"	1.95		T/ P L.O.
40	12/11/43	"	"S"		1.70		Eff 25/10/43.
1	7/1/44	A/L/Sgt			1.90		Eff 15/12/43.
15	7/4/44	"	"C"		2.15		Eff 15/12/43.

ASSIGNMENTS OF PAY

Name & Address of Assignee	Effective Date	Amount
Isabel Esther JENNE - Wife, HMS Tormentor, Warsash, Near Southampton, England.		
Rec./Gen. P.W.S.C.	3/41	1 00
R. R# 2 Compton P.Q.	25/4/44	35 00
Rec Gen Vic Loan May/Oct 43		
Total		XXXXXX 36.00

DEPENDENTS

Date Application Forwarded	Relationship	Amount Awarded	Effective Date

Deps.

*Outfit *Clothing } Allce. $.....Paid on.....

Rehabilitation Grant $.....Paid on.....

*Delete words which are inapplicable.

M. F. M. 14

200M—10-41 (2231)
H.Q. 1772-39-1662

In Receipt of Pension under Pension Act or Militia Pension Act (1910) $.....P.A.

Occupational Form Completed.....

CASUALTIES, ETC.

Part II D.O. No.	Date	
		D-46602 A/Cpl L.M. Jenne
34	18/9/40	TOS Sherbrooke Fusilier Regt.eff. 4/9/40
59	18/3/41	Granted furlough from 17/3/41 to 30/3/41
214	14/10/41	Promoted to L/Cpl eff. 14/10/41
241	18/11/41	Promoted to A/Cpl eff. 17/11/41
13	9/3/42	Granted furlough from 9/3/42 to 22/3/42
62	3-6-42	Reprimanded-Neglects to obey Stand. Orders
95	13-7-42	Having been trade tested by ZUnit Testing board is Qualified Driver Class 111 (W) 13-7-42
135	3/9/42	Having served satisfactorly for (3/ months is confirmed in rank Cpl eff 3/9/ 42
138S	9/9/42	Granted special leave from 8/9- 12/9/42
146S	19/9/42	Tested by ~~XXXX~~ Bde Trade Testing Board classified as Loader Operator eff 15/9/52
152	1/10/42	Granted T/P Group "C" eff 15/9/42 L.O.
6	9.11.42	SOS Cdn Army Canada 27.10.42
		SOS " " O/S 28.10.42
2	15/1/43	7 days P/L 1-8/1/43 with ration allce.
12	24-4-43	Proc on Course & att. to CTS wef: 11-4-43

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

CARD SEQUENCE No. 2

No. D-46602 RANK CPL. NAME JENNE, L.M.

CASUALTIES, ETC.

PART II D. O. No.	DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
17	27/5/43	Ret'd from CMHQ Course #805 Ser 10 24/4/43.	
17	27/5/43	Completed CMHQ Course #805, qualified "Q2"	
19	10/6/43	9 days P/L 14-22/5/43 with ration allce.	
27	7/8/43	Re-mustered as Operator CAC "C" eff 13/7/43.	
32	16/9/43	9 days P/L 1-10/9/43 with ration allce.	
36	14/10/43	Proceeded on Enemy Army Course & Att to 1 CGRU eff 5/10/43.	
40	12/11/43	Reverts to Regt'l rate of $1.70 eff 25/10/43.	
41	19/11/43	Ret from Enemy Army Course eff 24/10/43.	
42	29/11/43	Completed Enemy Army Course, Qualified "Q1"	
1	7/1/44	Appointed A/L/Sgt eff 15/12/43.	
5	28/1/44	9 days P/L 14-23/1/44 with ration allce.	
15	7/4/44	Granted T/P Operator CAC "C" eff 15/12/43.	
15	7/4/44	Granted permission to marry Miss Isabel Waters WOOLLEY (O.N.27265)(WRNS) w.e.f. 15 Apr 44.	
19	4/5/55	Married with permission to Miss Isabel Waters WOOLLEY (WRNS No 27265) at Hook-W-Warsash, Southampton on 16 Apr 44.	

CASUALTIES, ETC.

PART II D. O. No.	DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
23	25/5/44	To be L/SERGEANT eff 9/5/44.	
CR	9/8/44	SOS 27 CAR (SFR), killed in action, eff 8/8/44.	

