D76725
SOMERVILLE
JOHN KERMA

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 SOMERVILLE, John Kormack (b) Reg'l. No. D 76725
2. (a) Arm of service Army (b) Unit 32 Recce C/C (c) Rank Pte
3. (a) Date of birth 17 Jul 1920 (b) Have you any dependents? No (c) Place of residence at time of enlistment Montreal, Que.
4. (a) Place of enlistment Westmount, Que. (b) Date of enlistment 6 Oct 1939

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 16 (b) Were you attending school or college up to the time of enlistment? No
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) 10th Grade
7. If you attended a university, give name of university and standing or degree secured
8. (a) Did you ever enter upon a trade apprenticeship? No (b) If so, for what occupation? (c) Did you finish it? (d) If you did not finish it, how long did you serve at it?
9. (a) What languages do you speak fluently? English (b) What languages do you read well? English

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

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

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

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

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

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

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

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

18. Name of employer T.S. Robert Simpson Co., Ltd. Address Montreal, Que.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Departmental Stores.
20. (a) Your specific occupation Stock Keeper (China Dept) (b) Number of years' experience at this occupation with any employer 5
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? Undecided

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 Undecided

DATE 22 May 1945 SIGNATURE W/O1 Clerk for officer i/c Records CMR

FOR COMPLETION AND RETURN BY

Form P. 64

Mrs. Mary H. Somerville
2040 Northcliffe Ave.,
Montreal 28, Quebec.

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-S-28,049 FD 119

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

12th June 1945.

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

SOMERVILLE John Kermack Trooper

D-76725 C.A. O/S

ESTATES BRANCH
JUN 22 1945
D.E.D.
OTTAWA
NATIONAL DEFENCE

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

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

E.L. Smith Col.

Director of Estates.

ECM/MM

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		Doreen Agnes Mary (Oldham)		Somerville 52 Oak Hill Road, Sutton, Surrey, England
2	Children of the Deceased and dates of their Births		None		
3	Father of the Deceased		John Somerville	Deceased	Aug. 13, 1935
4	Mother of the Deceased		Elizabeth Cooper	"	Dec. 3, 1926
5	Brothers of the Deceased	Full Blood			
		Half Blood			
6	Sisters of the Deceased	Full Blood	Miss Jean Elizabeth Somerville, age 22 2140 Northcliffe Ave., Montreal, Que.		
		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.	Somerville, John Kennack
9	Date of his birth.	July 17, 1920
10	Place and date of his marriage.	Sutton, Surrey, Eng. Sept 12, 1942
11	Place and date of his parents' marriage.	Montreal, Que. Canada June 20, 1908

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal, Que. Canada
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) (b) (c) (d) Montreal, Que. Canada
14	Nature of employment before enlistment.	China Dept., Robt Simpson Co
15	State whether he owned the premises in which he lived, and, if so, where situated.	No
16	Name place where deceased stated he intended to make his permanent home.	Montreal

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	Pay Book 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?	Do Not Know
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?	"
20	Amount of War Savings Certificates held by deceased. Indicate where located.	"
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	"
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Metropolitan Life Ins. Co $1,000 Mrs. Mary Helena Somerville
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	

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.	Lived at home free of charge until day of embarkation Dec. 6, 1939.
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.	—

(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

*Step Mother of the deceased.

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

Mary Helena Somerville — Signature of Informant

2140 Northcliffe Ave — Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief Mary Helena Somerville {Name of informant} is the* S/ Mother of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

*See above.

