D57977
LEFEBVRE
MARCEL

Do not remove documents from this folder. Prepared for digitization project. Ces documents seront numérisés. Ne pas les déplacer.

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: IN THE FIELD (FRANCE)

Official name of civil municipality or township:

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

Street: No.: Hospital or Institution:

2. LENGTH OF STAY

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

3. NAME OF DECEASED

Surname: LEFEBVRE (*Block letters*)

Given names: Marcel

Do not write in this space

4. RESIDENCE

Street: Clark Street, No. 6373

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			Single

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

10. BIRTHPLACE (Province or Country): Quebec

11. DATE OF BIRTH: September (Month) 7th, (Day) 1921. (Year)

12. AGE OF DECEASED

Years	Months	Days	If less than one day old
22			....hrs. or....min.

OCCUPATION

13. Trade, profession or kind of work, as **spinner, teamster, office clerk,** etc.: Baker's Apprentice

14. Kind of industry or business, as **cotton-mill, lumbering, bank,** etc.:

15. Date deceased last worked at this occupation:

16. Total years spent in this occupation:

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER	Deceased	
MOTHER (Maiden Name)		

19. Place of burial, cremation or removal: France

20. Date of burial: ....19....

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church:

(b) Civil municipality of:

(c) Municipal county:

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

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: June (Month) 6th, (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.)

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

NOV 8 1945

Director of Records, Dept. of National Defence.

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER D57977 RANK Private SERVICE UNIT Le Regiment de la Chaudière (CA)

NAME LEFEBVRE, Marcel

DATE OF BIRTH

DAY 7th MONTH September YEAR 1921 Enlisted: 25-3-1941

MARITAL STATUS Single Religion: Roman Catholic

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Mother NAME Mrs. Marie A. Lefebvre

ADDRESS 5207 Waverley St., MONTREAL, Que. ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. 6985 H.Q.405-L-18384

CASUALTY DETAILS Killed in Action DATE 6-6-44

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO PER

M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO

DATE 21-6-44

OFFICER I/C RECORDS

5

COPY FOR C.R. FILE

MÉMORANDUM POUR

Mme Marie A. Lefebvre,

5207, rue Waverley,

MONTREAL, Qué.

Prière d'adresser toute communication subséquente à ce sujet à:

L'ADMINISTRATEUR DES SUCCESSIONS,
MINISTÈRE DE LA DÉFENSE NATIONALE,
OTTAWA, ONTARIO

et de citer le numéro suivant:

Q.G. 405-L-18,384 FD.431

MINISTÈRE DE LA DÉFENSE NATIONALE
DIVISION DES SUCCESSIONS
OTTAWA, ONTARIO

ce 20 juillet 1944

Afin de les consigner dans nos dossiers et au cas où il y aurait une succession militaire à distribuer (conformément à la loi) au nom de feu

LEFEBVRE, Marcel,

Soldat,

No. D.57977, ARMEE CANADIENNE

ESTATES BRANCH
AUG 24 1944
H. Q. OTTAWA
NATIONAL DEFENCE

il est nécessaire que les renseignements voulus concernant le défunt et les membres de sa famille soient fournis à l'intérieur de cette formule, en stricte conformité des instructions imprimées. Les détails exigés doivent être inscrits comme il faut et la déclaration au verso doit être ensuite signée en présence d'un pasteur, prêtre, magistrat de la localité, commissaire ou notaire public, que l'on priera de compléter et signer le certificat. Cette formule doit être ensuite renvoyée à l'adresse mentionnée ci-dessus.

La succession militaire d'un défunt, dont l'administration incombe à la division des successions, comprend tout reliquat de solde et d'allocations au crédit du défunt, l'argent en main et les effets personnels qui sont sous le contrôle des autorités militaires. Pour entrer en possession de ces valeurs, il n'est pas nécessaire que les personnes qui y ont légalement droit fassent homologuer le testament en cour ou, si le défunt était intestat, qu'elles obtiennent des lettres d'administration de sa succession.

25

En plus de voir à l'administration de ces valeurs militaires, l'administrateur des successions est autorisé à retirer, au compte du gouvernement, tous les fonds (jusqu'à concurrence d'un montant défini) déposés au nom du défunt dans les banques, bureaux de poste ou autres institutions financières au Canada et outre-mer, sans frais ni dérangement pour les personnes ayant légalement droit à la succession, et de distribuer cet argent en même temps que tout reliquat de solde. De même, les certificats d'épargne de guerre et les bons de la victoire que possédait le défunt peuvent être rachetés et distribués de la même façon, ou transférés au nom des personnes qui y ont légalement droit. Ces certificats et bons ne doivent pas être envoyés à l'administrateur des successions avant qu'il les demande.

S'il y a d'autres valeurs nécessitant une demande d'homologation du testament ou de lettres d'administration, l'administrateur des successions pourra transférer et remettre les valeurs militaires à l'exécuteur ou à l'administrateur nommé par la Cour, afin que toute la succession, militaire et autre, soit traitée comme un tout.

Les renseignements que vous donnerez aux pages 2 et 3 de cette formule seront donc un facteur qui aidera à déterminer si toute la succession du défunt peut ou non être entièrement distribuée par l'administrateur des successions aux personnes qui y ont légalement droit, c'est-à-dire, sans qu'il soit nécessaire de faire homologuer le testament ou administrer la succession.

Si l'espace destiné aux questions des pages 2 et 3 de cette formule n'est pas suffisant pour donner tous les détails, il faudra alors se servir de l'espace réservé aux "observations supplémentaires", à la page 4.

~~L'administrateur des successions,~~

D. Goddard major.

pour LE DIRECTEUR DES SUCCESSIONS.

M.F.W. 77a
1M-9-43 (2070)
H.Q. 1772-39-972.-K.P.

RÉPONDRE AU LONG À TOUTES LES QUESTIONS APPLICABLES

ÉTAT des noms, âges et adresses, ou dates de décès, de tous les parents du défunt, à chacun des degrés spécifiés ci-dessous.

Degrés de parenté	PARENTS à signaler		TÉMOIGNAGE DU DÉCLARANT — NOM ET PRÉNOMS de tout parent de chacun des degrés mentionnés	Age	ADRESSE AU LONG de chaque parent survivant, en regard de son nom, et date du décès de tout parent décédé
1	Veuve du défunt		Wilfrid Lefebvre Père	47	St Rose Co Laval
2	Enfants du défunt et dates de naissance		Marie anne Lefebvre Mere	45	5207 Woodley Montreal
3	Père du défunt				
4	Mère du défunt				
5	Frères du défunt — aucun	Frères germains — aucun			
		Demi-frères — aucun			
6	Sœurs du défunt — aucun vivant	Sœurs germaines — aucune			
		Demi-sœurs — aucune			
7	Noms des frères ou sœurs (germains ou non) du défunt, qui sont décédés, et date de décès de chacun d'eux		Noms et âges de leurs enfants, le cas échéant — Thérèse sœur décédé ~~mars~~ juin 1922		Adresse de leurs enfants

RÉPONDRE AU LONG À TOUTES LES QUESTIONS SUR CETTE PAGE

DÉTAILS D'IDENTITÉ

8	Nom et prénoms du défunt.	Marcel Lefebvre
9	Date de sa naissance.	17 Sept 1921
10	Lieu et date de son mariage.	Celibataire
11	Lieu et date du mariage de ses parents.	Montreal 4 mars 1919

DÉTAILS DE DOMICILE

12	Lieu où le défunt est né.	St adèle en haut Co Terrebonne Quebec
13	Indiquer, par ordre, la province, l'état et/ou le pays où le défunt a résidé avant son engagement, et la durée dans chaque cas.	(a) Montreal P.Que (b) (c) (d)
14	Nature de son emploi avant son engagement.	Boulanger
15	Indiquer s'il était propriétaire de la maison où il demeurait. Le cas échéant, à quel endroit?	non
16	Indiquer le lieu où le défunt entendait vivre d'une façon permanente.	Montreal

DÉTAILS DE LA SUCCESSION

17	A-t-il laissé un testament?	non
18	Si le défunt était marié et domicilié dans la province de Québec ou dans un état des État-Unis d'Amérique ou dans un pays où il existe communauté de biens entre les époux, existait-il un contrat se rapportant à la propriété?	Celibataire
19	Avait-il un compte d'épargnes dans une banque, un bureau de poste ou autre institution? Le cas échéant, donner le nom et l'adresse de la banque, etc., et le montant déposé.	non
20	Montant des certificats d'épargne de guerre que possédait le défunt.	aucun a ma Connaissance
21	Montant des bons de la victoire que possédait le défunt.	—
22	Si le défunt possédait des polices d'assurance-vie, donner les noms des compagnies et la somme payable en vertu de chacune des polices, ainsi que le nom de la personne qui y est nommée bénéficiaire. Décrire les autres valeurs, le cas échéant, et en donner le montant approximatif.	Prudential 278 marie anne Lefebre Sun Life 1,000 marie anne Lefebre
23	Est-il nécessaire de faire une demande d'homologation du testament ou de lettres d'administration (voir la page 1)?	non 24

AUTRES DÉTAILS

24	Après son engagement, le défunt avait-il contracté des dettes: (a) pour ses propres logement et pension pendant qu'il était dans les forces armées. (b) pour habits et équipement militaires. Un état détaillé de chacun de ces comptes doit être annexé à cette formule et, s'ils sont exacts, veuillez y inscrire "approuvé" et signer votre nom. Si vous les croyez inexacts, donnez des détails.	non non
25	Est-ce que les frais funéraires ont été payés, entièrement ou en partie, par vous-même ou un autre parent? Le cas échéant, annexez des états détaillés indiquant les montants payés, et par qui?	décédé outre mer en france

(Remarque:—Le gouvernement paye les frais funéraires, jusqu'à concurrence de montants déterminés par les règlements, lorsque le militaire est décédé et inhumé outre-mer, de même lorsqu'il est décédé et inhumé au Canada ou ailleurs en Amérique du Nord; si un parent a déjà payé les frais funéraires, ceux-ci lui seront remboursés par le gouvernement jusqu'à concurrence du montant fixé par les règlements. Cependant, si les frais excèdent ce montant, la différence ne sera pas payée par le gouvernement ni ne sera à la charge de la succession militaire du défunt.)

