D56232
VIGER
MARIO

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

"D"

Doit être remplie en triplicata, désignant chaque exemplaire en biffant les deux termes inutiles.
To be completed in triplicate. Copy designation to be shown by striking out terms not applicable.

M.F.M. 2 (Fr.)
A.F.B. 271
30M—11-36 (9359)
H.Q. 1772-45-18

Unité (Unit) Régiment de Maisonneuve C.A.S.F. Matricule (Regimental Number) D56232

~~Original~~ Duplicata ~~Triplicata~~

ARMÉE ACTIVE DU CANADA
CANADIAN ACTIVE SERVICE FORCE

~~Original~~ Duplicate Triplicate

FORMULE D'ENRÔLEMENT
ATTESTATION PAPER

WSG COMPLETED

1. Nom (Surname): Viger
2. Prénoms (Christian Names): Mario
3. Adresse actuelle (Present Address): 920 St. Lawrence Blvd., Montreal
4. Date de naissance (Date of birth): Feb. 19, 1917
5. Lieu de naissance (Place of birth): Canada (Pays)—(Country) Quebec (Comté ou province)—(County or Province) Montreal (Ville ou canton)—(Town or Twp.)
6. Religion (state denomination): Roman Catholic
7. Métier ou profession (Trade or Calling): Office clerk
8. Marié, veuf ou célibataire (Married, Widower or Single): s
9. Nom du plus proche parent (Name of next of kin): D/56232 VIGER M. (Regt.de Mais)
10. Parenté de celui-ci (Relationship): Mrs. Joan K. Viger, 14, Priory Close, Pevensey Bay, Sussex, England.
11. Adresse du plus proche parent (Address of next of kin): ~~57 St. James St., W., Montreal~~
12. Avez-vous servi dans les forces navales, militaires ou aériennes? (Have you served in any Naval, Military or Air Force?): no
13. Si vous avez accompli du service de guerre antérieur, spécifiez l'arme, la force et les détails régimentaires (If previous war service, state arm, force and regimental particulars): no
14. Faites-vous actuellement partie de la milice active du Canada ou avez-vous déjà servi dans cette force? (Do you now belong to or have you served in the Active Militia of Canada?): yes

Regiment de Maisonneuve HQ Sept. 1st, 1939
(Indiquez l'unité et la date de l'enrôlement)
(Give unit and date of attestation)

DÉCLARATION FAITE PAR L'HOMME LORS DE L'ENRÔLEMENT
DECLARATION TO BE MADE BY MAN ON ATTESTATION

Je, soussigné, Mario Viger, déclare solennellement que les renseignements ci-dessous mentionnés sont vrais et je m'engage, par les présentes, à servir dans l'armée active du Canada, tant qu'il existera ou que l'on aura à craindre une guerre, une invasion, une émeute ou une insurrection, aussi bien que pour la période de démobilisation après que la dite crise aura cessé, et, en tout cas, pour une période d'au moins un an, si Sa Majesté requiert mes services.

Date September 8, 1939 Mario Viger
(Signature de la recrue)

SERMENT PRÊTÉ PAR LA RECRUE LORS DE L'ENRÔLEMENT
OATH TO BE TAKEN BY MAN ON ATTESTATION

Je, Mario Viger, promets sincèrement et jure (ou déclare solennellement) que je serai fidèle et porterai sincère allégeance à Sa Majesté.

Mario Viger
(Signature de la recrue)

CERTIFICAT DU MAGISTRAT, DU JUGE DE PAIX OU DE L'OFFICIER QUI FAIT PRÊTER LE SERMENT
CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER

J'ai averti l'homme susnommé que s'il répondait inexactement à l'une quelconque des questions précédentes, il serait passible de punition, tel que prévu par la loi.

Les questions et les réponses ci-dessus lui furent ensuite lues en ma présence.

Je me suis assuré qu'il comprenait chaque question et que sa réponse à chacune d'elles a été dûment inscrite telle qu'il l'a donnée, et il a fait et signé la déclaration ci-dessus et a prêté serment devant moi,

à Montreal ce 8 jour de Sept 1939

Lucien Laverdure capt.
(Signature du magistrat, du juge de paix ou de l'officier qui fait prêter le serment)

Régiment de Maisonneuve
(Titre, grade et unité ou emploi)

N.B. On désire attirer l'attention sur le fait que toute personne qui répond inexactement à l'une quelconque des questions ci-dessus est passible d'un emprisonnement de six mois.
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.

F.M. RECEIVED SEP 1 1940

FINGERPRINTED—CAIB

Etat de service de Vigen (Nom—Surname) Mario (Prénoms—Christian Names) Matricule P 56232
Record of Service of — Regimental Number

APTITUDES
Qualifications

Militaires
Military

Professionnelles ou commerciales
Business or Professional

Civiles ou de métier: Commis de Bureau.
Trade or Civil

Techniques
Technical

Langues: Français Anglais.
Languages

QUALITÉS ÉDUCATIONNELLES
Educational qualifications

Académies High School or Collegiate: Plateau 2 ans. (années complétées—years completed)

Graduation ou (or) Immatriculation Matriculation (Spécifier—Specify)

*Collège

*Université
University

*(Mentionnez le nom de l'institution, les années ou cours complétés et les diplômes obtenus)
(Name of institution, courses or years completed, and degrees obtained to be shown)

Toutes les recrues enrolées le seront comme simples soldats, la nomination ou la promotion à un grade supérieur devant être indiquée dans l'espace ci-dessous prévu à cette fin.
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.

Rapport — Report: Date	Reçu de — From whom received	Etat des promotions, rétrogradations, mutations et permutations, maladies ou blessures, rapports, etc., à compter de la date de son enrôlement dans les troupes de campagne — Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on strength of Field Force	Grade indiqué — Rank shown	Prenant date le — Effective date	Unité — Unit	Endroit — Place	Autorisation — Authority: N°, Partie 11, Ordres du jour. Liste des morts et blessés, etc. — Part II D.O. No Cas. List, etc.	Daté le — Dated
		Affecté lors de son enrôlement — Joined on enlistment			Le R.de Mais.			
Sept.8th		Coy. D.	Private	Sept.8th	C.A.S.F.	Montréal	9-I	Sept.1st39
Déc 4	5602	Promotion L.	Caporal	4/12/39	"	"	#100	Déc 4
6/2/40	—	Admis a l'hopital St Jean	"	5/2/40	"	"	O.R. Part 11#37-6	12/4/40
14/2/40	—	Absent sans permission de 1 jour de paie	"		"	"	O.R. Part 11#45-10	"
15/2/40	—	Retour de l'hopital	"	15/2/40	"	"	O.R. Part 11#46-3	"
17/2/40	1	Hopital de 5/2/40 au 15/2/40 11 jours a 0.75	"	17/2/40	"	"	O.R. Part 11#48-4	"
2/3/40		Admis a l'hopital St Jean	"	1/3/40	"	"	O.R. Part 11#62-5	"
8/4/50		De retour de l'hopital St Jean sur un arrêt de solde de 37 jours a $ 0.75 F.R. & I 222 (B) aut. Pay list of R de Mais. for month of April 1940	"	6/4/40	"	"	O.R. Part 11# 94.7	"

Pour les entrées supplémentaires, se servir de M.F.M. 1 et 2 (a) (Fr.)
For additional entries use M.F.M. 1 and 2 (a) (Fr.)

Recevez-vous ou avez-vous déjà reçu une pension ou compensation pour invalidité? Si oui, donnez détails. Non

Are you receiving or have you in the past received, disability pension or compensation? If so give details ..... No

CERTIFICAT DE L'EXAMEN MÉDICAL
CERTIFICATE OF MEDICAL EXAMINATION

Nom en entier (Name in full) VIGER, Mario ..... Date Sept. 8, 1939.

PARTIE 1. Renseignements obtenus de la recrue.
Part 1. Information obtained from the applicant.

1. Age 22 ..... 2. Avez-vous déjà souffert de l'une quelconque des maladies suivantes? (Have you ever suffered from any of the following diseases?)

a. Rhumatisme (Rheumatism) ..... No
b. Tuberculose (Tuberculosis) ..... No
c. Bronchite ou asthme (Bronchitis or asthma) ..... No
d. Affection cardiaque (Heart disease) ..... No
e. Maladie du rein ou de la vessie (Kidney or bladder disease) ..... No
f. Gastrite intestinale (Gastro-intestinal) ..... No
g. Hernie (Rupture) ..... No
h. Varices (Varicose veins) ..... No
i. Pieds plats ou déformés (Flat or deformed feet) ..... Yes
j. Affection nasale (Nasal trouble) ..... No
k. Maladie des oreilles (Ear disease) ..... No
l. Maladie des yeux (Eye disease) ..... No
m. Epilepsie (Epilepsy) ..... No
n. Maladie nerveuse ou mentale (Nervous or mental disease) ..... No
o. Syphilis ..... No
p. Gonorrhée (Gonorrhœa) ..... No
q. Avez-vous déjà porté des verres? (Have you ever worn glasses?) ..... No

Mario Viger
(Signature de la recrue)—(Signature of recruit)

Observations des examinateurs (Examiners remarks *re* above) ..... Slight degree flat feet; no disability.