Dated at Montreal this 20 day of June 19 45

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

R J Inocelli — Qualification Commissioner for the taking of oaths

Address Dept of Veterans Affairs Montreal

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

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

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

OHF

ORIGINAL
DUPLICATE
TRIPLICATE ..... Checked ..... Card ..... Observation ..... D

M.F.M. 2
A.F.B. 271
400 M.—8-39 (1696)
H.Q. 1772-45-16

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

Unit ..... R.M.R. (M.G.) ..... Regimental Number ..... D.76725 C

CANADIAN ACTIVE SERVICE FORCE 01

ATTESTATION PAPER

WSG COMPLETED

1. Surname ..... Somerville
2. Christian Names ..... John Kermack
3. Present address ..... 2140 ~~(illegible)~~ Northcliffe Ave Montreal P.Q.
4. Date of birth ..... July 17th 1920
5. Place of birth ..... Canada (Country) Quebec (County or Province) Montreal (Town or Township)
6. Religion (state denomination) ..... Presbyterian
7. Trade or Calling ..... Stockkeeper Chauffeur
8. Married, Widower or Single ..... ~~Single~~ married
9. Name of next of kin ..... ~~Mary Helena Somerville~~
10. Relationship ..... ~~Mother~~ wife see change
11. Address of next of kin ..... ~~2140 Northcliffe Ave Montreal P.Q.~~
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, ... J.K. Somerville ..... 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 7th 1939 ..... J K Somerville (Signature of recruit) Ethel Gordon Williams

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

..... J K Somerville ..... (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 7th day of October 1939

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

MMAR

FINGERPRINTED—CAIB

Record of Service of Somerville (Surname) John Kermack (Christian Names) Regimental Number D76725

Dual Driver i/c Wheeled

Qualifications

Military: nil

Business or Professional: nil

Trade or Civil: Stock Keeper, Chauffeur

Technical: nil

Languages: English only

Educational Qualifications

High School or Collegiate: 1 year H.S. (years completed)

Graduation or Matriculation: nil (specify)

*College: nil

*University: 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.	6-10-39	RMR (MG.)	Westm'l't	Pt. II Orderl	7-10-39
		Proceeded overseas		6-12-39				
		Arrived in England		18.12.39				
		Granted privilege leave		27.6.40	RMR	Field	DO 10 (2)	5.7.40
		Granted leave		4.7.40 / 6.9.40 / 14.9.40	RMR	Field	DO 38	3.10.40
		Priv. leave 6. 5 march 41		26 Feb 41	RMR	Field	27	19 March 41
		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
		Priv leave to 9 July 41 (w.w.)	Cte	2 July 41	RMR	UK	65	8 Aug 41
		Awarded 4 days ~~forfeiture~~ pay FR1 149(2)	Pte	23 Aug 41	RMR	UK	95	3 Oct 41
		Leave - PS - NO/WAR	Pte	19 / 26 Nov 41	RMR	UK	103	26 Dec 41
		Priv. leave. W.O.W.		18/25 Feb 42	RMR	UK	21	18 Feb 42

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

Are you receiving or have yo

in the past received disability

CERTIFICATE OF MEDICAL EXAMINATION

Name in full John Kermack Somerville. Date Oct. 6, 1939.

Part 1. Information obtained from the recruit.

1. Age 19 2. Have you ever suffered from any of the following diseases?

a. Rheumatism	no	j. Nasal trouble	no
b. Tuberculosis	yes	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		

J. K. Somerville
(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 on right knee cap. 1 Vaccination mark on left arm. Appendix operation in 1939

2. Height 5 feet 9½ inches. 3. Weight 121 pounds.

4. Complexion Fair Eyes Blue Hair Medium Brown 5. Development Fair (Good / Fair / Poor)

6. Chest measurement—Girth on full expansion 33 inches.
Range of expansion 2½ inches.

7. Vision, right 20-20 left 20-20 8. Hearing, right Good left Good

9. Condition of mouth and teeth Good

10. The abnormalities (congenital and pathological) found on examination are as follows

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

NO.

President Member Member

give details. If pension or compensation has been claimed for any disability, state particulars.

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
22/11/39	Sleeps am. wt 120 Ears Reflexes normal. Urine O.K. - Cat. A. - R.P.M. Lt		
13/11/39	TAB 3		
20/11/39	Ichad. Mcf		
25/11/39	Vaccination		
29/11/39	Tetanus Toxoid 1 cc.		
	R.P. Macfarlane Lt.		
25.11.42.	TABT ½ cc		
29.9.42.	Vacc		

Regtl. No. D76725 Rank Surname Somerville Christian Name John Kermack

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

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

Statement of the Service of No. D 76735 Rank Sheet No.

M.F.M. 1 & 2 (a)
700 M—8-39 (1697)
H.Q. 1772-45-18

Name Sommerville J.K.