(VOIR AU VERSO)

*Insérez le degré de parenté, par exemple: "veuve", "père", "frère", etc.

DÉCLARATION

Je, soussigné, déclare que les renseignements qui précèdent sont exacts et constituent une liste fidèle et complète de tous les parents que le défunt ait jamais eus aux degrés signalés; et que je suis le/la* Mère du défunt.

N.B.—A être signée au long en présence d'un pasteur, prêtre, magistrat de la localité, commissaire ou notaire public.

Marie an Lefebvre (Signature du déclarant)

5307 rue Waverly Montréal Qué Adresse

CERTIFICAT

Je, soussigné, certifie que, autant que je sache Marianne Lefebvre (Nom du déclarant)

*Voir plus haut

est le/la* mère du défunt ci-dessus décrit et je crois que la liste des parents et des détails fournie par le déclarant et la déclaration ci-dessus, signée en ma présence, sont complètes et exactes.

Daté à Montréal ce 22e jour de août 1946

Signature du pasteur, prêtre, magistrat, commissaire ou notaire public. H. Maurice Titre C.C.S. district Montréal

Adresse 92 rue St-Denis, Montréal.

REMARQUE.—Avant d'accorder le certificat qui précède, il faut veiller à ce que le déclarant donne des détails concernant le décès de tout parent qu'il déclare être décédé et que les nom et prénoms et adresse de chaque parent survivant visé soient inscrits à l'endroit voulu dans la déclaration qui est vis-à-vis.

(Si le défunt n'a aucun parent vivant des degrés signalés à la page 2, il faudrait donner ci-après les noms et adresses, et le degré de parenté, d'autres parents.)

SE SERVIR DE L'ESPACE CI-DESSOUS SI VOUS DÉSIREZ FAIRE DES OBSERVATIONS SUPPLÉMENTAIRES.

No D.57977 Rank Private Name LEFEBVRE, Marcel

Unit Regt. de Chaudiere Date of death 6th June, 1944.

Died at France

Cause Killed in action.

Death occurred on strength of Forces.HQ 405-L-18384 d 21-6-44

N/K Mrs. Marie A. Lefebvre Relationship Mother

Address 5207 Waverley Street, Montreal, P.Q.

Remains buried in Bernieres-sur-Mer, MR 997854 7E/5. Cemetery

Gr. 3 DOW C.

Grave location

CHK

OVER-

DEATH CERT. TO N.K. FEB 2 1946

BURIAL REPORT TO N.K. NOV 8 1945

RETURN TO BUR. OF STAT.

ROYAL MESSAGE DESP'D. JUL 15 1944

CAN. MESSAGE DESP'D. 27/6/44

Temp BR sent to NK & Maj

REBURIAL

Beny-sur-Mer Canadian Military Cem.
Beny-sur-Mer, France.

Grave 4, row E, plot 1.

HI & CR Form Despd. NOV 29 1946

Photographs
Despatched
JUL 16 1947

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 Lefebvre Marcil (b) Reg'l. No. D-57777
2. (a) Arm of service Infantry (b) Unit R. 22 ... (c) Rank Pte
3. (a) Date of birth 17 Apr 20 (b) Have you any dependents? 1 (c) Place of residence at time of enlistment Montreal
4. (a) Place of enlistment Montreal (b) Date of enlistment 25 April 1941

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 9 years old (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.) 4 years public school
7. If you attended a university, give name of university and standing or degree secured no
8. (a) Did you ever enter upon a trade apprenticeship? yes (b) If so, for what occupation? Baker (c) Did you finish it? yes (d) If you did not finish it, how long did you serve at it?
9. (a) What languages do you speak fluently? French (b) What languages do you read well? French

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) Working (b) At time of enlistment of what trade union or professional society were you a member? no

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

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

11. Had you ever been employed fairly regularly since leaving school?
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 James Graham Address Montreal
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Baker
20. (a) Your specific occupation Helper Baker (b) Number of years' experience at this occupation with any employer 11 months
21. (a) Did your employer promise definitely to give you employment on discharge? no (b) Did your employer refuse to promise you employment on discharge? no (c) Do you wish to return to your former employment? no

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? yes (b) Do you feel competent to operate a farm? yes (c) If so, in what kind of farming? farming general
25. (a) Were you born on a farm? no (b) How many years' actual farming experience have you had? 3 years (c) In what provinces did you have experience? Quebec

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? no
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.) no
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form Lumber jack

DATE 3/11/41 194...... SIGNATURE M. Lefebvre.

COPY/MV

To be made out in duplicate

M.F.M. 5
200M—2-41 (9495-6)
H.Q. 1772-39-1651

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

INSTRUCTIONS.

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

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

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

---

(1) Name of Officer or Other Rank LEFEBVRE, Marcel
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Official Number and Rank D-57977 Pte.

(3) Unit Regiment de Maisonneuve

(4) Are you married? No

(5) If married, state,

(*a*) Full name of your wife

(*b*) Present postal address of wife

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

(7) Are you a widower?

(8) Have you any children? No Number of boys Girls

Names and ages

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

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

Name

Postal Address

[SEE OTHER SIDE]

22

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

If so, state her full name and Postal Address

(11) Is your father alive? No

If so, state name and address, occupation

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

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

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

(14) Is your mother alive? Yes

If so, state name and address Mrs. Marie Anne LEFEBVRE

6373 Clarke Street, Montreal, Que., Canada.

(15) If your mother is a widow, are you her sole or partial support? Sole Support

(16) If sole or partial support of widowed mother—state what amount per month you have given her prior to appointment or enlistment $30.00 per month

Also state reason why she has no other means of support, if partially supported by you what is your reason for not providing full support? The only child supporting her

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

If so, state the following particulars:—

Relationship

Full Name

Postal Address

Amount contributed monthly during the past six months

(18) Are you insured? Yes

If so, in what Company? Group Ins., James Strachan Bakers
(Give number of policy)

Have you made arrangements for payment of your Insurance Premium? Yes
If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

I hereby certify that the information given by me on this form is correct in each and every particular.

(Sgd.) Marcel Lefebvre
(Signature of officer or man)

Date 25th March 1941

(Sgd.) A. Champagne, Maj.

Officer Commanding No. 4 District Depot, A.F.

Date 25th March 1941

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

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON

ENTITLED TO Mrs. Marie A. Lefebvre (Mother)

5171 Hutchison St.

~~5207 Waverley St.~~,

ADDRESS: Montreal, Que. (6-12-51)

MEMORIAL BAR

8/1/52

(1) DATE DESP 4863

CANCELLED

REGN. NO 3,602

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(2)

(3) MEMORIAL CROSS

MOTHER Mrs. Marie A. Lefebvre, (FRENCH)

(1624)

ADDRESS: 5207 Rue Waverley, MONTREAL, P.Q.

(3) DESP. SEP 1 1944

REGN No. 1614

6-6-44

(O.C.L.-517)

AWARDS—CANADIAN ARMY (ACTIVE) (1624) M

M.J.A.

500M—1-44 (3467)
H.Q. 1772-45-8

FILE NO. 405-L-18384

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
LEFEBVRE,	Marcel	D.57977	Pte.	Regt. de Chaud.

WAR SERVICE
BADGE
(CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
France-Germany Star	919 4/11/49.
Defence Medal	
War Medal, 1939-45	
~~CVSM & Clasp~~	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

SERVICE AND CASUALTY FORM

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

(PART II)

Regiment or Corps...Regimental Number...

Substantive Rank.................................Surname.................................Christian Names.................................

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

(a) Report Date	(a) Report From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table 1 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
		6 C/RU	att f a p fr X List Rde Maison on disch fr 1 Cdn Spec Hosp (Pending TOS)	UK	20 apr 44	Pte	98/44
		"	TOS fr X List Rde Maison Disch f 1 Cdn Spec Hosp & ceases att f a p (Pending TOS)	"	21 apr 44	"	103/44
			SOS to X4 List Rde Chaud auth CRU Demand 33 d/24 apr 44		27 apr 44	"	106/44
	X4	Rde Chaud	TOS from 6 C RU	"	28 apr 44	"	~~17~~ 16-11 ~~[illegible]~~ apr 44
	X4	Rde Chaud	SOS to Rde Chaud	"	3 may 44	"	16-11 may
30 apr 44	[illegible] 4307	Chaud	TOS from X4 list (Rde Chaud)	Fd	4 may 44	✓	28/44
10 Jun 44	OC	✓	SOS killed in action	✓	6 Jun 44	✓	37/44