PARTIE 2. Renseignements obtenus par l'examen médical. La recrue doit être déshabillée.
Part 2. Information obtained by medical examination. The recruit must be stripped

1. Marques ou cicatrices d'identification (si celles-ci sont opératoires, obtenir les détails) (Identification marks or scars (If operative obtain history)). ..... None

2. Taille (Height) 5 pieds (feet) 7 pouces (inches).
3. Poids (Weight) 137 livres (pounds)
4. Teint (Complexion) Blond Yeux (Eyes) Brown Cheveux (Hair) Brown
5. Développement (Development) Good — Bon—Good / Passable—Fair / Médiocre—Poor
6. Tour de poitrine—Circonférence, pleine expansion (Chest measurement—Girth on full expansion) 36 pouces (inches) Degré d'expansion (Range of expansion) 2 pouces (inches)
7. Vue, œil droit (Vision, right) 20/20 œil gauche (left) 20/20
8. Ouïe, oreille droite (Hearing, right) W.V.20 gauche (left) W.V.20
9. Condition de la bouche et des dents (Condition of mouth and teeth) Teeth missing. Cavities.
10. Les anormalités (congénitales et pathologiques) constatées lors de l'examen sont les suivantes: (The abnormalities (congenital and pathological) found on examination are as follows:)

PARTIE 3. Nous, les examinateurs, ne trouvons aucune trace des maladies énumérées dans la question 2 de la partie 1, sauf tel que mentionné dans les observations. Nous avons examiné la recrue conformément aux instructions de la brochure "Physical Standards and Instructions for the medical examination of Recruits",

et il peut être classé dans la catégorie A

Observations spéciales lorsque la catégorie est inférieure à A (Special remarks when category lower than A)

(Président)—(President) (Membre)—(Member) (Membre)—(Member)

VACCINATIONS, INOCULATIONS, COMMISSIONS, RECLASSIFICATION DE LA CATÉGORIE MÉDICALE
VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Détails succints et signature / Brief details and signature	Date	Détails succints et signature / Brief details and signature
Nov 30	Re Examined, Normal Nose, Ears, Reflexes Category A	X-Ray exam - neg.	
		4-12-39	
		11-12-39	T.A.B
		18-12-39	
		26-1-40	T. tetanus
		7-3-40	
		10-2-40	Vaccination
		8-11-40	TAB (0.5cc)
		26-11-41	TABT (1/2cc)
		23-7-42	TABT
		30. 11. 42	½ Vacc

Pour les entrées supplémentaires, se servir de M.F.M. 1 et 2 (a) (Fr.)
For additional entries use M.F.M. 1 and 2 (a) (Fr.)

Recevez-vous ou avez-vous déjà reçu une pension ou une compensation pour invalidité? Si oui, donnez détails. NON

Are you receiving or have you in the past received, a pension or compensation? If so give details. No

Matricule / Regtl. No. ..... Grade / Rank ..... Nom / Surname ..... Prénoms / Christian Name .....

Garnison — Station	Date d'arrivée à la garnison — Date of Arrival at the Station	Date de — Dates of: L'admission à l'hôpital — Admission into Hospital: Jour — Day	Mois — Month	Année — Year	La sortie de l'hôpital — Discharge from Hospital: Jour — Day	Mois — Month	Année — Year	Maladie — Disease	Nombre de jours à l'hôpital — Number of days in hospital	Détails sur la nature et l'origine de la maladie; dire si elle était bénigne ou grave, si elle est entièrement guérie, et si un traitement spécial a été adopté. Dans le cas des maladies vénériennes, mentionner la nature de la maladie première et dire si on a prescrit le mercure. Si la maladie est accidentelle, spécifier si elle fut contractée en service et si un conseil d'enquête a été tenu. Détails et dates au sujet des fausses dents et des appareils chirurgicaux fournis. — 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 du médecin — Signature of Medical Officer
Montreal		5	2	40	15	2	40	V.D.G.	11	Recovered	J.H.B.
Montreal		1	3	40	6	4	40	V.D.S.	36	Stated was due to venereal exposure	J.H.B.

Pour les entrées supplémentaires, se servir de **M.F.M. 1 et 2 (b) (Fr.)**
For additional entries use **M.F.M. 1 and 2 (b) (Fr.)**

Etat de se[illegible] du No. D 56,232
Statement of th[illegible]ce of No.

Grade Pte.
Rank

Feuille No. 2
Sheet No.

Nom Viger Mario
Name

M.F.M. 1 & 2 (a) Fr.
5 M—11-36 (9359)
H.Q. 1772-45-18

Rapport — Report: Date	Rapport — Report: Reçu de — From whom received	Mention des promotions, rétrogradations, mutations et permutations, maladies ou blessures, rapports, etc. (Suite de la page 2, M.F.M. 1 et 2) — Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 and 2)	Grade indiqué — Rank shown	Prenant date le — Effective date	Unité — Unit	Endroit — Place	Autorisation — Authority: N° Partie II, Ordres du jour Liste des morts et blessés, etc. — Part II D.O. No. Casualty list, etc.	Autorisation — Authority: Daté le — Dated
7-5-40		Retrograde au rang de soldat sur sa propre demande	Pte.	3-5-40	R de Mais C.A.S.F.	Montreal	118-8	8-5-40
5-6-40		A.W.L. de 1400 hres le 1-6-40 a 2300 hres 3-5-40. Perd 3 jours de solde. Condamne a 14 jours de C.B.	"		" Valcartier		140-2	6-6-40
25-6-40		A.W.L. de 2200 le 19-6-40 a 1800 le 21-6-40. Arret de solde 2 jours. Condamne a 7 jours de C.B.	"		"	"	157-8	26-6-40
24-8-40		Embarcation H.M.T. HALIFAX	"	24-8-40	"	On Board. E 61	219	24-8-40
5-9-40		TOS CASF (Overseas) on transfer on 25-8-40 and disembarkad at Greenock Scotland on	"	5-9-40	" Adelshort Eng.		219	5-9-40
9-9-40		Is posted to "R" Coy	"	9-9-40	"	"	222-2	9-9-40
		Landing Reserve	"	Oct 6-40	R de Mais	Field	12	18 Oct 40
		168 hrs detention AAs (5(2)) forfeits seven days pay FRO 1499 (1)(b)	"	12 Nov 40	"	"	25	15 Nov 40
SOS		SOS to No 2 Can Inf Div Unit	Pte	23 Feb 41	R de Mais	Field	20	5 Mar 41
	SOS	T.O.S. on Trans from Regt de Mais	Pte	24 Feb 41	2/IHU	Witley	49	27 Feb 41
		Adm. to C. Gn. C.	"	12 Mar 41	2/IHU	"	63	15 Mar 41
		Trans. No 1 Gen. [illegible] Hosp.	"	14 Mar 41	2/IH[illegible]	"	67	20 Mar 41

Etat de service du No. D56232
Statement of the service of No.

Grade
Rank

Feuille No.
Sheet No.

Nom Vigers M.
Name

M.F.M. 1 & 2 (a) Fr.
5 M—11-36 (9359)
H.Q. 1772-45-18

Rapport — Report: Date	Rapport — Report: Reçu de — From whom received	Mention des promotions, rétrogradations, mutations et permutations, maladies ou blessures, rapports, etc. (Suite de la page 2, M.F.M. 1 et 2) — Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 and 2)	Grade indiqué — Rank shown	Prenant date le — Effective date	Unité — Unit	Endroit — Place	Autorisation — Authority: N° Partie II, Ordres du jour Liste des morts et blessés, etc. — Part II D.O. No. Casualty list, etc.	Autorisation — Authority: Daté le — Dated
		Forfeits 1 days Pay under FR+I (149)(1)(a)			2/1HU		88	15 Apr.
		Forfeits 1 days Pay under FR+I 149(1)(e)	Pte	5 Apr. 41	"1 G. Hosp.	—	* 42	8 Apr. 41
		~~Trans~~ Discharged 1 Gen hosp.	Pte	15 Apr 41	2/1HU	Wildly	90 Cas'lt	19 Apr 41 18 Apr 41
		AWL while a defaulter 1-5-41 Awarded 14 days det & forfeit 14 days pay under FR. 149(1)(b)	Pte	2 May 41	2/1HU	"	104	3 May 41
		Released from det. (1 days rem.)	Pte	14 May 41	2/1HU	"	114	15 May 41.
		AWL-31-5-41 - 10 days Det'n - Forf total 11 days pay FR+I 149 (1) a & b	Pte	2 June 41	"	"	130	3 June 41
		Released from Detention	Pte	11 June 41	"	"	137	11 June 41
		Adm. 15th Gen hosp	Pte	1 July 41	2/1HU	"	167 4.7.41 Cas'lt	17 July 41
		Discharged from 15th G. Hosp	Pte	16 July 41	"	U.K	167	17 July 41
		AWL-29-7-41 - 14 days C.B. Forf 1 days pay FR+I 149 (1) a	Pte	30 July 41	"	U.K.	179	31 July 41
SOS		S.O.S. on posting R. de M.	Pte.	2 Oct 41	2/1HU	U.K.	234	3 Oct 41
TOS		TOS from 2/1HU and Rem No 5255	Pte	3 Oct 41	R de Maio	UK	66	10 Oct 41
		Off AA Sec 19. Drunk 1st Off. admonished	Pte	18 mar 42	R de Maio	U.K	27	22 Apr 42
		awd. 7 days CB AA 15(1) AWL Forf. 1 days pay	Pte	19 May 42	R de M	U.K	43	10 July 42
		attd. F.A.P. from R de Maio to 11 aug 42	Pte	19 July 42	R de M 2A/TK	U.K	54 63	9 Sep 42 7 Aug 42
		adm 10 Fd. amb.	Pte	27 aug 42	R de M	U.K	54	9 Sep 42
		Rem'd 10 Fd amb. to 2 C.C.S	Pte	27 aug 42	R de M	U.K	54	9 Sep 42
		Discharged 2 C.C.S	Pte	30 aug 42	R de M	U.K	54	9 Sep 42

Statement of the Service of No. D56232 Rank ..... Sheet No. .....

M.F.M. 1 & 2A
40/P & S/119

Name Nigen M.

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
		Embarked at ..... UK ..... on 5 Jul 44	A/CPL		R de M	21 AG	58	14 Jul 44
		Disembarked at ..... France ..... on 9 Jul 44						
M47	✓	To be a/L/Sgt.	L/cpl (a/L/Sgt)	28 Jul 44	R de M	21 A Gp	45	12 Aug 44
	✓	To be A/Sgt	A/L/Sgt	8 Aug 44	R de M	21 A Gp	49	27 Aug 44
M47	✓	To be Cpl	a/sgt	9 Sep 44	R de M	21 A Gp	53	15 Sep 44
M139		✓ K illed	A/Sgt	29 Sept 44		AEF	A499	
		Sos. killed in action.	a/sgt	29 Sep 44	R de M	21 a gp	60	21 Oct 44

Statement of the Service of No. D56232 Rank..... Sheet No.....

