D76673
MURRAY
HARRY THOMA

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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: MURRAY Thomas Harry. (b) Reg'l. No. D.76673.
2. (a) Arm of service: Army. (b) Unit: 32 Recce. C.A.C. (c) Rank: L/Sgt.
3. (a) Date of birth: 24 Dec '17 (b) Have you any dependents? Yes (c) Place of residence at time of enlistment: Montreal.
4. (a) Place of enlistment: Westmount, Que. (b) Date of enlistment: 4 Oct. '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.): Grade 6.
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.

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):
(b) At time of enlistment of what trade union or professional society were you a member?

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: Canada Steamship Lines. Address: Montreal.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.): Steamship. - Transport
20. (a) Your specific occupation: Sailor. (b) Number of years' experience at this occupation with any employer: 7 yrs.
21. (a) Did your employer promise definitely to give you employment on discharge? Yes. (b) Did your employer refuse to promise you employment on discharge? No. (c) Do you wish to return to your former employment? Not stated

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

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

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? No. (b) Do you feel competent to operate a farm? (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: Not stated.

DATE: 24 May 1943. SIGNATURE: [illegible]
For Officer i/c Records, CMHQ.

CARDS PUNCHED

CONFIDENTIAL.

Soldiers Qualification Card

CODED

Regt'l. Number D76673. Last Name MURRAY. First Name THOMAS. Middle Names HARRY.

2 Nationality CANADIAN 08 | By Birth ✓ | By Naturalization | Country of Birth CANADA.

3 Racial Origin British. 4 Language spoken in home: French ..... Other ..... English ✓

5 Age 26 6/12 (1916) 6 Height 5.5. 7 Weight 172. 8 Silhouette 1 2 3 4

9 Colour of Eyes: Brown 10 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 Med Category A.

Cause .....

Attitude to own health Reasonable. To Medical attention .....

Health History Leg broken (L) in two places. 1941.

16 Education Level: Illiterate ..... E 6 (15) S ..... (Grade completed)

Conduct during school life .....

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 ENGLISH. FRENCH. 02

Written well ENGLISH. 09

24 Main occupation: Description SAILOR. 7818

Estimate of skill Sup.

Duration (from—to) 1932-39. Weekly Wage $250

Employer's Name and Address CANADA STEAMSHIP LINES. MONTREAL.

50"M" Test	Score	SM	
1	17		S. Tot. 36
2	11		SM
3	8		
4	17		S. Tot. 40
5	23.		SM
6	12.		S. Tot. 55
7	17.		SM
8	26.		
Tot.	131.	SM	Grade C.
9			

P

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 .....

Unit ROYAL MONTREAL REGT.

1 Corps " " "

25 Second Most Important Occupation: Description:

..... Estimate of skill .....

Duration (from—to) ..... Weekly Wage .....

Employer's Name and Address .....

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 Light Truck WR. 29 Auto WR. 30 Motorcycle WR.

31 Farm Tractor ..... 32 Tracked Vehicle ..... 33 Power Launch ..... 34 Aeroplane .....

35 Accident Prone .....

Farming Experience: Wide ..... Limited .....

District ..... Type .....

Job promised after discharge Yes. By whom? Name .....

Address As in 24.

Other provision for post-discharge occupation .....

..... Type of work desired .....

Occupational history: Ambitious ..... Accidental .....

Stable ✓ Erratic .....

36 Material Status: M ..... S ✓ W ..... D ..... Sep. .....

2 Marital Problems ..... (Remarks)

Age of wife ..... Wife's attitude to Service ..... Wife's Health .....

37 No. of Children ..... No. Brothers ..... No. Sisters .....

Position in family 1. 38 No. Dependents 1.

Relationship of Dependents Father.

Status of home in childhood Normal.

39 Hobbies: Photography M ..... S ..... Radio ..... Engines .....

Mechanics ..... Other .....

40 Sports: (1) SWIMMING. (2) SKATING. (3) .....

PW Team Games and Position (1) HOCKEY - R. WING.

3 (2) BASEBALL - CENTRE FIELD.

1 (3) .....

41 Ability to Entertain: Music: String ..... Brass .....

Woodwind ..... Percussion ..... Piano ..... Vocal .....

Theatrical ..... Other .....

3 JUL 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 4. 10. 39. Place Enlisted Westmount. Que.

Date From—to	Country	Corps	Unit and Sub-unit	Rank 44	Principal Duty	Performance
4.10.39.11.12.39	CANADA	RMR.	b. bay. 10 PLT.	Pte	Training.	SAT.
11.12.39.26.6.40	UK.	RMR.	b. bay 10 PLT.	"	SECTION-MAN.	"
26.6.40.11.10.40.	" "	RMR	b. bay. 10 PLT.	L/Cpl.	SECTION-CPL.	"
11.10.40.1.10.41	" "	RMR.	b. bay 10 PLT	Cpl	Section Corporal.	"
1.10.41.15.3.42	" "	RMR	b. bay. 11 PLT.	"	" " 1/H.	
15.3.42.	" "	RMR	b bay. 12 PLT.	"	" "	124
15.6.42.	" "			a/L Sgt		
				E		

45 COURSES ATTENDED

	PLACE	Date: From—to	Qualified as	Rating
P.T. Course.	Colchester.	5.1.41. 26.1.41	Instructor.	QII. 175
AIR.-CRAFT COURSE	ISLE-OF-MAN.	15.3.42. 26.3.42	"	QII. 134

46 Crime: Number Courts Martial Convictions ..... Hospitalization 1/210.....

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

Chronic Major Offender ..... Chronic Minor Offender ..... Occasional Offender .....

49 Psychiatric ☐☐☐☐☐

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

47 Classification: Military Specialties and Trades

Designation	Degree of Proficiency	Date	Authority
Section Corporal. 124	Sat.	3. 6. 42.	Pl. Officer.

55 Type of Service Desired (1) Transfer to Navy. (2) .....

Remarks re Outstanding or Limiting Factors

Dep. Correct
App Neat
Phys App. Good B. Healthy.
Disp. Cheerful.
Initiat Sat.
Lead. Sat
Tech Sat.

Rather a determined type of non good N.C.O. respectful well-spoken. likes naval service. in preference to Army.

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

Reason for Joining Cdn. Army (if ascertainable) Patriotic.

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

..... (2) .....

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

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

Interviewed by L. A. Howard Lieut. Date 3-6-42.

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

Mr. James Murray,
2136 Devilliers~~xxxxx~~
Ville Emard,
Montreal 20, Que.

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

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

and the following number quoted:—

H.Q. 405-M-40,611 FD-347

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

Dec. 7, 1944

ESTATES BRANCH DEC 19 1944 N.D.H.Q. OTTAWA DEFENCE

For the purpose of record and in the event of there being any Service estate available for distribution (according to law) on account of the late

MURRAY Thomas H. Sgt.

D-76673 Can. Army

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

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

C.W. Pybus Capt.
for Director of Estates.