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
		Qual Dvr. Mech M/V Gp. C	Tpr	23 Jun 43	32 Recce	UK	29	23 July 43
		Granted 4 Cy. Dr. Mech. M.V.C.	Tpr.	2 July 43	32 Recce	UK.	35	3 Sep. 43
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
Cy. S.O.S.		S.O.S. to Reinf Enc. 21 Armd Regt (Dr Mech M.V.C.)	TPR	18 Mar 44	32 Recce	UK	15	20 Mar 44
	T.O.S.	TOS from 32 Recce Regt Dr Mech M.V.C.	Tpr	19 Mar 44	21 Armd Regt	UK	14	24 Mar 44
C&L SOS		SOS to x L. CAC. (C) Dr. M. M.V.C.	Gdsm	1 Jun 44	21 CAR "C"	U/K	27	21 June 44
	TOS.							
M.106		T R & Pay Dvr. mech Tk "C"	Gdsm.	29 Jun 44	XL CAC "C"	21 A Gp	26	17 Jul 44
M.106		Reverts to RR & Pay 150 P D Dr mech. M.V.C.	Gdsm.	28 Jun 44	XL CAC "C"	21 A Gp	26	17 Jul 44
M.106		Qual Dvr. tk mech "C"	Gdsm.	29 Jun 44	XL CAC.	21 A Gp	26	17 Jul 44
		Embarked at ..... UK ..... on 22 Jul 44						
		Disembarked at FRANCE on 23 Jul 44	Gdsm		XL CAC C	21 A Gp	35	21 Aug 44
		SOS x 4 List C Agm 25 CAOR to 32 CAR (dr mech, Tk "C")	Spr	1 Aug 44	XL CAC "C"	21 A Gp	35	21 Aug 44
Obs. on att. list C	Lab.	SOS to x 6 list C x 16 (C.) Dvr Mec Tk "C" Missing	Tpr	10 Oct 44	28 Armd R. x list	21 A/Gp	50	20 Oct 44
		TOS x 6 list from 28 Cdn armed Regt BCR Dvr Mech Tk C	Tpr	11 Oct 44	CAC (C)	21 A Gp	81	4 Nov 44
M 139.		Missing		10 Oct 44		AEF	A 502	
		Presumed Killed		10 Oct 44	28 CAR.		Cas L. A 582.	3 June 45.

Statement of the Service of No. D 76725 Rank Pte Sheet No.

Name Somerville J. K.

M.F.M. 1 & 2 (a)
700 M—S-39 (1697)
H.Q. 1772-45-18

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
		7 days Furl: leave	Pte	10/17 June 42	RMR	UK	51	2 July 42
		Permission granted to marry	Pte	26 Aug 42	RMR	UK	53	9 July 42.
		Qual Driver y/c Wheled Regt Board	Pte	13 Mar 42	RMR	UK	64	28 Aug 42
		P/leave to 23 Sept	Pte	16 Sept 42	RMR	UK	69	29 Sept 42
		~~Married permission granted Miss DAM Oldham~~	Pte	19 Sept 42	RMR	UK	69	29 Sept 42
		change of address N of K. Wife ~~53 OAKHILL RD BONHILTON SURREY England~~	Pte		RMR	UK	69	29 Sept 42
		change of address N of K. Wife ~~HILL HOUSE LAPWORTH RD LAPWORTH NR BIRMINGHAM~~ Eng			RMR	UK	70	6 Oct 42.
		Priv leave to 20 Jan 43	Pte	13 Jan 43	RMR	UK	6	2 Feb 43
		Reg Cay y/ SD Sedeens	T/Dr	1 Jan 43	32 Recce	UK	8-A	29 Mar 43
		Qualified Dr I/C	T/Dr	25 Feb 43	32 Recce	UK	10	7 April 43
		change of Address N of K. Mrs. Doreen Agnes Mary Somerville (wife) to 52 Oakhill Road, Sutton, Surrey, England.			32 Recce	UK.	15 (Ver 3/5/44)	12 May 43.
SoS		SoS to 1 Cdo Res. Prov. on Dvr. Mech Cnse 1047	Tpr	13 May 43	32 Recce	UK	17	21 May 43
	ToS	ToS from 32 Recce Regt Attchd Dvr. Mech Cnse 1047	Tpr	14 May 43	1 Cdo Res	UK	114	20 May 43
		Rejd from Cnse 1047 C Tp Bde HQ 3 Tech Emy Gp	Tpr	24 June 43	1 Cdo Res	UK	144	24 June 43
		Qual Dvr. Mech. MV. Gp. 'C'	Tpr	23 June 43	1 Cdo Res	UK	154	4 July 43
SoS		SoS to 32 Recce Regt	Tpr	1 July 43	1 Cdo Res	UK	149	4 July 43
	ToS	ToS from 1 Cdo Res	Tpr	2 July 43	32 Recce R	UK	26	5 July 43

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.76725 Rank Tpr. Surname Somerville Christian Name John K.

