

D513353  
GORICHAN  
MICHAEL

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M.F.M. 2  
 (Combining M.F.M. 103)  
 1,000,000-12-43 (3115)  
 H.Q. 1772-39-1645  
 E.P. 96379

FOR USE OF N.D.H.Q. ONLY	
Date Received	_____
Checked	_____
Carded	_____
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ORIGINAL }  
 DUPLICATE } Copy designation to be shown  
 TRIPLICATE } by striking out terms not applicable.

Corps \_\_\_\_\_ **CANADIAN ARMY** Regimental Number **D-513353**

**ENROLMENT AND ATTESTATION PAPER**

1. **G O R I C H A N** (Surname) **M I C H A E L** (Christian Names)

2. Present Address **542 Charron Street, Montreal, P. Q., Canada**

3. (a) Date of birth **24 Mar 1918**  
 (b) Place of birth **Canada** **Quebec** **Montreal**  
(Country) (County or Province) (Town or Township)

4. (a) Place of birth of Father \_\_\_\_\_  
 (b) " " " " Mother \_\_\_\_\_  
(Country) (County or Province) (Town or Township)

5. Nationality **Canadian**  
(To what country do you now owe allegiance) if naturalized give certif. no. date and place of issue. If not naturalized so state.

6. Religion (state denomination) **Roman Catholic**

7. Trade or calling **CNR Shops**

8. (a) Name and address of last employer \_\_\_\_\_  
 (b) How long employed \_\_\_\_\_

9. Married, Widower or Single **Married** If married, how many children \_\_\_\_\_

10. Name of Next-of-Kin **Mrs. Mary Ann GARICHAN** 11. Relationship **Wife**

12. Address of Next-of-Kin **542 Charron Street, Montreal, P.Q., Canada**

13. Previous Service (Navy, Army or Air Force) Units and dates **30 days trg. Farnham**  
**22 Nov to 22 Dec 40**

14. (a) Former war service **NIL**  
 (b) In the armed forces of what country **NIL**  
 (c) Dates of such Service **N/A**

15. Decorations and medals, if any **NONE**

16. I do solemnly declare that the above particulars are true



Signature of Recruit, or in the case of N.R.M.A. personnel who refuse to sign, signature of officer under Regn. 8 (d) (I) R.A.S.R. 1941

**16a CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE ATTESTING OR ENROLLING OFFICER**

The 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 above named 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,  
 at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_\_

\_\_\_\_\_  
 { Signature of Magistrate, Justice Attesting or Enrolling Officer.  
 Office or Rank and Unit or appointment.

**ITEMS 17, 18 AND 19 WILL NOT BE COMPLETED UNLESS A MAN ENLISTS FOR GENERAL SERVICE ANYWHERE.**

**17. DECLARATION TO BE MADE BY MAN ON ATTESTATION**

I, \_\_\_\_\_, hereby engage to serve in any Active Formation or Unit of the Canadian Army so long as an emergency, i.e., war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization after said emergency ceases to exist, and in any event for a period of not less than one year, provided His Majesty should so require my services.  
 Date \_\_\_\_\_ (Signature of Recruit)

**18. OATH TO BE TAKEN BY MAN ON ATTESTATION**

I, \_\_\_\_\_, do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.  
 Witness \_\_\_\_\_ (Name) \_\_\_\_\_ (Rank) \_\_\_\_\_ (Signature of Recruit)

19. The above named recruit has made and signed the declaration and taken the oath before me.  
 at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_\_ (Signature of Magistrate, Justice or Attesting Officer.)  
 \_\_\_\_\_ (Office or Rank and Unit or appointment)

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

TO BE FILLED IN BY DISTRICT DEPOT	
Fingerprinted	YES
Photographed	YES
Occupational History Form Completed	YES

Record of Service of GORICHAN  
(Surname)

MICHAEL  
(Christian Name)

Regimental Number D-513353

QUALIFICATIONS

Military 30 days initial trg.  
 Business or Professional NIL  
 Trade or Civil CNR SHOPS  
 Technical NIL  
 Languages ENGLISH

EDUCATIONAL QUALIFICATIONS

High School } NIL  
 or }  
 Collegiate } (years completed)  
 Graduation } NIL  
 or }  
 Matriculation } (specify)  
 \*College NIL  
 \*University NIL

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

All personnel whether G.S. (General Service) or N.R.M.A. will be taken on strength as private soldiers. Postings, appointments and promotions should be shown in the spaces below.

This column for checking purposes only	Record of Postings, Promotions, Reductions, Transfers, Casualties, Reports, etc, from and including date taken on strength.	Rank Shown	Effective Date	Unit	Place	AUTHORITY	
						Part II D.O. No. Cas. List, etc.	Dated
	Posted to NRMA CD 3 and att to TTC "C" L&RSR and posted to "A" Coy.	Pte.	21-5-42	L&RSR	Connaught	R21	23 Jun 42
	Having completed 4 mos. cont. service is granted \$1.40 per diem.	"	15-4-43	"	Dartmouth	92	17 Apr 43
	Having completed 6 mos. cont. service is granted \$1.50 per diem	"	1-5-43	"	"	121	22 May 43
	Having been granted permission to marry, 14 Jun 43, was married on 14 Aug 43 to: Miss Mary Ann McVarrie Aitchison, (wife), 542 Charron St., Point St.Charles, Montreal, Quebec.		14-8-43	"	Port Alberni	197	31 Aug 43
	N-of-K is changed from Mrs. Mary Gorichan(Mother) 542 Charron St., Montreal, P.Q., to Mrs. Mary Ann GORICHAN (Wife), 542 Charron St., Montreal, P.Q.	"	24-12-43	RRC	Prince George	256	24 Dec 43
	Granted Furl. & leave 10 Aug 44 to 27 Aug 44	"	10-8-44	"	Fd 2 Ech	93	11 Aug 44
	SOS CDN ARMY (CANADA) TOS CDN ARMY (O/S) ON TRANSFER DISEMBARKED IN U.K.		2 JAN 45	RRC	UK	1	13-1-45
	SOS TO 5 CTR TO S FROM RRC		10 . . . 11 . . . 12 . . .	5 CTR	UK	12	14-1-45

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

**CERTIFICATE OF MEDICAL EXAMINATION**

20. Surname GORICHAN Christian Names Michael  
 Reception Centre ..... Military District ..... Date .....

The medical examination is divided into three parts. The history in Part I, item 24, (a) to (z), is taken by a Medical Officer. Part II sections items 25, 26, 27 and 28 are filled in by the respective Specialist. Part III is completed by the President of the Board.

21. Age 26 Eyes (Colour) Grey Hair Brown Height 5' 10" Weight 167  
 Identification marks and scars Scar left knee

22. Urinalysis (a) Albumen ..... (b) Microscopic (if albumen positive) ..... (c) Sugar .....  
 " recheck (a) " ..... (b) " " ..... (c) Blood sugar .....

23. X-Ray No. .... Laboratory ..... Report .....

**Part I. History**

24. Have you now or did you ever have any of the following diseases?

(a) Eye trouble .....

(b) Nose, throat, sinus or ear trouble .....

**Part II. Physical Examination**

25. The Medical Officers will complete this part and indicate "negative" or describe positive findings.

Vision (without glasses) Rt. 20/..... Lt. 20/.....

(with glasses) Rt. 20/..... Lt. 20/.....

Hearing (C.V.) Rt. .... Lt. ....

Ears (Drums) Rt. .... Lt. ....

Nose ..... Throat .....

Sinuses .....

**Remarks and Diagnosis**

Pulhems grading H..... E.....

R.C.A.M.C.

(Signature E.E.N.T. Specialist)

24. (Cont'd)  
 (c) Any broken bones or other injuries .....

\* Head injuries .....

(d) Spinal trouble .....

(e) Foot trouble .....

(f) Operations .....

(g) Ruptures .....

(h) Kidney or bladder trouble .....

(i) Gonorrhoea .....

(j) Varicose veins .....

(k) Haemorrhoids .....

(l) Rheumatism or joint trouble .....

26. Cranium .....

Spine .....

Extremities .....

Hernia .....

Genito-Urinary .....

Rectum .....

Varicose Veins .....

Feet .....

Abdominal .....

**Remarks and Diagnosis**

Pulhems grading P..... U..... L.....

R.C.A.M.C.

(Signature of Surgeon)



**FIELD RETURN UNIT**

9 to B

No. 2513353 RANK RFN NAME GORICHAN MICHAEL \*Married ✓  
\*Widower  
\*Single

Place of <sup>\*Appointment</sup> CONNORNAUGHT RANGES ONT. Date of <sup>\*Appointment</sup> 21-5-43  
<sub>\*Enlistment</sub>

RATE OF PAY

D.O. No.	Date of D.O.	Rank	Group	P.F. or A.S.	Daily Rate	Effective Date	If liable Pen. Ded.	REMARKS
<u>121</u>	<u>22-5-43</u>	<u>RFN</u>		<u>NRMA</u>	<u>1.50</u>	<u>1-5-43</u>		

All ~~2~~ 5.00 Ded (18)

Name and Address of Assignees				Effective Date	Amount	Date Application Forwarded	Relationship	Amount Awarded	Effective Date
<u>N. of K Mrs. Mary GORICHAN (Mother)</u> <u>542 CHARRON ST. MONTREAL, P.Q.</u>									
<u>MRS. MARY GORICHAN</u>				<u>9/1/43</u>	<u>23.00</u>	<u>30-8-43</u>	<u>WIFE</u>	<u>37.20</u>	
<u>542 CHARRON ST. (MOTHER) MARYS</u>					<u>30.00</u>	<u>DA CANCELLED 31 MAY 44.</u>			
<u>MTL. P.Q. MFM18 (WIFE) WEF 1 JUN 44.</u>						<u>MARRIAGE ANNULLED</u>			
<del><u>5 F. LOAN BOND</u></del>				<del><u>1-1-43</u></del>	<del><u>8.40</u></del>				
<u>6VLB. 1.5/31. 10.44</u>					<u>8.40</u>		<u>Vol</u>		
Total.....									

\*Outfit { Allice. \$ ..... Paid on.....  
\*Clothing {  
Rehabilitation Grant \$ ..... Paid On.....  
\*Delete words which are inapplicable.

**M. F. M. 14**  
200 M-2-43 (8705)  
H.Q. 1772-39-1662

In Receipt of Pension under Pension Act or Militia Pension Act (1910) \$ ..... P.A.  
Occupational Form Completed. 6.470

M.F.M. 14A  
DOM-5-42 (4724)  
H.Q. 17-39-1662

CARD SEQUENCE No. 2

No. 2513353

RANK RFN

NAME GORICHAN M.

CASUALTIES, ETC.

PART II D. O.		NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
No.	DATE		
<u>260</u>	<u>29.12.43</u> <del>28.12.43</del> DEC 29	Gr'd.5 days N Y Leave & acc, Leave DEC 30/43 to JAN 7/44 Auth, R, A, at, 50 Per diem	
<u>76</u>	<u>5.7.44</u>	Adm. to Nanaimo Mil Hosp (Sick) 23.6.44	
<u>77</u>	<u>7.7.44</u>	Disch from Nanaimo Mil Hosp wef 1.7.44	
<u>93</u>	<u>11.8.44</u>	Granted 14 Days. Furlough & 4 Days Accum. Leave with R, A.	<u>10.8.44 to 27.8.44.</u>
<u>101</u>	<u>5.9.44</u>	Att. to Special Infantry Training Camp Vernon B.C.	
<u>2</u>	<u>29.11.44</u>	F, A, P. except pay 31.8.44. Ceases att to Spec. Inf. Trg. Camp, Vernon, B.C. F.A.P. except pay wef 29.11.44.	



## CASUALTIES, ETC.

PART II D. O.		NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
No.	DATE		
1	13.1.45	S.O.S. Cdn Army (Canada) wef 2 Jan 45: T.O.S. Cdn Army (Overseas) wef 3 Jan 45:	
1	13.1.45.	SOS RRC to 5CITR wef 11.1.45	
12	14.1.45	TOS 5 CITR fr. Rrc, Wef 12 Jan 45	
103	30.4.45	SOS 5 CITR to X4 CIC wef 29 Apr 45: SOS (X4 List CIC 10 CBR Bn) to 13 Bn wef 4.5.45	
	CR 11/5/45	SOS X4 LIST 13 Bn To RTRC (BW) V.E.F. 15.5.45. T.O.S. From X4 LIST (BW) wef 16/5/45	
	6050 11/9/45	Award France-Germany Star.	
	57 28-9-45	Att. 9 CRD) Granted SI&MA wef 30-9/9-10-45	
	64 14-10-45	Gtd 7 dys L&MA wef 22-10/28-10-45	
	66 2-11-45	Lve & M.A. 2/8-11-45	
	69 13-11-45	Cease att 9 CRD & SOS GAO 14-11-45	

CASUALTIES, ETC.