LOWE-MARTIN CO. LIMITED D63969

CERTIFICATE OF STANDING

This is to Certify that

Cpl. Jenne, L.M.,

27 C.A.T.R., 3 Cdn Army Tk Bde.,

Cdn Army Overseas

has successfully completed a correspondence course in

Field Sketching & Camouflage
(Subject)

Brighton School of Art
(School)

and has been granted 75% *standing*

Remarks by the Instructor

per *Director of Education,*
Canadian Legion War Service Inc.

Principal.

R.A.

File No 405-J-7988

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. D-46602. Name Jenne Lloyd Melville

Rank on Discharge Cpl. Date of Discharge 8-8-44

Authority for Discharge or Retirement Deceased

Served in:

				Non-qualifying service
Canada	from 18-9-40	to 27-10-42.		
	from	to		
United Kingdom	from 28-10-42.	to 3-6-44		
	from	to		
Italy	from	to		
Northwest Europe	from 6-6-44.	to 8-8-44. K/A.		
---	from	to		
---	from	to		

Eligible for award of:

1939 - 45 Star o.k.

~~Italy Star~~

France-Germany Star o.k.

Defence Medal o.k.

War Medal o.k.

Canadian Volunteer Service Medal o.k.

with clasp o.k.

M

G.P.

Verified by R. Menard

Date 22-7-46.

Carded JUL 23 1946

NO RIBBON DESPATCH

HA 165

File Copy

H.Q. 405-J-7988(Records-C)

Quote No._____

DEPARTMENT OF NATIONAL DEFENCE

ARMY

Ottawa, Canada,
17th August 1944

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

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

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

Regimental No. D46602 Rank Corporal

Surname JENNE

Christian Names Lloyd Melville

Nature of Casualty Killed in action

Date of Casualty 8-8-44

Address at time of enlistment Moc River, Que.

Date of enlistment: 4-9-40

Date of Birth 27-2-17

Marital Status (On enlistment) Single

Marital Status (Present) Married

Occupation Truck Driver

Name and address of Next-of-Kin WREN Isabel Esther Waters Jenne
WRN. Quarters HMS Tormentor, Warsash NR Southampton, Hants, England

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

GR/LF

5

28th August, 1944.

Mrs. Arabel Naus,
R.R. #2,
Compton, Quebec.

Dear Mrs. Naus:

It was with deep regret that I learned of the death of your son, D46602 Corporal Lloyd Melville Jenne, who gave his life in the Service of his Country in France on the 8th day of August, 1944.

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

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

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

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

AUG 24 1944

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

/EMA

Ph

405-J-7988

FIELD SERVICE

MBR 9/31B Army Form B. 2090A. 40/P & S/2551 (5504)

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

REGIMENT OR CORPS: 27 Cdn Armd Regt' — Squadron, Troop Battery or Company:

Officer's Personal No. (if known) / Soldier's Army No.: D-46602 — Rank: I/Sgt

Surname: Fenne — Christian Names: L.M.

Died — Date: 8 Aug 44 — Place: France

Cause of Death*: K/A

Nature and Date of Report: A.F.W.3014/85 d.16 Aug 44

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

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

Burial — Place: Chateau gardens 7F/1 046653 — Date: -

By whom reported: C.F.

State whether he leaves a Will or not

(a) in Army Book 64: No

(b) as a separate document: Not Received.

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

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

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

Station and Date: France, 26 Aug 44

Signature of Officer in charge of Section Adjutant-General's Office at the Base: W Bannie Lieut for Officer i/c

Cdn Sec GHQ 2 Ech 21 A Gp

P.A.

The Administrator of Estates.

Regimental No D-46602 ..... Rank Corporal .....

..... JENNE ..... Lloyd Melville .....
Surname Christian Names

Unit ..... 27th Army Tank Regiment CAC (CA) .....

Date of Death 8-8-44 ..... Place of Death Overseas (France) .....

Next-of-kin ... Wren Isabel Esther Waters Jenne Relationship .... Wife .....

Address ..... WRN Quarters HMS Tormentor Warsash NR Southampton Hants, Eng.

..... Mrs. Arabel Naus (Mother) .....

..... R.R. #2 Compton, P.Q. .....

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

Will ..... Wills d/18-9-40 and d/27-4-44 herewith .....

Date 8-9-44 .....

ESTATES BRANCH
SEP 19 1944
H.Q. OTTAWA
NATIONAL DEFENCE

MMD/EML

G.L. Laurin
Colonel
Director of Records

(W.E.L. Coleman) Colonel,
Director of Records,
for Adjutant-General.

405-J-7988

RECORDS OFFICE OVERSEAS.