CWP/HS

M.F.W. 77
16M-10-44 (5854)
H.Q. 1772-39-972

ANSWER IN FULL ALL APPLICABLE QUESTIONS

STATEMENT of the Names, Ages and Addresses or Dates of Death, of all the relatives that the deceased ever had in each of the degrees specified below:

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT: NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased		Not Married		
2	Children of the Deceased and dates of their Births		X		
3	Father of the Deceased		James Murray	59	2136 De Villiers Montreal Que
4	Mother of the Deceased		Dead		Nov 24 - 1932
5	Brothers of the Deceased	Full Blood	No Brothers		
		Half Blood			
6	Sisters of the Deceased	Full Blood	No Sisters		
		Half Blood			
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each.		Names and ages of their children (if any)		Address of their children

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Thomas Harry Murray
9	Date of his birth.	Dec 24 - 1918
10	Place and date of his marriage.	not Married
11	Place and date of his parents' marriage.	Stanchope Que Dec 10 - 1915

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal Que
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) (b) Montreal Que (c) (d) all his life
14	Nature of employment before enlistment.	Canada Steam Ship Line
15	State whether he owned the premises in which he lived, and, if so, where situated.	X
16	Name place where deceased stated he intended to make his permanent home.	Montreal Que

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	no will
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	X
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	no bank account
20	Amount of War Savings Certificates held by deceased. Indicate where located.	i do not know
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	X
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	X
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	X

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— *(a)* His own separate board and lodging while on service. *(b)* Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	he did not
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	X

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

(PLEASE TURN OVER)

DECLARATION

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

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

*Father of the deceased.

N.B.—To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

James Murray — Signature of Informant

2136 De Villiers Montreal Que — Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief that James Murray {Name of informant} is the* father of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

*See above.

Dated at Montreal this 16th day of december 1944

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces. W. Sauvé — Qualification Justice of the Peace

Address 4669 Notre Dame W.

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

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

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

Checked .... Cat. .... Observations ....

~~ORIGINAL~~
DUPLICATE
~~TRIPLICATE~~

OCCUPATIONAL HISTORY FORM COMPLETED O

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

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

Unit Royal Montreal Regiment (M.G.) Regimental Number D76673 C

CANADIAN ACTIVE SERVICE FORCE 08.

ATTESTATION PAPER

1. Surname Murray
2. Christian Names Harry Thomas
3. Present address 5057 Notre Dame West Montreal.
4. Date of birth December 24th 1917
5. Place of birth Canad a (Country) Quebec (County or Province) Montreal. (Town or Township)
6. Religion (state denomination) Roman Catholic
7. Trade or Calling Sailor
8. Married, Widower or Single Single
9. Name of next of kin James Haryy Murray
10. Relationship Father
11. Address of next of kin ~~5057 Notre DamesWest Montreal.~~ SEE CHANGE
12. Have you served in any Naval, Military or Air Force? no
13. If previous war service, state arm, force and regimental particulars no
no
14. Do you now belong to or have you served in the Active Militia of Canada? no
no
(Give unit and date of attestation)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, Thomas Murray do solemnly declare that the above particulars are true, and I hereby engage to serve in the Canadian Active Service Force so long as an emergency, i.e., war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization after said emergency ceases to exist, and in any event for a period of not less than one year, provided His Majesty should so require my services.

Date October 5th 1939 Thomas Murray (Signature of recruit) Sev ... witness

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Thomas Murray (Signature of Recruit)

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER

The Recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law.

The above questions and answers were then read to the recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me,

at Montreal this 5th day of O)ctober 19 39

H Russell-Murray (Signature of Magistrate, Justice or Attesting Officer.)

Capt. R.M.R. ~~(M.G.)~~ (Office or Rank and Unit or appointment.)

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

FINGERPRINTED

P

Record of Service of Murray (Surname) Thomas Harry (Christian Names) Regimental Number D76673

QUALIFICATIONS	
Military	nil
Business or Professional	nil
Trade or Civil	Sailor
Technical	nil
Languages	English

EDUCATIONAL QUALIFICATIONS	
High School or Collegiate	nil (years completed)
Graduation or Matriculation	nil (specify)
*College	nil
*University	nil
	nil

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

All enlisted personnel will be taken on as Private soldiers, appointments and promotions to higher rank to be shown as provided in the space below.

Report: Date	Report: From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Rank Shown	Effective Date	Unit	Place	Authority: Part II D.O. No. Cas. List, etc.	Authority: Dated
1332		Joined on appointment	Pte.	5-10-39	RMR (MG)	Westm't	Pt. II Order 1	5-10-39
—		Proceeded Overseas		6-12-39				
—		Arrived in England		18-12-39				
—		Appoint. A/L Cpl with pay	A/L Cpl	27 6 40	"	Field	D O 4	27 6 40
|		Granted leave	"	26.7.40 to 2.8.40	RMR.	Field	Do 21.	9.8.40
—		Confirmed in rank	"	11.10.40	"	"	Do 43	15.10.40
		Appointed A/Cpl with "C" pay (Auth. C.O.)	A/Cpl.	15.10.40	"	"	45.	22.10.40.
		Granted priv. leave to 15-11-40	"	8-11-40	"	"	55	15-11-40
		On Command Attending Course Physical		1 Jan 41				
		Recreational Training #14	A/CPL	23 Jan 41	RMR.	Fld	Do 1	8 Jan 41
		Confirmed in rank	CPL	15 Jan	RMR	Fld	Do 14	10 Feb 41.
		Graded "C" plus P.R.T. Course 17	CPL	4 March	RMR	Fld	Do 24	4 March 41

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

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

CERTIFICATE OF MEDICAL EXAMINATION

Name in full Thomas Harry Murray. Date Oct 4 1939.

Part 1. Information obtained from the recruit.

1. Age 22

2. Have you ever suffered from any of the following diseases?

a. Rheumatism	NO	j. Nasal trouble	NO
b. Tuberculosis	NO	k. Ear disease	NO
c. Bronchitis or asthma	NO	l. Eye disease	NO
d. Heart disease	NO	m. Epilepsy	NO
e. Kidney or bladder disease	NO	n. Nervous or mental disease	NO
f. Gastro-intestinal	NO	o. Syphilis	NO
g. Rupture	NO	p. Gonorrhoea	NO
h. Varicose veins	NO	q. Have you ever worn glasses?	NO
i. Flat or deformed feet	NO		

Thomas Murray
(Signature of Recruit)

Examiner's remarks re above

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

1. Identification marks or scars. (If operative obtain history.)
Scar right cheek.

2. Height 5 feet 6 inches.
3. Weight 160 pounds.
4. Complexion Medium ~~20-20~~ Eyes Brown ~~20-20~~ Hair Brown
5. Development Good (Good / Fair / Poor)
6. Chest measurement—Girth on full expansion 38 inches.
Range of expansion 3 inches.
7. Vision, right 20-20, left 20-20
8. Hearing, right Normal left Normal
9. Condition of mouth and teeth Teeth fair, Five extractions needed.
10. The abnormalities (congenital and pathological) found on examination are as follows
Arches low, Hypertrophied Rt Tonsil.

Part 3. We, the examiners find no evidence of the diseases mentioned in Question 2, Part 1, except as reported in the remarks. We have examined the Recruit in accordance with the pamphlet "Physical standards and Instructions for the medical examination of recruits" and he is found fit for Category A.

Special remarks when category lower than A

[signature] President [signature] Member [signature] Member Lt Col

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

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
21/11/39	Reexam. wt 156 Ears Reflexes Urine normal. Both tonsils enlarged. K.R.M /Lt.		
20/11/39	Chest Neg		
13/11/39	TAB - 3		
25/11/39	Vaccination		
29/11/39	Tetanus Toxoid - 1cc		
	K.R. MacKenzie Lt.		