Unit	Hospt.	Admitted			Discharged			Hospt. Days	Disease or Injury	Remarks	Cas. List No.
		Day	Mo.	Year	Day	Mo.	Year				
28 Armd. Regt.									Missing 10-10-44		A-502
"	—								Presumed killed 10-10-44		A-582

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

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.C.) Regimental Number D76725

1. Surname SOMERVILLE
2. Christian Names John Kermack
3. *Substantive Rank and Appointment Pte
   *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 17th July, 1920
   (A)
6. Date of enlistment 6th 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 Presbyterian
12. If married, state date 19 Sept 42 S
13. Trade on enlistment Stockkeeper, Chauffeur
14. Corps, trade and grade
15. (D) Qualifications Dvr 1/c (W), Dvr Mech M VC
16. (E) Miscellaneous entries Dvr Mech Sk C J

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

Unit (Battn., etc) 32nd Cdn Recce Regt. (R.M.R.) 21 CDN ARMD REGT (GGFG)

(18) Medical

Category	Date	Authority
"A"	22 Nov 39	99/20/32 Recce 1/A5G d/5 Jan 43

(19) Next of kin (entries to be made in pencil)
Mrs. Doreen Agnes Mary Somerville, (wife)
52 Oakhill Rd
Sutton, Surrey
England

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

NOTES—

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

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	Army rank as at (e)	(g) Army Form or other authority for entry to be shown
		R.M.R.	Proceeded overseas 6-12-39				
		✓	Arrived in England 18-12-39				
5.7.40		✓	Furlough leave 27.6.40 to 4.7.40	England	27.6.40	Pte	Pte 11 # 10
3.10.40		✓	Furlough leave 6.9.40 to 14.9.40		6.9.40	Pte	Pte 11 " 38
15.3.41	AFW 3011	✓	Furlough leave 26.2.41 to 5.3.41	"	26.2.41	Pte	#27 d/19.3.41
30 Jun 41	"	✓	Furlough leave 2 Jun 41 to 9 Jun 41 (W.W.)	"	2 Jun 41	Pte	" 65 d/8 Aug 41
25 Sep 41	"	"	Awarded 4 days forfeiture of pay offence see 40AA	"	24 Sep 41	Pte	" 78 d/30 Oct 41
			Date of offence 21 Nov 41				
			S.O.S. CASF Canada		8 12/39	"	6 14/1/41
			T.O.S. " UK		9 "	"	" "
			Transferred in U.K.		18 "	"	" "
21 Nov 41	"	"	Furlough leave 19 Nov 41 to 26 Nov 41 (N.W.) P-5	"	19 Nov 41	"	102 d/26 Dec 41
25 Feb 42	"	"	Privilege leave 18 Feb 42 to 25 Feb 42 (N.O.W.) P-6	"	18 Feb 42	"	21 d/18 Mar 42
14 Jun 42	"	"	Priv. Leave 10 Jun 42 to 17 Jun 42 (W.W.) P-7	"	10 Jun 42	"	51 d/2 July 42
1 Jun 42	"	"	Permission granted to marry Miss Dream	"	28 Aug 42	"	53 d/1 Jun 42
			Many aggravating problem				
24 Jun 42	"	"	Quarters did Driver i/c wheeled - Returned	"	13 MAR 42	"	64 d/28 Aug 42
17 Sep 42	"	"	Priv. leave 16 Sep 42 to 23 Sep 42 P-6	"	16 Sep 42	"	69 d/29 Sep 42
20 Sep 42	"	"	Married with permission.	"	19 Sep 42	Pte	69 d/29 Sep 42
"	"	"	Change of Next of Kin.	"	19 Sep 42	Pte	69 d/29 Sep 42
28 Sep 42	"	"	Change address N. of K.	"	28 Sep 42	Pte	70/6 Oct 42
18 Dec 42	"	"	Re Command Special Telecommunication Class "Flash"	"	17 Dec 42	"	1-d/2 Jan 43.
				to	29 Dec 42		
25 Jan 43	"	"	Leave 13 Jan 43 to 20 Jan 43	"	13 Jan 43	"	6-2 Feb 43
25 Jan 43	"	"	S.O.S. to 32nd Cdn. Recce Regt. (B.M.R.)	"	25 Jan 43	"	6-2 Feb 43
26 Jan 43	"	32 Recce	T.O.S. from R.M.R. (M.G.) on trans. to C.A.C.	"	26 Jan 43	Tpr	1-9 Feb 43
29 Mar 43	"	"	Qualified Dr. i/c (T)	"	25 Feb 43	"	10-7 Apr 43
26 Mar 43	"	"	Granted daily rate of pay $1.50 per diem	"	1 Jan 43	"	8A-29 Mar 43
3 May 43	"	"	Chge Add. N. of K	"	3 May 43	"	15. 12 May 43
13 May 43	"	"	SOS to 1CACRU-CMHQ Crse 1047 Ser 3 Dr Mechs- No 3 Tech Trg Gp-(6 wks)	"	13 May 43	"	17 - 21 May 43
		1 C.A.C.R.U.	T.O.S. from 32 Recce Regt on Crse	"	14 May 43	"	114 20 May 43.
			Ret. from Crse	"	24 Jun 43	"	144 24 Jun 43
			S.O.S. to 32 Recce	"	1 July 43	"	149 1 July 43
3 Jul 43	Tech	32 Recce	T.O.S. from 1 CACRU	Field	5 Jul 43	Tpr	2 1 26/5 Jul 43
5 July 43	ITB	"	Qual Dvr Mech MV "C"	"	23 Jun 43	"	29 - 22 Jul 43
23 Aug 43	3011	"	Stat L.P. Dr Mech MV "C"	"	2 Jul 43	"	35 - 3 Sep 43