CANADIAN MILITARY HEADQUARTERS.

GRAVES REGISTRATION CARD.

NAME JENNE, Lloyd Melville

PLACE & DATE OF BIRTH MONTPELIER, U.S.A. 27 Feb 1917

RANK L/Sgt

REGIMENTAL NO D-46602

UNIT 27 Armd Regt., CAC

NEXT OF KIN & ADDRESS Wife:

WREN Isabel Ester Waters JENNE, WRNS

Quarters, H.M.S. "Tormentor" WARSASH, Nr. Southampton, Hants, England.

PARTICULARS OF HOSPITALISATION

DATE OF ADMISSION

NAME & LOCATION OF HOSPITAL

DIAGNOSIS

PARTICULARS OF DEATH

DATE OF DEATH 8 Aug 44

PLACE OF DEATH France.

HRS

CAUSE OF DEATH KILLED

PARTICULARS OF BURIAL

DATE OF BURIAL 8 Aug 44

CEMETERY N.W. Portion of Chateau Vegetable Garden. 40/16 04706540.

PLOT NO ROW GRAVE

DEATH CERTIFICATE NO.

RELIGION Protestant

DATE 15 Oct 45

(M.BLUTEAU) Capt.
For COLONEL
Officer i/c Records,
CANADIAN MILITARY HEADQUARTERS.

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

D. 46602.
R. 4 (B)

CERTIFICATE OF DEATH

THIS IS TO CERTIFY that according to information received at the Department of National Defence from the overseas authorities, No. D.46602, Lance Sergeant Lloyd Melville JENNE, of the Royal Canadian Armoured Corps, Canadian Army, was killed in action on the 8th of August, 1944.

(H.M. Jackson) Lt.-Col.,
for Adjutant-General.

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

Department of National Defence,
OTTAWA, Canada.
9th December, 1948.

No D.46602 Rank ~~Corporal~~ L-Sgt. Name JENNE, Lloyd Melville

Unit C.A.C. Date of death 8th August, 1944.

Died at France.

Cause Killed in Action.

Death occurred on strength of Forces.H.Q. 405-J-7988

N/K ~~W.R.E.N.~~ WRXN Mrs. Isabel Esther Waters Jenne, Relationship Widow.

Address ~~W.R.N. Quarters, H.M.S. Tormentor, Warsash N.R. Southampton, Hants, England.~~

C/o Mr.& Mrs. R.D. Naus, R.M.D. #2, Compton, P.Q.

Remains buried in Cemetery

MR 046653 Sheet 7F/1 Chateau Gardens, France

Grave Location

CHK

OVER

BURIAL REPORT TO N.K.

RETURN TO BUR. OF STAT. FEB 26 1945

ROYAL MESSAGE DESP'D. SEP 6 1944

CAN. MESSAGE DESP'D. AUG 28 1944

REBURIAL

Bretteville-sur-Laize Cdn.Military Cem.
Bretteville-sur-Laize, France.

Grave 7, row C, plot 2.

HI & CR Form Despd. NOV 21 1946

Photographs
Despatched
SEP 5 1947

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER D46602 RANK Corporal SERVICE UNIT 27th Army Tank Regiment CAC (CA)

NAME JENNE, Lloyd Melville

DATE OF BIRTH 27th February 1917 DATE OF ENLISTMENT 4-9-40

MARITAL STATUS Married RELIGION C. of Eng.

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Wife NAME WREN Isabel Esther Waters Jenne

ADDRESS WRN. Quarters HMS Tormentor ADDRESS D.A.B. Warsash NR Southampton, Hants, Eng.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME Mrs. Arabel Naus (Mother)

ADDRESS (IF SOLDIER MARRIED OVERSEAS) R.R. # 2, Compton, P.Q.

AUTHORITY CAS. SIG. NO. 9134 H.Q. 405-J-7988

CASUALTY DETAILS Killed in action DATE 8-8-44

FRANCE

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO DATE 17-8-44

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

LF

DIRECTOR OF RECORDS

6

COPY FOR DOCUMENT FILE

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: IN THE FIELD (FRANCE)

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: JENNE (*Block letters*)

Given names: Lloyd Melville

Do not write in this space

4. RESIDENCE

Street: No.:

Official name of civil municipality or township: Moe River

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): U.S.A.