Regtl. No. D76673 Rank ..... Surname Murray ..... Christian Name Harry Thomas

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				

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

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER: D76673
RANK: Sergeant
SERVICE UNIT: 1st Army.HQ. Def. Coy. (SMR)

NAME: MURRAY Thomas Harry

DATE OF BIRTH
DAY: 24th
MONTH: December
YEAR: 1917
Date enlisted 5-10-39

MARITAL STATUS: Single
Religion: Roman Catholic.

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP: Father
NAME / ADDRESS / D.A.B.: Mr. James Murray,
ADDRESS: 2156 Devilliers Ville Emard Montreal 20, Pq.

ADDITIONAL PERSON TO BE NOTIFIED
ADDRESS

PARENTS NAME
ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO.: CANRECORDS 2237A H.Q. 405-1-40,611

CASUALTY DETAILS: Killed in action
DATE: 6-10-44

FRANCE

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

M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO: O/S with

DATE: 3-11-44

OFFICER I/C RECORDS

6

COPY FOR DOCUMENT FILE

To be made out in duplicate.

M.F.M. 5

400M—8-39 (1702)
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 ..... Murray
(Surname first—Christian names in full—Block capitals)
Thomas Harry

(2) Regimental Number D76673

(3) Unit ..... Royal Montreal Regiment (M.G.)

(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? ..... no

(8) Have you any children? ..... no

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

Also their names and ages ..... -

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

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

Name .....

Postal Address ..... -

(SEE OTHER SIDE).

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

If so, state her full name and Postal Address -

-

-

(11) Is your father alive? yes

If so, state name and address James Harry Murray

5057 Notre Dame West, Montreal. PQ.

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

~~no~~ yes

(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. $36 per month

Also state reason he has no other means of support Widower.

Suffering from Rheumatism & Unemployed

(14) Is your mother alive? no

If so, state name and address -

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

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

Also state reason why she has no other means of support

-

(17) Are you insured? no

If so, in what Company? -

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

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.

Thomas Murray
(Signature of officer ~~or man~~)

Date October 5th 1939

J C Slesor
Officer Commanding

OCT 17 1939

Date October 5th 1939

THE ROYAL MONTREAL REGIMENT (M.G.)

N

2133

FORM No. 1

Register No. ..... Nominal Roll No. .....

H.Q. File No. .....

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-76673	SGT.	MURRAY	HARRY THOMAS

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. 5 OCT 39	T.O.S.	T.O.S.
S.O.S. 9 OCT 44 MD. O/S	S.O.S. MD	S.O.S. MD
Total Days 1832	Total Days	Total Days

Total Service 1832 DAYS

—	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere	RL 65	NIL	65
Overseas Service	RL 1767	NIL	1767
Totals	1832	NIL	
Add Non-qualifying Service			NIL
Total Service			1832

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 9 OCT 44 2. Date S.O.S. Overseas .....

REMARKS:

Computer's Signature .....

Checker's Signature .....

Date Computed 18 June 48

KILLED IN ACTION 9 OCT 44

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

for 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. 9 DEC 39 T.O.S. T.O.S.

S.O.S. 9 OCT 44 S.O.S. S.O.S.

Total

Regimental No. D76673 Rank ....

Sheet No. ....

MFM 1 & 2a
40/P & S/119 (3913)

Name Murray H.T.

	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc—	Rank Shown	Effective Date	Unit	Place	Authority: DO Number	Authority: Dated
M66 SOS	SOS to 29 A Recce	Sgt	18 Mar 44	32 Recce	UK	15	20 Mar 44
M66 TOS	TOS from 32 Recce	Sgt	19 Mar 44	29 A Recce	UK	14	25 Mar 44
M66	C/att fap to 1 Cdn Army Postal Unit	Sgt	15 Mar 44	32 Recce	UK	15	20 Mar 44
SOS	SOS ~~to 32 Cdn Recce Regt~~ (RMR)	Sgt	8 Apr 44	29 CARR	UK	18	20 Apr 44
TOS	att to 1 CACRU fap.	Sgt	3/16 Apr 44	29 A RECCE	UK	19	24 Apr 44
C86 SOS	SOS to 1 CA HQ Def Coy.	Sgt	11 Apr 44	32 Recce	UK	19	24 Apr 44
TOS	TOS from 32 Recce Regt.		12 Apr 44	1 CA HQ Def Coy	✓	1	24 Apr 44
X108	Trans. from CAS to CIS + remain posted to 1 Cdn Army HQ Def Co	Sgt.	12 Apr 44	1 CA HQ DC	UK	1	24 Apr 44
	TOS from Rft. Incr. 29 Arm. Regt. 15 Jun 44		9 Apr 44.	32 Recce Regt.	✓	18	18 Apr 44.
		Sgt		1 CA HQ Def Coy.	21 AG	12	14 Jul 44
	Embarked at ..... UK ..... on ~~16 Jul~~ 44						
M106	Disembarked at France on ~~18 Jul 44~~ 17 Jun 44 DO #16 d/9 Aug 44						
	att fap to Regina Rifles Regt.	Sgt	15 Sep 44	1 CA HQ Def Coy	21 AGp	23	30 Sep 44
B139.	Killed		6 Oct 44	1 CA Def Coy	AEF	A502	15 Oct 44
	ceases att fap to RRR	Sgt.	9 Oct 44.	1 CA D Co.	21 AGp	26	21 Oct 44
	SOS. Deceased. Killed in action.	Sgt.	9 Oct 44	1 CA D Co.	21 AGp	26	21 Oct 44

Statement of the Service of No. D-76679 Rank ..... Sheet No. .....

Name Murray H. T.

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) (8 Nov 42 - 19 Dec 42)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
SOS		SOS to IMGRU on Case CMHQ 810. at CTS	A/L/Sgt	8 Nov 42	RMR	UK	76	16 Nov 42
	TOS	TOS from RMR	A/L/Sgt	9 Nov 42	IMGRU	UK	162	17 Nov 42
		SOS to RMR	a/L/Sgt	24 Dec 42	MGRU	UK	190	23 Dec 42
		TOS from MGRU	a/L/Sgt	23 Dec 42	RMR	UK	83	31 Dec 42
		Off Crse & cases att to CTS	a/L/Sgt	19 Dec 42	IMGRU	UK	187	19 Dec 42
		Qual "Q2" comp CMHQ Crse 810 Sec 7. I.M.G.	A/L/Sgt	19 Dec 42	32 Recce	UK	1	9 Feb 43
		to be L/Sgt	L/Sgt	22 Jan 43	32 Recce	UK	1	9 Feb 43
Change of Address N.O.K.		To Mr. James Harry Murray (Father) 5174 Murray St., Montreal, Que., Canada.			32 Recce	UK	3	20 Feb 43
		appt A/Sgt	A/Sgt	26 Mar 43	32 Recce	UK	10	7 Apr 43
		Qual Dril: I.C. (T)	A/Sgt	5 Mar 43	32 Recce R.	UK	16	17 Mar 43
		Confirmed in rank Sgt.	Sgt	29 June 43	32 Recce R.	UK	27	12 Jul 43
M66 SOS		SOS to 1 Cacru (Adm 17 Gen Hosp)	Sgt	30 Nov 43	32 Recce	UK	52	8 Dec 43
M66	TOS	TOS from 32 Recce (Pr 17 Gen Hosp)	Sgt	1 Dec 43	1 Cacru	UK	287	8 Dec 43
M66		Disch from 17 Gen Hosp	Sgt	15 Jan 44	1 Cacru	UK	15	17 Jan 44
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
M66 SOS		SOS to 32 Recce	Sgt	27 Jan 44	1 Cacru	UK	24	27 Jan 44
	TOS	TOS from 1 Cacru	Sgt	28 Jan 44	32 Recce	UK	6	2 Feb 44
CY		Att. to 1st Cdn Army Postal Unit f.a.p.	Sgt	23 Feb 44	32 Recce	UK	12	10 Mar 44

Statement of the Service of No. D 76673 Rank ..... Sheet No. .....