M.F.M. 1 & 2A
40/P & S/119

Name VIGER M

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
		Granted Permission to marry Mrs Joan Kathleen Loadsman	Pte	17 Nov 42	R de M	U.K	72	10 Dec 42
		married with Perm. to Mrs Joan Kathleen Loadsman at CHICHESTER SUSSEX	ENGLAND	18 Nov 42	R de M	U.K	72	10 Dec 42
CHANGE OF N.O.K. NOW.	WIFE.	From Mr Lionel Janelle (Friend)	—	—	—	—	—	— — —
See Change		MRS JOHN KATHLEEN VIGER ~~TO: GLENTHORNE GORDON AVE, EAST BOGNOR REGIS.~~	ENGLAND		R de M	U.K	72	~~10 Dec 42~~
		Priv. Leave 14 days to 1 Dec 42	Pte	17 Nov 42	R de M	U.K	71	7 Dec 42
		awarded 21 days F.P. Sec 15(1) A.A. Total Forf 22 days Pay.	Pte	10 Dec 42	R de M	U.K	74	18 Dec 42
		Son Joseph Bernard Ulyade Mario BIRTH: at Bognor Regis Sussex Eng.	Pte	5 Jan 43	R de M	U.K	6	27 Jan 43
		to wife. Joan Kathleen Viger.	"	"	"	"	-	- - -
		Rem'd from 4 Cdn FD. Dr Stn 40	Pte	29 July 43	R de Mais	UK	40	6 aug 43
		Adm 40 4 Cdn FD Dr Stn	Pte	29 July 43	R de Mais	UK	40	6 aug 43
		Daily reg'l rate of pay of $1.50	Pte.	10 June 43	R de M	UK	48	17 Sept 43
(1/40)		Daily reg'l rate of $1/40	Pte	10 Apr 43	R de M	UK	65	10 DEC 43
Add N/K		MRS JOHN KATHLEEN VIGER (WIFE) "PEVENSEY" 14 PRIORY CLOSE BOGNOR REGIS	SUSSEX	ENG.	R de M	UK	65	10 DEC 43
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
(C19)		Adm 40 2 Cdn CCS.	Pte	11 Feb 44	R de M	UK	9	21 Feb 44
(C19)		appt A/Sgt/cpl.	A/Sgt/cpl	8 Feb 44	R de M	UK	11	29 Feb 44
		To be L/cpl.	L/cpl	8 May 44	R de M	Field	34	23 Feb 44
C123		To be a/cpl.	a/cpl.	9 June 44	R de M.	21 A Gp.	36	4 July 44

Sheet No.....

POSTINGS FROM O/S CASUALTY LISTS

To be attached to M.F.M. 1 or M.F.M. 2

Regt'l No. D 56 236 Rank Sgt Surname Viger Christian Name Marie

Unit	Hospt.	Admitted			Discharged			Hospt. Days	Disease or Injury	Remarks	Cas. List No.
		Day	Mo.	Year	Day	Mo.	Year				
Regt de Maisonneuve									Killed 29-9-44		O-499

Records B3-49
H.Q. 1772-45-8
100M—7-44 (5202)

No. J56232 Name VIGER M. Sqn., Battery, or Company } Corps INFANTRY. Date of enlistment } 1-9-39 G.C. Badges } N.A Service or Proficiency Pay } 1.50

M.F.M. 6
(A.F.B. 122)
40/P & S/136 (2637)

Date of last entry in Company Conduct Sheet } NIL No. and date of last drunk } N/A Period not reckoning towards freedom from extra fine } N/A Sheet No. 1 Signature O.C. Company, etc. } [illegible] Capt. Character

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
MONTREAL	30-4-40	L/CPL		A.A. 15 (1) WOAS - AWL FROM 2245 HRS 30-4-40 UNTIL 2245 HRS 1-5-40. TOTAL ABSENCE 1 DAY.	P.S.M. THIBODEAU		3-5-40	MAJOR BELANGER	FORFEITS 1 DAY'S PAY FR & I 149 (1) (A)
VALCARTIER	1-6-40	PTE		A.A. 15 (1) WOAS - AWL FROM 1400 HRS 1-6-40 UNTIL 2300 HRS 3-6-40 - TOTAL ABSENCE 2 DAYS 9 HRS.	P.S.M. THIBODEAU	14 DAYS C.B.	4-6-40	MAJOR BELANGER	FORFEITS 2 DAYS PAY FR & I 149 (1) (A)
VALCARTIER	19-6-40	PTE		A.A. 15 (1) WOAS A.W.L. FROM 2200 HRS 19-6-40 UNTIL 1800 HRS 21-6-40 - TOTAL ABSENCE 1 DAY 20 HRS.	C.S.M. FOREST P.S.M. THIBODEAU	7 DAYS C.B.	25-6-40	LT. COL. BOURASSA	FORFEITS 2 DAYS' PAY FR & I 149 (1) (A)
FIELD	11-11-40	PTE.		A.A. 40 (1) WOAS NEGLECT TO THE PREJUDICE OF GOOD ORDER AND MILITARY DISCIPLINE FAILED TO APPEAR ON PARADE	C.S.M. RAPIN	7 DAYS DETN.	12-11-40	MAJOR R. BROSSEAU	FORFEITS 7 DAYS PAY FR & I 149 (1) (B)

(P.T.O.)

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
FIELD	22-4-41	PTE		1ST CHARGE: A.A.40 W.O.A.S. CONDUCT TO THE PREJUDICE OF GOOD ORDER AND MILITARY DISCIPLINE. WAS NOT PROPERLY DRESSED ON PARADE. 2ND CHARGE A.A.40 W.O.A.S. CONDUCT TO THE PREJUDICE OF GOOD ORDER AND MILITARY DISCIPLINE. NEGLECTED TO OBEY AN ORDER GIVEN BY A SUPERIOR OFFICER.	C.S.M. RADIN SJT CASSIDY C.S.M. RADIN SJT. CASSIDY SJT. ANGRIGNON	14 DAYS C.B.	23-4-41	LT.COL. MATHEWSON	
FIELD	1-5-41	PTE		A.A.10. W.O.A.S., BREAKING OUT OF BARRACKS WHILST A DEFAULTER FROM 1800 HRS 1-5-41 TO 2300 HRS 1-5-41 (5 HRS)	CPL MATHIEU L/CPL BOURGET	14 DAYS DETN.	2-5-41	LT.COL. MATHEWSON	
FIELD	31-5-41	PTE		1ST CHARGE: A.A.15(1) W.O.A.S., AWL FROM 2230 HRS 31-5-41 TO 1800 HRS 1-6-41 (19 HRS) 2ND CHARGE: A.A.40 W.O.A.S., NEGLECTING TO OBEY A CAMP ORDER #350. WAS FOUND IN GUILDFORD WITHOUT A PASS	SJT. ANGRIGNON L/CPL LAMOUREUX LT. M. BLUTEAU	10 DAYS DETN.	2-6-41	LT.COL. MATHEWSON	FORFEITS 1 DAY'S PAY FR-I 149 (1) (A)

No. 256232 Name VIGER M. Sqn., Battery, or Company } Corps INFANTRY Date of enlistment } 1-9-39 G.C. Badges } N/A Service or Proficiency Pay }

M.F.M. 6
(A.F. B.122)
40/P & /S136 (2965)

Date of last entry in Company Conduct Sheet } 31-5-41 No. and date of last drunk } N/A Period not reckoning towards freedom from extra fine } Sheet No. 1 Signature O.C. Company, etc. } J.B. Lieutenant Capt. Character

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
FIELD	29-7-41	PTE		A.A. 15(1) W.O.A.S, A.W.L. FROM 2230 HRS 29-7-41 TO 0600 HRS 30-7-41. (7 HRS. 30 MINS.)	SJT. ANGRIGNON CPL BOURGET	14 DAYS C.B.	30-7-41	MAJOR R. DUPUIS	FORFEITS 1 DAY'S PAY FRI 149 (1)(A)
FIELD	15-8-41	PTE		1ST CHARGE- A.A. 40. W.O.A.S, CONDUCT TO THE PREJUDICE OF GOOD ORDER AND MILITARY DISCIPLINE IN THAT HE WAS IMPROPERLY DRESSED. 2ND CHARGE: A.A. 40 W.O.A.S. CONDUCT TO THE PREJUDICE OF GOOD ORDER AND MILITARY DISCIPLINE IN THAT HE ABSENTED HIMSELF FROM #2 A.A. POST WHILST ON DUTY.	SJT. ANGRIGNON CPL. BOURGET C.S.M. BERRY C.S.M. HUNT	14 DAYS C.B.	18-8-41	LT. COL. MATHEWSON	J.B.

(P.T.O.)

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
FIELD	16-3-42	PTE	1	A.A. 19. WOAS. DRUNKNESS IN THAT HE AT 1700HRS WAS DRUNK	P.S.M. THIBAULT Cpl. GAUDREAU	ADMONISHED	18-3-43	MAJOR BELANGER	
FIELD	17-5-42	PTE		A.A. 15(1) WOAS, AWL FROM 2300HRS 17-5-42 TO 0800HRS 18-5-42 (9 HRS)	P.S.M. THIBAULT	7 DAYS C.B.	19-5-42	CAPT. MASSUE	FORFEITS 1 DAY'S PAY FRLI 149(1)(A)
FIELD	29-10-42	PTE		A.A. 15(1) WOAS, AWL FROM 0830 HRS TO 0900 HRS 29-10-42 (30 MINS.)	SJT LAVOIE L/Cpl. PAGE	7 DAYS C.B.	22-11-42	LTCOL. DE ROME	
FIELD	7-12-42	PTE		A.A. 15(1) WOAS, AWL, FROM 1400 HRS 7-12-42 TO 1100 HRS 8-12-42 (21 HRS.)	SJT LAVOIE PTE PAQUIN	21 DAYS F.P.	10-12-42	LTCOL BISAILLON	FORFEITS 1 DAY'S PAY FRLI 149(1)(A) 21 DAYS PAY FRLI 149(1)(B)
FIELD	1-7-43	PTE		A.A. 15(1) WOAS, AWL FROM 2230 HRS TO 2305 HRS 1-7-43 (35 MINS.)	L/Cpl. LAMOUREUX Cpl. ARBOUR	ADMONISHED	2-7-43	LT-COL. BISAILLON	
Field	16-11-43	PE		AA 15(1) W.O.A.S A.W.L from 1430 hrs 16-11-43 till 1850 hrs 16-11-43 4 hrs 20 mins	[illegible]	14 days CB	22-11-43	[illegible]	

SERVICE AND CASUALTY FORM

PART I (For all ranks)

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

Unit: LE REGIMENT DE MAISONNEUVE, C.A.S.F. Regimental Number: D 56,232

(g)

Form or other rity for entry to be shown

(f)