11. DATE OF BIRTH: February (Month) 27th (Day) 1917 (Year)

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

OCCUPATION

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

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		
MOTHER (Maiden Name)	Deceased	

19. Place of burial, cremation or removal: France

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

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: August (Month) 8th (Day) 19 44 (Year)

23. I HEREBY CERTIFY that I attended deceased from

....19.... to ....19....

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

24. CAUSE OF DEATH

I

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

(a) Killed in Action

due to

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

(b)

due to

(c)

II

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

III If a communicable disease is mentioned on this certificate, give

(a) Date of appearance ....19....

(b) Duration of disease ....days

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

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

State findings: Was there an autopsy?

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

Accident, suicide or homicide: (State which) Date ....19....

Manner of injury: (How sustained)

Nature of injury:

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

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

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

OVERSEAS CASUALTY CANADIAN ARMY

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

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)

FEB 26 1945

FOR COMPLETION AND RETURN BY

Form P. 64

Mrs. Arabel Naus,
R.R. #2,
Compton, P.Q.

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-J-7988 FD.169

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

September 26 1944

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

JENNE, Lloyd Melville, Corporal

D-46602, (C.A.)

ESTATES BRANCH OCT 13 1944 H.Q. OTTAWA NATIONAL DEFENCE

it is necessary that certain information regarding the deceased and his relatives should be furnished the Estates Branch. You are asked therefore to read the enclosed memorandum before completing pages 2 and 3 of this form. The particulars required are to be carefully filled in and the Declaration on page 4 should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths, Notary Public or a Commissioned Officer of any of His Majesty's Forces who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

If there is insufficient space for complete particulars to be given opposite any question on pages 2 and 3 of this form, the space under "additional remarks" on page 4 should be used.

effects to widow.

GC/

for Director of Estates.

M.F.W. 77
6-44 (4878)
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		ISOBEL ESTHER WOOLLEY	27	WRNS QUARTERS H.M.S. TORMENTOR WARSASH ENG.
2	Children of the Deceased and dates of their Births		None		
3	Father of the Deceased		~~None~~ MELVILLE GLYNDON JENNE	38	DIED JULY. 8. 1929
4	Mother of the Deceased		ARABEL TRCEY NAUS		
5	Brothers of the Deceased	Full Blood	GLYNDON TRACY JENNE	30	93 CHURCH ST. BURLINGTON VERMONT
		Half Blood	None		
6	Sisters of the Deceased	Full Blood	None		
		Half Blood	None		
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each.		Names and ages of their children (if any)		Address of their children
			None		

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	LLOYD MELVILLE JENNE
9	Date of his birth.	27th FEBUARY 1917
10	Place and date of his marriage.	APRIL 16th 1944 WORTHING ENGLAND
11	Place and date of his parents' marriage.	RICHFORD, VT. DEC. 23rd 1912

PARTICULARS OF DOMICILE

12	Place where deceased was born.	MONTPELIER VT.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) 12 Years Montpelier VT (b) 15 " Quebec. (c) (d)
14	Nature of employment before enlistment.	Truck driver & Prospector
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.	Moe River Compton Quebec

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	no
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	no
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	no
20	Amount of War Savings Certificates held by deceased. Indicate where located.	$50.00 mother RR #2 Compton Que
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	Reg. amount $50.00 Royal Bank of Canada Farnsville
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	No
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	14.000 shares Moe River Gold Mines Ltd. $1.00

OTHER PARTICULARS

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

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

(PLEASE TURN OVER)

DECLARATION

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

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

*Mother 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.

Mrs. Arabel Nans. (Signature of Informant)

R.R.#2 Compton. Que. (Address)

CERTIFICATE

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

See above Arabel Nans (Name of informant) is the Mother of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at Compton this 11th day of October 1944

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces. Justice of Peace Qualification J. P. District of St Francis

Address Compton Quebec

NOTE.—Before granting the above Certificate, care should be taken to see that the informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative specified is stated in its proper place in the Statement opposite.

(If the deceased has no living relatives of the degrees shown on page 2, the names and addresses and relationship of other relatives should be set out below.)

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

TO BE COMPLETED IN DUPLICATE.

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

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

WILL

(1) I, Lloyd Melville JENNE, (Names in Full), of the Township (City, Town, Village, Township)

Address in civil life.

of Compton, in the County ~~District~~ of Compton

Province of Quebec, Prospector (Civil Occupation)

Regimental No. D-46602, Unit 27 Cdn Armd Regt(SFR), 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 wife, Mrs Isabel Esther Waters JENNE, (WRNS No. 27265) now stationed at shore base "HMS TORMENTOR", Warsash, Nr Southampton, in the County of HAMPSHIRE, ENGLAND, (home address No. 17 Paragon Street, WORTHING, SUSSEX, ENGLAND) the whole of my Estate, both real and personal.