SERVICE AND CASUALTY FORM

M.F.M. 4 (a) (Part II)
40/P & S/412 (2640)

(PART II)

Regiment or Corps 22 Cdn Recce Regt (R.M.R.) Regimental Number D76725

Substantive Rank Tpr Surname Somerville Christian Names J K

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 shown
21 Jan 44	30 Lt	22 Recce	Awarded Canadian Volunteer Service Medal and Clasp	UK	15 Jan 44	Tpr	5-31 Jan 44
16 Mar 44	"	"	SOS to Reinf Dre 21 CAR (Dr Mech MV "C")	"	18 Mar 44	"	15-28 Mar 44
"	2 Ech	Offr Instr 21 CAR	TOS from 22 Recce Regt (Dr Mech MV "C")	Field	19 Mar 44	Sdsm	14-24 Mar 44
14-6-44	CR	"	SOS to X-4 List CAC(C) (D Sqn) 25 CA DR (Dr Mech MV "C")	"	1 Jun 44	"	27-31 May 44
18 Jun 44	X4 CAC(C)	25 CA DR	TOS from 21 Armd Regt (Dr Mech MV C)	"	9 Jun 44	"	22-12 Jun 44
	X-4 CAC(C)	25 CA DR	Qual. Dvr Mech TK "C"	"	29 June 44	"	26-17 July 44
	X-4 CAC(C)	25 CA DR	Cancs & Dras T.P. Dvr MV "C"	"	28 June 44	"	26-17 July 44
	X-4 CAC(C)	25 CA DR	Granted T.P. Dvr Mech TK "C"	"	29 June 44	"	26-17 July 44
	✓	✓	Embarked U.K 22 Jul 44 Disembarked France		23 Jul 44		35-21 Aug 44
	X4 CAC(C)	25 CA DR	SOS to 28 CAR (Dvr Mech TK "C")	Field	10 Aug 44	✓	35-21 Aug 44
		28 CAR	TOS from X4 List CAC(C) (Dvr Mech TK "C")	"	11 Aug 44	2 Lt	36/44
		"	SOS to X6 List CAC "C" (MISSING) Dvr Mech TK "C"		10 Oct 44	"	50/44
		X6 CAC(C)	TOS from 28 Armd Regt (Dvr Mech TK "C")	Fd	11 Oct 44	Tpr	8/1 Jan 45
15 Jun 45	X-6 List	CAC(C)	SOS X-6 List deceased (presumed killed 10 Oct 44) Dvr Mech TK "C"	✓	11 Oct 44	Tpr.	1388/Jun 45.