Name Murray D. H.

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
		SOS CASF (CANADA) ON EMBARKATION AT Halifax ON 8 Dec 39						
		TOS CASF (OVERSEAS) ON TRANSFER ON 9 Dec 39 AND DISEMBARKED AT Glasgow ON		18 Dec 39	RMR	Fld	6	14 Jan 41
		Granted Priv. leave	Cpl	28 Apr 41 5 May 41	RMR	Fld.	44	14 May 41
		Priv. leave - with/wat	Cpl	28 Aug 41 to 4 Sep 41	RMR	UK	44	12 Sep 41
		Adm. 5th Gen. Hosp	Cpl	14 Oct 41	RMR	UK	CL	25 Oct 41
S.O.S.		S.O.S. to MGHU on adm. 5th Gen. Hosp.	Cpl	17 Oct 41	RMR	UK	84	24 Oct 41
T.O.S.		T.O.S from RMR	Cpl	18 Oct 41	1MGHU	UK	149	24 Oct 41
		Trans. from 18 Fld amb. to 4 CCS or 5th Gen. Wac. to	Cpl	17 Oct 41	RMR	UK	84	24 Oct 41
		Trans. from 5th Gen hosp. to 1 Conval Depot	Cpl	11 Nov 41	1MGHU	UK	192	15 Nov 41
		Disch. 5th Gen. Hosp.	Cpl	11 Nov 41	RMR	UK	DC	14 Nov 41
		Adm. 18 Fld amb.	Cpl	16 Oct 41	RMR	UK	83	22 Oct 41
		Discharged 1 Conval Depot	Cpl	30 Jan 42	1MGRU	UK	14	3 Feb 42
S.O.S.		S.O.S. to R.M.R. (M.G.)	Cpl.	5 Feb 42	1MGRU	UK	16	6 Feb 42
T.O.S.		TOS from 1 MG RU	Cpl	6 Feb 42	RMR	UK	11	11 Feb 42
		Priv. leave w.o.w.	Cpl	18 25 Feb 42	RMR	UK	21	18 Jan 42
		Att'd R.A.F. Recog. Sch. Course 29 RAF Aircraft Recognition	Cpl.	25 Mar 42 4 Apr 42	RMR	UK	30	22 Apr 42
		appointed A/L/Sgt.	A/L/Sgt.	15 June 42	RMR	UK	48	24 June 42
		P/leave to 21 July	A/L/Sgt	14 July 42	RMR	UK	59	2 Aug 42
		Priv. leave	A/L/Sgt	21 30 Oct 42	RMR	UK	74	2 Nov 42

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 THE ROYAL MONTREAL REGIMENT (M.G.) Regimental Number D76673

1. Surname MURRAY RMR
2. Christian Names Harry Thomas
3. *Substantive Rank and Appointment Sgt
   *Acting Temporary or Local Rank
   giving date
   *To be entered in pencil to facilitate alteration.
4. Place of birth Montreal, Que.
5. Date of birth as declared on attestation 24th Dec. 1917
   (A)
6. Date of enlistment 5th Oct. 1939
7. Place of enlistment Montreal, Que.
8. Residence at time of enlistment Montreal, Que.
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion Roman Catholic
12. If married, state date Single S
13. Trade on enlistment Sailor
14. Corps, trade and grade
15. (D) Qualifications Drill (T)
16. (E) Miscellaneous entries

(17) Regiment or Corps C.A.C. C.I.C

Unit (Battn., etc) 32nd Cdn. Recte Regt. (R.M.R.) Army Def Coy (RMR)

(18) Medical

Category	Date	Authority
"A"		Rec/341/Units/363 Research d/24 May 43

(19) Next of kin (entries to be made in pencil)
MR. JAMES HARRY MURRAY (FATHER)
5174 MURRAY ST.
MONTREAL,
CANADA.

(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
			Proceeded Overseas 6-12-39				
			Arrived in England 18-12-39				
12-4-40		R.M.R	Admitted Hospital Ship E.6	Ship Board	12-12-39	Pte	Pt II # 94
12-4-40		R.M.R	Discharged " " E.6	"	15-12-39	"	Pt II # 94
27.6.40		R.M.R.	Promotion A/L cpl 26.6.40	Aldershot	26.6.40	A/L cpl	Pt 11 # 7
9.8.40		R.M.R.	Privilege leave 26.7.40 to 2.8.40	"	26.7.40	A/L cpl	Pt 11 # 21
15.10.40		R.M.R.	Confirmation of Rank-Lance Corporal	England	11.10.40	L/cpl	Pt 11 # 43
22.10.40		R.M.R.	Promotion A/cpl with pay	"	15.10.40	A/cpl	Pt 11 # 45
15.11.40		R.M.R. 2	Privilege leave 8.11.40 to 15.11.40	"	8.11.40	A/cpl	Pt 11 # 55
30.12.40	AFW.3011	"	On command attending Course Physical Recreational Training # 17 effective 1.1.41 to 23.1.41	"	1.1.41	A/cpl	# 1 d/3.1.41
6.2.41	"	"	Confirmation of rank (Corporal)	"	15.1.41	Cpl	17 d/10.2.41
27.2.41	"	"	Having attended Course No: 17 was graded C+	"	–	Cpl	24 d/4.3.41
9 May 41	"	"	3 Privilege leave 22 Apr 41 to 29 Apr 41	"	22 Apr 41	Cpl	44 d/14 May 41
30 Aug 41	"	"	4 Privilege leave 28 Aug 41 to 4 Sep 41 (W.W.)	"	28 Aug 41	Cpl	74 d/12 Sep 41
17 Oct 41	"	"	Sick Adm. 18 Fd Amb	"	16 Oct 41	Cpl	83 d/22 Oct 41
20 Oct 41	"	"	Trans. from 18 Fd Amb to 14 C.C.S. 17 Oct 41 evacuated to # 5 Cdn Gen Hosp	"	17 Oct 41	Cpl	84 d/24 Oct 41
20 Oct 41	"	"	S.O.S. to 1 Cdn MG H.U. adm. 5 Cdn Gen Hosp	"	17 Oct 41	Cpl	84 d/24 Oct 41
	Pt II	1 C M G H. U	T.O.S. from R.M.R. adm. 5 Cdn Gen Hosp.		18-Oct-41	"	# 179 27-Oct-41
15-11-41	"	"	Trans. 5 Cdn Gen Hosp to 1 Conv Depot	Ewshott	11-11-41	"	197 15-11-41
3-2-42	"	"	Disc. from # 1 Conv. Depot	"	30-1-42	"	# 14-11 = 3-2-42
6-2-42	"	R.M.R.	S.O.S. to R.M.R. (mg)	U.K.	5-2-42	"	16 6-2-42
7 Feb 42	AFW.3011	"	T.O.S. from 1 Cdn MG Reinf. Unit	–	6 Feb 42	"	11 d/11 Feb 42
25 Feb 42	"	"	Priv Leave 18 Feb 42 to 25 Feb 42 (W.W.) P-5	–	18 Feb 42	–	21 d/18 Mar 42
9 Apr 42	"	"	Att'd RAF Rec. School attending Course R.A.F. Aircraft Recognition No: 29	"	25 Mar 42 to 7 Apr 42	"	30 d/22 Apr 42
19 Jun 42	"	"	Appointed A/L/Sgt with pay	"	15 Jun 42	A/L/Sgt	48 d/24 Jun 42
15 Jul 42	"	"	Priv. leave 14 Jul 42 to 21 Jul 42 P-6	"	14 Jul 42	"	59 d/2 Aug 42
21 Oct 42	"	"	Priv leave 21 Oct 42 to 30 Oct 42 F.I.6	"	21 Oct 42	"	74 - 27 Nov 42
9 Nov 42	"	"	S.O.S. to 1 CMGRU attending CMHQ Course 810 Ser. 7. M.M.G. at C.T.S.	"	8 Nov 42	A/L/Sgt	76 - 16 Nov 42
	TOS.	1CMGRU	TOS. ON POSTING FROM R.M.R.(M.G.) & ATT. f.a.p. CTS. WHILST ATT'NG CMHQ CRSE 810. SER. 7. (MMG)	UK	9.Nov.42	"	162. 17.Nov.42
		"	Ret. from above Crse & ceases att. f.a.p. C.T.S.	"	19-12-42	"	187 19-12-42
S.O.S.		"	SOS to RMR(MG)	UK	24Dec42	A/L/S	190, 23Dec42
23 Dec 42	AFW3011	RMR	T.O.S. from 1CMGRU	"	25 Dec 42	"	83 - 31 Dec 42
		1CACRU	SOS to 32 Cdn Recce Regt	UK	27 Jan 44	A/L/Sgt	24 27 Jan 44