(a) Report		(b)	(c)	(d)	(e)	(f)	(g)
Date	From whom received	Unit	Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	Place of Casualty	Date of Casualty	Army rank as at (e)	Army Form or other authority for entry to be shown
26-11-41	D.O.	2CIHU	Embarked in Canada	2CIHU	10-11-41	Pte	280 25-11-41
			Disembarked in U.K.	"	24-11-41	"	" "
			T.O.S. Cdn Army o/s and	"	10-11-41	"	" "
			Posted to No 2 C.I.H.U.	"	24-11-41	"	" "
	"	2 CDIRU	Att'd No 1 Rd Const Coy RCE	2 CDIRU	9-12-41	"	9 10-12-41
		✓	Ceases att'd to 1 Rd Const Coy RCE	UK	15-12-41	✓	14 16-12-41
			5 days L. Leave	✓	15-12-41	✓	15 17-12-41
			Adm. #2 C.M.C.	"	20-3-42	"	77 1-4-42.
		✓	Disch #2 CMC	✓	20 3 42		68 21-3-42
		✓	7 days P. Leave WW	✓	5-5-42	✓	106 5-5-42
		2CDIRU	Detailed to #8 Wolf Bn	UK	18-5-42	"	118 19-5-42
		✓	Ceases detailed 8 Wolf Bn	✓	3.6.42	✓	134 6.6.42
		✓	Priv leave from 7-14 Aug 42	✓		✓	188 10 Aug 42
SOS		✓	to Rde M Arden 5799		3-9-42	✓	209 3-9-42.
4 Sep 42	OC	Rde Mais	T.O.S. from 2 C.D.I.R.U. (Demand 5799)	Field	4 Sep 42	"	DO 54-9 Sep 42
23 Nov 42	"	"	7 Days Leave J.H.	"	24 Nov 42	"	" 71-7 Dec 42
26 Mar 43	"	"	Granted Daily Rates of Pay of $1.50 per diem	"	1 Jan 43	"	" 18-29 Mar 43
	"	"	Adm 18 Fd Amb	"	28 Mar 43	"	}
	"	"	Rem'd to 2 CCS.	"	29 " 43	"	} " 20-10 Apr 43
2 Apr 43	"	"	9 Days Priv Leave	"	18 Mar 43	"	" 21-16 " 43
	"	"	Disch from 2 CCS.	"	13 Apr 43	"	" 22-22 " 43
15 Jul 43	"	"	9 Days Priv Leave	"	16 Jul 43	"	" 38-26 Jul 43
	"	"	Adm 4 FDS - Rem'd to 4 CCS and 14 Gen Hosp	"	29 Jul 43	"	}
	"	"	SOS to 6 CIRU	"	29 " 43	"	} " 40-6 Aug 43
		6CIRU	T.O.S. fr. R de Maison adm to 14 CGH	U.K.	30 Jul 43	"	161-9 Aug 43
		"	Disch. fr. 14 CGH	"	9 Sep 43	"	190-11 Sep 43
		" SOS	R de Mais (draft dem 8082 d/19 Sep 43	"	23 Sep 43	"	201-23 Sep 43
	OC	R de Mais	TOS from 6 CIRU	Field	24 " 43	"	DO 51-30 Sep 43
	"	"	Adm 18 Fd Amb and rem'd to 1 Cdn Spec Hosp	"	30 Oct 43	"	" 58-8 Nov 43
	"	"	Disch from 1 Spec Hosp	"	15 Nov 43	"	" 61-24 " 43
10 Jan 44	"	"	One Good Conduct Badge	"	25 Nov 43	"	" 3-20 Jan 44
15 Jan 44	"	"	Awarded Canadian Volunteer Service Medal and Clasp	"	15 Jan 44	"	" 4-44
	"	"	Adm to 18 Fd Amb remd to 13 Cdn Gen Hosp	"	3 Apr 44	"	" 22 | Apr 44
	"	"	SOS to X-3 List (R de M) on adm to 13 Cdn Gen Hosp	"	3 Apr 44	"	" 22 | Apr 44
9 Apr 44	2 Ech	X3 (R de M)	TOS from R de M on adm to hosp	"	4 Apr 44	"	12-11 Apr 44
4 May 44	X3	R de Mais	SOS to 6 CIRU on disch from 1 Spec Hosp	✓	20 Apr 44	✓	16-9 May 44

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 R.DE M. AF. Regimental Number D-57977

1. Surname LEFEBVRE
2. Christian Names MARCEL
3. *Substantive Rank and Appointment
   *Acting Temporary or Local Rank Pte
   giving date 25 Mar-41

*To be entered in pencil to facilitate alteration.

4. Place of birth Ste-Adele, P.Quebec, Can.
5. Date of birth as declared on attestation 7 Sept.1921
   (A)
6. Date of enlistment 25 Mar.41
7. Place of enlistment Montreal South, P.Q.Can.
8. Residence at time of enlistment 6373 Clark St.Mont.
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion R.C.
12. If married, state date N/A.
13. Trade on enlistment Baker's Apprentice
14. Corps, trade and grade
15. (D) Qualifications
16. (E) Miscellaneous entries

(17) Regiment or Corps	Unit (Battn., etc)

(18) Medical

Category	Date	Authority

(19) Next of kin (entries to be made in pencil)
Mrs. Marie Lefebvre (Mother)
6373 Clarke St. Mont.

(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.

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-57977 Rank Pte Surname Lefebvre. Christian Name Marcel.

Unit	Hospt.	Admitted Day	Admitted Mo.	Admitted Year	Discharged Day	Discharged Mo.	Discharged Year	Hospt. Days	Disease or Injury	Remarks	Cas. List No.
(R.M.R.) 32. Recce Regt.	14 Gen.	29	7	43				–	Penile ulcer.		C-1105
"	"				9	9	43	42	V.D.S. Sero-neg. Primary		C-1140
					15	11	43	16	N.S. Urethritis		& C-1199
Mais Regt.	1 Cdn Spec.	30	10	43					N.Y.D. Urethritis		C-1187
					20	4	44	17	V.D.G. (I)		C-1360
"	13 " Gen	3	4	44					Quinsy		C-1354
"	1 " Spec.	12	4	44					V.D.G. ac. Peri tonsillar abscess (Lt.)	Tr fr 13 Cdn Gen	C-1358
"									Killed 6-6-44		a-457

Records B3-49
H.Q. 1772-45-8
100M—5-43 (9999)

Regimental No. D-57977 Rank Pte.

Sheet No. ....

MFM 1 & 2a
40/P & S/119 (4398)

Name LE FEBVRE Marcel

	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc—	Rank Shown	Effective Date	Unit	Place	Authority DO Number	Authority Dated
S.O.S	S.O.S. to X-4 Rds Chaud.	PTE	27 Apr 44	6 CIRU	UK	106	4 May 44
T.O.S.	TOS from X-4 list (R. de. Chaud)	Pte	4 May 44	R. de Chaud	UK	26	12 May 44
	Killed	Pte	6 Jun 44	R de Ch	CLA	457	18 Jun 44
b.t.s. S.O.S.	S.O.S. Killed in Action T.u	PTE	6 Jun 44	Regt de Chaud.	UK	37	20 Jun 44
	Embarked at UK on 1 Jun 44 / Disembarked at France on 6 Jun 44	PTE		R de Chaud	21 A.G.	45	13 Jun 44

Statement of the Service of No. D57977 Rank .... Sheet No. ....

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

Name LEFEBVRE MARCEL

REPORT Date	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.	Dated
		Disch 2 CCS.	Pte	13 Apr 43	R de M	UK	22	22 Apl 43
		Granted a daily regt'l rate of pay of $1.50	Pte	1 Jan 43	R de M	UK	18	29 Mar 43
SOS		SOS to 6 CIRU on adm to 14 Gen Hosp	Pte	29 July 43	R de Mais	UK	40	6 aug 43
	TOS	TOS						
		Rem'd from 4 Cdn FD Dr Stn to 4 Cdn CCS: 4 Cdn CCS to 14 Gen	Pte	29 July 43	R de Mais	UK	40	6 aug 43
		Adm to 4 Cdn FD Dr Stn.	Pte	? July 43	R de Mais	UK	40	6 aug 43
SOS								
✓	TOS	TOS from R de mais on adm to 14 Gen Hosp	Pte	30 July 43	6 CIRU	UK	161	9 Aug 43
		Disch from 14 Gen Hosp	Pte	9 Sept 43	6 CIRU	UK	190	11 Sept 43
SOS		SOS to R de M	Pte	23 Sep 43	6 CIRU	UK	201	23 Sep 43
	TOS	TOS from 6 CIRU	Pte	24 Sep 43	R de M	UK	57	30 Sep 43
		adm to 18 C.L.F.A.	Pte	30 Oct 43	R de M	UK	58	8 Nov 43
		Rem'd from 18 C.L.F.A. to 1 Cdn Spec Hosp	Pte	30 Oct 43	R de M	UK	58	8 Nov 43
		Disch from 1 Cdn Spec Hosp	Pte	15 Nov 43	R de M	UK	61	24 Nov 43
CV		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
SOS		SOS to x list R de M. on adm to 13 Cdn Gen Hosp	Pte	3 apr 44	R de M	UK	22	15 apr 44
	TOS	TOS. From x List RdM on Dis from 1 Spec Hosp • Att FAP. Pend TOS	Pte	21 April 44	6 CIRU	UK	103	1 May 44
		Remove from 13 CGH to 1 Spec Hosp		12 apr 44			Cl	

Statement of Service of No. D. 57977 Rank Pte Sheet No. 2

Name Lefebvre Marcel

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

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
T.O.S.		T.O.S. Cdn Army o/s and Posted to No 2 C.I.H.U.	Pte "	10-11-41 "	2 CIHU "	Witley "	280 "	25-11-41 "
		Att'd to No 1 Cdn Rd. Const Coy RCE Working Party	Pte	9 Dec 41	2 DIRU	UK	9	10 Dec 41
5606		Ceases to be att'd 1 Rd Const Coy RCE	Pte	15 Dec 41	2/DIRU	UK	14	16 Dec 41
		Landing leave 5 days w/w	Pte	15-20 Dec 41	2/DIRU	UK	15	17 Dec 41
		Att'd for a/p 2 Det RCOC (M.T. Guard)	Pte	26 Jan 42	2/DIRU	UK	22	27 Jan 42
		Ceases to be att'd (f.a.p.) to 2 Det RCOC M.T. Guard	Pte	17 Feb 42	2 DIRU	UK	28	3 Feb 42
1		Adm to No 2 C.M.C.	Pte	20 Mar 42	2 DIRU	U.K.	77	1 Apr 42
		Disc. from No 2 C.M.C.	Pte	20 Mar 42	2/DIRU	U.K.	68	21 Mar 42
		Att'd for a/p 2 Det RCOC (M.T. Gd)	Pte	1 apr 42	2 DIRU	U.K.	77	1 apr 42
		Ceases to be att'd #2 Det R.C.O.C. M.T. Gd	Pte	16 apr 42	2/DIRU	U.K.	95	22 apr 42
		P. Leave w. w.	Pte	5/12 May 42	2/DIRU	U.K.	106	5 May 42
		Detailed 8 Wolf Bn	Pte	18 May 42	2/DIRU	U.K.	118	19 May 42
		Cease to be detailed 8 Wolf Bn.	Pte	3 June 42	2/DIRU	U.K.	134	6 June 42
		P. Leave to 14 Aug. 42.	Pte	7 Aug 42	2/DIRU	U.K.	188	10 Aug 42
S.O.S		S.O.S to R de M.	Pte	3 Sep 42	2/DIRU	U.K	209	3 Sep 42
	T.O.S	T.O.S. From 2/DIRU	Pte	4 Sep 42	R de M	UK	54	9 Sep 42
		Prid. Leave to 1 Dec 42.	Pte	24 Nov 42	R de M	UK	71	7 Dec 42
		adm to 187d. Amb.	Pte	28 Mar 43	R de M.	UK	20	10 Apr 43
		Remd from 187d. Amb to 2CCS	Pte	29 Mar 43	R de M	U.K.	20	10 Apr 43

Statement of the Service of No. D. 57977 Rank Pte Sheet No.