(COPY)

No. D-76225 Name SOMERVILLE, J.T. Sqn., Battery, or Company "C" Corps R.M.R. (MG)

Date of enlistment 6-OCT-39 G.C. Badges Service or Proficiency Pay

M.F.M. 6
(A.F.B. 122)
500M—8-39 (1703)
H.Q. 1772-45-18

Date of last entry in Company Conduct Sheet | No. and date of last drunk | Period not reckoning towards freedom from extra fine | Sheet No. 1 | Signature O.C. Company, etc. Capt Tumpin Mt for MAJOR COMDG. 'C' COY THE ROYAL MONTREAL REGT. (M.G.) | Character

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
SUTTON	23-AUG-41	Pte.		(Sec. 40) Neglect To Prejudice. Involved In An Accident With a W.D Vehicle.	D-76645 Pte. White.	Forf. 4 days Pay	24-Sep-41	Lt. Col. J.A. Calder (Cmd)	
At the end of two years Service a New Conduct sheet was made out. There were the above Entries on the old conduct sheet.									
						Capt Tumpin Mt for MAJOR COMDG. 'C' COY THE ROYAL MONTREAL REGT. (M.G.)			
IN The Field.	14MAY-42	Pte.		Neglect. (AA-Sec. 40) When Ordered To Remain Concealed He Slept in The Open.	D-76097 CSM. McIntosh.	ADMONISHED.	14MAY-42	MAJOR J.M. LAING.	

The above is a certified true copy of the Original MFM-6 now held. Capt Tumpin Mt for MAJOR COMDG. 'C' COY THE ROYAL MONTREAL REGT. (M.G.)

(P.T.O.)

NO D.76725 Rank Trooper Name SOMERVILLE, John Kermack

Unit C.A.C. Date of death 10th October, 1944.

Died at Belgium

Cause ~~For official purposes presumed~~ killed in action.

Death occurred on strength of Forces H.Q. 405-S-28049

N/K Mrs. Doreen A.M. Somerville, Relashionship Widow

Address 52 Oak Hill Road, Sutton, Surrey, England.

Remains buried in Cdn.Perm. Mil.Cem. Adegem, Belgium Cemetery

MR: 043978 (sheet 21-31 Zeebrugge-Brugges

~~1/50000 GSGS~~ 4040 Plot 11 Row F, Grave 4

Grave location

CHK

OVER

BURIAL REPORT TO N.K. ——————→

RETURN TO BUR. OF STAT. JAN 22 1946

ROYAL MESSAGE DESP'D. JUN 25 1945

CAN. MESSAGE DESP'D. JUN 7 1945

Now known as,
Adegem Canadian Military Cemetery,
Adegem, Belgium.

Grave 4, row F, plot 11.

Photographs
Despatched
NOV 8 1947

10M-1-45 (M-4608)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

MEMORIAL BAR

DATE DESP

(1)

REGN. NO 2794

(1) MEDALS

PERSON ENTITLED TO Mrs. Doreen Somerville Widow

ADDRESS: 52 Oak Hill Road, Sutton, Surrey, Eng.

(2) MEMORIAL CROSS

WIDOW Mrs. Doreen A.M.Somerville, (ENGLISH)

1970 52 Oak Hill Road,

ADDRESS: Sutton, Surrey, England.

(2)

DESP. JUN 28 1945
REGN No. 20629

(3) MEMORIAL CROSS

MOTHER Mrs. Mary H. Somerville, (ENGLISH)

1970 2140 Northcliffe Ave.,

ADDRESS: MONTREAL 28, Que.

(3)

DESP. JUN 28 1945
REGN No. 20630

499. 28/10/49.

CB.

10-10-44

AWARDS—CANADIAN ARMY (ACTIVE) M 1970

500M—1-44 (3467)
H.Q. 1772-45-8

FILE NO. 405-S-28,049

SURNAME (IN BLOCK LETTERS) / CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
SOMERVILLE John Kermack	D-76725	Tpr.	C.A.C.