Dec 39

18
11
12
33

SERVICE AND CASUALTY FORM

(PART II)

M.F.M. 4(a) (Part II)
(A.F.B. 103) (Part II)
500M—8-39 (1701)
H.Q. 1772-45-18

Regiment or Corps 32 Cdn Recce Regt (RMR) Regimental Number D76673

Substantive Rank Sgt Surname Murray Christian Names H. T.

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 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
Dem 5492	23 Jan 44	32 Recce	TOS from 1 CACRU	UK	28 Jan 44	Sgt	6 - 2 Feb 44
		1 CACRU	Awarded Cdn Vol Service Medal & Clasp	"	15 Jan 44	"	14 - 16 Jan 44
29 Feb 44	2011	32 Recce	att First Cdn Army Postal Unit fap	"	23 Feb 44	"	12 - 7 Mar 44
13 Mar 44	"	"	Ceases " " " " " "	"	15 Mar 44	"	15 - 20 Mar 44
16 Mar 44	"	"	SOS to 29 Armd Recce	"	18 Mar 44	"	18 - 20 Mar 44
"	"	29 CACRR Reinf Gr	TOS from 32 Recce Regt (	"	19 Mar 44	"	14 - 25 Mar 44
		RMR	Appts A/Sgt	"	26 Mar 43	"	10 - 7 Apr 43
		"	Confirmed in the rank of Sgt	"	27 Jun 43	"	27 / 43
6 Apr 44	EHS/1746	R. L.	S.O.S. to 32 Cdn Recce R. (RMR)	"	8 Apr 44	"	18 - 20 Apr 44
12 Apr 44	2011	32 Recce	TOS from Rft Gr 29 Armd Recce R	"	9 Apr 44	"	18 - 18 Apr 44
		"	SOS to Army Def Coy (RMR)	"	11 Apr 44	"	19 - 24 Apr 44
		Def Coy	TOS from 32 Recce & trans to CIC	"	12 Apr 44	"	1 - 24 Apr 44
			Embarked United Kingdom	"	15 Jun 44	"	12 - 14 Jul 44
			Disembarked FRANCE	"	17 Jun 44	"	12 - 14 Jul 44
			att to Regina Rifles Regt	—	12 Sep 44	—	23 - 44
		—	Ceases att Regina Rifles Regt	—	9 Oct 44	—	26 - 44
		—	SOS deceased Killed in action	—	9 Oct 44	—	26 - 44

NAME MURRAY THOMAS HARRY

REGIMENTAL NO. D. 76673 RANK ~~PTE.~~ Sgt

ENLISTED AT MONTREAL. PROMOTIONS, ETC. AND DATE ~~Cpl.~~ A/SGT 26.3.43 E.O.10

DATE OCT. 5th 1939.

IF SERVED PREVIOUSLY, STATE UNIT, ETC.

MARRIED, WIDOWER, OR SINGLE SINGLE.

NEXT OF KIN JAS. HENRY MURRAY RELATIONSHIP FATHER.

ADDRESS OF 5174 ST MARIE ST ~~5057 NOTRE DAME~~ ST. MONTREAL. P.Q.

ASSIGNMENT OF PAY, $ 20.00 C. + ~~$8.40 May to Oct 43 R.G.I.C. V.L.B.~~ ~~16.80~~ 8.40 Nov/43 to Apr/44 5th V.L.B.

ADDRESS AS ABOVE.

DEPENDENT'S ALLOWANCE, ENTITLED OR NOT Disallowed 25-11-39

DATE APPLICATION FORWARDED TO DISTRICT PAYMASTER 17-10-39.

IN WHOSE FAVOUR JAMES HENRY MURRAY

M. F. M. 14

100M—9-39 (1873)
H.Q. 1772-39-1662

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.
A/L/Cpl with pay	7	27-6-40	w.e.f. 26-6-40
Conformed L/Cpl	43	15oct 40	W.E.F. 11 oct 40
appointed a/Cpl with pay	44	oct 18-40	15 oct 40
Cpl (confirmed	17	10-2-41	w.e.f 15-1-41
S.O.S. to No. 1 Can. M.G.H.U. 17 Oct 41	84	24.10.41	adm. #5 Can. Gen. Hosp.
TOS #1 CMGHU from RMR. on adm.	179	27-10-41	to #5 Cdn Gen Hosp. w.e. 18-10-41.
Trans. to #1 Conv. depot	192	15-11-41	w.e.f. 11-11-41
DISCH. #1 CONV. DEPOT 30-1-42	14	3-2-42	
SOS. 1. C.MGRU. TO. RMR.	16	6-2-42	W.E. 5-2-42
TOS from 1 CDN. MGRU.	11	11.2.42.	w.e.f. 6.2.42
Course R.A.F. Recognition School.	30	22-4-42	No. 29 25 Mar/42 - 7 Apl./42.
A/L/Sgt.	48	24-6-42	w.e.f. 15-6-42.
S.O.S. to MGRU.			" " " 8-11-42 COURSE 810
T.O.S. fr. RMR. & att 2 Apts CTS.	162	17-11-42	while att Course 810 (M mg) W.e.f. 9-11-42.
C+A. Crse 810 (M mg) C+BA. 2 Apts CTS	187	19-12-42	W.e.f. 19-12-42
SOS to RMR (mg) w.e.f. 24-12-42	190	23-12-42	
L SGT (CONFIRMED) w.e.f. 22 Jan 43	E.O. 1	9 FEB 43	A/SGT 26-3-43 - E.O. 10 d/7-4-43

Part II D.O.		PARTICULARS OF CASUALTY
No.	Date	
12	14 Jul 44	Embarked UK 15 Jan 44 - Disembarked France 17 Jan 44
CR 65	9 Oct 44	SOS TO X LIST MISSING IN ACTION 9 Oct 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-76673 Rank Sgt. Surname Murray. Christian Name Harry J.