Original Received
JUN 15 1944
N.D.H. Quebec
DR197 Lmj

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

Lmj

(4) I appoint Mrs Isabel Esther Waters JENNE, (Name) Shore Base HMS Tormentor, Warsash, Nr Southampton, Hants, (Address)

WRNS No. 27265, (~~Civil Occupation~~), to be the ~~XXXXXXX Executor~~ Executrix of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 27th day of April, 19 44.

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

L M Jenne
(Signature of soldier)

First witness sign here.

(5) Signature G.W. Côté
Civil Address 107 Wellington S. Sherbrooke Que Canada
Civil Occupation Accountant

Second witness sign here.

Signature [illegible]
Civil Address 3571 Shuter St, Montreal, Que, Canada
Civil Occupation Chartered Accountant.

(Witnesses are not to be beneficiaries.)

[OVER]

To be made out in duplicate

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

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

INSTRUCTIONS.

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

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

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

---

(1) Name of Officer of Other Rank.....Jenne, Lloyd Melville.....
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank..D 46602.....Private

(3) Unit..Sherbrooke Fusilier Regiment 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.....NA

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

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

Name.....N/A

Postal Address.....N/A

[SEE OTHER SIDE]

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

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

(11) Is your father alive? 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 Naus, Arabelle, (Mrs)
Moe River, P.Quebec, Canada

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

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

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

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

If so, state the following particulars:—

Relationship N/A

Full Name N/A

Postal Address N/A

Amount contributed monthly during the past six months N/A

(18) Are you insured? No

If so, in what Company? N/A
(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.

Lloyd Melville Jenne
(Signature of officer or man)

Date 18th September, 1940

Aimé Piron Major ~~Lt-Col.~~
for Officer Commanding THE SHERBROOKE FUSILIER REGIMENT
C.A.S.F.

Date SEP 23 1940

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.

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

DEPARTMENT OF NATIONAL DEFENCE

NAVY — ARMY — AIR FORCE

4
ARMY

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Lloyd Melville (CHRISTIAN NAMES) JENNE (SURNAME)

PAYEE ADDRESS:
Mrs. Isabel E. JENNE,
W.R.N.S. Quarters,
H.M.S. Tormentor,
c/o G.P.O. London, Eng.

REGISTER NO. D-7179
FILE NO. 405-J-7988
DATE 16-4-45
SERVICE NO. D-46602
FINAL RANK OR RATING L/Sgt.
DATE OF DISCHARGE 8-8-44

DATE OF TERMINATION OF OVERSEAS SERVICE 8-8-44

A. TOTAL QUALIFYING SERVICE
NO. OF DAYS 1435 / 30 EQUAL TO 47 COMPLETE PERIODS AT $7.50 — 1410 (25) — $ 352.50

B. QUALIFYING OVERSEAS SERVICE
No. of Days 651 LESS 25 INELIGIBLE DAYS, EQUAL TO 626 DAYS @ 25c. PER DAY — 156.50
SEE PAR. 2 OVERLEAF FOR EXPLANATION

509.00

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	$ 1.90
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$ 1.25
ADDITIONAL PAY	$ .25
	$
	$
DEPENDENTS' ALLOWANCE 1/30 OF $37.20	$ 1.24
TOTAL	$ 4.64 ×7 = $ 32.48
NO. OF DAYS 651 / 183	×$ 32.48 — 115.54

RECEIVED
APR 20 1945
WAR SERVICE GRATUITY DIVISION, ARMY TREASURY

D. WAR SERVICE GRATUITY — 624.54

E. DEDUCTIONS — OVERPAYMENT OF
PAY AND ALLOWANCES $
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $
OTHER DEDUCTIONS $

F. TOTAL AMOUNT PAYABLE — 624.54

G. YOUR PORTION OF GRATUITY IS— 100%

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $______ OF $ = $
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

16

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

PREPARED BY	CHECKED BY
KRH	[signature]

TREASURY CHECKED BY	DATE
H. McClelland	24/4/45

[signature] Lt
SERVICE REPRESENTATIVE

TL

DISTRIBUTION OF SERVICE ESTATES

ARMY

Estates Form "P. 4"

Name: JENNE (Surname) Lloyd M. (Christian Names) No.: D.46602

A/Cpl. (Rank) C.A. O/S (Unit) 4-3-44 (Date of Death)

AMOUNT

L.P.C. $ 141.20

Date: 30-5-45

Other Credits 96.92

Total 238.12

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Widow	Mrs. Isabel Esther Waters Jenne, (W.R.N.S. - 27265). H.M.S. "TORMENTOR", Warsash, Nr. Southampton, Hants. England. (sole beneficiary under will)	£ 53/5/5

P4. TO TREAS. 3-7-45 QM

TO BE FORWARDED BY REG. MAIL DIRECT.