Army rank as at (e) | Army autho

1. Surname: Viger
2. Christian Names: Mario
3. *Substantive Rank and Appointment:
   *Acting Temporary or Local Rank: Cpl (Actg)
   giving date:
   *To be entered in pencil to facilitate alteration.
4. Place of birth: Montreal, Que. Canada.
5. Date of birth as declared on attestation: 19 fev. 1917
   (A)
6. Date of enlistment: 8 sept. 1939
7. Place of enlistment: Montreal, Que. Canada.
8. Residence at time of enlistment: 920 St Laurent, Momt. Que. Can.
9. (B) Special conditions (if any) of enlistment or rate of pay:
10. (C) Any subsequent variations of conditions of service:
11. Religion: C.R.
12. If married, state date: ~~C.~~ Married 18 Nov 42
13. Trade on enlistment: Commis de Bureau
14. Corps, trade and grade:
15. (D) Qualifications:
16. (E) Miscellaneous entries:

(17) Regiment or Corps: R de M. | Unit (Battn., etc): D

(18) Medical

Category	Date	Authority
"A"	8-9-39	Capt. L. Ostiguy

(19) Next of kin (entries to be made in pencil)
Mrs Joan Kathleen Viger, wife
"Pevensey" 14 Priory Close
Bognor Regis, Sussex, 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
		R de M.	On Board.				
24-8-40		C.A.S.F.	Embarcation H.M.T.	E 61	24-8-40	Pte.	
5-9-40		"	TOS CASF(Overseas) on transfer on 25-8-40 and disembarked at Greenock on		5-9-40	Pte.	219
9-9-40		"	Posted to R Coy.	Aldershort	9-9-40	"	221-2
12 OCT 40	3011	"	Granted Landing Leave	Aldershot	6-10-40	"	Pt.11 No.12 d/18 OCT 40
12 Nov 40	3011	"	Awarded 168 hrs Detention for "Failing to appear at place of parade, forfeit 7 days pay	"	11-11-40	"	" 25 d/15 Nov 40
28-2-41	OC.	"	S.D.S. to 2nd Cdn Inf Holding Unit	Eng	23-2-41	"	" 19 5-3-41
		1/C.I.H.U	T.O.S. from R de M.	Shilley	24/2/41	"	D.O.49 27/2/41
		"	Adm to C.M.C.	"	12/3/41	"	D.O.63 12/3/41
		"	Proceeds to No 1 Cdn Gen hosp.	"	14-3-41	"	D.O.67 20/3/41
15.4.41		"	Awarded 2 days Pay & W.L. from Hospital	"	15.4.41	"	D688
17.4.41		"	Discharged No 1 General Hospital	"	15.4.41	"	D690
3.5.41		"	A.W.L. Thurs while a defaulter. 14 days Det. 14 days pay	"	2.5.41	"	D.O.124
15-5-41		"	Released from Det. 1 day remission	"	14.5.41	"	D.O.115
		"	AAIS AWL from 2230 hrs 1800 hrs 1-6-41				
			16 days Det. Arrests & Stoppage	"	2-6-41	"	D.O.130 d/3-6-41
11-6-41		"	Released from Detention (Remission)	"	11-6-41	"	D.O.137 d/11-6-41
18/7/41	AO.	"	Admitted 15 Gen Hospital	"	1/7/41	"	167 17/7/41
18/7/41	"	"	Discharged from 15 Gen Hospital	"	16/7/41	"	167 17/7/41
11/8/41	"	"	AWL from 2230 hrs 29/7/41 to 0630 hrs 30/7/41 (7 hrs 30 mins) awarded 14 days CB & forfeits 14 days pay.	"	30/7/41	"	179 31/7/41
2-10-41	D.O.	"	S.D.S. to R de Transmanche	"	2-10-41	"	234 3-10-41
6 Oct 41	OC.	R de Mais	T.O.S. from No 2 C.I.H.U.	Field	3 Oct 41	"	D.O.66 10 Oct 41
		"	Admonished for Offence on 19	"	18 Mar 42	"	" 27-22 Apr 42
3 Jul 42	"	"	7 days C.B. for Ovt. 9 hrs. Forf. 1 days pay F.R.R. 149 (1) (b)	"	19 May 42	"	" 43-10 Jul 42
17 Aug 42	"	"	Att to 2 Cdn A/TK Regt for 19 Jul 42 to 11 Aug 42	"	19 Jul 42	"	" 54-9 Sep 42
1 Sep 42	"	"	Adm 11 Fd Amb and rejoined to 2 Cdn R	"	27 Aug 42	"	" 54-9 Sep 42
1 " 42	"	"	Absch 2 Cdn R	"	30 " 42	"	
17 Nov 42	"	"	14 days Leave F.R.	"	17 Nov 42	"	" 71-7 Dec 42
23 Nov 42	"	"	Granted permission to marry Mrs Joan Kathleen Loodsman on 17 Nov 42		17 Sep 42		
23 Nov 42	"	"	Married with permission to Mrs Joan Kathleen Loodsman of Chichester, Sussex England	"	18 Nov 42		" 72-10 Dec 42
23 Nov 42	"		Change of N-of-K recorded			"	

SERVICE AND CASUALTY FORM

(PART 11)

M.F.M. 4 (a) (Part II)
40/P & S/412 (8/42)

Regiment or Corps: R. de Mais Regimental Number: D56232

Substantive Rank: Pte Surname: Viger Christian Names: Mario

Acting Temporary or Local Rank: Pte

(To be entered in pencil to facilitate alteration)

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry shown
10 Dec 42	Ob	R de Mais	21 days F.P. for Off 21 hours. Forf 21 days pay F.R. & I. 149(c)(B). Forf 1 days pay F.R. & I. 149(c)(A) Total forf. 22 days pay	Field	10 Dec 42	Pte	WO 74 - 18 Dec 42
21 Jan 43	"	"	Son, Joseph, Bernard, Ulysse Mario, born at Bognor Regis, Sussex, England	"	5 Jan 43	"	" 6-27 Jan 43
20 Apr 43	"	"	7 days Pub Leave	"	23 Mar 43	"	" 21-16 Apr 43
15 Jul 43	"	"	7 " " "	"	22 Jun 43	"	" 38-26 Jul 43
	"	"	Adm to F.W.D. and remd to duty	"	29 Jul 43	"	" 40-6 Aug 43
1 Sep 43	"	"	Granted Daily Rates of Pay of $ 1.50 per diem	"	10 Jun 43	"	" 48-17 Sep 43
3 Dec 43	"	"	Next of Kin recorded	"	"	"	" 65-10 Dec 43
27 Nov 43	"		Granted Daily Rates of Pay of $ 1.40 per diem	"	29 Oct 43	"	" 65-10 Dec 43
15 Jan 44	"	"	Awarded Canadian Volunteer Service Medal and Clasp	"	15 Jan 44	"	" 4-44
23 Feb 44	"	"	Appt'd A/L/cpl	"	8 Feb 44	A/L/cpl	" 18-29 Feb 44
15 Jun 44	"	"	To be L/cpl	"	8 May 44	L/cpl	" 34/44
23 Jun 44	"	"	To be A/Sgt	"	9 Jun 44	L/cpl (A/Sgt)	" 36/44
			Embarked U.K. 5 Jul 44 Disembarked France 9 Jul 44				" 38/44
	"	"	To be ~~Cpl~~ A/L/sgt	"	28 Jul 44	A/L/sgt	" 45/44
	"	"	To be A/sgt	"	8 Aug 44	A/sgt	" 49/44
	"	"	To be Cpl	"	9 Sep 44	Cpl (A/sgt)	" 53/44
	"	"	SOS Killed in Action	"	29 " 44	"	" 60/44

No. D.56232 Rank Sergeant Name VIGER, Mario

Unit Regiment de Maisonneuve Date of death 29th Sept., 1944.

Died at ~~France~~ BELGIUM

Cause Killed in action

Death occurred on strength of Forces.H.Q. 405-V-3227

N/K Mrs. Joan Kthleen Viger, Relationship Wife

9 York Grove, Brighton, Sussex, England.

Address ~~Pevensey 14, Priory Close, Bognor Regis, Sussex, ENGLAND.~~

Remains buried in Cemetery

Grave location

CHK

OVER

BURIAL REPORT TO N.K.

RETURN TO BUR. OF STAT. MAY 8 1946

ROYAL MESSAGE DESP'D. NOV 14 1944

CAN. MESSAGE DESP'D. DEC 11 1944

H I & CR Form Despd. MAR 8 1947

REBURIAL

Bergen-op-Zoom Can. Mil. Cem.,
4 miles N.E. of Bergen-op-Zoom, Holland.
Grave 5, Row F, Plot 9.

5M-10-44 (M-4414)

Additional Notes by Unit M.O. and Field Ambulance.

Morphia—	A.T. Serum—
Dose. Time and date given—	Dose and date given—
Date of Wound or onset of illness	Religion—

Disease*	Microscopic Diagnosis*			
Malaria	B.T.	M.T.	Q.	Clin.
Dysentry	B.Ex.	Ehyst.	Indef. Ex.	

Malaria Treatment							
Days	1	2	3	4	5	6	7
Ateb. grms							
Quin. grs.							

NOTES.

Ex. Feb. 40. Wass. positive. Irregular treatment for 2½ years. After 2 doubtful Wass. reactions, all others were negative. C.S.F. negative Aug. 42.
Under surveillance since then.
Sent for C.S.F. examination according to Instructions from 13 Cdn Fd Hygiene Section.

Paulrobert
Capt.

* Strike out where inapplicable.

Army Form W3118.
R.A.F. Form 3118.
Naval Form M204.

FIELD MEDICAL CARD.

*No. D-56232 Rank Pte.
Name Vigar M.T.
Unit R. de Mais.
* In cases of Enemy Prisoners of War serial number allotted by A.F.W. 3000.

~~Battle Casualty.~~ ~~Accidentally Wounded.~~ "Sick."
(*Strike out description which does not apply.*)

Diagnosis of Unit M.O.— V.D.S.
C.S.F. examination
Date seen by him— Paulrobert Capt. 11-2-44

No. of Field Ambulance— 18 Cdn Fd Amb.
Date of admission— 11-2-44
Field Ambulance diagnosis— C.S.F. Exam. V.D.S.
Guy Gladding

C.C.S. or ~~M.C.S.~~ diagnosis (if altered from above)—
V.D.S. Surveillance

General or other Hospital diagnosis (alterations or additions)—

(4403) Wt.45953 560m (12) 2/42 Gp.697 C&SLtd.