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

Name LEFEBVRE MARCEL

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
T.O.S.		T.O.S. Cdn Army o/s and	Pte	10-11-41	2 CIHU	Witley	280	25-11-41
		Posted to No 2 C.I.H.U.	"	24-11-41	"	"	"	"
		Att'd No 1 Rd Const Coy RCE	"	9-12-41	2 CDIRU	"	9	10-12-41
		Ceases attd to #1 Rd Const Coy RCE	"	15-12-41	"	UK	14	16-12-41
		5 days L. Leave	—	15-12-41	"	"	15	17-12-41
		Adm #2 CMC	"	20-3-42	"	UK	77	1-4-42.
		Disch #2 CMC	"	20-3-42	"	"	68	21-3-42
		7 Days P. Leave 1st W W	"	5.5.42	"	"	106	5.5.42.
		Detailed to #8 Wolf Bn	"	18-5-42	"	"	118	19-5-42
		Ceases detailed 8 Wolf. Bn	"	3.6.42.	"	"	134	6.6.42.
		Priv leave from 7-14 aug 42	"		"	"	188	10 Aug 42
SOS		to Rdc M F U dem 5799	"	3-9-42	"	"	209	3-9-42.

Received DEC 1 1941 Checked ACG Card ✓ Observations O

F

Doit être remplie en triplicata, désignant chaque exemplaire en biffant les deux termes inutiles.

M.F.M. 2 Fr.
A.F.B. 271
10 M—10-39 (2386)
H.Q. 1772-39-1645

Unité Regiment de Maisonneuve A.F. N° Matricule D-57977

~~Original~~
Duplicata
~~Triplicata~~

ARMÉE ACTIVE DU CANADA

FORMULE D'ENRÔLEMENT

01 / Pte

1. Nom LEFEBVRE
2. Prénoms MARCEL
3. Adresse actuelle 6373 Clark Street, Montreal, P.Q. Canada
4. Date de naissance 7 September, 1921
5. Lieu de naissance Canada (Pays) Quebec (Comté ou province) Ste Adele (Ville ou canton)
6. Religion (indiquez la confession) Roman Catholic
7. Métier ou profession Baker's Apprentice
8. Marié, veuf ou célibataire Single
9. Nom du plus proche parent Mrs. Marie ~~[illegible]~~ Anne LEFEBVRE
10. Degré de parenté Mother
11. Adresse du plus proche parent 6373 Clarke Street, Montreal, P.Q. Canada.
12. Avez-vous servi dans quelque armée de mer, de terre ou de l'air? NO
13. Si vous avez accompli du service de guerre antérieur, spécifiez l'arme, le corps de troupe et les détails régimentaires NO
14. Faites-vous actuellement partie de la milice active du Canada ou y avez-vous déjà servi? NO

(Indiquez l'unité et la date de l'enrôlement)

DÉCLARATION FAITE PAR L'HOMME LORS DE L'ENRÔLEMENT

Je, soussigné, Marcel Lefebvre, déclare solennellement que les renseignements ci-dessus 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 25 March, 1941

Witness J. Dumm Pte.

x Marcel Lefebvre
(Signature de la recrue)

SERMENT PRÊTÉ PAR LA RECRUE LORS DE L'ENRÔLEMENT

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

x Marcel Lefebvre
(Signature de la recrue)

CERTIFICAT DU MAGISTRAT, DU JUGE DE PAIX OU DE L'OFFICIER CERTIFICATEUR

J'ai averti l'homme susnommé que s'il répondait inexactement à l'une quelconque des questions précédentes, il s'exposerait aux rigueurs de 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 South PQ ce 25 jour de March, 1941

A. Marfe[illegible] Maj
(Signature du magistrat, du juge de paix ou de l'officier certificateur

NO. 4 DISTRICT DEPOT A.F.
(Titre, grade et unité ou emploi)

N.B. On désire signaler que quiconque répond inexactement à l'une quelconque des questions précitées est passible d'un emprisonnement de six mois.

FINGERPRINTED

P

État de service de LEFEBVRE (Nom) Marcel (Prénoms) N° matricule D-57977

APTITUDES		DEGRÉ D'INSTRUCTION	
Militaires	Nil	*Académies (années complétées)	Nil
Professionnelles ou commerciales	Nil	Graduation ou Immatriculation (Spécifier)	Nil
Civiles ou de métier	Baker's Apprentice	*Collège	Nil
Techniques	Nil	*Université	Nil
Langues	French		3 Yrs. Public Schooling

(*Mentionnez le nom de l'institution, les années ou cours complétés et les diplômes obtenus)

Toutes les recrues enrôlées le seront comme simples soldats, les nominations ou les promotions à un grade supérieur devant être indiquées dans l'espace réservé ci-dessous à cette fin.

Rapport: Date	Rapport: Reçu de	État des promotions, abaissements de grade, mutations, maladies ou blessures, rapports, etc., à compter de la date de son enrôlement dans l'armée active	Grade indiqué	Prenant date le	Unité	Endroit	Autorisation: N°, Partie II, Ordres du jour. Liste des morts et blessés, etc.	Autorisation: Daté le
		Affecté lors de son enrôlement						
25 Mar41	DRO	No. 4 District Depot A.P.	Pte	25 Mar41	4 D.D.	Mtl.Sth.	4 DD-PtII-No71	25 Mar41
17 Apr41	4 D.D.	Pro. on Com.&Att.for all Pur.BTC43 Sher.Q	"	17Apr.41	4 D.D.	" "	4 DD/PtII/N.90	17 Apr 41
21-4-41	BTC #43	T.O.S BTC 43 Sherbrooke, On command and attached for all purposes from DD#4	"	18-4-41	R de M	Sherbrooke	#43 Pt.II 68A	21-4-41
25-6-41	"	S.O.S on transfer to T.C.12A Farnham	"	25-6-41	"	"	" 110A	25-6-41
26-6-41	ATC A12	Attached for all purposes at A12 Farnham	"	26-6-41	ATC A12	Farnham	Pt. II, A-88;	26-6-41
"	"	Granted 14 Days Furlough under Prov. R.O. 699	"	26-9-41 9-10-41	" "	"	" " A-137	26-9-41
8-11-41	"	Granted Embarkation Leave from 5-11-41 to 8-11-41	"	5-11-41	" "	"	" " A-171	9-11-41
9-11-41	"	Ceases to be attached fro all purposes on proceeding Overseas.	"	9-11-41	"	"	" " A-171	9-11-41
		Embarked in Canada	2	10-11-41	2CIHU	Witley	280	25-11-41
		Disembarked in U.K.	"	24-11-41	"	"	"	"

Pour les inscriptions supplémentaires, se servir de M.F.M. 1 et 2 (a) (Fr.)

Recevez-vous ou avez reçu une pension ou compensat... details.

CERTIFICAT DE L'EXAMEN MÉDICAL

Nom en entier LEFEBVRE MARCEL Date March 22 1941.

PARTIE 1. Renseignements obtenus de la recrue.

1. Âge 19   2. Avez-vous déjà souffert de l'une quelconque des maladies suivantes?

a. Rhumatisme	NO	j. Affection nasale	NO
b. Tuberculose	NO	k. Maladies des oreilles	NO
c. Bronchite ou asthme	NO	l. Maladie des yeux	NO
d. Affection cardiaque	NO	m. Épilepsie	NO
e. Maladie du rein ou de la vessie	NO	n. Maladie nerveuse ou mentale	NO
f. Gastrite intestinale	NO	o. Syphilis	NO
g. Hernie	NO	p. Gonorrhée	NO
h. Varices	NO	q. Avez-vous déjà porté des lunettes?	NO
i. Pieds plats ou déformés	No		

Marcel Lefebvre
(Signature de la recrue)

Observations de l'examinateur
Color Vision Iṡhihara CN.
Ears & Reflexes Normal. A.L.Delahaye.Capt.

MAR 24 1941
URINE N
73981 N
X-RAY N

PARTIE 2. Renseignements obtenus par l'examen médical. La recrue doit être déshabillée.

1. Marques ou cicatrices d'identification (si celles-ci sont opératoires, obtenir les détails)
1 Vacc. left Arm.

2. Taille 5 pieds 4 pouces. 3. Poids 123 livres

4. Teint Medium Yeux Brown Cheveux Dk. Brown

5. Développement Good {Bon / Passable / Médiocre}

6. Tour de poitrine—Circonférence, pleine expansion 34 pouces Degré d'expansion 2 pouces

7. Vue, œil droit 20-30 œil gauche 20-60 8. Ouïe, oreille droite C.V.20 gauche C.V.20

9. Etat de la bouche et des dents Good.

Les anomalies (congénitales et pathologiques) constatées lors de l'examen sont les suivantes:
Fat feet flexible.
Left inguinal ring enlarged. No actual hernia at present.
Seen by Capt. Mackenzie.

PARTIE 3. Nous les examinateurs, ne trouvons aucune trace des maladies énumérées dans la question 2 de la partie 1, sauf ce qui est 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

J.G.BROWNFELT.COL. (Président) C.F.WYLDE.COL. (Membre) I.E.BRUNEAU.CAPT. (Membre)

J.G. Brownfelt Col   C.F. Wylde Col   I. Bruneau Capt.

VACCINATIONS, INOCULATIONS, COMMISSIONS, RECLASSIFICATION DE LA CATÉGORIE MÉDICALE

Date	Détails succints et signature	Date	Détails succints et signature
MAR 25 '41	TAB	5-11-41	Re Examined Cat "A"
3-5-41		20-11-42	TAB ½
	3		
MAR 25 '41	VACCINATION		
MAR 25 '41	TETANUS TOX 1cc		
3-5-41	TETANUS TOX 1cc		
Medical Recheck 24/6/41			

Pour les inscriptions supplémentaires, se servir de M.F.M. 1 et 2 (a) (Fr.)

Recevez-vous ou avez reçu une pension ou compensation details. no.