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	$238.12

CLASSIFIED BY

Original Signed by
K. L. McCUAIG

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

75M—2-45 (6771)
H.Q. 1772-80-2

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

CANADIAN ACTIVE SERVICE FORCE
OVERSEAS

LAST PAY CERTIFICATE

(All Ranks)

District..........

Dispersal Area..........

Regtl No. D. 46602. Rank and Name Jenne L.M. L/Sgt.

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

XXXXXXr Discharge).......... to.......... on 8th. Aug. 19 44.

Reason Death. Authority : C.C.L. "A" 478 d/13th. Aug. 44.

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

Dr

Particulars	Amount	
Balance Dr from last account		
First Monthly Payment		
Casual Payments		
Payments on Transfer or Discharge		
Assigned Pay $35.00 & $1.00.	36	00
Regimental Charges		
Public Stoppages (Give particulars):		
To Balance Cr — Free	71	20
To Balance Cr — Deferred	70	00
	141	20 ✓
Total	177	20

Cr

Particulars	Amount	
Balance Cr from last account	108	73
Regimental Pay 31 days @ $ 1.90	58	90
Tradesmen's Pay 31 days at $ .25¢	7	75
Additional Pay (Give particulars) .... days at $		
Allowances (Give particulars) .... days at $		
Def. Pay Interest.	1	82
By Balance Dr		
Total	177	20

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

Remarks:

Assnd. Pay of $35.00 (W) stopped eff. Sept. 44.

Assnd. Pay of $100. (W.S.C.) stopped eff. Sept. 44.

The above statement has been compiled from Treasury records, the latest paybook not being available.

ESTATES BRANCH
MAR 2 1945
H.Q. OTTAWA
NATIONAL DEFENCE

Compiled by F. Gough.

Checked by E.V. Collins

Date 15th. February 19 45.

Certified correct D. Rowley
for Chief Treasury Officer, Overseas

P.H.

Form No. 1

2641

Register No. D-7179

Nominal Roll No. D-149

H.Q. File No. 405-J-7988

TO: P.M.G.

CANADIAN ARMY (ACTIVE)
COMPUTATION OF SERVICE
WAR SERVICE GRANT

Regt. No.	Rank When S.O.S.	Surname	Christian Name in Full
D-46602	CPL	JENNE	LLOYD MELVILLE

Reason for Termination of Service:

1st Enlistment KILLED IN ACTION CARO ( )

2nd Enlistment CARO ( )

3rd Enlistment CARO ( )

TOTAL SERVICE

1st Enlistment	2nd Enlistment	3rd Enlistment
T.O.S. 4 SEP 40	T.O.S.	T.O.S.
S.O.S. 8 AUG 44 MD O/S	S.O.S. Nil MD	S.O.S. MD
Total Days 1435	Total Days	Total Days

TOTAL SERVICE 1435 DAYS

	Total Service	Less Non-qualifying Service	Net Service
WESTERN HEMISPHERE	784		784
OVERSEAS SERVICE	651		651
Totals	1435		1435
Add Non-qualifying Service			
TOTAL SERVICE			1435

14

EMBARKATION DETAILS:

1. TOS O/S 28 OCT 42
Date S.O.S. Overseas 8 AUG 44

2. Date S.O.S. Overseas

REMARKS:

KILLED IN ACTION
8 AUG 44

Computer's Signature [illegible]

Checker's Signature H Kennedy Sgt

Date Computed 18 Mar 45

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

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

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

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME D-46602 A/Cpl Jenne L M Dec'd

RECEIVED FROM Cdn Sec GHQ 2nd Echelon 21 Army Group
A-II7006 Gnr Schwartz M
B-8I759 Sgt Graves J G

CHECKED BY ..... DATE 3 Jan 45

I I	Red Identity Disc, Cap Badge.		

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

TRIPLICATE — with effects.

for OC 1 Cdn KSD