476/44.

Date of admission to C.C.S., M.C.S. or General or other Hospital and designation of medical unit to which admitted must be recorded hereunder immediately on admission. Brief clinical notes should be added later, dated and signed by the M.O.

No. 2 C. C. S. R. C. A. M. C.

FEB 11 1944

Spinal puncture - clear fluid obtained without difficulty. Sent for Wass on.

Discharge to Unit.

C. S. F. Wass. M.O.

This F.M. Card must not be destroyed. It must be transmitted with the patient if he is evacuated to U.K. Temperature charts or additional clinical notes may be sent with it, either in the same or in another envelope attached to the patient.

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS PERSON ENTITLED TO Mrs. Joan K. Vigor Widow

ADDRESS: 9 York Grove,BrightonI, Sussex, Eng.

MEMORIAL BAR

(1) DATE DESP

REGN. NO 1242

(2) MEMORIAL CROSS

WIDOW Mrs. Joan K. VIGER, (ENGLISH)

(1798)

ADDRESS: 14 Priory Close, Pevensey Bay, Sussex, England.

(2) DESP. FEB 2 1945 REGN No. 12186

(3) MEMORIAL CROSS

MOTHER (DECEASED) MFM5

ADDRESS:

(3)

29-9-44

M

FB

AWARDS—CANADIAN ARMY (ACTIVE)

(1798)

500M—1-44 (3467)
H.Q. 1772-45-8

FILE NO. 405-V-3227

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
VIGER,	Mario	D-56232	Sgt.	Le Regt. de Mais.

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
~~France & Germany Star~~	
Defence Medal	
War Medal 1939-45	
C.V.S.M. & Clasp	
	1459

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

10 AUG 1942

42 Previous Experience in Armed Forces

ARM or CORPS	Type (C.E.F., N.P., etc.)	Years	Highest Rank	Last Discharge (Yr.)	Special Training Received

43 CURRENT SERVICE: Date Enlisted 1/9/39 Place Enlisted MONTREAL.

Date From—to	Country	Corps	Unit and Sub-unit	Rank 44	Principal Duty	Performance
1/9/39-27/8/40	CAN	INF.	RDE M. H.Q. Coy	PTE.	BASIC TRAIN.	
27/8/40-24/2/41	U.K.	"	RDE M. H.Q. Cy.	PTE	# 3 PL. # 1 MORTAR.	(H. & V.D.S.)
24/2/41-3/10/41	U.K.	"	" 2 CDI RM.	"	BASIC TRAIN.	
3/10/41-	U.K.	"	" H.Q. Cy	PTE	# 3 PL. # 1 ON MORTAR 3"	SAT 333
				A		

45 COURSES ATTENDED

	PLACE	Date From—to	Qualified as	Rating
P.2 Course	6th Hussars	18-12-39 to 23-1-40	results now	cancel
2# a/tk Course	Unit.	4th Bde Barnsdale	with unit	

46 Crime: Number Courts Martial Convictions ..... Hospitalization 3/83

Number Civil Convictions ..... Minor Offender ..... Occasional Offender .....

0 Chronic Major Offender 5/33 Chronic Minor Offender 17/134 Occasional Offender .....

49 Psychiatric ✓

9/68 15-99

Once in P Camp

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

47 Classification: Military Specialties and Trades

Designation	Degree of Proficiency	Date	Authority
CLERK. 106	GOOD.		CIVIL
3" MORTAR. 333	GOOD.	2/11/41	M.B.M. 1.
2# a/tk	Guard		
	on P. Epl. of some unit — now Infantry		

55 Type of Service Desired (1) CLERK 106 (2) .....

Remarks re Outstanding or Limiting Factors DEPT. CORRECT. APP. NEAT.
PHYS. APP GOOD. DISP. EARNEST. MILIT. SAT.
MAP. R. DEF. MECH. DEF. COURSE WANTED CLERKS.
NICE PERSONALITY. SEEMS A GOOD TYPE. HAS APPLIED FOR PERMISSION TO MARRY, BUT IT WILL NOT BE GRANTED, BECAUSE HE IS NOT YET FREE OF V.D.S. HIS PROSPECTIVE WIFE IS ALREADY EXPECTING A CHILD. — a widow with 1 stepson 2 yrs. old.

Permission Granted to Marry. (Blood Test Negative)
Married 18-11-42.

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

Reason for Joining Cdn. Army (if ascertainable) DRUNK WHEN ENLISTED.
Army ever since.

48 Suggested Possibilities for Employment (1) CLERK. (2) .....

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

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

Interviewed by LIEUT. J. D. LEMAY. Date 19/4/42

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

CARDS PUNCHED

CONFIDENTIAL.

Soldiers Qualification Card

Regt'l. Number D 56232 Last Name VIGER First Name MARIO BERNARD Middle Names JOSEPH.

Unit R. DE M. Maisonneuve H.C.R.

COLLED

1 Corps R DE M.

2 Nationality 08 CAN. By Birth ✓ By Naturalization Country of Birth CAN.

3 Racial Origin 2 FR. CDN. 4 2 Language spoken in home: French ✓ Other English

5 Age 25 4/12 1914 6 Height 5' 9" 7 Weight 145 8 Silhouette 1 2 3 4

Eyes: 9 4 Colour of BROWN 10 2 Acuity 1 2 3 10 Glasses 11 Colour Vision 1 2 3 4

12 Hearing: Acuity 1 2 3 13 Speech Defects

14 Handedness R L A 15 1 Med Category A

Cause

Attitude to own health REASON To Medical attention

Health History NORMAL

16 Education Level: Illiterate E 10 — 15 S 10 (Grade completed)

Conduct during school life NORMAL

17 18 University or Professional	Course Taken	Years Completed	Degree

19 Post Graduate	Course	From—To	Degree

Specialized Training:

20 1. (Course) At From—To Completed

21 2 (Course) At From—To Completed

22 3. (Course) At From—To Completed

Other trades papers. Diplomas Certificates or Qualifications

23 Languages: Spoken fluently FRENCH — ENGLISH

02 Written well FRENCH ENGLISH

24 Main occupation: Description DEMONSTRATOR SEWING MACHINE ATTACHMENTS Estimate of skill GOOD

2498

Duration (from—to) 1937-39 Weekly Wage $35.00

Employer's Name and Address FOR HIMSELF MONTREAL

50 "M" Test	Score	SM	
1	13		S. Tot. 34
2	15		SM
3	9		
4	21		S. Tot. 43
5	22		SM
6	14		S. Tot. 64
7	20		SM
8	30		
Tot.	144	SM	Grade C
9	24		

51 OTHER MENTAL

Test

Score L. Grade

Date

52 MECHANICAL

Test

Score Grade

Date

52 CLERICAL APT.

Test

Score Grade

Date

53 TRADE TEST

1. Score G. Date
2. Score G. Date
3. Score G. Date
4. Score G. Date

54 OTHER

Test

Score Grade

Date

25 Second Most Important Occupation: Description:

0808 BOOKEEPER & GEN. OFFICE CLERK Estimate of skill GOOD

Duration (from—to) 1934-37 Weekly Wage $30.00

Employer's Name and Address D.-BEL-O JAVEL WATER MONTREAL

26 Third Most Important Occupation:

Estimate of skill

Duration (from—to) Weekly Wage

Employer's Name and Address

Trade Union or Professional Society

Vehicles: 27 Heavy Truck 28 1 Light Truck D 29 1 Auto D 30 Motorcycle

31 Farm Tractor 32 Tracked Vehicle 33 Power Launch 34 Aeroplane

35 Accident Prone NO.

Farming Experience: Wide Limited

District Type

Job promised after discharge NO. By whom? Name

Address

Other provision for post-discharge occupation SAVING

Type of work desired RESTAURANT OF OWN.

Occupational history: Ambitious Accidental

Stable ✓ Erratic

36 Material Status: M VE 18-11-47 S ✓ W D Sep.

Marital Problems (Remarks)

Age of wife 24 Wife's attitude to Service Wife's Health good

37 No. of Children 1 Stepchild No. Brothers 5 No. Sisters 2

Position in family 2 38 No. Dependents ~~2~~ 1

Relationship of Dependents Wife + Stepson

Status of home in childhood BROKEN (TRIMBLE STEP-MOTHER)

39 Hobbies: Photography M S Radio Engines

Mechanics Other None

40 Sports: (1) None (2) (3)

Team Games and Position (1)

(2) (3)

41 Ability to Entertain: Music: String None Brass

Woodwind Percussion Piano Vocal

Theatrical Other

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 VIGER, Mario Bernard Joseph (b) Reg'l. No. D.56232
2. (a) Arm of service Army (b) Unit R. de Mais. (c) Rank Pte.
3. (a) Date of birth 19 Feb. 17 (b) Have you any dependents? Yes (c) Place of residence at time of enlistment Montreal Que.
4. (a) Place of enlistment Montreal Que. (b) Date of enlistment 1 Sept. 39

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 15 (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.) 10th Grade
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 French (b) What languages do you read well? English French

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) Working (b) At time of enlistment of what trade union or professional society were you a member? 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?
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 Address
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)
20. (a) Your specific occupation (b) Number of years' experience at this occupation with any employer
21. (a) Did your employer promise definitely to give you employment on discharge? (b) Did your employer refuse to promise you employment on discharge? (c) Do you wish to return to your former employment?

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 Sewing mach. Demonstrator (b) Where was it located? Montreal Que.
23. (a) Number of years engaged in this business 2 yrs. (b) Have you made, or will you make plans to return to the same or a similar business on discharge? No

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? (c) If so, in what kind of farming?
25. (a) Were you born on a farm? (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? 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.)
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form Restaurant for himself

DATE 19th June 1943 SIGNATURE [illegible]

For Officer i/c Records C.M.H.Q.

certificate sent to the Vatican on 22 Sept 42

ASB

Form C.M.H.Q. 1000:110
40/P & S/1237

APPLICATION FOR PERMISSION TO MARRY

(one copy only to be completed)

September 12 (Date) 1942

1. I, D56232 (Number) Pte (Rank) VIGER (Name) Mario (Initials)
Régiment de Maisonneuve (Unit) hereby apply for permission to marry Mrs Horace Cecil Loadsman (formerly Joan Kathleen Guy) (Proposed wife's name in full) of 4, King George Cottages, Westham, Pevensey, Sussex (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 February 19th / 1917

(ii) Date of enlistment Sept. 1st / 1939

(iii) Domicile (place of permanent residence) immediately prior to enlistment 8199 St. Dominique St. Montreal - Can.