N° matricule D-57977 Grade PTE Nom LEFEBVRE Prénoms MARCEL

Garnison	Date d'arrivée à la garnison	Date de Admission à l'hôpital			Date de Sortie de l'hôpital			Maladie	Nombre de jours à l'hôpital	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 primaire 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.	Signature du médecin
		Jour	Mois	Année	Jour	Mois	Année				

Pour les inscriptions supplémentaires, se servir de **M.F.M. 1 et 2 (b) (Fr.)**

File No. 405-L-18384

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. D 57977 Name LEFEBVRE MARCEL

Rank on Discharge Pte Date of Discharge 6-6-44

Authority for Discharge or Retirement Deceased

Served in:

				Non-qualifying service
Canada	from 25-3-41	to	10-11-41	
	from	to		
United Kingdom	from 11-11-41	to	5-6-44	
	from	to		
Italy	from	to		
Northwest Europe	from 6-6-44	to	KIA 6-6-44	
----------	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 ok

M

Verified by [illegible]

Date 30-9-46

Carded OCT 2 1946

HA 165

NO RIBBON DESPATCH

Ottawa, 3 juillet, 1944.

Chère madame,

C'est avec un profond regret que j'apprends le décès de votre fils, le soldat Marcel LEFEBVRE, matricule D-57977, qui a donné sa vie au service de sa patrie en France le 6 juin 1944.

D'après les renseignements officiels que nous avons reçus, votre fils a été tué au combat contre l'ennemi. Vous pouvez compter que sur réception de détails supplémentaires, nous vous en aviserons sans délai.

Le Ministre de la Défense nationale et les membres du Conseil de l'Armée me chargent de vous offrir, à vous-même et à votre famille, leurs sincères condoléances dans votre deuil.

Nous rendons hommage au soldat Lefebvre pour son vaillant sacrifice.

Votre bien dévoué,

l'Adjudant-général,

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

JUN 30 1944

(H.F.G. Letson),
major-général.

Mme Marie A. Lefebvre,
5207, rue Waverley,
Montréal, Qué.

9

TL

Estates Form "P. 4"

DISTRIBUTION OF SERVICE ESTATES

ARMY

Name: LEFEBVRE, Marcel (Surname / Christian Names) No.: D.57977

Pte. (Rank) C.A. O/S (Unit) 6-6-44 (Date of Death)

AMOUNT

L.P.C. $ 35.46

Date: 19-3-45

Other Credits

Total 35.46

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Marie-Anne Lefebvre, 5207 Waverley Street, MONTREAL, P.Q. (S ole beneficiary under will)	35.46 R 37

TO BE FORWARDED BY REG. MAIL DIRECT.

P4. TO TREAS. 18-4-45

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	$35.46

CLASSIFIED BY

Original Signed by
K. L. McCUAIG

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by

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

AUDITED FOR PAYMENT

For Chief Treasury Officer

50M—8-44 (5426)
H.Q. 1772-80-2

405-L-18384.

RECORDS OFFICE OVERSEAS.

CANADIAN MILITARY HEADQUARTERS.

GRAVES REGISTRATION CARD.

NAME LEFEBVRE, Marcel.

RANK PTE.

UNIT REGT DE LA CHAUDIERE,

PLACE & DATE OF BIRTH Quebec. CANADA. 7 September 1921

REGIMENTAL NO D.57977

NEXT OF KIN & ADDRESS MOTHER:-
Mrs Marie Anne LEFEBVRE,
6373 CLARKE STREET.
MONTREAL, QUEBEC, CANADA.

PARTICULARS OF HOSPITALISATION

DATE OF ADMISSION

NAME & LOCATION OF HOSPITAL

DIAGNOSIS

PARTICULARS OF DEATH

DATE OF DEATH 6 JUNE ~~1944~~ 1944

PLACE OF DEATH FRANCE

HRS

CAUSE OF DEATH KILLED.

PARTICULARS OF BURIAL

DATE OF BURIAL 8 June 44

CEMETERY Bernieres-sur-Mer MR.997854 7E/5.

PLOT NO. ROW NO. C GRAVE NO. 3

DEATH CERTIFICATE NO

DATE OF REGN OF DEATH CERT

RELIGION ROMAN CATHOLIC.

DATE 13 Sept 45

(M. BLUTEAU) CAPT.
for Officer i/c Records,
CANADIAN MILITARY HEADQUARTERS,

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

50

QG 405-L-18384 DR 2(c).

le 1er février 1946.

Madame,

Des renseignements maintenant reçus d'outre-mer, indiquent que les restes de votre fils, le soldat Marcel LEFEBVRE, matricule D-57977, ont maintenant été soigneusement exhumés de l'endroit original d'inhumation et respectueusement inhumés de nouveau dans la tombe 4, rang E, lot 1, du cimetière militaire canadien de Beny-sur-Mer, à Beny-sur-Mer en France. (Carte marquée ci-jointe). Ce cimetière est un lieu de sépulture reconnu et l'entretien en sera perpétuel.

La tombe a dû être marquée temporairement d'une croix qui sera remplacée, en temps opportun, par une pierre tombale permanente portant une inscription appropriée. Pour des raisons évidentes, nous ne pouvons dire à quelle date commencera ce travail de commémoration permanente, mais vous pouvez être assurée qu'à ce moment, nous communiquerons avec vous et nous vous donnerons l'occasion de choisir une courte inscription personnelle destinée à être gravée sur le mémorial. Par conséquent, nous vous saurions gré de nous informer de tout changement dans votre adresse.

Veuillez agréer, madame, mes respectueuses salutations.

Pour l'adjudant général,

(C.L. Laurin) colonel,
directeur des archives.

Mme Marie A. Lefebvre,
5207, rue Waverley,
Montréal, Qué.

/MA

55

2119

FORM No. 1

Registe[redacted]o. C.D. 1825 Nominal Roll No. D-593

H.Q. File No. 405-L-18384

To: P.M.G.

CANADIAN ARMY (ACTIVE)

Computation of Service

WAR SERVICE GRANT

Regt. No.	Rank when S.O.S.	Surname	Christian Name in Full
D 57977	Pte	Lefebvre	Marcel

REASON FOR TERMINATION OF SERVICE:

1st Enlistment Killed in Action CARO ( )

2nd Enlistment CARO ( )

3rd Enlistment CARO ( )

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. 25 Mar 41	T.O.S.	T.O.S.
S.O.S. 6 June 44 MD O/S	S.O.S. MD	S.O.S. MD
Total Days 1170	Total Days	Total Days

Total Service 1170 DAYS

—	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere	231	–	231
Overseas Service	939	–	939
Totals	1170	–	1170
Add Non-qualifying Service			
Total Service			1170

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 6 June 44 2. Date S.O.S. Overseas

REMARKS:

Computer's Signature

Checker's Signature

Date Computed 13 May 45

KILLED IN ACTION 6 June 44

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.

500M—11-44 (6012)
H.Q. 1772-45-8

Details of Non-Qualifying Service

Western Hemisphere—

Forfeits for	From	To	Effective Date	Days	Total
				Total	—

Overseas: T.O.S. 11 Nov 41 T.O.S. T.O.S.

S.O.S. 6 June 44 S.O.S. S.O.S.

				Total	—

Q.G. 405-L-18384 R.4(b)

le 15 juillet 1947.

Madame,

Je vous envoie sous ce pli une photographie de la tombe et du monument commémoratif qui marque la sépulture de votre regretté fils, le soldat Marcel LEFEBVRE, matricule D-57977, inhumé dans la fosse 4, rang E, lot 1, du cimetière militaire canadien de Beny-sur-Mer, à Beny-sur-Mer, en France.

Toute erreur paraissant dans l'inscription sera corrigée au moment de l'érection de la pierre tombale permanente.

Veuillez agréer, madame, mes respectueuses salutations.

Pour l'adjudant général,

Pièces jointes

(H.M.Jackson)lt-colonel,
directeur des archives.

Mme Marie A. Lefebvre,
5207, rue Waverley,
Montréal,
P. Qué.

/BP

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

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

District.....

Dispersal Area.....

Regtl No. D57977 Rank and Name LEFEBVRE M. Pte.

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

(Transfer or Discharge).....to.....on 6th June. 19 44.

Reason Death Authority : C.C.L. "A" 457 d/18.June.44.

The following is a statement of the account of the above-named from 1.June. to 30 June. 19 44. the inclusive date of transfer or discharge.

Dr			Cr		
Particulars	Amount		Particulars	Amount	
Balance Dr from last account			Balance Cr from last account	13	46
First Monthly Payment			Regimental Pay 30 days at 1.50	45	00
Casual Payments			Technical Pay days at $		
Payments on Transfer or Discharge			Additional Pay (Give particulars) days at $		
Assigned Pay	23	00			
Regimental Charges			Allowances (Give particulars) days at $		
Public Stoppages (Give particulars) :					
To Balance Cr Free	35	46			
Deferred			By Balance Dr		
Total	58	46	Total	58	46

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

Remarks :

Assnd Pay $23.00 (M) stopped eff July.44.

Compiled by E.G.Ripley.

Checked by B.M. Wadsworth

Date 29th December. 19 44.

Certified correct T. Hill
for Chief Treasury Officer, Overseas

MM

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

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME D-51977 Pte. Lefebvre M. (Deceased)

RECEIVED FROM H. Q. No. 1 C.K.S.D.

CHECKED BY M-16610 Pte. Funnell L.T.F.
B-126252 Cpl. Sislofsky A. DATE 28 Aug 44

1	Kit Bag		
1	Kit Bag Handle		
1	Lock		
2	Pair P.T. Shorts. G.I. RTS (RSD)		
2	Pair P.T. Shirts G.I. RTS (RSD)		
1	Suit Denims G.I. RTS (RSD)		
1	Khaki Angola Shirt G.I. RTS (RSD)		
1	Battle Dress Uniform G.I. RTS (RSD)		
5	Brushes G.I. RTS (RSD)		
1	Suit Woollen Underwear G.I. RTS (RSD)		
2	Undervests (Cotton)		
1	Undershirt (Cotton		
1	Khaki Dress Shirt		
2½	Pair Dress Socks		
8	KH Handkerchiefs		
1	Towel		
1	Ration Bag		
1	Button Stick		
1	Crucifix		
1	First Field Dressing Removed for Dist.		
2	Tin Anti-Gas Ointment Removed for Dist.		
2	Tins Blanco Removed for Dist.		
1	Tin Brasso Removed for Dist.		
1	Bottle India Ink Removed for Dist.		
	No Inventory Received With Effects		

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

TRIPLICATE — with effects.