PART II D. O.		NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
No.	DATE		
285	26-11-45	<p>POS DD4 from CA (O/S) wef 15-11-45</p> <p>Granted leave &amp; rations allow from 20-11-45 to 6-1-46</p> <p>Disch RO 1029-<sup>10</sup> Gr 100.00 cloth allow &amp; 30 days</p> <p>pay of rank wef <del>5</del>X-1-46</p>	
6	7-1-46	<p>Comm. leave 38 days credited to</p>	12-2-46
		(WHILE IN M.M.H.)	

M. F. M. 14  
 300M-5-41 (323-4)  
 H. Q. 1772-39-1662

m-1

\*MARRIED  
 \*WIDOWER  
 \*SINGLE

NO. **D513353** RANK **Pte** NAME **GORICHAN Michael**

PLACE OF ENLISTMENT **Connaught Ranges, Ont.** DATE **21-5-42**

RATE OF PAY

**'A' COY**

D. O. NO.	DATE	RANK	GROUP	P. F. OR A. S.	DAILY RATE	IF LIABLE PEN. DED.	REMARKS
166 1-	10-42	Pte		<b>H.D.</b>	1.30		Next of Kin
92 17-	4-43	Pte			1.40		Mrs Mary Ann McVarrig
121 22-	5-43	Pte			1.50		GORICHAN (Wife)
							542 Charron St.,
							Montreal Que.
							Pt. St. Charles

ASSIGNMENTS

DEPENDENTS' ALLOWANCES NO.

ASSIGNEE	EFFECTIVE DATE	AMOUNT	TOTAL	DATE APPLICATION FORWARDED	RELATIONSHIP	AMOUNT AWARDED	EFFECTIVE DATE
Mrs. M. A. Gorichan	9/43	23.00	<del>23.00</del>	30-8-43	Wife	36.40	
5" V" LOAN BOND	1.11.43	8.40	31.40				

OUTFIT OR } ALLOWANCE \$ PAID ON  
 CLOTHING }  
 REHABILITATION GRANT \$ PAID  
 \*DELETE WORDS WHICH ARE INAPPLICABLE

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

OCCUPATIONAL FORM COMPLETED

## CASUALTIES, ETC.

PART II D. O.		NATURE AND PARTICULARS	"A"	IF IN HOSPITAL NOTE NAME
NO.	DATE			
166	1-10-42	T.O.S. L&RSR.CA(A) member H.D. eff 1-10-42		
10	12-1-43	Att except Pay to 1st Halifax Coast Reg't., Osborne Head, eff 11-1-43.		
36	11-2-43	Cease to be att to 1st Hal. Reg't eff 16-1-43		
91	16-4-43	Granted furlough from 19-4-43 to 2-5-43		
92	17-4-43	Granted \$1.40 per day FR&I 144 eff 15-4-43		
121	22-5-43	Granted \$1.50 per day R.O. 2772(3) I-5-43		
141	1506-43	Granted permission to Marry eff 14-6-43.		
173	2-8-43	Granted furlough from 2-8-43 to 15-8-43		
197	31-8-43	Was married 14-8-43		
213	18-9-43	SOS L&RS to Royal Rifles of Can 19-9-43		
195	25.9.43	TOS.RRC.wef .20,9.43 on trans from L R&S		
232	24.11.43	Granted 6 days camp leave 7.6.12/11.12.43 with R.A.		
245	DEC 10 1943	Cease to be Mem.H.D.on Decn 'g an NRMA Soldier		
256	24-12-43	Eff. 1 12 43 Next of kin changed from Mrs. Mary Brickan (mother) to Mrs. Mary Ann Brickan (wife) 542 Charon St. Mt P. 2.		

		except pay to No. 20 Coy., Veteran's Guard of Canada, J&S Magazine, w.e.f. 1201 hrs. 11 Mar 43.	"	11-3-43	"	"	61	12-3-43
		Ceases to be On Attachment for all purposes except pay, to No. 20 Coy., Veteran's Guard of Canada, J&S Magazine, w.e.f. 1400 hrs. 14 Mar 43.	"	14-3-43	"	"	63	15-3-43
		On Attachment to Lawlor's Island Military Hospital, for rations & quarters, w.e.f. 5 Apr 43.	"	5-4-43	"	"	86	10-4-43
X		Granted furlough from reveille 19 Apr 43 to tattoo 2 May 43. T.W. A-222727 from Dartmouth, N.S. to Montreal, Que.	"	19-4-43	"	"	91	16-4-43
		Having completed four months continuous service is granted \$1.40 per day.	"	15-4-43	"	"	92	17-4-43
		Ceases to be On Attachment for rations & quarters to Lawlor's Island Military Hospital 18 Apr 43.	"	18-4-43	"	"	98	26-4-43
X		Having completed six months continuous service is granted \$1.50 per day.	"	1-5-43	"	"	121	22-5-43
		On Attachment to 52nd Coast Bty., R.C.A., for all purposes except pay, w.e.f. 1200 hrs. 31 May 43 to 1100 hrs. 14 June 43.	"	31-5-43	"	"	129	1-6-43
		Granted permission to marry: Miss Mary Ann McVerrie Aitchison, 2612 Colrairie St., Pt. St. Charles, Montreal, Quebec, w.e.f. 14 June 43.	"	14-6-43	"	"	141	15-6-43
		Granted furlough from 2 Aug 43 to 15 Aug 43.	"	2-8-43	"	Port Alberni	173	2-8-43
		T.W. A-429276 from Port Alberni, B.C. to Winnipeg, Man.	"	2-8-43	"	"	173	2-8-43
X		Having been granted permission to marry, 14th June 43, was married on 14 Aug 43 to: Miss Mary Ann McVerrie Aitchison, (Wife) 542 Charron Str., Point St. Charles, Montreal, P.Q.	"	14-8-43	"	"	197	31-8-43
		S.O.S. on transfer to R.R. of C.	"	19-9-43	"	"	213	18-9-43
		T.O.S. R.R.C. on transfer from Lanark & Renfrew Scottish Regt.	"	20-9-43	RRC	WAINWRIGHT	Pt. II No. 195	25-9-43
24-11-43	RRC	Granted six(6) days compassionate leave from 6 Dec 43 to 11 Dec 43 incl and authorized to draw allowance in lieu of rations at the rate of .50 per diem in accordance with the provisions of F.R. & I. 196(4).	"	6-12-43	RRC	Prince George	" " 232	24-11-43
		Cease to be Mem. H.D. on becom'g an NRMA Soldier	"	DEC 1 - 1943	"	"	"	DEC 1 1943

Eff. 1 12 43



Regimental No. D.513353 Rank Rfn.

Sheet No. 1

M.F.M. 1 & 2 (a)  
300M-1-43 (8255)  
H.Q. 1772-39-1646

Name GORICHAN M.

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc.—

	Rank Shown	Effective Date	Unit	Place	Authority	
					D.O. Number	Dated
Next of kin is changed from Mrs. Mary Gorichan (mother) <del>542 Charron St.</del> Montreal Que to Mrs Mary Ann Gorichan (wife) <del>542 Charron St. Montreal, Que.</del>	Rfn.	24-12-43	RRC	Prince Geo.	256	24-12-43
Granted 5 days new years leave plus accumulated leave from 30 Dec 43 to 9 Jan 44 and auth'd to draw R/A of .50 per diem under F.R. & I. 196(4)	"	30-12-43	"	" "	260	29-12-43
Admitted to Nanaimo Mil Hosp. (Sick)	"	23 Jun 44	"	Fd 2 Ech.	#76	5 Jul 44
Disch. from Nanaimo Mil. Hosp	"	1 Jul 44	"	" " "	#77	7 Jul 44
<i>R-A SIN GRANTED FOR LEAVE TO AUG 27 1944</i>		<i>AUG 10 1944</i>			93	<i>11 AUG 44</i>
Att. to Special Inf Trg. Camp, Vernon, B.C. for a/p ex pay.	"	31 Aug 44	"	"	101	5 Sep 44
SOS CDN ARMY (CANADA)						
TOS CDN ARMY (O/S) ON TRANSFER						
D. MARKED IN U.K.						
SOS TO 5 CTR						
TO 5 FROM RRC						
<i>Change of N of K. Now is Mrs. Mary Gorichan (Mother)</i> <i>VER. 143. 542 Charron St. Montreal P.Q. Canada ✓</i>	<i>Rfn</i>	<i>2 JAN 45</i>	<i>RRC</i>	<i>UK</i>	<i>1</i>	<i>13-1-45</i>
<i>C138 SOS TOS SOS to X4 List CIC</i>	<i>Pte</i>	<i>12</i>	<i>5 CTR</i>	<i>UK</i>	<i>12</i>	<i>14-1-45</i>
	<i>Pte</i>	<i>13-1-45</i>	<i>5 C. 9. 6. R.</i>	<i>U.K.</i>	<i>13</i>	<i>15-1-45</i>
	<i>Pte</i>	<i>29 Apr 45</i>	<i>5 C ITR</i>	<i>UK</i>	<i>103</i>	<i>30 Apr 45</i>
<i>C138 SOS TOS SOS X4 List (13Bn) to RHC</i>	<i>Pte</i>	<i>15 May 45</i>	<i>X4 of Gen Small 2129</i>		<i>120</i>	<i>24 May 45</i>
<i>TOS TOS from X4 Blk Wtch</i>	<i>Pte</i>	<i>16 May 45</i>	<i>RHR</i>	<i>2129</i>	<i>31</i>	<i>26 May 45</i>
TOS from C.A. (O/S) (Reported 20 nov 45 ) (XUK) 239).						
Granted LEAVE (R.O. 5520(9) ) and ration allowe, (Art 196(4) FR & I) from 20 nov 45 to 6 Jan 46						
Adm sick to Long. Mil. Hosp.	Pte	15 Nov 45	4 DD-	Mtl Sth	285	26 Nov 45.
Rem. from Lon g. Mil. Hosp. to Mtl. Mil. Hospp	Pte	22 Nov 45	4 DD	Mtl. Sth.	8	9 Jan 46.
	Pte.	26 Nov 45	4 DD	Mtl. Sth.	8	9 Jan 45.





# SERVICE AND CASUALTY FORM

PART I (For all ranks)

**M.F.M. 4 (Part I)**  
A.F.B. 103 (Part I)  
150M-3-42 (3885)  
H.Q. 1772-39-1649

Unit N.R.M.A. D.O. #3  
Royal Rifles of Canada, C.A. (A)

Regimental Number D-513353

<p>1. Surname <u>GORICHAN</u></p> <p>2. Christian Names <u>MICHAEL</u></p> <p>3. *Substantive Rank and Appointment <u>R.F.N.</u> *Acting Temporary or Local Rank giving date</p> <p><small>*To be entered in pencil to facilitate alteration.</small></p> <p>4. Place of birth <u>MONTREAL QUEBEC CANADA</u></p> <p>5. Date of birth as declared on attestation <u>24 MARCH 1918</u></p> <p>(A)</p> <p>6. Date of enlistment <u>21/5/42</u></p> <p>7. Place of enlistment <u>N.R.M.A. CLRG DPT. No. 4</u></p> <p>8. Residence at time of enlistment <u>542 CHARRON ST. MONTREAL QUE.</u></p> <p>9. (B) Special conditions (if any) of enlistment or rate of pay</p> <p>10. (C) Any subsequent variations of conditions of service</p> <p>11. Religion <u>R.C.</u></p> <p>12. If married, state date <u>14/1/43</u></p> <p>13. Trade on enlistment <u>C.N.R. SHOPS</u></p> <p>14. Corps, trade and grade</p> <p>15. (D) Qualifications</p> <p>16. (E) Miscellaneous entries <u>1.50</u> <u>1-5-43</u></p>	<p>(17) Regiment or Corps <u>INFANTRY</u></p> <p>Unit (Battn., etc) <u>R.R.C.</u></p> <p>(18) Medical</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>Category</th> <th>Date</th> <th>Authority</th> </tr> <tr> <td><u>A</u></td> <td><u>21/5/42</u></td> <td><u>M.F.M. 103 PAGE 1</u></td> </tr> <tr> <td><u>A</u></td> <td><u>20/9/43</u></td> <td><u>M.F.M. 10.3 PAGE 4</u></td> </tr> </table> <p style="text-align: center;"><u>20 Sept 43</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Y</td><td>O</td><td>B</td><td>P</td><td>U</td><td>L</td><td>H</td><td>E</td><td>M</td><td>S</td> </tr> <tr> <td>18</td><td>1</td><td>1</td><td>1</td><td>1</td><td>1</td><td>1</td><td>1</td><td>1</td><td>1</td> </tr> </table> <p>(19) Next of kin (entries to be made in pencil)</p> <p><u>Mrs Mary Gorichan (Mother)</u> <u>542 Charon St.</u> <u>Montreal, P.Q. Canada</u></p> <p>(20) E</p> <p>(21) E</p> <p>(22) E</p>	Category	Date	Authority	<u>A</u>	<u>21/5/42</u>	<u>M.F.M. 103 PAGE 1</u>	<u>A</u>	<u>20/9/43</u>	<u>M.F.M. 10.3 PAGE 4</u>	Y	O	B	P	U	L	H	E	M	S	18	1	1	1	1	1	1	1	1	1
Category	Date	Authority																												
<u>A</u>	<u>21/5/42</u>	<u>M.F.M. 103 PAGE 1</u>																												
<u>A</u>	<u>20/9/43</u>	<u>M.F.M. 10.3 PAGE 4</u>																												
Y	O	B	P	U	L	H	E	M	S																					
18	1	1	1	1	1	1	1	1	1																					

G.D

- 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.