Unit	Hospt.	Admitted			Discharged			Hospt. Days	Disease or Injury	Remarks	Cas. List No.
		Day	Mo.	Year	Day	Mo.	Year				
(R.M.R.) (M.G) 32 Recce. Regt	17 Cdn Gen	30	11	43	15	1	44	46	Frac rt. patella		E-1257 E-1213
1 Cdn Army Def. Coy.									Killed 6-10-44		A 502

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

~~Could not locate~~

No D.76673 Rank Sergeant Name MURRAY, Thomas Harry

Unit Royal Montreal Regt. Date of death 6th. Oct. 1944

Died at ~~France~~ Belgium

Cause Killed in action

Death occurred on strength of Forces.H.Q. 405-M-40611

N/K Mr. James Murray Relationship Father

Address 1021 Church Avenue, Verdun, ~~2156 Devilliers, Ville Emard~~, Montreal ~~20~~ 19, P.Q.

Remains buried in Adegem Cdn.Mil.Cem. MR j;043978 Cemetery
sheet 2 plot 8, row F, Gr. 11

CHK ✓

Grave location

OVER-

BURIAL REPORT TO N.K. JAN 2 1946

RETURN TO BUR. OF STAT. SEP 27 1945

ROYAL MESSAGE DESP'D. NOV 29 1944

CAN. MESSAGE DESP'D. DEC 14 1944

Temp BR sent to NK & Maj.

REBURIAL

Adegem Canadian Military Cemetery,
Adegem, Belgium.

Grave 11, row F, plot 8.

HI & CR Form Despd. JAN 2 1947

Photographs
Despatched OCT 31 1947

5M-10-44 (M-4414)

DEPARTMENT OF VETERANS AFFAIRS
6-10-46 ARMY

AWARDS

M

WAR SERVICE RECORDS

SURNAME (IN BLOCK LETTERS) CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	FILE No. C.A.S.F. UNIT
MURRAY, Harry Thomas	D-76673	Sgt	41-01048

WAR SERVICE BADGE
(CLASS) No. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star.	
France & Germany Star.	
Defence Medal	
CVSM & Clasp	
War Medal 39-45	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 806

MEDALS AND MEMORIALS—DECEASED PERSONNEL

(MOTHER)

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO ~~James Murray Father Benef,~~ Dec'd
~~2136 Devilliers St.,~~
~~Ville Emard, Montreal,20, Que.~~

MRS Bertha M. Taylor.
Box 14
(1) Beebe QUEBEC.

ADDRESS:

(2) MEMORIAL CROSS

WIDOW Single

ADDRESS: 5709 - 14 - 7 - 50

MEMORIAL BAR

DATE DESP (2)

REGN. NO. 3790

(3) MEMORIAL CROSS

MOTHER Deceased (MFM5)

(3)

ADDRESS:

6.10.44

AWARDS—CANADIAN ARMY (ACTIVE)

D.W.
500M—1-44 (3467)
H.Q. 1772-45-8

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
MURRAY,	Harry Thomas	D.76673	Sgt.	FILE NO. 405-M-40,611 1st. Army H.Q. Def. Coy.

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star France & Germany Star ~~Defence Medal~~ CVSM & Clasp War Medal, 1939-45	~~MED RET'D. INDELIB'D~~ 10/11/49 2970 ~~RET'D TO STOCK.~~

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

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

WSG 142
2782

2
ARMY

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME Harry Thomas (CHRISTIAN NAMES) MURRAY (SURNAME)

REGISTER NO. D-5664
FILE NO. 405-M-40611
DATE 14-7-45
SERVICE NO. D-76673
FINAL RANK OR RATING Sgt.
DATE OF DISCHARGE 6-10-44

PAYEE Director of Estates

ADDRESS

DATE OF TERMINATION OF OVERSEAS SERVICE 6-10-44

	$ ¢
A. TOTAL QUALIFYING SERVICE — NO. OF DAYS 1829 / 30 EQUAL TO 60 COMPLETE PERIODS AT $7.50	450.00
B. QUALIFYING OVERSEAS SERVICE — NO. OF DAYS 1764 LESS 29 INELIGIBLE DAYS, EQUAL TO 1735 DAYS @ 25c. PER DAY (SEE PAR. 2 OVERLEAF FOR EXPLANATION)	433.75
	883.75
C. SUPPLEMENT FOR OVERSEAS SERVICE	
DAILY RATES AT DISCHARGE: PAY $ 2.20	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.25	
ADDITIONAL PAY $	
$	
$	
DEPENDENTS' ALLOWANCE 1/30 OF $ ____ $	
TOTAL $ 3.45 X7 = $ 24.15	
NO. OF DAYS 1764 / 183 X$ 24.15	232.79
D. WAR SERVICE GRATUITY	1116.54
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES $	
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $	
OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE	1116.54

G. YOUR PORTION OF GRATUITY IS— 100%

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

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

ΔT

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
PJ	[illegible]

TREASURY	
CHECKED BY	DATE
D Cochrane	26-7-45

[illegible]
SERVICE REPRESENTATIVE

405-M-40611

P.A. /K

RECORDS OFFICE OVERSEAS.

CANADIAN MILITARY HEADQUARTERS.

GRAVES REGISTRATION CARD.

NAME MURRAY, Harry Thomas

RANK Sgt.

UNIT F.C.A. Def Coy

PLACE & DATE OF BIRTH MONTREAL, Canada 24 Dec 1917

REGIMENTAL NO. D-76673

NEXT OF KIN & ADDRESS Father:

Mr. James Harry MURRAY, 5174 Murray St.,

MONTREAL, Quebec.

PARTICULARS OF HOSPITALISATION.

DATE OF ADMISSION

DIAGNOSIS

NAME & LOCATION OF HOSPITAL

PARTICULARS OF DEATH.

DATE OF DEATH 6 Oct 44

HRS

PLACE OF DEATH BELGIUM

CAUSE OF DEATH KILLED (Prev reported missing)

PARTICULARS OF BURIAL.

DATE OF BURIAL D.N.K.

CEMETERY Adegem Cdn. Mil. Cem. MR J:043978 Sh.2.

PLOT NO 8 ROW F GRAVE 11

DEATH CERT NO.

RELIGION Roman Catholic

DATE 20 OCT 45

(M. BLUTEAU) Capt.,
for COLONEL,
O i/c Records,
CANADIAN MILITARY HEADQUARTERS.

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

H.Q. 405-M-40611
(D.R. 2(D))

2nd January, 1946.

Mr. James Murray,
2136 Devilliers,
Ville Emard,
Montreal 20, Quebec.