(iv) Marital status—(Strike out words inapplicable)

Bachelor ✓ 25

~~Widower~~

Name of deceased wife N/A

Date of death of deceased wife N/A

~~Divorced~~

Name of former wife N/A

Date of divorce decree N/A

Place where divorce granted N/A

Department DEC 11 1942 National Records OTTAWA

(v) Educational standing 10th grade, Primary School (Highest standing secured at school)

(vi) Training General office Work (2½ years) Seller and demonstrator (State qualifications for profession, business, trade, etc.)

(vii) Employment at time of enlistment 2 months unemployed - Before that; seller and demonstrator

(viii) Average weekly earnings at enlistment About $30-35

(ix) If unemployed on enlistment give particulars of prior employment and earnings N/A

(x) If history does not disclose probable ability to maintain family after discharge from Army state how it is proposed to do this I intend to start again selling and demonstrating. If this impossible, I will start a little trade of my own

(xi) Particulars of dependents in receipt of dependents allowance, if any:

(1) Name or names of dependents Miss Claire Viger

(2) Relationship of dependents Sister. (It was a free gift to her, as she earns her living)

(3) Amount of dependents allowance ~~$20.00 monthly~~ Nil

(4) Amount of assigned pay ~~Nil~~ $20.00 monthly

(5) How and by whom will dependents be supported after marriage She earns her living

(b) PARTICULARS OF PROPOSED WIFE

(i) Date and place of Birth 12 Sept. 1918 – Brighton

(ii) Name and address of nearest relative Mrs. Alice Woodger (aunt) 4, King George Cottages, Westham, Pevensey, Sussex

(iii) How long have you known her Since October/41

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

as set out in Para. 2(a) (iv) above, and that I am legally free to marry Miss Joan Guy Loadsman –
(Name of proposed wife)

4. I hereby request that the sum of ten dollars ($10.00) per month be retained from my pay until a sum of two hundred dollars ($200.00) has been accumulated, such sum to be expended under my direction to provide passage to Canada for my wife (and child or children).

Maria Viger (D.56.232)
(Signature of applicant)

(NOTE) (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.

(iv) This application must be read, and the following statement signed, by the parent or guardian of the proposed wife, when she is under the age of 21 years.

The foregoing requirements 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 to conform to the laws of the country where the marriage takes place.

STATEMENT TO BE SIGNED BY PARENT OR GUARDIAN OF PROPOSED WIFE

..... 194.....

I, ... the .....of ..... declare that I have read
(Name in Full) (Mother, Father or Guardian) (Name of Proposed Wife)

over the above application of .....
(Number, Rank, Name and Initials of Applicant)

and that I am aware of and fully understand the statements therein made.

.....
(Signature)

.....
(Address)

RECOMMENDATION OF COMMANDING OFFICER

I recommend that permission to marry be granted to Pte. Viger

Date 16 Sept 1942 Signature N. Stanbovlt major

A Commanding Le Regt. de Mais.

DECISION OF HIGH AUTHORITY

(This will be signed by a Brigadier or an officer performing for the time being the duties of a Brigadier)

Permission granted to marry on or after 17 Nov. 42

Date 17 Sept 42 Signature G. W. Whitelaw Brig

Commanding COMD. 5 CDN. INF. BDE.

X (If permission is granted, designate date, not less than two calendar months hence, after which marriage may take place.)

Y After permission to marry has been published this form will be forwarded through the usual channels to O. i/c Records, C.M.H.Q.

Attached.

1/ Certificates of good character of Mrs. Loudoman
2/ Royal Air Force paper, stating that the first husband was killed in action.
3/ Baptism certificate of Pte Viger
4/ Birth certificate of Mrs Loudoman (née Guy)
5/ A renunciation to assigned pay from Miss Viger
6/ Medical report from Pte Viger.
7/ Padre's statement

To be made out in duplicate.

M.F.M. 5
88M—11-36 (9359)
H.Q. 1772-45-18

PARTICULARS OF FAMILY OF AN OFFICER OR SOLDIER OF THE CANADIAN [redacted] FORCE ACTIVE SERVICE

INSTRUCTIONS.

(*a*) This form is to be completed immediately an officer or soldier is appointed to, or enlisted in, the [redacted] C.A.S.F.

(*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 soldier, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District or Camp Paymaster, to the Chief Paymaster, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster until the unit arrives Overseas, when it will be forwarded to the Chief Paymaster, Canadian Overseas Intermediate Base.

---

(1) Name of Officer or Soldier ..... Viger, Mario
(Surname first—Christian names in full—Block capitals)

(2) Regimental Number D56232

(3) Unit ..... LE REGIMENT DE MAISONNEUVE, C.A.S.F.

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

(5) If married, state,

(*a*) Full name of your wife ..... nil

(*b*) Present postal address of wife ..... nil

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

(7) Are you a widower? ..... nou

(8) Have you any children? ..... nil

If so, give number of boys and girls ..... nil

Also their names and ages ..... nil

(9) If Separation Allowance is claimed in respect of children—state whether you have been regularly supporting them ..... nil

Give particulars of Guardian to whom Separation Allowance should be paid—if authorized—

Name ..... nil

Postal Address ..... nil

(SEE OTHER SIDE).

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife? no

If so, state her full name and Postal Address nil

(11) Is your father alive? no

If so, state name and address nil

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

nil

(13) If sole support of father who is a widower—state what amount per month you have given him prior to joining [redacted] C.A.S.F. nil

Also state reason he has no other means of support nil

(14) Is your mother alive? no

If so, state name and address nil

(15) If your mother is a widow, are you her sole support? nil

(16) If sole support of widowed mother—state what amount per month you have given her prior to joining [redacted] C.A.S.F. nil

Also state reason why she has no other means of support nil

(17) Are you insured? no

If so, in what Company? nil

Have you made arrangements for payment of your Insurance Premium? nil

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.

Marie Vigier
Affonnt.
(Signature of officer or man)

Date Sept 8th 1939

Robert Bourassa
(Robert Bourassa) Lt-Colonel
Officer Commanding O.C. Le Régiment de Maisonneuve CASF.

Date SEP 8 1939

VOIR INSTRUCTIONS AU VERSO.

M.F. M 10a
35M—7-41 (1218)
H.Q. 1772-39-1657

FORMULE DE TESTAMENT

(1) Je, Mario Viger (Nom au long), de la cite de Montreal, dans le Comté / District de Laval, Province de Quebec, Vendeur (Occupation civile), N° matricule D-56232, Unité Regt. de Maisonneuve, révoque par les présentes tous testaments que j'ai pu faire antérieurement et déclare que ceci est mon testament.

Noms et adresse des bénéficiaires

(2) Je lègue à mon epouse:Mrs. Joan K Viger, tous mes biens.

Received
JUN 15 1944
D.R.197

Noms et adresse des bénéficiaires résiduaires

(3) ~~Je lègue tout le reste de mes biens, quels qu'ils soient et où qu'ils soient, à~~

(4) Je nomme Mon epouse: Mrs Joan K Viger (Nom), 14 Priory Close, Pevensey Sussex England (adresse) ~~exécuteur~~ exécutrice de mon présent testament.

Signé et reconnu par le testateur, en présence de nous, présents en même temps, qui en sa présence et à sa demande, et en présence l'un de l'autre, avons immédiatement signé comme témoins.

(5)

Signature du premier témoin: [signature] (Adresse)

(Les bénéficiaires ne peuvent être témoins)

Signature du second témoin: [signature] (Adresse)

En foi de quoi j'ai signé ce 28ème jour de Avril A.D. 1944

[signature] (Signature du soldat)

(VOIR AU VERSO)

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

CANADIAN ACTIVE SERVICE FORCE
OVERSEAS

District.....

Dispersal Area.....

LAST PAY CERTIFICATE
(All Ranks)

Regtl No. D.56232 Rank and Name VIGER. M. A/SGT.

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

~~(Transfer or~~ Discharge) ~~X~~ on 29th September 1944

Reason Death Authority: C.C.L."A"499 d/11th Oct:44

The following is a statement of the account of the above-named from 1st Sep: to 30th Sep: 1944 the inclusive date of transfer or discharge.

Dr Particulars	Amount		Cr Particulars	Amount	
Balance Dr from last account			Balance Cr from last account	239	60
First Monthly Payment AR.32 d/3.9.44	6	71	Regimental Pay 30 days @ $2.20	66	00
Casual Payments AR.35 d/22.9.44	15	20	Tradesmen's Pay days at $		
Payments on Transfer or Discharge			Additional Pay (Give particulars) days at $		
Assigned Pay $35.00 & $5.00	40	00			
Regimental Charges			Allowances (Give particulars) days at $		
Public Stoppages (Give particulars): AR.36 d/29.9.44	15	20	Def: Pay Interest	20	04
To Balance Cr Free	48	53			
To Balance Cr Deferred	200	00	By Balance Dr		
Total	325	64	Total	325	64

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

Remarks:

Assigned Pay of $35.00 (W) stopped eff: October, 1944.
Assigned Pay of $5.00 (S) stopped eff: October, 1944.
The above statement has been compiled from Treasury Records, the latest paybook not being available.

Compiled by F. Trenouth

Checked by A Bell

Date 26th February 1945

Certified correct [signature]
for Chief Treasury Officer, Overseas

DS.

CFA 187
40/P & S/21[illegible] (4066)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME B-56232 Sgt Viger M. (Deceased)

RECEIVED FROM 2nd Echelon 21 Army Group

CHECKED BY C-5267 Tpr Carr J.A. C-5591 Pte Patterson L.R. DATE 26 Jan 45

2	Red & Green "I" Disc		
1	Crucifix		
1	Note Book		
1	Pr Scissors		
1	Crucifix In Case		
1	Pipe In Case		
2	Purses		
63	Coins Souvenir		

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

L R Patterson P6
for OC 1 Cdn KSD

FORM No. 1

Register No. D 11640

Nominal Roll No. D259

H.Q. File No. 405-V-3227

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
D56232	A/SGT.	VIGER	MARIO

REASON FOR TERMINATION OF SERVICE:

1st Enlistment DECEASED. CARO ( )

2nd Enlistment CARO ( )

3rd Enlistment CARO ( )

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. 10 SEPT 39	T.O.S.	T.O.S.
S.O.S. 29 SEPT 44 MD O/S	S.O.S. MD	S.O.S. MD
Total Days 1847	Total Days	Total Days

Total Service 1847 DAYS

—	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere	350	6	344
Overseas Service	1497	57	1440
Totals	1847	63	1784
Add Non-qualifying Service			63
Total Service			1847

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 29 SEPT 44 2. Date S.O.S. Overseas

REMARKS: Can. Act. Army 8-Sept 39.