CFEF	✓	2nd	85	Score
NO	R	0	5	44
MD	MD	MD	YOB	Disp
—	4	4	18	

(a) Report		(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
Date	From whom received						
20.9.43		R.R.C.	T.O.S. from L.P.S.R.	Hainwright	20.9.43	R.R.C.	P.T.II #195
6-7-44	O.C.	R.R.C.	Adm. Nanaimo Mil. Hosp. (Sick)	Field	23-6-44	Rfn	D.O.76 d/5-7-44
	O.C.	R.R.C.	Disch. from Nanaimo Mil Hosp	Field	1-7-44	Rfn	D.O. 77 d/ 7 Jul 44
	"	"	14 ds furl. & 4 ds acc. leave with R.A. (T.W. No.A-657573 )	"	27-8-44	"	D.O.93 d/11-8-44
6-9-44	"	"	Att. Sp Inf Trg Camp FAP exc pay	Field	31-8-44	"	D.O.101 d/5-9-44
			granted 1.50 per day	Saltmarsh	1.5.43	Pte	121 27 May 43
		ARC	SOS CDN ARMY (CANADA)	UK	(2 JAN 45)		
			TOS CDN ARMY (O/S) ON TRANSFER		3	Rfn	1 13-1-45
			DISSEMBARKED IN U.K.		10		
			SOS TO 5 CTR		H 10		
			5 CTR TO 5 FROM RRG	UK	21	Pte	12 14-1-45
			Next of Kin Now is Mrs. Mary Gorichan (Mother)	U.K.		Pte	13-15 Jan 45
			542 Charbon St. Montreal Canada				
		5CITR	SOS to X-4 List (CIC)	U.K.	29 Apr 45	"	103d/30 Apr 45
			Embarked UK 30 Apr 45				
			Disembarked NWE 1 May 45				
			TOS X-4 List (2 Bn) Inf Gen Unall wef 30 Apr 45				
			10 Bn				
			X4(13Bn) Inf Gen Unall wef 30 Apr 45				
			RHC TOS from X-4 List RHC	NINE	15.5.45	Pte	120/45
			AWARDED THE FRANCE & GERMANY STAR	Field	16 May 45		31-45
							50 1945

Approved by RRC DO 6/45  
" " 5 CTR DO 29/45

Next of Kin Now is

X4(13Bn) Inf Gen Unall wef 30 Apr 45

No. D-513353 RANK Pte.

NAME GORICHAN, Michael

~~MARRIED~~  
~~WIDOWER~~  
\*SINGLE

PLACE OF ENLISTMENT

Connaught Ranges, Ont.

DATE 21-5-42

RATE OF PAY 1.30

D.O. No.	DATE	RANK	DAILY RATE	REMARKS
R-21	23-6-42	Pte.	1.30	Next of Kin Mrs. Mary Gorichan (Mother) 542 Charron St., Montreal Que.

ASSIGNMENTS

DEPENDENTS' ALLOWANCES

ASSIGNEE	EFFECTIVE DATE	AMOUNT		TOTAL	DATE APPLICATION FORWARDED	RELATIONSHIP	AMOUNT AWARDED	EFFECTIVE DATE
NIL						NIL		

\*DELETE WORDS WHICH ARE INAPPLICABLE

M.F.M. 111  
50M-6-41 (898)  
H.Q. 1772-39-1801

## CASUALTIES, ETC.

PART II D. O.	
No.	DATE
R-21	23-6-42
R97	30-9-42

TOS L&R S Reg't posted to "A" Coy eff 21-5-42  
Ceases to be attached to TBTC "C" on posting  
to L&RSR as member H.D. eff. 30-9-42.

DEPARTMENT OF NATIONAL DEFENCE  
(ARMY)  
SUPPLEMENT TO PERSONNEL SELECTION RECORD  
(M.F.M. 196A)

To be attached to M.F.M.  
196, and to be initiated  
only when M.F.M. 196 is  
completely filled

D 513353

Regtl. No.

PTE.

Rank

GORICHAN, M.

Surname

AGE: 27

First Name

ADDITIONAL FOLLOW-UP:

Y O B P U L H E M S

18 1 1 1 1 1 2 1

PLANS:

Return to C.N.R. Lumber yard, Cartierville, Quebec.

APPRECIATION OF PLANS:

A 27 year old man, who was employed as a labourer for the C.N.R. for 18 mos. Expects to start working again at the same job as soon as discharged.

A man of limited ability, who would appear best fitted for continual employment in the labouring field.

Has no special rehabilitation problem since he expects to make his home with his parents.

UNRESOLVED ITEMS:

Is quite anxious at present to make use of all gratuities and credits as soon as discharged. Will need further counselling and reassurance on the time limit and what Re-establishment credit is for.

9 REPAT DEPOT,  
12 Oct, 45.

  
J. Carpenter, Capt. SPO

W. D. 12 PREPARED AT 4 D. D.  
Date ..... JAN 4 1946 .....

REWRITTEN

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

DEPARTMENT OF NATIONAL DEFENCE (Army)

Royal Rifles of Canada Arm or Corps

Personnel Selection Record

Trade (if Tradesman or Trade Trainee)

General Duties

Work in Arm (if Non-Tradesman)

I. D-513353 Rfn GORICHAN, Michael NRMA 26 -- English Ukrainian RR of C., Vernon, B. C. 16 Oct 44

II. Revised Examination "M" Connaught Ranges 22 May 42 77 V Subtests 8 5 2 9 16 8 10 19 Subtotals 15 25 37

Table with columns Y, O, B, P, U, L, H, E, M, S and values 18, 1, 1, 1, 1, 1, 2, 1

III. Educational Background Grade 7 at 17 yrs of age. Part time study in Ukrainian schools. Frequent transfers. No studies since.

IV. Occupational Background Labouring in lumber yard, CNR - loading and unloading cars. Wage - 24 dollars per week.

Table with columns Y, O, B, P, U, L, H, E, M, S and values 18, 5, 1, 1, 1, 1, 1, 1

V. Military Background 30 days trg under NRMA, 1940 at Farnham. Enrolled May 42. TOS Lanark and Renfrew Scottish Regt. BT and AT with unit, Sussex, N.B. Employed in rifle coy. TOS Royal Rifles of Canada, Sep 43. Battle drill trg. Continues to date in rifle coy. No special courses. Wainwright with unit, '43; Combined operations, Courtenay, '44. Clear

VI. Other Personal History and Appraisal MFM 6. Born 24 March 1918, Montreal. Married, but separated from wife - no children. Parents living in Montreal; father employed in CNR shops. One brother overseas in army. One married sister.

Height - 5 feet 11 inches. Weight - 165 lbs. In fairly good health.

Attends movies. Member of Russian Orthodox Church. Seldom reads. Limited social habits. Nonsmoker.

This is a very slow and limited soldier, not at all well adjusted to army life. He has vague complaints of "feeling cold at all times, even in summer and when running", of disinclination to eat for this reason and of indigestion which he thinks may come from this and from his army dentures. In the writer's opinion this is rather poorly planned malingering in the hope of obtaining a referral to the Psychiatrist.

Gorrichan's knowledge of trg, for a man who has been in the army 2 1/2 yrs, is shockingly limited. He seems to have no real familiarity with the Bren gun, only the vaguest knowledge of map-reading or gas trg - (Over)...

VII. Recommendations (1) Suitable to continue present duties, CIC operational. (2) Observe trg record closely. If unsatisfactory, suggest referral to AE in one month.

W. D. 12 PREPARED AT 4 D. D. Date JAN 4 1946

(Signed) R.L. Haig-Brown (R.L. Haig-Brown) Capt. Army Examiner

D-513353

FURTHER INFORMATION AND FOLLOW-UP

for instance, though he has been several times in the gas chamber he claims to have no knowledge at all of the properties or limitations of chlorine gas. He says he has been on fatigues for the past two months. In his present apparent state of trg Gorichan is not a safe or useful soldier at all and he will not improve on fatigues. He can read and write quite well and in spite of his slowness there seems no sufficient reason why he should not be able to absorb trg. It seems very doubtful that he is really trying. It is suggested that he be put back on trg., closely watched and put through T's OET at the end of an adequate refresher period; should he fail, refer back to AE.


6 Dec 44.

No change since las interviewed.

Rec: Suitable CIC Operational G.D.

Royal Rifles of Canada  
Vernon B.C.

YOB PULHEMS  
18 111121

  
(GEO.H.POLAND) Lt.  
Army Examiner.

SOS 5 CTR to X-4 List (CIC) wef 24-5-45

# RECORD OF SERVICE

No.: G.S.  
No.: NRMA **D 513353**

1. CHRISTIAN NAMES **MICHAEL** SURNAME **GORIC HAN**

2. Date of Birth **24 MAR 1918**  
 3. Date of enrolment NRMA **21 MAY 1942**  
 4. Date of enlistment G.S.  
 5. N. of Kin  
 Relationship  
 6. Address of N. of Kin  
 7. Marital Status: **M**  
 8. Occupation on enlistment: **C, N, R. SHOPS**

15. TRANSFERS, POSTINGS etc

	WEF	UNIT	DO
SOS to X46 CIC	29 Apr 45	SCIR	103
TOS			
SOS to X46 (13 Bn) to RHC	15 May 45	X2334	120
TOS from X46 Bk with	16 May 45	RHR	21
Emb. UK. 30 Apr 45: UKAG/39/18E.			
Disemb. 26.7.17 May 45. AFW 5169/1132. 6 June 45.			
Emb. NWE & Disemb UK	27 Sep 45	RHR	57
Att fap to 9 Cdn Repat	28 Sep 45	RHR	57
Granted 10 day PL with MA			
From 30 Sep 45 to 9 Oct 45	30 Sep 45	RHR	57
Granted 7 Day PL with MA	22 Oct 45	RHR	64
Granted 7 days PL with MA	2 Nov 45	RHR	66
CTBARMP to 9 Cdn Repat Depot and SOS CA(OS)XUK 237	14 Nov 45		69

9. RANK, ACTING OR CONFIRMED  
**Pte**  
 WEF **21 May 42** AUTH: **21/42**

10. SERVICE (Country)

COUNTRY	FROM	TO	DAYS
<b>CANADA</b>	<b>21 May 42</b>	<b>27 Jan 45</b>	<b>958</b>
<b>21. K</b>	<b>3 Jan 45</b>		<b>88</b>

**W. HEMI**  
**03**

11. HONOURS AND AWARDS  
**AWD. FRANCE & GERM STAR**  
 WEF AUTH: **50-45**

12. QUALIFICATIONS AND COURSES

QUALIFICATION	PLACE	WEF	RESULT	AUTH.

13. HOSPITALIZATION

WEF	UNIT	DO or CL

16. MED CAT OR PULHEMS

Y	O	B	P	U	L	H	E	M	S

17. M.D. PREFERENCE:  
 18. RE-ALLOC. PREFERENCE  
 1.  
 2.  
 3.

14. PUNISHMENTS

WEF	UNIT	PLACE	D.O.	POINTS:
				<b>85</b>



# OCCUPATIONAL HISTORY FORM

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

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

## Section A—GENERAL INFORMATION

1. (a) Print name in full Gorichan Michael (b) Reg'l. No. DB13353
2. (a) Arm of service Army (b) Unit Lan. & Rec. Scot. Reg't (c) Rank Pte.
3. (a) Date of birth 5-24-18 (b) Have you any dependents? no. (c) Place of residence at time of enlistment Montreal
4. (a) Place of enlistment Connaught Ranges Ottawa (b) Date of enlistment 5-21-42

PLEASE  
LEAVE  
BLANK

## Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 1934 (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.) Entrance Public School
7. If you attended a university, give name of university and standing or degree secured.....
8. (a) Did you ever enter upon a trade apprenticeship? No (b) If so, for what occupation?..... (c) Did you finish it?..... (d) If you did not finish it, how long did you serve at it?.....
9. (a) What languages do you speak fluently? English, Ukrainian (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) Working (b) At time of enlistment of what trade union or professional society were you a member? Can. Nat. Brotherhood

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

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

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

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

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

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

18. Name of employer Can. Nat. Railways Address Valroyal Que.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Can. Nat. Railways (Lumber Yard)
20. (a) Your specific occupation Labourer (b) Number of years' experience at this occupation with any employer 17 Months
21. (a) Did your employer promise definitely to give you employment on discharge? Yes (b) Did your employer refuse to promise you employment on discharge? no (c) Do you wish to return to your former employment? yes

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

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

## Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? No (b) Do you feel competent to operate a farm? no (c) If so, in what kind of farming?.....
25. (a) Were you born on a farm? no (b) How many years' actual farming experience have you had? none (c) In what provinces did you have experience?.....

## Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?..... None
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.).....
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form..... None.

DATE July 8 1942

SIGNATURE Michael Gorichan

B-7  
82

MILITIA ACT

M.F.M. 82  
480M-8-40 (6652)  
H.Q. 1772-39-1773

National Resources Mobilization Act, 1940

ENROLMENT  
NON-PERMANENT ACTIVE MILITIA OF CANADA

WSG  
COMPLETED

467  
E-22280

REGIMENTAL No. D-513353

Militia Unit taken On Strength R.M.R.

1. Surname (Block Letters) GORICHAN

2. Christian Names (In Full) Michael

3. Present Address Montreal, P.Q. 542 xCharron St.

4. Place of Birth Montreal, P.Q. Date of Birth 24 May 18

5. Religion R. C. 6. Occupation Labourer

7. Next-of-Kin GORICHAN, Mrs. Mary  
(NAME AND ADDRESS)

Montreal, P.Q. 542 Charron St.

8. Physical Description: Height 5'11 1/2" Weight 162

Color of Eyes G. Brown Color of Hair Brown

9. Preference, if any, for Naval, Military or Air Force Service. (Give particulars, qualifications, etc.)

Army

22-11-0  
040 Dated this 22 day of Nov 19 40

21-12-0  
Training Centre No. 40

1  
Michael Gorichan  
(SIGNATURE OF MAN)

Robert Macdonald  
(SIGNATURE AND RANK OF OFFICER EFFECTING ENROLMENT)

TRAINING CERTIFICATE STAMP  
NO. 40 CANADIAN MILITIA TRAINING CENTRE

Medical base Gary A. Smith  
Lieut. Colonel

(SIGNATURE OF OFFICER AFFIXING THE STAMP)

01  
99  
M. TRAINING  
No. 40  
STAMP  
COURSE 2  
ENDING  
DEC 21 1940  
Q.B.

J.M.B.

W.S.G.

MILITIA ACT  
THE NATIONAL RESOURCES MOBILIZATION ACT, 1940

N.R.M.A. PERSONNEL

ENROLMENT FORM

FINGERPRINTED  
PHOTOGRAPHED

WSG  
COMPLETED

N.R.M.A. Serial Number of Notice of Call.....Regimental Number **D 513353**

1. Taken on Strength of No. **4** N.R.M.A. Clearing Depot **Montreal**

2. Surname (Block Letters) **G O R I C H A N**

3. Christian Names (in full) **M I C H A E L**

4. Present Address **542 Charron St. Montreal P.Q.**

5. Place of Birth **Canada** **Quebec** **Montreal**  
(Country) (County or Province) (Town or Township)

6. Date of Birth **24 Mar. 1918** 7. Religion— **R C**  
Denomination

8. Physical Description: Height **5' 10"** Weight **167** Eyes **Grey** Hair **Brown**  
Complexion **med** Identification marks **scar left knee**

9. Married, Single, Widower? ~~Single~~ **Married** ~~SEE CHANGE~~

10. Next-of-Kin ~~Mrs. Mary Gorichan~~ **Mrs. Mary Ann Chuchas** Relationship ~~Mother~~ **wife**  
**542 Charron St. Montreal**  
(Address)

11. Trade or Occupation **C N R shops**

12. Previous Naval, Military or Air Service **30 days training Farnham Nov. 22--**  
(State Units and Dates of Service)  
**Dec 22 1940**

13. Preference, if any, for, R.C.N.? **yes** Army? **--** R.C.A.F.? **--**  
(Arm of Service)

14. Employment in War Industry, if any **no**

**Michael Gorichan**  
(Signature of Man)

**H. J. Clouston Lieut.**  
(Signature and Rank of Enrolment Officer)

**June 20,** 194 **2**  
(Date of Signature)

TRAINING CENTRE PARTICULARS

A. Attached to Basic T.C. No. **"C"** at **Connaught Ranges** Date **21-6-42**  
Completed.....Days Basic Training.

(Date, Signature, and Rank of Recording Officer)

B. Attached to Advanced T.C. No. .... at ..... Date.....  
Completed.....Days Advanced Training.

Qualities of Leadership, Positive..... Becoming Evident?..... Dormant?.....

Transferred to..... Date.....  
(R.C.N. formation or unit of the C.A., R.C.A.F.)

(Date, Signature, and Rank of Recording Officer)

C. Medical Category on acceptance at Basic Training Centre **"A"**

RECORD OF SERVICE of Gorichan (Surname) Michael (Christian Names) Regimental Number D 513353

QUALIFICATIONS

EDUCATIONAL QUALIFICATIONS

1. Naval, Military, or Air 30 days initial training  
 2. Business or Professional no  
 3. Trade or Civil C. N. R. shops  
 4. Technical no  
 5. Languages, etc. Eng (mother tongue) Can speak? Eng Can read and write? Eng  
 6. High School or Collegiate } no (years completed) Graduation or Matriculation } no (specify)  
 7. \*College no  
 8. \*University no (Name of institution, courses or years completed, and degrees obtained to be shown)  
 Can drive a car? no Repair a motor? no Cooking experience? no Hobby? no

All N.R.M.A. Personnel will be taken on as Private soldiers, appointments and promotions to higher rank to be shown as provided in the space below.

Report		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force.	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		Joined on TRANSFER from N.R.M.A. Clearing Depot No. <u>Posted to NRMA CD 3 and attached to TTC "C" LARSR and posted to A Coy.</u>	<u>Pte.</u>	<u>21-5-42</u>	<u>LARSR</u>	<u>Connaught</u>	<u>R21</u>	<u>23-6-42</u>
		<u>Cease to be attached to T.B.T.C. "G", Lanark &amp; Renfrew Scottish Reg't., from No. 3 N.R.M.A. Clearing Depot on posting to Lanark &amp; Renfrew Scottish Reg't., as members Home Defence of the Canadian Army, with effect from 30 Sept 42.</u>	<u>"</u>	<u>30-9-42</u>	<u>"</u>	<u>Dartmouth</u>	<u>R-97</u>	<u>30-9-42</u>
		<u>Is taken on strength Lanark &amp; Renfrew Scottish Reg't. as member H.D., having been posted from T.B.T.C. "C" Lanark &amp; Renfrew Scottish Reg't., w.e.f. 1 Oct 42.</u>	<u>"</u>	<u>1-10-42</u>	<u>"</u>	<u>"</u>	<u>166</u>	<u>1-10-42</u>
		<u>R-97 is amended to read: S.C.S. No. 3 N.R.M.A. Clearing Depot and ceases to be attached for all purposes to LARSR (T.B.T.C. "C") on posting as Member H.D. of C.A., eff. 30 Sept 42.</u>	<u>"</u>	<u>30-9-42</u>	<u>"</u>	<u>"</u>	<u>R-99</u>	<u>8-10-42</u>
		<u>Attached to 1st Halifax Coast Reg't., Osborne Head, for quarters &amp; rations, w.e.f. 1200 hrs. 11 Jan 43.</u>	<u>"</u>	<u>11-1-43</u>	<u>"</u>	<u>"</u>	<u>10</u>	<u>12-1-43</u>
		<u>Ceases to be attached to 1st Halifax Coast Reg't., Osborne Head, for rations and quarters, w.e.f. 16 Jan 43.</u>	<u>"</u>	<u>16-1-43</u>	<u>"</u>	<u>"</u>	<u>36</u>	<u>11-2-43</u>
		<u>On Attachment for all purposes except pay, to No. 19 Coy., Veteran's Guard of Canada, J&amp;S Magazine, w.e.f. 0700 hrs. 8 Mar 43.</u>	<u>"</u>	<u>8-3-43</u>	<u>"</u>	<u>"</u>	<u>61</u>	<u>12-3-43</u>
		<u>Ceases to be On Attachment for all purposes except pay to No. 19 Coy., Veteran's Guard of Canada, J&amp;S Magazine, w.e.f. 1200 hrs. 11 Mar 43, and is On Attachment for all purposes</u>	<u>"</u>	<u>11-3-43</u>	<u>"</u>	<u>"</u>	<u>61</u>	<u>12-3-43</u>
		<u>except pay to No. 20 Coy., Veteran's Guard of Canada, J&amp;S Magazine, w.e.f. 1201 hrs. 11 Mar 43.</u>	<u>"</u>	<u>11-3-43</u>	<u>"</u>	<u>"</u>	<u>61</u>	<u>12-3-43</u>

1200 hrs. 11 Mar 43, and is On Attachment for all purposes							
except pay to No. 20 Coy., Veteran's Guard of Canada, J&S Magazine, w/e.f. 1201 hrs. 11 Mar 43.	"	11-3-43	"	"	61	12-3-43	
Ceases to be On Attachment for all purposes except pay, to No. 20 Coy., Veteran's Guard of Canada, J&S Magazine, w/e.f. 1400 hrs. 14 Mar 43.	"	14-3-43	"	"	63	15-3-43	
On Attachment to Lawlor's Island Military Hospital, for rations & quarters, w.e.f. 5 Apr 43.	"	5-4-43	"	"	86	10-4-43	
Granted furlough from reveille 19 Apr 43 to tattoo 2 May 43. T.W. A-222727 from Dartmouth, N.S. to Montreal, Que.	"	19-4-43	"	"	91	16-4-43	
Having completed four months continuous service is granted \$1.40 per day.	"	15-4-43	"	"	92	17-4-43	
Ceases to be On Attachment for rations & quarters to Lawlor's Island Military Hospital 18 Apr 43.	"	18-4-43	"	"	98	26-4-43	
Having completed six months continuous service is granted \$1.50 per day.	"	1-5-43	"	"	121	22-5-43	
On Attachment to 52nd Coast Bty., R.C.A., for all purposes except pay, w.e.f. 1200 hrs. 31 May 43 to 1100 hrs. 14 June 43.	"	31-5-43	"	"	129	1-6-43	
Granted permission to marry: Miss Mary Ann McVerrie Aitchison, 2612 Colrairie St., Pt. St. Charles, Montreal, Quebec, w.e.f. 14 June 43.	"	14-6-43	"	"	141	15-6-43	
Granted furlough from 2 Aug 43 to 15 Aug 43.	"	2-8-43	"	Port Alberni	173	2-8-43	
T.W. A-429276 from Port Alberni, B.C. to Winnipeg, Man.	"	2-8-43	"	"	173	2-8-43	
Having been granted permission to marry, 14th June 43, was married on 14 Aug 43 to: Miss Mary Ann McVerrie Aitchison, (Wife) 542 Charron Str., Point St. Charles, Montreal, P.Q.	"	14-8-43	"	"	197	31-8-43	
S.O.S. on transfer to R.R. of C.	"	19-9-43	"	"	213	18-9-43	
T.O.S. R.R.C. on transfer from Lanark & Rennew Scottish Regt.	"	20-9-43	RRC	WAINWRIGHT	Pt. II No. 195	25-9-43	
24-11-43 RRC	"	6-12-43	RRC	Prince George	" " 232	24-11-43	
Granted six(6) days compassionate leave from 6 Dec 43 to 11 Dec 43 incl and authorized to draw allowance in lieu of rations at the rate of .50 per diem in accordance with the provisions of F.R. & I. 196(4).							
Cease to be Mem. H.D. on becoming an NRMA Soldier		DEC 1 - 1943					
Eff. 1 12 43					245	DEC 1 0 1943	



IF DISCHARGED  
OR PATRIATED  
PRISONER OF WAR  
MARK "POW"

IN HOSPITAL

(X)

**CONFIDENTIAL**

ATTENTION

**SPECIAL**

1. SURNAME <b>GORICHAN, Michael,</b>		FIRST NAME		INITIALS	RANK <b>Pte</b>	NUMBER <b>D-513353</b>	SEX <b>M</b>
2. DATE OF COMMENCEMENT OF ACTIVE SERVICE:- <b>21 May 42</b>				PLACE <b>Ottawa, Ont.</b>		YR. OF BIRTH <b>1918</b>	
3. SERVICE OUTSIDE CANADA:-		YES <b>X</b>	NO	IN WHAT SERVICE? <b>ARMY</b>			
4. CAUSE OF DISCHARGE:- <b>R.O. 1029-(10).</b>							

## 5. PRE-ENLISTMENT EDUCATION:-

Completed 7th grade in Montreal (St.Lambert) Public School in 1935.