A Sislofsky Cpl
for OC 1 Cdn KSD

5M-1-45 (6393) (FR.)
H.Q. 1064-81-3

4
ARMY

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Marcel (CHRISTIAN NAMES) LEFEBVRE (SURNAME)

REGISTER NO. D-20817
FILE NO. 405-L-18384
DATE 1-4-46
SERVICE NO. D-57977
FINAL RANK OR RATING Pte.
DATE OF DISCHARGE 6-6-44

PAYEE Mme. Marie E. LEFEBVRE,
ADDRESS 5207 rue Waverley,
Montreal - P.Q.

DATE OF TERMINATION OF OVERSEAS SERVICE 6-6-44

	$ ¢
A. TOTAL QUALIFYING SERVICE NO. OF DAYS 1170/30 EQUAL TO 39 COMPLETE PERIODS AT $7.50	292.50
B. QUALIFYING OVERSEAS SERVICE No. OF DAYS 939 LESS INELIGIBLE DAYS, EQUAL TO DAYS @ 25c. PER DAY (SEE PAR. 2 OVERLEAF FOR EXPLANATION)	234.75
	527.25
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 $ ~~2x5~~ 25.00 $ .83	
TOTAL $ 3.58 X7 = $ 25.06	
NO. OF DAYS 939/183 X$ 25.06	128.59
D. WAR SERVICE GRATUITY	655.84
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $; DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $	
OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE	655.84

G. YOUR PORTION OF GRATUITY IS— 100%

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $_____ OF $ = $

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

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

PREPARED BY	CHECKED BY
KRM	[illegible]

TREASURY	
CHECKED BY	DATE
D. Beckerton	4-4-46

[illegible] Capt
SERVICE REPRESENTATIVE

File No 405-L-18384

R E B U R I A L

NO D57977

RANK PTE

NAME LEFEBVRE, M.

NAME OF CEMETERY Beny-sur-Mer Canadian Military Cemetery,

LOCATION OF CEMETERY Beny-sur-Mer, France.

GRAVE LOCATION Plot 1, Row E, Grave 4.

AUTHORITY 54-27-88-2 Vol. 19

Reburial list.

53

SOLDIERS' PAY AND ALLOWANCE LEDGER · OVERSEAS

REGIMENTAL No.	NAME	PARTICULARS	REFERENCE UNIT	REFERENCE No.	CREDITS	DEBIT PAYMENTS, ETC.	DEBIT ASSIGNED		PAY	DATE ENTERED MO. DAY
D 57977	LEFEBVRE M	BAL FEB 10 44	*		5168					2 1[illegible]
D 57977	LEFEBVRE M	P AND A FEB			4350		2000			2 03
D 57977	LEFEBVRE M	AR31 12 19035	117	86		671				1 27
D 57977	LEFEBVRE M	AR 11 1 19394	117	87		1565				2 02 4
D 57977	LEFEBRE M	ADJ ASSND PAY		2949			600			2 08 4
D 57977	LEFEBVRE M	9 RATION ALL	117	3	603					2 13 4
D 57977	LEFEBVRE M	AR30 11 16413	117	76		1788				1 2 24
D 57977	LEFEBVRE M	AR31 1 21013	117	97		1341				2 26 4
D 57977	LEFEBRE M	P AND A MAR			4650		2300			3 01 4
D 57977	LEFEBVRE M	AR 15 2 22531	117	101		894				
D 57977	LEFEBVRE M	AR 29 2 22870	117	107		1118				
D 57977	LEFEBRE M	P AND A APRIL			4500		2300			
D 57977	LEFEBVRE M	AR 15 3 24666	117	115		1118				
D 57977	LEFEBVRE M	AR 27 3 25202	117	117		2012				
D 57977	LEFEBRE M	P AND A MAY			4650		2300			
D 57977	LEFEBVRE M	AR14 4 1905	548	7		224				
D 57977	LEFEBRE M	P AND A JUNE			4500		2300			
D 57977	LEFEBVRE M	AR 29 4 4444	786	1		1341				
D 57977	LEFEBVRE M	AR 15 5 5137	370	16		1118				
D 57977	LEFEBVRE M	9 RATION ALL	117	23	671 √					
D 57977	LEFEBVRE M	IAI ROLL MAY	786	18		9				
D 57977	LEFEBRE M	P AND A JULY			4650 √		√ 2300			
D 57977	LEFEBVRE M	IAI ROLL MAY	1323	14		100				7 1
D 57977	LEFEBVRE M	ADJ ASSND PAY					* √ 2300			7 1 4
D 57977	LEFEBVRE M	SOS DECEASED				4650 √				7 13 4
D 57977	LEFEBVRE M	AR 29 5 10228	370	21		447				7 26 4
D 57977	LEFEBVRE M		130	20						
				3546	33742	18396	11800			

L.P.C. agrees √

BW
26 Dec 44

INTERIM
4 DEC 1944

ALACRA TABULATOR FORMS

LAST AMOUNT SHOWN = GROSS BALANCE. TO OBTAIN FREE BALANCE SUBTRACT TOTAL OF DEFERRED PAY

Montréal 18 Septembre 1945

RS

RECORDS

KILLED
6 June 44.
Cas List A/457.

Messieurs,

Je vous ecrit ces quelque mots, pour vous demander, s'il vous serais possible de me donner certains renseigne-ments, concernant mon petit fils, le soldat Marcel Lefèbvre D. 57977 qui était en service actif avec le régiment de Maison-neuve, et qui fut ensuite verser dans le régiment de La Chaudière. Je sais qu'il fut blessé plusieurs fois, et qu'il fit des stages assez prolongés a divers hopi-taux de l'Angleterre mais je ne sais plus rien de lui, et je suis dans une inquiétude de folle, soyez, je vous prie assez généreux de bien vouloir, s'il vous est possible me donner tout les renseignements, le concer-nant, et quelque soit, ces renseignements je vous en remercie a l'avance et je vous demande de bien vouloir me les communiquer le plus tôt possible. Je demeure votre obligée

Madame Jos. Bélair
4620 Boulvd St Laurent
Montréal
Cité
Québec

Officer i/c Records
A. G. Branch
OCT 16 1945
Nat. Defence Hqrs.
Ottawa. - Canada.

OCT 1945

BUREAU FOR TRANSLATIONS
OCT 16 1945
Rec'd
OCT 18 1945
DEFENCE

45

QG 405-L-18384 DR 2(b).

le 24 octobre 1945.

Madame,

Votre lettre du 18 septembre 1945, adressée au quartier général militaire canadien à Londres en Angleterre, touchant votre petit fils, le soldat Marcel LEFEBVRE, matricule D-57977, nous a été transmise pour que nous y répondions.

Je regrette de vous informer que votre petit-fils a été tué au combat le 6 juin 1944, lorsque son unité, le Régiment de la Chaudière, attaquait l'ennemi dans le bataille de la Normandie.

Veuillez agréer, madame, mes respectueuses salutations.

Pour l'adjudant général,

(C.L. Laurin) colonel,
directeur des archives.

Mme Joseph Bélair,
4620, boulevard St-Laurent,
Montréal, Qué.

/MA

49

D.R.B.

Je suis chargé de vous faire savoir que d'après les renseignements que nous avons reçus d'outre-mer, le militaire précité est en route pour le Canada à bord d'un vaisseau-hôpital.

A l'arrivée, il sera conduit à son dépôt de District à moins qu'il ne soit jugé autrement pour des raisons personnelles ou médicales. Bien que nous ne puissions donner l'assurance d'un congé de débarquement, il est dans notre ligne de conduite d'accorder un tel congé au personnel qui ne requiert pas de soins immédiats d'hôpital.

Il est regrettable que les circonstances ne permettent pas que vous vous rendiez au port de débarquement.

J'ai l'honneur d'être votre tout dévoué.

Pour l'adjudant général,

(C.L. Laurin) colonel,
directeur des archives.

VERIFIED
DATE 13/10/42 BY

10 NOV 1941
MILITIA BOOK M. 1

Part II
[illegible]-5-40 (52[illegible])
(H.Q. 1772—39-1672)

CANADIAN MILITIA

Soldier's Pay Book

(For use on Active Service)

Number D 57977

Surname (Capitals) LEFEBVRE

Christian Names in full Marcel

Unit Maisonneuve
H. A.

PARTICULARS OF FAMILY, ETC.

1. State whether married, widower or single:

Celibataire

2. If married, give full postal address of wife, or if widower, name and address of guardian of children, if any, or if single, name and address of next-of-kin, stating relationship to the soldier: (see also page 40.)

Mrs Anne Marie-Anne Lefebvre (Mere)
6373 rue Clarke Montreal Que
Canada

3. If married after enlistment, state date of marriage:

4. Assignment of pay: Date effective:

$ 20.00 Avril 1941

$

$

5. Name and address of assignee:

Jude Marie Anne Lefebvre (Mere)
6373 rue Clarke Montreal
Que Canada

6. Any change of assignee:

7. Dependents allowance, payable to:

(Relationship)

Original unit in which enlisted:

Maisonneuve

Regimental Depot:

Montreal, Que

Unit in field:

R de Maisonneuve

Regimental Number:

D57977

Name in full (surname first):

Lefebvre Marcel

Date of Attestation:

25 Mars 1941

CASUALTIES AFFECTING DAILY RATE OF PAY AND ALLOWANCES

Date effective	Particulars	Part II Order	Unit	Signature of Officer
25/3/41	Pris Sur Effectif	4 D D 71	R. de M.	G. Laframboise Lt.

DAILY RATES OF PAY AND ALLOWANCES

Pay		Field Allowance		Additional Pay		Total Daily Rate		Date effective	Signature of Paymaster
$	c.	$	c.	$	c.	$	c.		
1	30					1	30	25/3/41	G. Laframboise Lt.