Computer's Signature

Checker's Signature

Date Computed 21 May 45.

KILLED IN ACTION 29 SEPT 44

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

W.O. Eng. Capt.

C. L. LAURIN,
Colonel,
DIRECTOR OF RECORDS.

4

500M—11-44 (6012)
H.Q. 1772-45-8

Details of Non-Qualifying Service

Western Hemisphere—

Forfeits for	From	To	Effective Date	Days	Total
AWL.			14 FEB 40.		1.
AWL.	1 JUNE 40.	3 JUNE 40.	4 JUNE 40.		3
AWL.	12 JUNE 40	21 JUNE 40	25 JUNE 40.		2.
				Total	6.

Overseas: T.O.S. 25 AUG 40. T.O.S. T.O.S.

S.O.S. 29 SEPT 40. S.O.S. S.O.S.

AWL.			12 NOV 40.		7.
AWL.			5 APR 41	1	
AWARDED.			5 APR 41	1	2.
AWL. DET.			2 MAY 41	14	
BEMS.			14 MAY 41	1	13
AWL.			31 MAY 41	1	
DET.			2 JUNE 41	10	11
AWL.			29 JULY 41		1
AWL.			19 MAY 42		1
AWL.				1	
F.P.			10 DEC 42.	21	22
				Total	57

COMPUTATION OF WAR SERVICE GRATUITY

MEMBER'S NAME MARIO (Christian Names) VIGER (Surname) — Register No. D-11640

File No. 405-V-3227

PAYEE'S NAME MRS JOAN K. (Christian Names) VIGER (Surname) — Date 5-7-45

ADDRESS 14 PRIORY CLOSE, PEVENSEY BAY - SUSSEX - ENGLAND — Service No. D-56232

Final Rank A/SGT

DATE OF TERMINATION OF OVERSEAS SERVICE 29-9-44 — Date of Discharge 29 SEP 44

	AMOUNT $	c
A. TOTAL QUALIFYING SERVICE No. of days $\frac{1784}{30}$ = 59 (14) Periods @ $7.50	442	50
B. QUALIFYING OVERSEAS SERVICE No. of days 1440 less 14 Ineligible days, equal 1426 Days @ 25c per day	356	50
C. SUPPLEMENT FOR OVERSEAS SERVICE Daily Rate of Pay $. 2.20 Subsistence Allowance $. 1.25 Additional Pay $. — Dependents' Allowance 1/30 $. 51.12 $. 1.70 TOTAL $. 5.15 × 7 = $. 36.05 No. of Days $\frac{1440}{183}$ × $. 36.05	799	00
	283	67
D. WAR SERVICE GRATUITY Computed By Gates	1082	67
E. DEDUCTIONS Overpayment of (1) Pay & Allowance $. (2) D.A. & A.P. $. 5.00 Other Deductions $.	5	00
Entered By		
F. AMOUNT PAYABLE (This amount is payable in 1 monthly instalments of $. 1077 67 each)	1077	67
G. Monthly instalment not to exceed *daily rate* of Pay & Allowances per (C) $. × 30 = $.	5	

REMARKS

100M-11-44 (6087)
H.Q. 1764-81-3

COMPUTATION OF WAR SERVICE GRATUITY

MEMBER'S NAME MARIO (Christian Names) VIGER (Surname) — Register No. D-11640

File No. 405-V-3227

PAYEE'S NAME MRS JOAN K. (Christian Names) VIGER (Surname) — Date 5-7-45

ADDRESS 14 PRIORY CLOSE, PEVENSEY BAY - SUSSEX - ENGLAND — Service No. D-56232

Final Rank A/SGT

DATE OF TERMINATION OF OVERSEAS SERVICE 29-9-44 — Date of Discharge 29 SEP 44

	AMOUNT $	c
A. TOTAL QUALIFYING SERVICE No. of days $\frac{1784}{30}$ = 59 (14) Periods @ $7.50	442	50
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C. SUPPLEMENT FOR OVERSEAS SERVICE Daily Rate of Pay $ 2.20 Subsistence Allowance $ 1.25 Additional Pay $ — Dependents' Allowance 1/30 $ 51.12 $ 1.70 TOTAL $ 5.15 × 7 = $ 36.05 No. of Days $\frac{1440}{183}$ × $ 36.05	799	00
	283	67
D. WAR SERVICE GRATUITY Computed By Mates	1082	67
E. DEDUCTIONS Overpayment of (1) Pay & Allowance $ (2) D.A. & A.P. $ 5.00 Other Deductions $ Entered By	5	00
F. AMOUNT PAYABLE (This amount is payable in 1 monthly instalments of $ 1077 67 each)	1077	67
G. Monthly instalment not to exceed *daily rate* of Pay & Allowances per (C) $ ..... × 30 = $		

REMARKS

100M-11-44 (6087)
H.Q. 1764-81-3

Casualties ONLY
For purposes of W.S.G.
Casualties include death
subsequent to discharge.

Register No. D11640

File No.

WAR SERVICE GRANTS ACT 1944

Ottawa 10 May 1945

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

Service No. D-56232

Name
Christian Name Surname

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

K.W. Rice
(K.W.Rice) Lieutenant,
for(A.R. Mortimore)Brigadier,
Paymaster-General.

	Name	Amount
Names of persons in receipt of D.A. and amount of monthly award	Mrs Joan K. Vigen	$ 51.12
	wife + 1 child	
If no D.A. in issue, list names of persons in receipt of A.P., who may be classed as dependents under W.S.G. Act, 1944 and amount of monthly assignment.	Miss Lelaine Vigen (sister	$ 5.00
	Disc 1-10-44	
Names of persons whom assigned pay was continued by supplementary award after death.		$
Amount of overpayment of dependents' allowance and/or assigned pay deductible from the War Service Gratuity and name of person to whom paid.	Miss Lelaine Vigen	5.00
	sister	

MAY 28 1945 194

Lelaine
For Chief Treasury Officer,
D.A.&.A.P. Branch

C.T.O., D.A.&.A.P.

Overpayments of D.A. and / or A.P. recovered from W.S.G. $ 5.00

July 24 1945

3

D. Washburn
for C.T.O.

405-V-3227
(Records G)

CERTIFICATE OF DEATH

THIS IS TO CERTIFY that according to information received at the Department of National Defence from the overseas authorities, No. D.56232, Sergeant Mario VIGER, of Le Regiment de Maisonneuve, Canadian Army, was killed in action on the 29th of September, 1944.

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

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

Department of National Defence,
Ottawa, Canada.
November 21st, 1944.

31

405-V-3227

SUPPLEMENTARY

FIELD SERVICE In lieu of Army Form B.2090A

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

REGIMENT OR CORPS Regt de Mais Squadron, Troop Battery or Company

Officer's Personal No (if known) D56232 Rank Sgt
Soldier's Army No

Surname VIGER Christian Names M.

Died: Date 29 Sept 44 Place

Cause of Death Killed x

Nature and Date of Report 3011C/F166 7 Oct 44

By whom made Regt de Mais

x Specially state if killed in action, or died from wounds received in action, or from exposure while on military duty, or from injury while on military duty.

Burial: Place BURIAL PARTICULARS NOT AVAILABLE Date

By whom reported

State whether he leaves a Will or not: (a) in Army Book 64 No. (b) as a separate document Not Rec'd

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 deceased officer or soldier of his wishes as to the diposal 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: Belgium, 18 Apr 45

Signature of Officer in charge of Section Adjutant-General's Office at the Base: [signature] Capt., for Officer i/c Cdn Sec 2nd Ech HQ 21 A Gp

P.A.

53

405-V-3227

RECORDS OFFICE OVERSEAS.

CANADIAN MILITARY HEADQUARTERS.

GRAVES REGISTRATION CARD.

NAME VIGER Mario

PLACE & DATE OF BIRTH QUEBEC 19 Feb 1917

RANK SGT

REGIMENTAL NO D56232

UNIT REGT DE MAIS AEF

NEXT OF KIN & ADDRESS WIFE,
Mrs. Joan K. Viger,
14, Priory Close
PEVENSEY BAY.
Sussex

PARTICULARS OF HOSPITALISATION

DATE OF ADMISSION

NAME & LOCATION OF HOSPITAL

DIAGNOSIS

PARTICULARS OF DEATH

DATE OF DEATH 29 Sep 44

PLACE OF DEATH No Information

HRS

CAUSE OF DEATH KILLED

PARTICULARS OF BURIAL

DATE OF BURIAL N o Information

CEMETERY No Information

PLOT NO ROW GRAVE

DEATH CERT.NO

RELIGION Roman Catholic

DATE 15 October 1945

M. BIGNEAU CAPT

for COLONEL,
O i/c Records,
CANADIAN MILITARY HEADQUARTERS.

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

61

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: IN THE FIELD(BELGIUM)

Official name of civil municipality or township:

Place an X over the word which applies to this municipality or this territory: City | Town | Village | Parish | Township

Street: No.: Hospital or Institution:

2. LENGTH OF STAY

(a) In hospital or institution	Years	Months	Days	(b) In municipality where death occurred	Years	Months	Days	(c) In Province	Years	Months	Days	(d) In Canada (if immigrant)	Years	Months	Days

3. NAME OF DECEASED

Surname: VIGER, (*Block letters*)

Given names: Mario.

Do not write in this space

4. RESIDENCE

Street: St-Laurent Blvd., No. 920

Official name of civil municipality or township: Montreal,

Municipal county: Province: Quebec.

5. SEX	6. NATIONALITY (Citizenship)	7. RACIAL ORIGIN	8. Single, Married, Widowed or Divorced (*Write the word*)
M.			Married.

9. If married give name of wife or husband of deceased

10. BIRTHPLACE (Province or Country): Quebec.

11. DATE OF BIRTH: February (Month) 19th. (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.: Office clerk.

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)		

19. Place of burial, cremation or removal: Holland.

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: September (Month) 29th, (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**....