## 6. LANGUAGES:-

English, <sup>U</sup>krainian (speaks) French (a little).

## 7. OCCUPATIONAL HISTORY:-

Held various odd unskilled jobs at irregular intervals with several periods of unemployment.  
Worked during several summers at a golf club mostly cleaning sport instruments.

8. IMMEDIATE  
PRE-ENLISTMENT EMPLOYMENT:-  
(WITH NAME AND ADDRESS OF EMPLOYER)

16 months - C.N.R. - Lumber yard - Cartierville, Que.  
Labor work.

## 9. SHORT ACCOUNT OF SERVICE, TRAINING AND DUTIES:-

Served 44 months including 9 months in U.K. and about 2 months in Holland, did not serve in action.

A fully trained infantryman, he served as such throughout on coastal defense, training and o/s as reinforcement (potential).

## 10. EDUCATIONAL COURSES WHILE IN SERVICE:-

None

## 11. MEDICAL OFFICER'S STATEMENT OF PHYSICAL LIMITATIONS (IF ANY):-

Requires further treatment.

12. MARITAL STATUS:- **Separated** NUMBER OF DEPENDENTS, OTHER THAN WIFE **none**

13. DISCHARGEES OWN STATEMENT OF FUTURE PLANS (IF ANY):-

**Plans to return to former employment.**

14. POST-DISCHARGE MAILING ADDRESS:-

**542 Charron Street, (Pte St. Charles) Montreal.**

15. BASIS FOR COUNSELLOR'S RECOMMENDATIONS:-

Gorichan is a 27 years old man who was employed as a labourer in lumber yards of C.N.R. prior to enlistment. He expects to resume his former employment when discharged from treatment which will not be for sometime yet.

This appears to be a sound plan in view of his seniority with the Railway Co which continued during his service, and the fact that his job does not involve strenuous work.

In any event, it is felt that Gorichan can give best service in unskilled work of light or medium nature in accordance with his probable ultimate physical condition. He has <sup>no</sup> plan yet as to use of reestablishment credit.

16. ACTION RECOMMENDED:-

**No action (in hospital).**

17. OTHER POSSIBILITIES SUGGESTED BY COUNSELLOR:-

**Former employment as labourer in lumber yards of C.N.R.  
Seek employment in unskilled labor of light or medium nature.**

18. REFERRED TO:-

**D.V.A. /SPECIAL PLACEMENT OFFICER - Montreal, Que.  
D.V.A. /CHIEF MEDICAL OFFICER - Montreal, Que.**

19. PLACE DATE  
**Montreal Military Hospital, 4 Jan 46**

**rsp.**

SIGNATURE OF COUNSELLOR

RANK OR APPOINTMENT

*Guy, S. Pontbriand*  
**Guy, S. Pontbriand,  
Lieut.,**

NOTE:- COUNSELLOR WILL CHECK TO SEE THAT THIS FORM HAS BEEN COMPLETED AS REQUIRED.



U.I. 166

# MEDICAL EXAMINATION AND CERTIFICATE FORM

DEPARTMENT OF NATIONAL WAR SERVICES  
NATIONAL RESOURCES MOBILIZATION ACT, 1940

REGISTRATION DIVISION  
"E"  
OCT 4 1940  
Services Nationaux de Guerre  
QUE.

Notice of Call  
Serial No:—  
E- 22280

This form to be used by divisional registrars for copies of original medical examination and certificate forms.

### PART I

Name in full..... Gorichan..... Michael  
(Print in block letters) (Surname) (Given Names)  
Born: Place..... Montreal..... Canadian Province..... Quebec..... Date..... Feb 24th 1918  
(or other country)  
Permanent Postal Address..... 542 Charron St...... Montreal..... Que.  
(Street and Number) (Rural Route and Post Office) (Town or City) (Province)

The following questions must be answered "Yes" or "No".

Have you ever suffered from any of the following:—

Rheumatism..... no..... Tuberculosis..... no..... Bronchitis or Asthma..... no..... Heart Disease..... no  
Kidney or Bladder Disease..... no..... Stomach or Intestinal Trouble..... no..... Rupture..... no..... Varicose Veins..... no  
Trouble with feet..... no..... Nasal Trouble..... no..... Ear Trouble..... no..... Eye Disease..... no..... Fits..... no  
Nervous or Mental Disease..... no..... Syphilis..... no..... Gonorrhoea..... no..... Have you ever worn Glasses?..... no  
Have you ever been rejected for Military Service?..... no..... Are you in receipt of disability pension or compensation?..... no..... If so, from whom?.....  
("Yes" or "No")

Place..... Montreal..... Province..... Quebec..... Date..... Oct. 2nd. 1940.  
(Signed):

Michael Gorichan  
Signature of man.

### PART II

Examiner's remarks. Give a clear and concise history of any of the above conditions where the answer is "Yes"

Physical examination (the man must be stripped)

1. Height..... 5..... feet..... 11½..... inches. 2. Weight..... 162..... pounds  
3. Complexion..... fair..... Colour of eyes..... greyish brown 4. Development..... good..... {good  
fair  
poor} Strike out inapplicable words.  
Colour of hair..... brown  
5. Chest measurement—Girth on full expansion..... 40½..... inches  
Range of expansion..... 2..... inches  
6. (a) Vision without glasses—Right eye..... 20/20..... left eye..... 20/20  
(b) If in possession of glasses: Vision with glasses—Right eye..... left eye.....  
7. Hearing, right ear..... 20/20..... left ear..... 20/20  
8. Mouth and teeth..... mouth clear..... Teeth..... good 4 fillings  
Describe dentures, if any..... 2  
9. If the above named man suffers from any disability, whether congenital or pathological, which places him in a category lower than "A", a clear and concise description of such disability is to be given here:—

### PART III

I have examined the man in accordance with the physical standards and instructions for the medical examination of recruits and certify that he is fit for:—

Category "A"..... A..... (Signed):  
"B I"..... Signature..... Howard Gillis M.D...... (Examining Physician)  
"B II".....  
"C I".....  
"C II"..... Address..... 1880 Wellington St. Montreal que  
"D".....  
"E"..... Date..... Oct. 2nd. 1940.

The space below is reserved for Training Centre Medical Officer.

### PART IV

Record in detail any disease or disability not previously described:— ✓ ✓ X

Signature..... J Lydie Capt  
Training Centre Medical Officer.  
Training Centre No. or Name..... NO. 40 CANADIAN MILITIA TRAINING CENTRE  
N.P.A.M. No.....

(Important: See other side)

Station	Admission to Hospital			Discharged from Hospital			Disease	Remarks: If mild or severe; if completely recovered from. If an accident, state whether Court of Inquiry was held. Date of issue of surgical appliances supplied.
	Day	Month	Year	Day	Month	Year		

### INSTRUCTIONS

1. Only a duly qualified and licensed medical practitioner in Canada who has been appointed by the Minister of National War Services as an "examining physician," in accordance with the National War Services Regulations, 1940 (Recruits), may examine the man and complete this form and certificate.

2. The "examining physician" must examine the man and complete this form and certificate herein contained in accordance with the physical standards and instructions for the medical examination of recruits, copy of which will be supplied to each "examining physician" by the Department of National War Services.

3. The "examining physician," immediately upon completing this form and certificate must mail or deliver it in person to the Divisional Registrar of the Administrative Division of the Department of National War Services in which the man resides. The names and addresses of all Divisional Registrars will be brought to the attention of all appointed "examining physicians" by notices in the press or, if possible, by letter.

4. Payment for the examination of each man will be made monthly by the Department of National War Services, Ottawa, to the duly appointed examining physician concerned. Examining physicians will not submit any other account; this properly completed form and certificate will serve in lieu of an account.

5. The Divisional Registrar of the Administrative Division in which the man examined resides, immediately upon receipt of this form properly completed, will stamp hereupon the date the form has been received by him and will prepare or have prepared, four exact and typewritten copies of this original, showing upon the four copies the date the original was received from the examining physician. Each such copy will be certified as a true and correct copy by the Divisional Registrar or by a person duly appointed by him for this purpose.

The Divisional Registrar will retain the first typewritten copy. He will attach a copy to the original form and certificate received from the examining physician and will immediately forward both original form and certificate and the copy to the Department of National War Services, Ottawa. He will forward a copy to the representative of the Department of National Defence; and the last copy, if the man has been found fit for military training and is being notified to report to a military training centre, to the Officer Commanding the military training centre to which the man has been instructed to report. If the last typewritten copy is not so disposed of, it shall be retained by the Divisional Registrar.

6. No copy of this form is to be in the possession of any unauthorized person.

Section 12 (3) of the National War Services Regulations, 1940 (Recruits), reads as follows:—

"(3) In any case in which any doubt arises as to the accuracy of the examining physician's certificate of unfitness for military training of any man so certified by him, the Divisional Registrar may give the man concerned another notice requiring him to submit himself for another examination, in which case the man shall report at such place and time as will be indicated to him by the Divisional Registrar for examination by three examining physicians appointed by the Minister. Such three examining physicians will examine the man, and if they do not confirm the certificate given in the case of the man concerned by the examining physician who first examined him, shall issue another certificate which will be final and conclusive."

Section 36 of the National War Services Regulations, 1940 (Recruits), reads as follows:—

"Any examining physician who, in furnishing information under these regulations, knowingly makes any inaccurate statement or signs an inaccurate certificate shall be guilty of an offence and liable on summary conviction to imprisonment for a term not exceeding six months or to a fine not exceeding one hundred dollars or to both such imprisonment and such fine."

I hereby certify this to be a true and correct copy.

*[Handwritten Signature]*

The Divisional Registrar will stamp the four copies showing his Administrative Division and the place and date where the copies were made and certified by him.

(See National War Services Regulations, 1940 (Recruits).)

2-11-46

P.D  
AWARDS-CANADIAN ARMY (ACTIVE)

2014

M

EMG

GORICHAN, Michael		D. 513353	Pte.	FILE No. 869-G-5933 e.I.C.
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
France & Germany Star	6843. 25.3.50
Defence Medal	
CVSM & Clasp	
War Medal 1939-45	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

(1) MEDALS  
PERSON Mrs. Mary Gorichan (Mother)  
 ENTITLED TO

ADDRESS 542 Charron Street, Point St. Charles,  
 Montreal, P. Q.

(2) MEMORIAL CROSS  
 WIDOW Mrs. Mary Ann GORICHAN (English)

2014 542 Charron St.,  
 ADDRESS Point St. Charles, MONTREAL, P.Q.

(3) MEMORIAL CROSS  
 MOTHER Mrs. Mary GORICHAN (English)

2014 542 Charron St.,  
 ADDRESS Point St. Charles, MONTREAL, P.Q.

REGISTRATION No. DATE OF DESPATCH  
**MEMORIAL BAR**  
 DATE DESP.....  
 (1)  
 REGN. NO. 2811

(2) DESP. APR 10 1947  
 REGN No. 00029

(3) DESP. APR 10 1947  
 REGN No. 00030

APPLICATION FOR PERMISSION TO MARRY

(One copy only to be completed)

Note: Study the notes on page 2 before completing this application

Date... 12 June ..... 1943...

1. I, D-513353 Pte. Gorichan M. (Number) (Rank) (Surname) (Initials)

The Lanark & Renfrew Scottish Reg't., C.A. (Unit) hereby apply for permission

to marry... Miss Mary Ann Mc Nerrie Aitchison (Proposed wife's name in full) to

2612 Colraine St., Pt. St. Charles, Montreal, Que., (Proposed wife's address in full)

2. I certify that the following particulars concerning myself and my proposed wife are true:

(a) Particulars of Soldier:

(i) Date of Birth... 24 March 1918

(ii) Date of enlistment... 21 May 1942

(iii) In receipt of tradesmen's rates, Class... nil

(iv) Marital Status (Strike out words inapplicable)--Soldier to initial:

Bachelor.

~~Widower~~ M

Name of deceased wife.....

Date of death of deceased wife.....

Divorced.

(See para. (5) of Routine Order and note on page 2 of this application, number (vi).)

Name of former wife.....

Date of divorce decree.....

Place where divorce granted.....

(v) Particulars of dependents in receipt of Dependents' Allowance, if any:

Name (or names) of dependents... nil

Relationship of dependents.....

Amount of Dependents' Allowance.....

Amount of assigned pay..... nil

How, and by whom, dependents will be supported after marriage.....

(b) Particulars of Proposed Wife:

(i) Date and place of birth... 8 April 1923... Cyr. Scotland...

(ii) How long you have known her... 19 months

(iii) Present nationality... scotch

(iv) Name and address of nearest relative Mrs. Elizabeth Aitchison 3177 St. James West St. Henry, Montreal, Que.