Dear Sir:

Information has just been received from overseas that the remains of your son, D76676 Sergeant Thomas Harry Murray, have been carefully exhumed from the original place of interment and reverently reburied in grave 11, row F, plot 8, of Adegem Canadian Military Cemetery, Adegem, Belgium. Marked map is enclosed. This is a recognized military burial ground and will receive care and maintenance in perpetuity.

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

Yours faithfully,

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

/EMA

Form No. 1 # 2252

Register No. D 5664

Nominal Roll No. D116

H.Q. File No. 405 M-40611

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 76673	SGT	MURRAY	HARRY THOMAS

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. 5 OCT 39	T.O.S.	T.O.S.
S.O.S. 6 OCT 44 MD O/S	S.O.S. MD	S.O.S. MD
Total Days 1829	Total Days	Total Days

TOTAL SERVICE 1829 DAYS

	Total Service	Less Non-qualifying Service	Net Service
WESTERN HEMISPHERE	65		65
OVERSEAS SERVICE	1764	nil	1764
Totals	1829		1829
Add Non-qualifying Service			
TOTAL SERVICE			1829

EMBARKATION DETAILS:

1. TOS O/S. 9 DEC 39
Date S.O.S. Overseas 6 OCT 44

2.
Date S.O.S. Overseas

REMARKS:

KILLED IN ACTION 6 OCT 44

Computer's Signature [signature] Sgt

Checker's Signature [signature] Sgt

Date Computed 20 FEB 45

DOCS SHOW ABOVE DATES TOS - SOS O/S
TOS O/S

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

[signature]
(C.L. Laurin) Colonel,
Director of Records.

22

DETAILS OF NON-QUALIFYING SERVICE

WESTERN HEMISPHERE

Forfeits for		to	Eff.Date	Days	Total

TOTAL

OVERSEAS

T.O.S. 9DEC39 T.O.S. ______ T.O.S. ______

S.O.S. 6OCT44 S.O.S. ______ S.O.S. ______

TOTAL

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 territ[illegible]
City | Town | Village | Parish | Townshi[illegible]

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: MURRAY (*Block letters*)

Given names: Thomas Harry

Do not write in this space

4. RESIDENCE

Street: Notre Dame Ouest, No. 5057

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: December (Month) 24th, (Day) 1917. (Year)

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

OCCUPATION

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

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	MURRAY, James Harry	
MOTHER (Maiden Name)		

19. Place of burial, cremation or removal: Belgium

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) (Year) 19....

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: October (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**

OVERSEAS CASUALTY
CANADIAN ARMY

SEP 27 1945

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 francais)

Director of Records, Dept. of National Defence.

SGT. MURRAY. T.
076673

Militia Book M-1. (Part I)
40/P&S/279 (12/42)

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 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 this book whenever called upon to do so by a competent authority, viz.: Officer, Warrant Officer, N.C.O., Military Policeman or Civilian Police.

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.

Malie F 1.90
Bill 1.00
1.00
10.0

D76673
Sgt. MURRAY. T.

(XIV) PARTICULARS OF DENTAL TREATMENT

Date	Required	Completed	SPECIFICATION Use authorized Abbreviations and Symbols	Signature of Dental Officer
17 JAN 44	✓		3 Fill PUD PLD	J. W. McLean

(1) SOLDIER'S NAME AND DESCRIPTION ON ATTESTATION

Regtl. No. D76673

Surname (in capitals) MURRAY

Christian Names (in full) THOMAS HARRY

Date of Birth 24 DEC 1917

Place of Birth MONTREAL, QUE.

Trade on Enlistment SAILOR

Nationality of Father at birth IRISH

Nationality of Mother at birth IRISH

Religion R. C.

Enlisted at MONTREAL, QUE.

Date 4 OCT 1939

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

Signature of Soldier T. H. Murray

Signature of Officer Clifford W. Street Lt.

Place In the Field Date 17 Mar 43

(II) 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	MURRAY JAMES	16 MAR 43	5174 ST. MARIE ST. MONTREAL, QUE.
	Mother	MURRAY BERTHA	16 MAR 43	5174 ST. MARIE ST. MONTREAL, QUE.
3rd	*Brothers and Sisters	MRS. H. J. LYNCH	16 MAR 43	~~2030 - 6TH ST~~ 1922 A. VIRGINIA ST. BERKELEY, CAL. U.S.A.
		MRS M COLLINS	16 " 43	93 BROADWAY, PROVIDENCE R.I. USA.
4th	Other Relations (stating) relationship)			

*State whether brothers are older or younger.

076673
Sgt. MURRAY. T.

(III) RANK and APPOINTMENT

Date	Rank and Appointment	Substantive, Temporary, Acting or Local (with or without pay)	Authority of Part II Orders	Signature of Officer
5-OCT 39	PTE		B.O. 27. 39	P.H. BARRE. CAPT.
26 JUNE 40	A/L/CPL	WITH PAY	BO-7-40	PH BARRE CAPT.
11 OCT 40	L/CPL (APPT)	" "	BO-43-40	PH BARRE MAJOR
15 " 40	A/CPL		BO-44-40	PH BARRE "
15 " 40	CPL.	" "	BO-46-40	PH BARRE "
15 JAN 41	A/L/SGT.	" "	BO 48-24-6-41	G W TURPIN LT.
22 " 43	L/SGT (CONFIRMED)	" "	BO '	Clifford W Smith Lt
26 MAR 43	A/SGT.	" "	E.O. 10, 7 Apr 43	C.W.D. Scotcher Capt.
27 JUN 43	SGT (CONFIRMED)	" "	E.O. 27	C.W.D. Scotcher Capt.

(IV) 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:*—*

Qualified in addition as under :—

Date..........

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

Kalie F 1.80
Bill 1.00
1.00
10.0

07[illegible]673
Sgt. MURRAY. T.

(V) PARTICULARS OF TRAINING

Courses and Schools. Specialist Qualifications. Swimming, etc., show'g result	Date	Signature of Officer
Dov 1/c (T)	5 May 43	C.W.D. Se Stelu Capt.

(VI) SMALL ARMS RANGE COURSES

Year	Classification	If Table not completed, state parts fired	Signature of Officer
2 SEP 40	HENLEY SHOOT	Poss. 70. Score 21	from previous bod.

076673
Sgt. MURRAY. T.

(IX) 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.

(X) MEDICAL CLASSIFICATION

Date	Category or Grade	Medical Examiner of Recruits, or other Medical Authority	Signature of Medical Officer
4 Oct 39	A	Medical Board	
21 Nov 39	A.	Re-examination	
20 " 39		Chest X-Ray (neg)	R.R. MacKenzie Lt.