Soldier's Signature M Lefebvre

Book opens on 10/11/41 Balance Cr. or Dr. $4 38

G. Laframboise Lt. Paymaster.

Date	Particulars	Credits	Cash Payments and Other Charges: Local Currency	Cash Payments and Other Charges: Canad'n Currency	Assigned Pay	Deferred Pay	BALANCE: Debit	BALANCE: Credit	Signature of Paymaster or Officer making Award
10/11/41	Bal			4 38			4 38		G. Laframboise Lt.
Bal Mar Pay		27 30			14 -			8 92	J M Summer Capt
Dec Pay		40 30			20 -			29 22	J M Summer
29/11/41	AR 127		2 -	8 94	/			20 28	H Woodwards Capt
12-12-41	AR 196		2-0-0	8 94				11 34	A J Kruger
15-12-41	AR 131		1 -	4 47	/			6 87	H Woodwards Capt
23-12-	AR 145		-/10/-	2 24	/			4 63	H Woodwards Capt
30-12-41	AR 153		1-1	4 69	/		06		J M Summer Capt
Jan Pay		40 30			20			20 24	J M Summer
	Totals Carr'd Forward	107 90		33 66	54				

Date	Particulars	Credits	Cash Payments and Other Charges: Local Currency	Cash Payments and Other Charges: Canad'n Currency	Assigned Pay	Deferred Pay	Balance: Debit	Balance: Credit	Signature of Paymaster or Officer making Award
	Totals Br't Forward	20 24						20 24	Jmsummer
14-1-42	AR 163		2 -	8 44	✓			11 30	Jmsummer
31-1-42	AR 169		2/11/	11.40	✓		10		JD MacIntosh
Feb	5/3/49		2/5/	54 (circled)			64		Jmsummer
Feb. Pay		36 40			20 —			15 72	Jmsummer
13/3/42	AR 173		1/10	6 71	✓			9 05	Jmsummer
March Pay		40 30			20 —			*39 35	Jmsummer
16-3-42	AR 183		6 10	29 06	✓			10 29	Jmsummer
30-3-42	AR 186		2 1	9 16	✓			1 13	Jmsummer
April Pay		39 -			20 —			20 13	Jmsummer
16.4.42	AR 5		21/	5 94	✓			11 19	JD MacIntosh
29.4.42	AR 8		2-1	9 16	✓		*7 97	~~2 05~~	Jmsummer
	Totals Carr'd Forward	135 94		83 91	60				

Date	Particulars	Credits	Cash Payments and Other Charges: Local Currency	Cash Payments and Other Charges: Canad'n Currency	Assigned Pay	Deferred Pay	BALANCE: Debit	BALANCE: Credit	Signature of Paymaster or Officer making Award
	Totals Br't Forward		7 97				7 97		[illegible]
	May Pay	40 30			20 —			12 35	[illegible]
~~4/5/42~~	~~[illegible]~~		~~4 10~~	~~20 12~~			~~7 97~~		[illegible]
4/5/42	[illegible] 9		10/-	224			7 17	10 09	[illegible]
14-5-42	A.B. 14		1 —	4 47				5 62	[illegible]
30/5/42	AR. 4		1 —	4 47				1 15	[illegible]
June Pay		37			20			20 15	[illegible]
12-6-42	AR 28		2 0	11 18				8 97	[illegible]
30.6.42	AR. 33		2 —	8 97				03	[illegible]
30.6.42	129/513		0/0/1½	.21			18		[illegible]
		79 30		39 48	40				
	Totals Carr'd Forward								

DECEASED

Militia Book M-1. (Part I)
10M—5-40 (5202)
H.Q. 1772-39-1672

SOLDIER'S SERVICE BOOK

(Soldier's Pay Book, Militia Book M. 1 (Part II) will be issued for active service.)

Every entry in this book (other than those on page 24 of this part of Militia Book M. 1, connected with the making of a Soldier's short form of Will) is to be made under the superintendence of the Officer Commanding the Squadron, battery or company to which the man belongs or is attached.

Alterations in any of the entries will be initialled by an officer.

INSTRUCTIONS TO SOLDIER

1. You will be held **personally responsible** for the safe custody of this book.

2. You will **always carry this book** on your person when on duty, and on active service.

3. You must produce the book whenever called upon to do so by a competent military authority, viz.: Officer, Warrant Officer, N.C.O. or Military Policeman.

4. You must not alter or make any entry in this book (except as regards short form of Will on page 24; see instructions on pages 20 to 23), and disobedience of this order will be treated as a serious offence.

5. Should you consider that any entry is lacking or incorrect, or should you lose the book, you will report the matter to your immediate military superior.

6. You will be permitted to retain this book after discharge as a record of your services, but should you lose the book after discharge it cannot be replaced.

DECEASED

(I) SOLDIER'S NAME AND DESCRIPTION ON ATTESTATION

Regtl. No. D 57977 Unit Reg't de Mais

Surname (in capitals) LEFEBVRE

Christian Names (in full) Marcel

Date of Birth 17 Septembre 1921

Place of Birth St-Adele Que Canada

Trade on Enlistment apprenti Boulanger

Nationality of Father at birth Canadien

Nationality of Mother at birth Canadienne

Religion Catholique Romain

Enlisted at Montreal Sud Que Can.

Date 25 mars 1941

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

Signature of Soldier Marcel Lefebvre

Signature of Officer J. M. [illegible]

Place Montreal Sud Date 25 mars 1941

(II) CORPS and UNIT to which Soldier actually BELONGS

Date of Posting or Transfer	Corps	Unit	Signature of Officer
25/3/41	Maisonneuve		[illegible]
[illegible]	2 C.I.H.U. R.C.E. [illegible]		[illegible]
	1 Road Const. R.C.E.		[illegible]
	2 Det. R.C.O.C. [illegible]		[illegible]
	2nd Det. R.C.O.C. [illegible]		[illegible]
4/9/42	1 de Mais [illegible]	[illegible]	[illegible]

(III) If serving in a Corps other than his own, CORPS and UNIT to which ATTACHED

Period		Corps	Unit	Signature of Officer
From	To			

DECEASED

(IV) NEXT OF KIN

Any change becoming known is to be duly noted with date of such change and reported by O.C. Unit to the Officer i/c Records.

NOTE.—No entry in these pages has any legal effect as a WILL (see pages 20 to 23)

Nearest degree of relationship		Names	Date	Latest known Address in full
1st	Wife			
	Children			
2nd	Father			
	Mother	Mrs Marie Anne Lefebvre	25/3/41	6373 Clarke Montreal Que Canada
3rd	*Brothers and Sisters			
4th	Other Relations (stating relationship)			

*State whether brothers are older or younger.

NOW LIVING

DECEASED

(V) RANK and APPOINTMENT

Date	Rank and Appointment	Substantive, Temporary, Acting or Local (with or without pay)	Authority of Part II Orders	Signature of Officer
25/3/41	Soldier		4 D.T. 7/	J. McLachlan Lieut
18.8.42	A/L/Cpl	without pay	85/42	

(VI) Certificate Applicable to all Arms, to be completed and signed by the C.O. Bn., etc., before a Soldier proceeds Overseas

TRAINED (passed Recruit's Course as laid down for his arm of the Service) *except that he requires further training in:—**

P.A. G. Map Reading [initials]

Qualified in addition as under:—

Date........................ ....

Commanding..

*If no further training required, strike out words in italics and initial.

DECEASED

(VII) PARTICULARS OF TRAINING

Courses and Schools. Specialist Qualifications. Swimming, etc., showing result.	Date	Signature of Officer
3" Mortar 2cO-3 [illegible]	3-8-42 22-8-42	[illegible]

(VIII) SMALL ARMS RANGE COURSES

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

DECEASED

(XI) EMPLOYMENT WHILST SERVING

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

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

(XII) MEDICAL CLASSIFICATION

Date	Category or Grade	Medical Examiner of Recruits, or other Medical Authority	Signature of Medical Officer
22/3/41	9.	Examined Med a Mtl	[illegible]
5-11-41	"A"	Re Examined.	[illegible] Capt

DECEASED

(XIII) PRESCRIPTION FOR GLASSES

	Vision without Glasses	SPH	CYL	Axis Standard Notation	Vision with Glasses	Ophth, Centre:	Date of Exam.:
R						Frame No. (or measurements):	Date of Issue:
L							

Signature of M.O.....

	Vision without Glasses	SPH	CYL	Axis Standard Notation	Vision with Glasses	Ophth, Centre:	Date of Exam.:
R						Frame No. (or measurements):	Date of Issue:
L							

Signature of M.O.....

(XIV) PARTICULARS OF DENTURES SUPPLIED

Particulars	Date	Signature of Medical or Dental Officer
7 D.U. (Vulcanite)	19/3/42	C. H. Hamilton

(XV) PARTICULARS OF SURGICAL APPLIANCES ISSUED

Particulars	Date	Signature of Medical Officer

DECEASED

(XVI) PROTECTIVE INOCULATIONS

Nature of Vaccine, "T.A.B." Cholera, Plague, etc.	Date	Signature of Medical Officer
TAB	MAR 25 '41	[illegible]
TETANUS TOX 1cc	MAR 25 '41	[illegible]
TETANUS TOX 1cc		
TABT ½ cc	20-11-42	L Carter Capt
TABT. ½ cc	2-12-43	[illegible] Capt
Typhus ¼ cc	30-12-43	[illegible]
Typhus 1cc	19-1-44	[illegible] Capt
Typhus 1cc	24-4-44	[illegible]
" 1cc	1-5-44	[illegible] Capt

(XVII) VACCINATION

Date Vaccinated	Signature of Medical Officer
MAR 25 1941	[illegible] Major
8-2-44	[illegible] Capt

(XVIII) MISCELLANEOUS ENTRIES

(For entries for which space is not otherwise provided)

NOTE.—No entry on this page has any legal effect as a WILL

Particulars	Date	Signature of Officer
M TEST (REV.) COMPLETE	23-12-41	J. Mousseau Lieut.
ID CARD COMPLETE		
		[illegible]
" " " "	7-1-42	[illegible] Lieut
[illegible]	31-1-[illegible]	[illegible]
1st Privilege Leave	5-5-42	
	12-5-42	[illegible]
2nd Priv. Leave	7-8-42	
	14-8-42	[illegible]
[illegible]	2-9-42	[illegible]
P.L.W.W. 7 ds from	23/11/42	[illegible] Capt
C.A.P. Gas Chamber Test	13/5/43	[illegible]
P.L.W.W. 9 days from	16/6/43	[illegible] Major
P.L.W.W 9 days	6-10-43	[illegible]
Canadian Volunteer Service Medal with Clasp [illegible]	15-1-44	[illegible]
R.L. 9 days W.O.	21-3-44	[illegible]

DECEASED

No entry is made on this page without special instructions being issued

Particulars	Date	Signature of Officer
M.F.M. 182 Not Avail.	25 Apr. 44	R. Lévesque Lt.