3. I solemnly state that I am..... Bachelor.....  
(Bachelor, Widower, or Divorced).....

as set out in para. 2 (a) of this application, and that I am legally  
free to marry. Miss. Mary Ann McNerris Aitchison.....  
(Name of proposed wife)

*Mike Mouchon*.....  
(Signature of applicant)

- NOTES:
- (i) A certificate of the proposed wife's good character, signed by a responsible citizen, such as a clergyman, public official, school teacher or employer, must be attached to the application.
  - (ii) If the proposed wife is under the age of 21 years, the written consent of her parent or guardian must be attached to the application.
  - (iii) If the applicant is under the age of 19 years, the written consent of his parent or guardian must be attached to the application.

4. DECISION OF COMMANDING OFFICER

..... *Permission granted* .....

(See note at para. (vii) below)

Date..... *14 Jan 43*..... Signature..... *[Signature]*.....  
Commanding..... *S. + R. R. Reaf*.....

NOTES FOR ATTENTION OF COMMANDING OFFICERS

- .5. (i) After permission to marry has been published, this form will be forwarded, through the usual channels, to the Officer i/c Records, National Defence Headquarters, Ottawa, Ontario.
- (ii) Attention is drawn to the Routine Order covering the subject of "Permission to Marry", viz: No. 2242.
- (iii) The requirements of this form are for military purposes only. The parties to the proposed marriage (particularly when either one or both of them are under the age of 21 years) should consult a local solicitor, or other competent authority, upon the requirements necessary to conform to the civil laws of the country or province where the marriage takes place.
- (iv) Where permission to marry is granted, such permission will not apply to a marriage to any person other than the woman whose name is given in para. 1 of this application.
- (v) In the case of personnel declaring they have been divorced, the Commanding Officer will require them to produce the original divorce judgment, or a certified court copy thereof, before permission to marry may be granted.
- (vi) The Part II Order showing that permission has been granted will include the name of the proposed wife.
- (vii) In case of refusal of permission to marry, reasons will be stated by the Commanding Officer, in his own handwriting, in para. 4 above.

CANADIAN ARMY (A)  
LAST PAY CERTIFICATE

M.F.D. 930A  
200M-2-45 (6635)  
H.Q. 1772-39-1548

Regtl. No. D-513353 Rank and Name Pte GORICHAN, M.  
of NO. 4 DISTRICT DEPOT, C.A. Unit, on.....  
(Transfer, Posting or Discharge) to DISCH. WHILE IN HOSPITAL on 5th January 194 6  
(Unit and Station)  
Reason for discharge R.O. 1029-10 Authority DO 6 d/4-1-46

On TRANSFER of OFFICER or WARRANT OFFICER, Class I

Outfit allowance of \$..... has been paid by the Treasury Officer, Military District No.....

**REMARKS:**

- State (1) Date of appointment or enlistment 21-5-42  
(2) If individual has dependents eligible for Dependents Allowance, has application been submitted? N/A  
(3) Has assignment of pay been made? Yes If so, amount \$ 30.00  
Effective date 1-5-45  
(4) In the case of Officers in receipt of a Service (P.F.) Pension state monthly deduction \$ N/A

The following is a statement of the account of the above named from 1st Jan. to 5th Jan. 194 6  
the inclusive date of transfer, posting or discharge.

DR.		CR.	
PARTICULARS	AMOUNT	PARTICULARS	AMOUNT
	\$    c.		\$    c.
Balance Dr. from last account.....	55.71	Balance Cr. from last account..... <u>D&amp;P.</u>	60.00
First Monthly Payment.....		Regimental Pay... <u>5</u> ..... days at \$ <u>1.50</u> .....	7.50
Casual Payments.....		Tradesmen's Pay..... days at \$.....	
Payment on Transfer, Posting or Discharge.....		Additional Pay (Give particulars)	
Assigned Pay.....	5.00	<u>R.A.</u> ..... days at \$.....	
Regimental Charges.....		Allowances (Give particulars)	
Public Stoppages (Give particulars):		..... <u>14</u> ..... days at \$ <u>.50</u> .....	7.00
<u>A.R. 2979 Deferred Pay</u>	60.00	<u>38 dys Comm. lve</u>	57.00
<u>A.R. 2979 Ordinary Balance</u>	10.79	<u>Clothing DO 6</u>	100.00
<u>A.R. 2979 Clothing</u>	100.00	<u>Rehab. DO 6</u>	45.00
<u>A.R. 2979 Rehab.</u>	45.00		
To Balance Cr. (To be paid by new unit).....		By Balance Dr. (To be deducted by new unit).....	
Total.....	276.50	Total.....	276.50

**JACQUES CARTIER BARRACKS  
MONTREAL SOUTH, QUE.**

(Place)

12th January 1946.

(Date)

I certify that the above is a true and correct statement of the account of the above named on transfer, posting or discharge.

*W. Desbois*

Capt.  
Paymaster or Accounting Officer

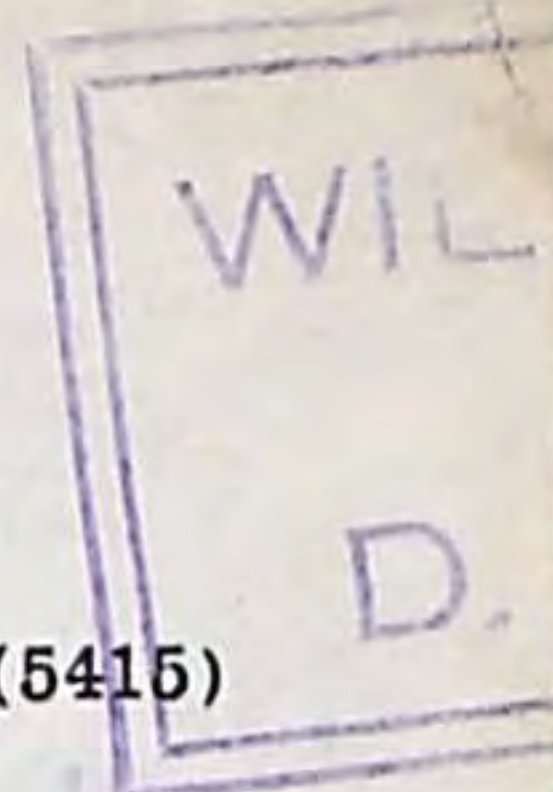
PAYMASTER NO. 4 DISTRICT DEPOT

TO BE COMPLETED IN DUPLICATE

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

WILL

3/18B MF M10 40/P & S/423 (5415)



(1) I, Michael Gorichan, of the City of Montreal, in the County of ... District of ... Province of Quebec, Labourer (Civil Occupation)

Address in civil life.

of Montreal, in the County of ... District of ...

Province of Quebec, Labourer (Civil Occupation)

Regimental No. D: 513353, Unit C.I.C., do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

Relationship, names and address of beneficiaries, and what each is to receive.

(2) I GIVE, DEVISE AND BEQUEATH unto my mother, Mary Gorichan, 542 Chanon Street, St. Charles, Montreal, Que., all my estate.

Relationship, names and address of residuary beneficiaries

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

(4) I appoint Mrs. Nellie Lesperance, 3292 Wellington St. Verdun, Que. (Name) (Address)

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

IN WITNESS WHEREOF I have hereunto set my hand this 5th day of March 1945.

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.

Michael Gorichan (Signature of soldier)

First witness sign here.

(5) Signature W. Berkins Civil Address 187 Gardenville Ave., Longueuil, Que Civil Occupation Printer.

Second witness sign here.

Signature J. Vincent Civil Address 25th Ave. Civil Occupation Truck Driver

(Witnesses are not to be beneficiaries.)

(OVER)



7

NOTE

If you have already made your Will, do not fill in this Will, but mark on the front where your Will can be located or with whom it is deposited.

(1) Example: I, John Charles Jones, of the City of Marlowe, in the County of Carleton, Province of Ontario, Mechanic, Regimental No. 1234, Royal Blankshire Regiment.

(2) If only one beneficiary for all your estate, complete as example: "my wife, Mary Jones of 26 Cherry Ave., Ottawa, Ont., all my estate," in which event, strike out clause (3) entirely.

If more than one beneficiary, set out in clause (2) what each is to receive, such as

"my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont., \$.....00, and my household goods and effects,"

"my brother, Thomas Jones, 80 Yonge St., Toronto, Ont., \$.....00,"

"my sister, Margaret Jones, 80 Yonge St., Toronto, Ont., \$.....00,"

"my friend, John Smith, 60 LaSalle St., Winnipeg, Man., \$.....00,"

and any personal gift, if desired. Then complete clause (3) as to the balance of your estate.

(3) If balance of estate is to one person, complete as example: "my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont." Another example: "my father, Jack Jones, and mother, Jessie Jones, 80 Yonge St., Toronto, Ont., equally," or as desired.

(4) Fill in name of Executor or Executrix, example: "John Doe, 24 Smith Street, Blankville, Ontario, Salesman," or, if Executrix, "Jane Doe" and address. A beneficiary under the Will may be appointed Executor or Executrix. It is preferable that the person appointed as Executor should not be on, or likely to be on, Active Service.

(5) The soldier will date the Will and sign same. Two witnesses must sign in the presence of the soldier, and each witness should fill in his or her full civil address and occupation. No one who is a beneficiary shall act as a witness. It is preferable, though not essential, that the witnesses be persons not on Active Service. When completed, leave Will (both copies) with Commanding Officer for transmission to the Records Office for safe custody.

APR 3 - 1945

WILL RECEIVED IN DOCUMENT SECTION  
APR 4 1945  
RECORD OFFICE  
NATIONAL ARMY

6

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

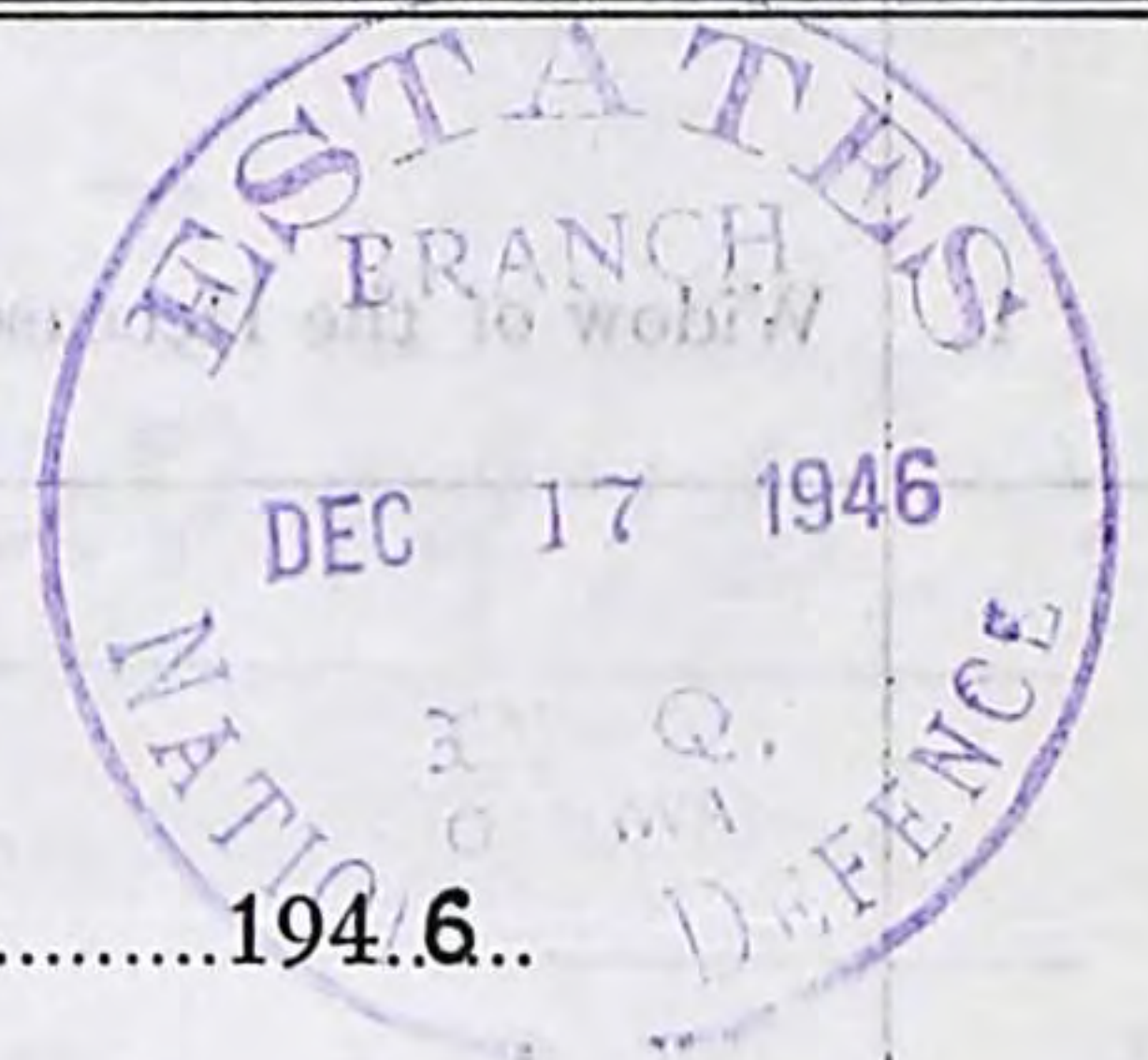
Mrs. Mary Gorichan,  
542 Charron Street,  
Montreal

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

and the following number quoted:—

H.Q. 869-G-5933 PD10

DEPARTMENT OF NATIONAL DEFENCE  
ESTATES BRANCH  
OTTAWA, ONT.