Sgt. MURRAY. T.
07673

(XIV) PROTECTIVE INOCULATIONS

Nature of Vaccine, "T.A.B." Cholera, Plague, etc.	Date	Signature of Medical Officer
TAB – 3.	13 Nov 39	K-A. MACKENZIE LT.
TETANUS TOXOID 1cc	29 " 39	
" " 1cc	8 Mar 40	
" " 1cc	16 Nov 40	KRM Capt
T.A.B.T 0.5 cc.	6-Feb 42	KRM "
T.A.B.T ½ cc	3-6-43	[illegible] Capt.
TYPHUS ½ ¼	28-1-44 / 4-2-44	[illegible] Capt.
"	12-2-44	
T.A.B.T ½	12-6-44	J P Hitcher
Typhus Booster	12-6-44	

(XV) VACCINATION

Date Vaccinated	Signature of Medical Officer
17-9-42	[illegible] Capt
12-6-44	J P Hitcher

(XVI) 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
TEST (REV) COMPLETED	3 JUN 42	L. ALLWARD LT
Q. CARD "	3 " 42	" "
PL-7- 21-30 OCT/42	F.1-6	E WAUD CAPT.
FINGERPRINTED—CAIB		
P8F1-7 17-24 Nov 43		[illegible] Capt
Awarded CVSM & clasp. 15 Jan 44		[illegible] Capt
awarded 4 Service Stripes 4 Oct. 43		Robert [illegible] Lt.
Embarked UK	15/6/44	W Bonnar Lt
Disembarked France	17/6/44	

Malie 1.00
Bill 1.00
1.00
1.00

076673 SGT. MURRAY. T.

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.........received and forwarded to the Officer i/c Records at

....

Signature of Officer.
Rank or Appointment.

Signature of Officer.......... Dept.

Date Certificate or Will extracted.......... To whom sent.

To whom sent. Records

Date Certificate or Will extracted 24 ... C.A.D. Section Canl ...

Lent 10
Page 5/

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY HG

Name: MURRAY (Surname) Thomas H. (Christian Names) No.: D.76673

Sgt. (Rank) C.A.O/S (Unit) 6-10-44 (Date of Death)

AMOUNT W.S.G. 1116.54
L.P.C. $ 366.65

Date: 14-8-45

Other Credits

Total 1483.19

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
A1	Father	James Murray, 2136 DeVilliers St., MONTREAL, Que.	$1483.19

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	$1483.19

CLASSIFIED BY

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

75M—2-45 (6771)
H.Q. 1772-80-2

5/7B CF[illegible]37
40/P & S/2180 (7060)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME .....D-76673.....MURRAY H. T. SGT. DEC'D.....

RECEIVED FROM .....GHQ CDN SEC 2nd Ech 21 Army Group.....

CHECKED BY .....A-117006 Gnr Schwartz M. DATE ....10 Mar 45.....

AND .....D-86094 Pte Morris H. A.....

1	Red "I" Disc.		
1	Excelsior Pen.		
1	Inox Pen.		
1	Cig Lighter.		
1	Address Book.		
	Snaps & Photo.		
	Letters.		
1	Leather Wallet.		

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

QUADRUPLICATE—with effects.

M. Schwartz Gnr
for OC 1 Cdn KSD

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-76673 Sgt Murray H T Dec'd

RECEIVED FROM Cdn SecGHQ 2nd Echelon 21 Army Group

CHECKED BY A-117006 Gnr Schwartz M
B-81759 Sgt Graves J G DATE 18 Jan 45

I	Crucifix.	
I	Pen (No Name).	
I	French Souvenier Pin.	
	Personal Papers.	
I	Leather Belt.	

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

for OC 1 Cdn KSD

CAN. DIAN MILITARY
ESTATES
22 JAN 1945
HEADQ

M.F.M. 267
50M-4-44 (4185)
H.Q. 1772-39-1989

CANADIAN NATIONAL TELEGRAPHS

MR

405-M-40,611

DAY LETTER ☐

NIGHT LETTER ☐

CASUALTY (REPORT DELIVERY)

OTTAWA 16 OCTOBER 1944

TO:- MR JAMES MURRAY
2136 DEVILLIERS
VILLE EMARD
MONTREAL 20 P Q

3094 MINISTER OF NATIONAL DEFENCE DEEPLY REGRETS TO INFORM YOU THAT D76673 SERGEANT THOMAS HARRY MURRAY HAS BEEN OFFICIALLY REPORTED MISSING IN ACTION NINTH OCTOBER 1944 STOP ~~IF~~ WHEN FURTHER INFORMATION BECOMES AVAILABLE IT WILL BE FORWARDED AS SOON AS RECEIVED

PREPAID 10

DIRECTOR OF RECORDS

3

3/45A MFM 510
40 P&S/254 (7012)

CANADIAN ACTIVE SERVICE FORCE

OVERSEAS

District..........

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

LAST PAY CERTIFICATE

(All Ranks)

Regtl No. D76673 Rank and Name MURRAY. T.H. Sgt.

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

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

Reason Death Authority : C.C.L."A" 502 d/15.Oct.44.

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

Dr Particulars	Amount		Cr Particulars	Amount	
Balance Dr from last account			Balance Cr from last account	244	06
First Monthly Payment			Regimental Pay 31 days at $ 2.20	68	20
Casual Payments			Tradesmen's Pay ..... days at ..... $		
Payments on Transfer or Discharge			Additional Pay (Give Particulars) ..... days at ..... $		
Assigned Pay	20	00	Allowances (give particulars) ..... days at ..... $		
Regimental Charges					
Public Stoppages (give particulars) :					
			Def. Pay Interest	4	58
			Cash Effects SOCR 21147	35	35 ✓
			" " " 23016	31	29
			" " " 25980	3	17 ✓
To Balance Cr — Free	190	65			
To Balance Cr — Deferred	176	00	By Balance Dr		
Total	386	65	Total	386	65

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

Remarks

Assnd Pay $20.00 (F) Stopped eff November.1944.

Compiled by B.Mc.Kercher.

Checked by L. Broughton

Date 28th.April 19 45.

Certified correct R. W. Hodgman
for Chief Treasury Officer, Overseas

MW

April 1st 1945

Miss Loretta Lanier
230 Bourget St
Montreal. (30)

ESTATES BRANCH
APR 5 1945
H. Q.
OTTAWA.
NATIONAL DEFENCE

Dear Sir

I am returning to you the receipt form which I signed I want to thank you for sending that bond to me and also for your very kind attitude That bond meant a great deal to me.

Yours gratefully
Loretta Lanier

BF/K

K
23-2-K

Administrator
of Estates of
Veterans
Overseas
Act

ESTATES BRANCH
MAR 19 1945
H. Q.
OTTAWA.
NATIONAL DEFENCE

Dear sir, regards
to the Estate of
Sgt Thomas H. Murray
R 76673 who was
killed in Belgium
Oct 6th 1944
have you heard from
England yet any news
Thanking you very
much for the attention
given to it i remain
as ever his father
James Murray
2136 De Vallier
Montreal 20

K 15 | K
30/5

ESTATES BRANCH 5 H. Q. OTTAWA NATIONAL DEFENCE

Dept of Nat Def.
Estates Branch
Ottawa
Ont

Dear sirs; i wish To
inform you of change
of Address
in case That you
want to get in Touch
with me
over The Estate of
Re Sgt Thomas H. Murray
D76673
My Old Address
2136 De Villiers St
Montreal 20
Que

New address

and now James Murray
1024 Church Ave
Verdun
Montreal 19 Que over

Thanking you very
much for the attension
you may give it
Yours
James Murray

1-8-12

ESTATES BRANCH
AUG 8 1945
H. Q.
OTTAWA
NATIONAL DEFENCE

Director of Estates
Ottawa

MURRAY, T.H.

Dear Sir; yours rec'd
today about the
Effects of my son
Thomas H. Murray
if you have not
sent them yet please
address
to 2136 De Villiers
Montreal 20
Que

as i have moved back
there thanking you
very much for your
trouble yours
James Murray
2136 De Villiers
Montreal 20
Que