No entry is to be made on this page without special instructions being issued

Particulars	Date	Signature of Officer
Sizes of Clothing	Sizes	
Field Service Cap	7 1/4	
Drawers woollen	32	
Shirt "	32	
Socks	9	
Boots	7 1/2	
Battle Dress	—	
Jacket chest	32	
waist	32	
lenght	22	
Trousers waist	32	
lenght	22	
Shirt kaki	14	

A soldier who has made a Will is recommended to inform his Commanding Officer where such Will has been deposited and the Commanding Officer shall upon receipt of such information forthwith complete the following certificate and despatch the same to the Officer i/c Records.

No. Rank Name

states that he has executed a Will and that the same has been deposited with

at

Signature of Officer.
Rank or Appointment.

Date

Soldiers who possess real estate and who have not made a Will are recommended to make a formal Will before embarkation when action as indicated above should be taken, or to make a Will on one of the forms provided, M.F.M. 10 with one or more beneficiaries or M.F.M. 10a in the case of a soldier owning real estate, and to hand this document duly executed to their Commanding Officer for transmission to the Record Officer concerned for safe custody.

The Officer receiving such Will shall complete the following certificate—

Certificate

M.F.M/10a received and forwarded to the Officer i/c Records at C.M.H.Q. L.J.R. Liverpool Lieut.

Signature of Officer.
Rank or Appointment.

Date Certificate or Will extracted.....
Signature of Officer.....

To whom sent.....
Unit or Dept.....

To whom sent.....

Date Will extracted.....
Signature of Officer.....

DECEASED

VOIR INSTRUCTIONS AU VERSO.

Dead

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

FORMULE DE TESTAMENT

(1) Je, Marcel Lefebvre (Nom au long), de la Ville

de Montreal, dans le ~~Comté~~ District de Montreal,

Province de Québec Canada, Apprenti Boulanger (Occupation civile),

N° matricule D-57977, Unité 6 C.I.R.U., 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 Ma mere, Mme Marie Anne Lefebvre 5207 Waverley st. Montreal P.Q. Canada. tous mes biens

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

L.J.R.L.Lt.

Original Received JUN 1 1944 R.D.E.C.

21

(4) Je nomme Mme Marie Anne Lefebvre (Nom)

5207 Waverley st. Montreal P.Q. Canada (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: L.J.R. Levesque Lieut 6 C.I.R.U.
(Adresse)
(Les bénéficiaires ne peuvent être témoins)

Signature du second témoin: D.M. Gendreau Lt 6.C.I.R.U.
(Adresse)

En foi de quoi j'ai signé ce 25 ième jour de Avril A.D. 1944

Marcel Lefebvre
(Signature du soldat)

(VOIR AU VERSO)

File Copy

Quote No. H.Q.405-L-18,384

DEPARTMENT OF NATIONAL DEFENCE

ARMY

Ottawa, Canada,
June 21st, 1944

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

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

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

Regimental No. D57977 Rank Private

Surname LEFEBVRE

Christian Names Marcel

Nature of Casualty Killed in action

Date of Casualty 6-6-44

Address at time of enlistment Montreal, P. Q.

Date of enlistment, 25-5-41

Date of Birth 7-9-21

Marital Status (On enlistment) Single

Marital Status (Present) Single

Occupation Bakers Apprentice

Name and address of Next-of-Kin Mrs Marie A. Lefebvre
5207 Waverley St., Montreal, P. Q.

GR/EC

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

6

(DUMMY) NO original

CONTINUATION CARD M.F.M. 14

A.

Regimental No. D-57911 Name LEFEBVRE M.

Part II D.O. No.	Part II D.O. Date	PARTICULARS OF CASUALTY
98.	25-4-44	Att fap f. X list R de Mais on disch f. 1 Spec Hosp. (Pending TOS). wef 20/4-44.
100	27-4-44	Ceases above att pending TOS on proceeding to X-4 list R de Chaud 27-4-44
26	12/5/44	T.O.S. R de Chaud from X 4 List (R de C) 4/5/44
37	20/6/44	S.O.S. Killed in action 6/6/44

M.F.M.—14A
40/P&S/67 (3400)

Part II D.O.		PARTICULARS OF CASUALTIES
No.	Date	
~~26.~~	~~17-5-44.~~	~~T.O.S. Rds. C from "X4" List (Rds C) w.e.f. 11-5-44~~

CONTINUATION CARD TO M.F.M. 14

Regimental No. D-57977 Name Lefebvre Marcel

Part 11 D.O. No.	Date	PARTICULARS OF CASUALTY
54	9. 9. 42	Too fr. 2 C & I R U wef. 4. 9. 42
18	29. 3. 43	Reg'l rate of pay inc'd to 1/5 a day " 1. 1. 43
20	10. 4. 43	Adm to 18 Fd Amb. " 28. 3. 43
"	" " "	Trans to #2 C C.S. " 28. 3. 43
22	22. 4. 43	Disch fr. " " " " " 13. 4. 43
161	9. 8. 43	Too 6 C I R U fr. R de M. on adm to 14 C G H. " 20. 7. 43
190	11. 9. 43	Disch fr #14 C. G. H. 9-9-43
57	16-9-43	Posted to "F" Coy. 5-9-43
201	23-9-43	S.O.S. #6 C I R U. to R. de M. 23-9-43
57	30-9-43	T.O.S. R. de Mais from #6 C.I.R.U. WEF 24-9-43
58	8/11/43	Adm to Hosp 30/10/43 18 Bde Fd Amb.
✓	✓	Rem'd from Hosp. 30/10/43 18 Bde Fd Amb to 1 Bde Spec Hosp
61	24/11/43	Disch from 1. Cdn. Special Hosp. wef. 15/11/43

M.F.M. 14A
40/P & S/67

Part 11 D.O.		PARTICULARS OF CASUALTY
No.	Date	
3	20-1-44	Privilege Leave from 4-1-44 to 13-1-44.
✓	✓	Inc Good Cond Badge wef 25-3-43.
4	24-1-44	Cdn Vol Serv Medal & clasp. [illegible]-1-44
C.R 31	10-4-44	SOS to X List on adm to 13 Hosp wef 3-4-44
12	11 apr 44	TOS x-3 R de MAIS from R de MAIS w.e.f. 4 apr 44
16	9 May 44	SOS to 6 CIRU on disch from 1 Cdn Spec Hosp w.e.f. 20 apr 44
103	1-5-44	TOS fr X List to R de M. & CTBA. 27-4-44
103	4-5-44	SOS to X 4 List R de C 27-4-44

CASUALTIES, ETC.

NATURE E. G. ABSENCE, PROMOTION, ETC.	PART 11, D. O. No.	PART 11, D. O. DATE	REMARKS IF IN HOSPITAL, NOTE NAME, ETC.
TOS DD 4 "F Wing"	71	25-3-41	eff 25-3-41
On command and attached for all purposes BTC 43 sherbrooke	90	17-4-41	eff 17-4-41
Att. for all purposes #43 C.A.(B) T.C.	68-A	21/4/41	w.e.f. 18/4/41
Transfer 12A Farnham	110	25-6-41	25-6-41
TOS to C.A.(A)T.C. No. A-12	A-88	26-6-41	w.e.f. 26-6-41.
Granted 14 days furlough	137	26-9-41	.wef. 26-9-41. To 9-10-41.
S.O.S. Proceeding O/S	171	9-11-41	wef. 9-11-41
Checked D.T.O. M.D. 4 Nov. 41.			
TOS. (O/S) 10.11.41. TOS-2 CdHQ and posted to R.de M.	280	25-11-41	" 24-11-41
Att #1 ~~Fd~~ Const Coy RCE.	9	10-12-41	" 9-12-41.
Returned from do.	14.	16.12.41	" 15.12.41
Dsch from 2 CMHC	68	21-3-42	" 20-3-42
Adm to 2 CMHC	77	1-4-42	" 20-3-42

R de M AF

1.50 (18) "F"

NAME: LEFEBVRE Marcel

REGIMENTAL NO. D-57977 RANK Pte

ENLISTED AT Montreal South, P.Q. PROMOTIONS, ETC. AND DATE

DATE March 25th, 1941

IF SERVED PREVIOUSLY, STATE UNIT, ETC. N/A

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN Mrs. Marie Anne LEFEBVRE RELATIONSHIP Mother

ADDRESS OF 6373 Clarke Street, Montreal, P.Q. Canada

ASSIGNMENT OF PAY, $ ~~20.00~~ ~~Effective April 1941~~ 23.00 wef - Jan 44

ADDRESS Same as above

DEPENDENT'S ALLOWANCE ENTITLED OR NOT Applied for (Refused) DPM letter 14-6-41

DATE APPLICATION FORWARDED TO DISTRICT PAYMASTER

M. F. M. 14

IN WHOSE FAVOUR Mother

rd

No. ....

DEPARTMENT OF MEDICINE.

No. D. 57977 Rank Pte. Name LEFEBRE M. Unit Reg De M.

Age: 22
Catp A

REPORT:— DATE 14 Dec 43.

Dyspnoea on effort many years, worse recently. Left submammary pain on effort, or at rest, or when excited, and heart beats violently.

Sore throat 1942. Claims to have flat feet and some nose trouble. Has had both syph. and gonorrhoea since coming O/s.

Struck on head 2 yrs ago "unconscious several hours".

B. a Quebec village, father deserted family, attended school irregularly, grade 3. Taken out of school to work. Labour. Enlisted March 41. O/s same year. Single. Worry re mother-financial and his girl has stopped writing and he thinks she is going to be married.

F.H. no nerves.

Dull temporal headache, dizzy feelings, easily excited, trembles often, often and usually depressed with freq. weeping, poor appetite and freq. morning vomiting. D8/N2. No enuresis. Urgency. Sleeps poorly. H.K.W. 140, 1940. Usual stated wt. net 120.

Exam: Shy, low voice. Palms moist. Hands cold and blue and tremulous. Heart apex inside nipple line. Regular, 90. Sounds of normal quality. No murmur. Wt. 120.

Conclude: No appreciable disease of heart.
Symptoms of emotional origin.

Advise: Reassurance. Can his worries be relieved. Carry on full duty. Refer for psychiatric board with your observations only if he fails to be useful after encouragement and relief of worry.

TBHeclin Lt.Col.
Specialist, RCAMC
No. 13 Cdn Gen Hospital.

AMD 10
40/P & S/1314 (3879)