December 4, 1946

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

GORICHAN, Michael (Dec'd)

No. D. 513353, C.A.

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.

*[Signature]*  
Director of Estates

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.....	none			
2	Children of the Deceased and dates of their Births.....	none			
3	Father of the Deceased.....	Vasile Gorichan	56	542 Charroux & Montreal	
4	Mother of the Deceased.....	Mary Bazar		ditto	
5	Brothers of the Deceased	Full Blood	John Gorichan	31	ditto
		Half Blood			
6	Sisters of the Deceased	Full Blood	Natalia Gorichan	25	ditto
		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	
		none			

8	F
9	D
10	P
11	P
12	P
13	S
14	N
15	S
16	N
17	D
18	I
19	(
20	A
21	(
22	I
23	D
24	I

ANSWER FULLY EACH QUESTION ON THIS PAGE  
PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Michael Gouchan
9	Date of his birth.	Mich 24 <sup>th</sup> 1918
10	Place and date of his marriage.	Single
11	Place and date of his parents' marriage.	August 2 <sup>nd</sup> 1915.

## PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal, Canada
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Montreal (b) Montreal (c) since Birth (d)
14	Nature of employment before enlistment.	yardman Can Nat Ry
15	State whether he owned the premises in which he lived, and, if so, where situated.	none
16	Name place where deceased stated he intended to make his permanent home.	Montreal - Que Canada

## PARTICULARS OF ESTATE

17	Did the deceased leave a Will other than a Service Will? If in your custody, please forward. If not, can you state where it is?	only Service Will on file
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	(a) Did he have a Bank, Post Office or other deposit account? (b) Give name and address of bank, etc., and the amount on deposit. (c) Do you wish it administered with the pay account? (d) If it is a joint account, state the survivor's name and relationship to the deceased.	yes Royal Bank - Rt St Charles \$ 1016.17 <u>no</u> - getting it ourselves only her own
20	Amount of War Savings Certificates purchased by the deceased and registered in his name. State where located.	none
21	(a) Amount of Victory Loan Bonds left by deceased. (b) State whether bearer or registered. (c) State in whose name they are registered. (d) During what loan were they purchased? (1st, 2nd, 3rd, etc.) (e) In whose possession, and address, are they?	\$ 500 Bearer - unknown - getting them ourselves Royal Bank - safe keeping
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Prudential Inc 1000 <sup>00</sup> already paid to mother
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	Personal clothing & Trunks in hands of Government

## 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.	none
----	--	------

(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 and of the deceased.

sole legatee under his will

Mary Gorichan

Signature of Informant

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.

542 Leharan St  
Montreal  
Que

Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief Mary Bazar wife

\*See above. Vasile Gorichan 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 Montreal this 7<sup>th</sup> day of December 19 46

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

John A. Staseley

Qualification Commissioner of the Superior Court  
District of Montreal

Commissioner of the Superior Court  
District of Montreal

Address 57 St James St Montreal

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

The whole Estate is left by the will to the Deceased's mother Mary Bazar wife of Vasile Gorichan of 542 Leharan St Montreal

OTHER PARTICULARS

Did the deceased ever collect from any estate or other source any money or property which he or she was entitled to receive? If so, state the amount and the source thereof.

**DISTRIBUTION OF SERVICE ESTATES**

Estates Form "P. 4"

ARMY

MI

Name GORICHAN Michael No. D-513353  
Surname Christian Names

Pte. Post Discharge 2-11-46  
Rank Unit Date of Death

AMOUNT

Date 9-1-47 L.P.C.....\$  
 Other Credits..... 158.00  
 Total..... 158.00

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
ALL	MOTHER	<p>Mrs. Mary Gorichan,                      c/o Brown, Stavely &amp; Jenkins,                      Barristers, Etc.,                      Rooms 402 - 403 - 404,                      57 St James St. West,                      Montreal, P.Q.</p> <p>(Sole beneficiary under will.)</p>	158.00 <i>R</i>

*MR 391*  
 P4. TO TREAS. *17-1-47 QW*

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	<i>731</i>	<i>00</i>	<i>00</i>	<i>001</i>	<i>158.00</i>
CLASSIFIED BY <i>[Signature]</i>			EXAMINED BY		
For Chief Treasury Officer					

DISTRIBUTION APPROVED AND AUTHORIZED

*[Signature]*  
 (L. M. FIRTH) Colonel  
 Director of Estates

AUDITED FOR PAYMENT

.....  
 For Chief Treasury Officer

THE CANADIAN PENSION COMMISSION

MEMORANDUM

CENTRAL REGISTRY Army  
PERM. SEC. 5  
JAN 16 1947  
869-G-5933  
Original to  
Copied to

To Deputy Minister,  
Department of National Defence,  
From The Canadian Pension Commission

OTTAWA, January 10, 1947.

ATTENTION - Director of Records.

ADDITION  
ENTERED

~~Canadian Agency~~  
~~Imperial War Graves Commission~~

~~XXXXX~~

D-513353 Pte. Michael Gorichan.  
C.I.C.

The marginally named died  
at St. Anne de Bellevue, P.Q.  
on November 2, 1946.

Cause of Death Pulmonary tuberculosis due to actual incident  
causing death was a pulmonary haemorrhage.

In the opinion of the Commission,  
death was related to military service.

Next of Kin Mrs. Mary Gorichan (mother),  
542 Charon Street,  
Point St. Charles, Montreal, P.Q.

*Noted  
R.P. 2(c)*

*E. Lackey*

MB  
Died on strength.

for  
Canadian Pension Commission.

*mem + widow + mother  
DP3(11)  
29-1-47*

Post-Discharge

**BROWN, STAVELEY & JENKINS**

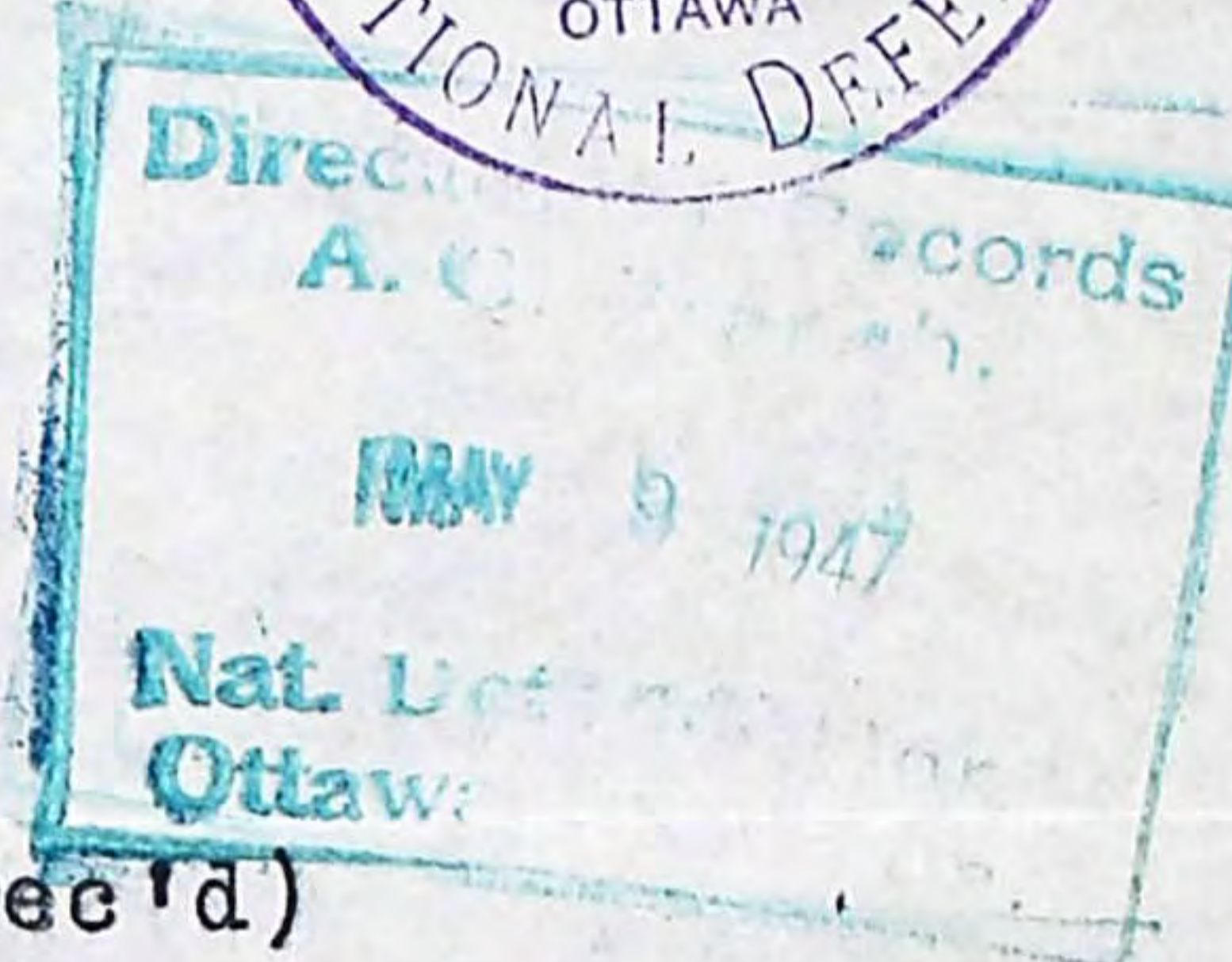
**Advocates, Barristers & Solicitors**

E. N. BROWN, K.C.  
WM. R. STAVELEY, K.C.  
JOSEPH JENKINS, K.C.

ROOMS 402-403-404  
57 ST. JAMES STREET WEST  
MONTREAL

TELEPHONE HARBOUR 2430

CABLE ADDRESS "WRENBY"



*Closed*

869-A-5933

May 6th, 1947

Department of National Defence,  
Ottawa, Canada.

Re: Pte Michael GORICHAN (Dec'd)  
No. D-513353 C.A.

Dear Sirs:-

Enclosed we are sending you Federal and Provincial succession tax releases for \$19.50 amount due the above deceased and would be obliged if you would send us a cheque for same payable to his mother Mrs. Mary Gorichan 542 Charron St. Montreal to whom the deceased bequeathed his whole estate by his Military Will dated March 5th, 1945 a copy of which is already in your possession.

Yours truly,

*Wm R Staveley*

LOS  
Encl.



NOT VALID UNTIL SIGNED BY  
INSPECTOR OR AUTHORIZED OFFICER

DOMINION OF CANADA  
SUCCESSION DUTY ACT

S.D. 30  
REV. MAY 1944

SERIAL NO. **C 43304**

CONSENT TO THE TRANSFER OF PROPERTY

DATE, Dec. 12th, 1946.

IN THE MATTER OF THE ESTATE OF

LATE MICHAEL GORICHAN,  
c/o Messrs. Brown, Staveley & Jenkins,

WHO DIED ON  
TO ALL PERSONS: Nov. 2nd, 19 46.

WHO MAY ON CONSENT "DELIVER, ASSIGN, TRANSFER, PAY OR PERMIT THE DELIVERY, ASSIGNMENT,  
TRANSFER OR PAYMENT OF ANY PROPERTY" TAKE NOTICE THAT CONSENT IS HEREBY GIVEN TO THE DELIVERY,  
ASSIGNMENT, TRANSFER OR PAYMENT OF—

AMOUNT OWED by NATIONAL DEFENCE DEPT.

\$19.50

I2/I2/46 M.

*C. Frank Elliott*  
DEPUTY MINISTER OF NATIONAL  
REVENUE FOR TAXATION

INSPECTOR OF SUCCESSION DUTIES AT MONTREAL  
BY A. Boursseau  
AN AUTHORIZED OFFICER

M-S-1  
TR-M-89



PROVINCE OF QUEBEC  
CERTIFICATE OF EXEMPTION OF SUCCESSION DUTIES

Record No.