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

C. Gauvin C.S.

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

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

(Voir l'autre côté pour le français)

OVERSEAS CASUALTY CANADIAN ARMY

MAY 8 - 1946

Director of Records, Dept. of National Defence.

File No. 405-V-3227

P.A.

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. W-56232 Name Viger, Mario

Rank on Discharge Sgt. Date of Discharge 29-9-44.

Authority for Discharge or Retirement Deceased

Served in:

				Non-qualifying service
Canada	from 8-9-39.	to	24-8-40	
	from	to		
United Kingdom	from 25-8-40	to	5-7-44	
	from	to		
Italy	from	to		
Northwest Europe	from 6-7-44.	to	29-9-44	12/a
----------	from	to		
----------	from	to		

Eligible for award of:

1939 - 45 Star ok

~~Italy Star~~

France-Germany Star ok

Defence Medal ok

War Medal ok

Canadian Volunteer Service Medal ok

with clasp

M

W*

Verified by D Foster

Date 17-9-46.

Carded SEP 18 1946

HA 165

NO RIBBON DESPATCH

UNIT COMMITTEE OF ADJUSTMENT REPORT

APPROVED AND FORWARDED
Eric Roberts Capt.
Standing Committee of Adjust.
Cdn. Sec. GHQ 2nd Ech 21 A.Gp.
NOV 24 1944

INSTRUCTIONS

1. To be completed in triplicate of which one copy will be retained by the unit.
2. Parts marked * which are not applicable will be ruled out and initialled.
3. All blanks marked † will be filled in with "NIL" where appropriate.
4. In the case of personnel reported MISSING, INTERNED, or PRISONERS OF WAR, NO PERSONAL EFFECTS WILL BE SOLD AND NO PREFERENTIAL CHARGES OR ORDINARY DEBTS WILL BE PAID by Unit Committee of Adjustment.
5. In the case of DECEASED personnel, no personal effects of sentimental nature will be sold. Other personal effects may be sold to pay preferential charges and also when, in the opinion of the C.O., the exigencies of the Service make it desirable to do so.
6. Unit Committee of Adjustment may pay, in the case of deceased personnel,
   (a) preferential charges owing within the unit and the unit area, and
   (b) ordinary debts similarly owing ONLY if after making provision for *all* preferential charges of which it has notice there is sufficient cash on hand to pay all ordinary debts.
7. The following will be forwarded in the manner shown,
   In U.K.—to Officer i/c Estates, C.M.H.Q.
   Ex U.K.—to Officer i/c Cdn Sec., G.H.Q., 2nd Echelon.
   (a) Personal effects not disposed of, original and duplicate copy of report, and Officers' Record of Service Book or Soldiers' Service and Pay Book MBM I, Pts. I and II—by post, rail or road.
   (b) Any Will or testamentary document with a memorandum giving regimental particulars and, if undated, any available evidence indicating the probable date of its execution—by registered post AT ONCE.
   (c) Cheques, drafts, money orders, personal papers and documents, effects of sentimental value *and* an inventory of *all* personal effects forwarded—by registered post.

REPORT

No. D 56232 Rank Sgt Name in full VIGER M.

*Deceased, ~~*Missing, *Prisoner of War, *Interned.~~ Date of Casualty 29 Sept 44

Unit Rde Fusiliers

Medical installation in which death took place (if applicable) N/A

Reinforcement Unit to which posted at time of death (if applicable) N/A

Name of Officer furnishing report F. D. Bourcier Capt.
(BLOCK CAPITALS)

A. PERSONAL EFFECTS

1.* Separate inventories are attached, as applicable, showing:—

(a)* ~~Articles privately owned, suitable for service requirements, turned into Q.M. Stores—Exhibit "A1".~~

(b)* ~~Articles sold to pay preferential charges, showing the purchaser of and the price paid for each article—~~ Exhibit "A2".

(c)* ~~Articles additionally sold under C.Os. authority showing the purchaser of, and the price paid for each~~ article, and the written authority of C.O. for such sale,—Exhibit "A3".

(d)* Bulky articles disposed of under authority of Officer i/c Estates C.M.H.Q., showing the disposition and, if ~~sold, the purchaser of, and the price paid for each~~ article,—Exhibit "A4".

(e)* ~~Personal Effects, forwarded to (*Officer i/c Estates), (*Officer i/c 2nd Echelon),—Exhibit "A5".~~

2. *No personal effects were found or received. A memorandum as to the circumstances and any action taken is attached as Exhibit "A6".

B. WILL

(a)* ~~Original Will or testamentary document was forwarded on~~ Nil (date) ~~by registered~~ post to (*~~Officer i/c Estates), (*Officer i/c 2nd Echelon). Copy thereof and of the memorandum forwarded therewith is attached as Exhibit "B1".~~

PARA (b) TO APPLY

(b)* ~~No Will or testamentary document was found on the person or among the effects of the deceased.~~

C. CLOTHING AND EQUIPMENT (PUBLIC)

(a)* Was turned in to Q.M. Stores.

(b)* There were no deficiencies.

(c)* There were deficiencies amounting to £ and ~~cash debit voucher duly certified by the D.A.D.O.S., or Senior Ordnance Representative of the formation is attached as Exhibit "C1".~~

NOTE: If space insufficient, attach, identify and sign additional sheets for Items D, E and F.

D. PREFERENTIAL CHARGES

(a)

Name and Address of Creditor	*Nature of Claim*	*Amount*	*Paid or Unpaid*
† Nil			

*Itemised accounts are attached as Exhibit "D1", those shown as paid being duly receipted, and those recommended for payment by the Officer i/c Estates being so certified.

(b)*Memorandum as to any disputed accounts, with full particulars of dispute attached as Exhibit "D2".

E. ORDINARY DEBTS

(a)

Name & Address of Creditor	*Nature of Claim*	*Amount*	*Paid or Unpaid*
† Nil			

*Itemised accounts are attached as Exhibit "E1", those shown as paid being duly receipted, and those recommended for payment by the Officer i/c Estates being so certified.

(b)*Memorandum as to any disputed accounts, with full particulars of dispute attached as Exhibit "E2".

F. CREDITS

(a) *Public Claims owing to the Casualty.*

Nature of Claim	*Amount*
† Nil	

(i)*Copy of each claim submitted and of any correspondence connected therewith attached as Exhibit "F1".

(ii)*Statement of valuation of, and receipt for, articles suitable for service requirements turned into Q.M. Stores (para. A.1. (a) above) attached as Exhibit "F2".

(b) *Private Claims Owing to the Casualty.*

Name & Address of Debtor	*Particulars of Claim*	*Amount*	*Paid or Unpaid*
† Nil			

*Memorandum as to any unpaid claims, showing whether or not liability admitted and steps taken to effect collection, attached as Exhibit "F3".

G. CASH RECEIVED AND PAID

		Paid	*Received*
Cr.	Cash found on person or in effects		†
	Cash realized from sale of effects as per para. A.		†
	Cash collected re private claims as per para. F.		† Nil
Dr.	Paid re preferential charges as per para. D.	†	
	Paid re ordinary debts as per para. E.	†	
	Paid (*balance) to unit Paymaster	†	
		†	†

H. SERVICE AND PAY BOOK

~~Officers' Record of Service Book~~ (*Soldiers' Service and Pay Book M.B.M. I, Pts. I and II) is (*~~forwarded with this report)~~

(*not forwarded by reason that Was buried by someone else

Signature of Committee or President.

Date

Unit

-D-

ARMÉE ACTIVE DU CANADA

DÉCLARATION SUPPLÉMENTAIRE

Nom VIGER MARIO Grade SOLDAT

@ A.S.F.

Unité REGIMENT DE MAISONNEUVE Numéro matricule D-56232

Je, soussigné, MARIO VIGER

m'étant enrôlé dans la Milice canadienne et, par ma déclaration en date du ~~PREMIER~~ 8 SEPTEMBRE jour de ....., m'étant engagé à servir dans l'Armée Active du Canada, aux termes de ladite déclaration, déclare en outre que je m'engage, par la présente, à faire du service actif dans l'Armée Active du Canada partout au Canada et aussi en dehors du pays et outre-mer, pendant la durée de la présente guerre aussi bien que durant la période de démobilisation subséquente, et, en tout cas, durant une période de pas moins d'un an, si Sa Majesté requiert ainsi mes services.

Témoin Réal Belanger Lieut. Mario Viger
Signature du soldat

3 Oct 1939
Date

REMARQUE. — Cette déclaration doit être faite en triple exemplaire dont un exemplaire devra être joint à chaque duplicata et triplicata original de la formule d'enrôlement M.F.M. 2 Fr.

2. Si la formule M.F.M. 2 Fr. a déjà été transmise au bureau des archives du Quartier général de la Défense Nationale, l'original de cette déclaration lui sera communiqué pour y être joint.

M.F.M. 2 (x) Fr.
30M — 9-39

F.T.

11th November, 1944.

Mr. Lionel Janelle,
57 St. James Street West,
Montreal, Quebec.

Dear Mr. Janelle:

It was with deep regret that I learned of the death of D56232 Sergeant Mario Viger, who gave his life in the Service of his Country in the Western European Theatre of War on the 29th day of September, 1944.

From official information we have received, Sergeant Viger 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 [redacted] their sincere sympathy in your bereavement.

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

A. E. WALFORD
Major-General
Adjutant-General

NOV 11 1944

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

/EMA

22

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER D.56232 RANK Sergeant SERVICE UNIT Le Regiment de Maisonneuve (C.A.).

NAME VIGER, Mario

DATE OF BIRTH DAY 19th MONTH February YEAR 1917 Enlisted: 8-9-39

MARITAL STATUS Married RELIGION--Roman Catholic

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Wife NAME Mrs. Joan Kathleen Viger,

ADDRESS Pevensey 14, Priory Close, ADDRESS D.A.B. Bognor, Regis, Sussex, England.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME Mr. Lionel Janelle (Friend),

ADDRESS (IF SOLDIER MARRIED OVERSEAS) 57 St. James St., West, Montreal,1, Quebec,

AUTHORITY CAS. SIG. NO. Canrecords 1947A H.Q. 405-V-3227

CASUALTY DETAILS Killed in action DATE 29-9-44

FRANCE.

O/S with Regt. de Mais.
S/L 345

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 26-10-44

BTC

OFFICER I/C RECORDS

6

COPY FOR DOCUMENT FILE