108274

Considering the declarations and other documents of record at the Revenue Office of the Province of Quebec, I, the undersigned hereby certify that no succession duty is exigible under the laws of the Province, by reason of the transmission owing to the death, on the NOVEMBER 2, 1946 of M. MICHAEL GORIDMAN in h. l.s. lifetime of MONTREAL and that transfer may therefore be made of the property hereunder described as follows, to-wit;

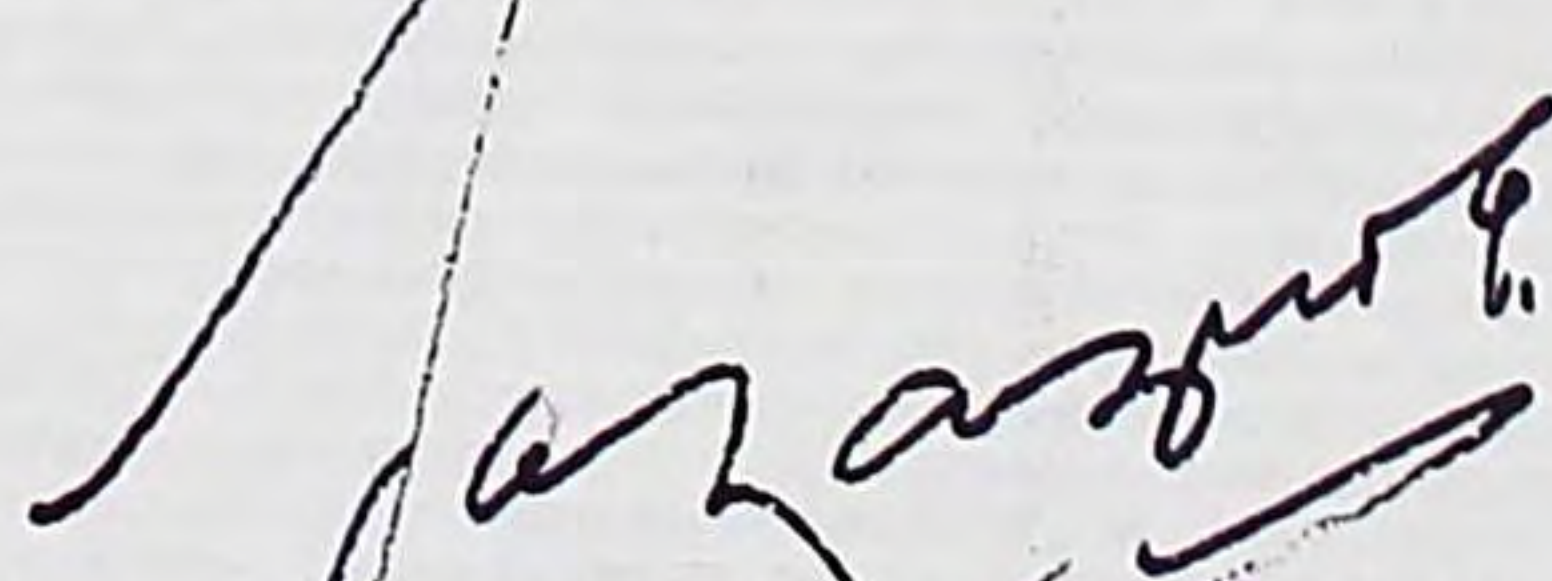
A SUM OF NINETEEN DOLLARS & FIFTY CENTS (\$19.50) BEING  
AMOUNT OWED BY NATIONAL DEFENCE DEPT.

Signed, sealed and delivered at Montreal, this DECEMBER 11, 19 46

AD:

THE COLLECTOR OF PROVINCIAL REVENUE,  
For the Revenue District of Montreal.

Per

  
Revenue Officer Specially Authorized.

N. R. M. A. FORM NO.

R33

Register No. 196163

Nominal Roll No.

To: P.M.G.

H.Q. File No.

CANADIAN ARMY (ACTIVE)

Computation of Service

WAR SERVICE GRANT

Regt. No.	Rank when S.O.S.	Surname	Christian Name in Full
D513353	PTE	KORICHAN	MICHAEL

REASON FOR TERMINATION OF SERVICE:

1st Enlistment.....	30 day training	CARO.....	( )
2nd Enlistment.....	Physically unfit	CARO.....	( )
3rd Enlistment.....		CARO.....	( )

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. 22 Nov. 40	T.O.S. 21 May 42	T.O.S.
S.O.S. 21 DEC. 40 MD. 4	S.O.S. 5 Jan 46 MD. 4	S.O.S. MD
Total Days 30	Total Days 1326	Total Days

Total Service

1356 DAYS

	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere.....	1034	Nil	1034
Overseas Service.....	322	Nil	322
Totals.....	1356	Nil	1356
Add Non-qualifying Service.....			Nil
Total Service.....			1356

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 19 Nov. 45 2. Date S.O.S. Overseas

REMARKS:

Computer's Signature [Signature]
Checker's Signature [Signature]
Date Computed 1 Feb 46

N. R. M. A. OVERSEAS SERVICE

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.



# COMPUTATION OF WAR SERVICE GRATUITY

968

MEMBER'S NAME MICHAEL GORICHAN Register No. 196163  
(Christian Names) (Surname)

PAYEE'S NAME \_\_\_\_\_ File No. \_\_\_\_\_  
(Christian Names) (Surname)

ADDRESS 542 CHARRAN ST Date 12-2-46  
P.O. ST CHARLES P.Q. Service No. D 513353

DATE OF TERMINATION OF OVERSEAS SERVICE 19-11-45 Final Rank Pte  
 Date of Discharge 5-1-46

	AMOUNT	
	\$	c
<b>A. TOTAL QUALIFYING SERVICE</b>		
No. of day <u>322</u> = <u>10</u> <sup>(22)</sup> Periods @ \$7.50	75	00
<b>B. QUALIFYING OVERSEAS SERVICE</b>		
No. of days <u>322</u> less <u>22</u> Ineligible days, equal <u>300</u> Days @ 25c. per day	80	00
<b>C. SUPPLEMENT FOR OVERSEAS SERVICE</b>		
Daily Rate of Pay \$ <u>1.50</u>		
Subsistence Allowance \$ <u>1.25</u>		
Additional Pay \$ <u>—</u>		
Dependents' Allowance 1/30 \$ <u>—</u>		
TOTAL \$ <u>2.75</u> × 7 = \$ <u>19.25</u>		
No. of Days <u>322</u> × \$ <u>19.25</u> 183	33	87
<b>D. WAR SERVICE GRATUITY</b>		
Computed By <u>Barley</u> <u>Roof</u>	183	87
<b>E. DEDUCTIONS</b>		
Overpayment of		
(1) Pay & Allowance \$ _____		
(2) D.A. & A.P. \$ _____		
Other Deductions \$ _____		
Entered By <u>[Signature]</u>		
<b>F. AMOUNT PAYABLE</b>		
(This amount is payable in <u>3</u> monthly instalments of \$ <u>61.29</u> each)	183	87
<b>G. Monthly instalment not to exceed daily rate of Pay &amp; Allowances per (C)</b>		
\$ <u>2.75</u> × 30 = \$ <u>82.50</u>		
<b>REMARKS</b>		

N.R.M.A  
**CANADIAN ARMY (ACTIVE)**  
**DISCHARGE CERTIFICATE**

M.F.M. 7 (PAPER)  
 500M-2-45 (6061)  
 H.Q. 1772-39-1653

This is to Certify that No. D-513353 (Rank) PRIVATE

Name (in full) Michael GORICHAN enlisted or was

enrolled in the XXXX UNDER THE NATIONAL RESOURCES MOBILIZATION ACT 1940.

the CANADIAN ARMY (ACTIVE) at CONNAUGHT on the 21st

day of MAY 1942

She XXXX served in Canada UNITED KINGDOM AND CONTINENTAL EUROPE IN ( R.N.R. )

He XXXX and is now discharged from the service under Routine Order 1029 Para 10 by reason of

UNABLE TO MEET THE REQUIRED MILITARY PHYSICAL STANDARDS.

Medals, Decorations, Mentions, }  
 awarded in respect of service }  
 during this war } FRANCE AND GERMANY STAR

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age <u>27 Years</u> <u>9 months</u>	Marks or Scars <u>XXXX</u>
Height <u>5'</u> <u>10"</u>	<u>Vaccination Left Arm</u>
Complexion <u>Medium</u>	<u>Scar left knee</u>
Eyes <u>Grey</u>	<u>Other Active Army Service (This War)</u>
Hair <u>Brown</u>	<u>XXXX</u>

Michael Gorichan  
 Signature of Soldier

Date of Discharge 5 January 1946

(S. ECHENBERG, ) Issuing Officer  
COMMANDING No. 4 DISTRICT DEPOT, (CA). Colonel,  
 Rank

Date 5 January 1946

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 Director of Records (Army), Department of National Defence, Ottawa, Canada.

Place: 4 D. D. Montreal, South, Que.

Date: 5 January 46

I hereby acknowledge receipt of:-

- (a) Discharge Certificate MFM 7.
- (b) ~~War Service Book "General Service Orders" XXXXXXXXXXXXXXXXXXXXXXXX~~
- (c) Priority Suit Purchase Certificate and application for Civilian ration book.

and that Discharge Proceedings have been carried out to my satisfaction subject to reservations noted below."

(Strike out where not applicable).

Reservations:

Michael Gorichan

Signature of soldier.

1. That discharge certificate must be carried when wearing uniform;
2. That uniform can be worn only thirty (30) days after discharge, or when duly authorized in writing.

M.F.M. As an duplicate of the Certificate will be issued only person finding same is requested to forward it in an unopened envelope to the Director of Records (Army) Department of National Defence, Ottawa, Canada.

DEPARTMENT OF NATIONAL DEFENCE  
NAVY ===== ARMY ===== AIR FORCE  
STATEMENT OF WAR SERVICE GRATUITY

6  
ARMY

NAME	Michael (CHRISTIAN NAMES)	GORICHAN (SURNAME)	REGISTER NO.	196163
ADDRESS	542 Charran St. P.O. St. Charles, P.Q.		FILE NO.	
DATE OF TERMINATION OF OVERSEAS SERVICE	1944-11-45	FINAL RANK OR RATING	Pte	
DATE OF DISCHARGE		DATE OF DISCHARGE	11-12-46	5-1-46
A. TOTAL QUALIFYING SERVICE				\$
NO. OF DAYS 322 EQUAL TO 10 COMPLETE PERIODS AT \$7.50			75.00	
B. QUALIFYING OVERSEAS SERVICE				\$
NO. OF DAYS 322 LESS 22 INELIGIBLE DAYS, EQUAL TO 300 DAYS @ 25c. PER DAY SEE PAR. 2 OVERLEAF FOR EXPLANATION			75.00	
			SUB TOTAL	150.00
C. SUPPLEMENT FOR OVERSEAS SERVICE				
DAILY RATES AT DISCHARGE				
PAY		\$	1.50	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE		\$	1.25	
ADDITIONAL PAY		\$		
DEPENDENTS' ALLOWANCE 1/30 OF \$		\$		
TOTAL		\$	2.75	X7 = \$19.25
NO. OF DAYS		183	322	X\$19.25
			33.87	
D. WAR SERVICE GRATUITY				183.87
E. DEDUCTIONS				
OVERPAYMENT OF		PAY AND ALLOWANCES	\$	
		DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	\$	
OTHER DEDUCTIONS			\$	
F. AMOUNT PAYABLE				
(THIS AMOUNT IS PAYABLE IN 3 MONTHLY INSTALMENTS OF \$61.29 EACH)				183.87

THE WAR SERVICE GRANTS ACT, 1944, PROVIDES FOR YOUR RE-ESTABLISHMENT CREDIT IN THE AMOUNT SHOWN IN SUB TOTAL OF A. & B. THIS CREDIT IS AVAILABLE TO YOU IN CERTAIN CIRCUMSTANCES. INQUIRY IN THIS CONNECTION SHOULD BE DIRECTED TO THE DEPARTMENT OF VETERANS' AFFAIRS.

SEE REVERSE SIDE  
FOR EXPLANATION  
OF ITEMS A, B & C

G. MONTHLY INSTALMENT NOT TO EXCEED DAILY RATE OF PAY AND ALLOWANCES \$ 2.75 X30 \$ 82.50

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
AF	

TREASURY	
CHECKED BY	DATE

Capt.

SERVICE REPRESENTATIVE



No. D. 513353 Rank Private Name GORICHAN, Michael

Unit Black Watch(RHR) of <sup>Can.</sup> Date of death 2nd Nov., 1946.

Died at St. Anne de Bellevue, P.Q.

Cause Pulmonary tuberculosis due to actual incident causing death was a pulmonary haemorrhage.

Death *was* Due. CPC. d. *10-1-47* HQ 869-G-5933 d

N/K Mrs. Mary Gorichan Relationship Mother

Address 542 Charon Street, Pointe St. Charles, Montreal, P.Q.

Remains buried in Mount Royal Cemetery

Montreal, P.Q.

Grave **CHK** location Grave 541, Section G.944. 10M-2-45 (M-4640)

CONTRACTOR'S RULE FOR THIS SUBMITTER  
GRAVE DESPATCHED  
APR 21 1947