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

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

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

CONTINUATION CARD M.F.M. 14

(4)

Regimental No. D16725 Name SOMERVILLE John Klomack Tpr

Part II D.O. No.	Part II D.O. Date	PARTICULARS OF CASUALTY
26	5-7-43	TOS from 1 CACRU wef 2-7-43
35	3-9-43	Granted T.P. Dr Mech MV Grd "C" wef 2-7-43
48	10/11/43	7 days P.L. & R.A. wef. 27 Oct. 43 Not 43
15	20-3-44	A.O.S. to G.G.F.G. Dy 18.3.44
14	24-3-TOS	21 CAR (GGFG) R.I. Dr Mech MV "C"
	SOS	21 CAR to 25 T.D.Regt wef 1 June 44. Dr.Mech MV"C"
		DOS. 1st. LIST. D.SQN. 21 CADR. 2.6.44.
		Qual Dvr mech 1st Cl eff. 29 June HH
		grant J/P Dvr mech 1st "C" 29 June HH
		SOS 1st List to 28 CAR wef. 10 aug 44
		TOS 28 CAR. BCR. WEF 11 AUG 44 (Dr. Mech 1st C)

M.F.M.—14A
40/P&S/67 (3400)

Part II D.O.		PARTICULARS OF CASUALTIES
No.	Date	
		SO 228 can to X-6 List Cac (c) Lemf 100 ex 44 (Th. Mud Fish Oil)

CONTINUATION CARD M.F.M. 14 (2)

Regimental No. D76725 Name SOMERVILLE John Kennack Tpr.

Part II D.O. No.	Part II D.O. Date	PARTICULARS OF CASUALTY
1	7-10-39	TOS RMR. (MG) wef. 6-10-39
6	14-1-41	SOS CASF. (Canada) 8-12-39 & TOS on Disembarkation 18-12-39.
10(2)	5-7-40.	Furlough to 4-7-40. wef 27-6-40.
38	3-10-40	Leave. to 14-9-40. wef 6-9-40
27.	19-3-41.	—"— to 5-3-41. wef 26-2-41.
65	8-8-41	—"— to 9-7-41 wef 2-7-41.
78	3-10-41.	Awarded 4 days for Fraud FRI 14 9 (2) wef 23-8-41.
102.	26-12-41.	Leave. to 26-11-41 wef 19-11-41.
21	18-2-42	—"— to 25-2-42. wef 18-2-42
51	2-11-42	—"— to 17-6-42. wef 10-6-42
53.	9-7-42	Permission to Marry. wef 26-8-42

M.F.M.—14A
40/P&S/67 (3400)

(3)

Part II D.O. No.	Part II D.O. Date	PARTICULARS OF CASUALTIES
64.	28-8-42	Qual. driver i/c Wheeled Regt Board mef 13-3-42
69.	29-9-42	Prov leave to 23-9-42. mef 16-9-42.
69.	29-9-42	Married (Permission already granted to. Miss D.A.M. Oldham. 19-9-42
69.	29-9-42	Change address N of K. wife 19-9-42.
70.	6-10-42	" " Hill House Lapworth Rd, Lapworth NR. Birmingham. ENG
6.	2-2-43	Prov leave to 20-1-43 mef 13-1-43
8A	29-3-43	Regtl rate of Pay $1.50 per diem mef 1-1-43
10	7-4-43	Qual driver i/c mef 25-2-43
15	12-5-43	Change address N of Kin (wife). to 520 OAKHILL RD SUTTON, SURREY
17.	21-5-43	SOS to 1 CACRU for Mechs course #147. mef 13-5-43
154.	7-7-43	Qual driver Mech MV Sect "C" mef 23-6-43
149.	1-7-43	SOS to 32 Recce Regt mef 1-7-43

3rd Can Recce Regt (RMR)

Reconstructed 191

NAME SOMERVILLE, JOHN, KERMACK.

REGIMENTAL NO. D76725 RANK TPR.

ENLISTED AT MONTREAL. PROMOTIONS, ETC. AND DATE Nil

DATE 6 OCT 39

IF SERVED PREVIOUSLY, STATE UNIT, ETC. Nil.

MARRIED, WIDOWER, OR SINGLE Married

NEXT OF KIN DOREEN AGNES MARY, SOMERVILLE RELATIONSHIP WIFE.

ADDRESS OF 57 OAK HILL RD. SUTTON.

ASSIGNMENT OF PAY, $ 25 C. (WIFE) wife & all 3 as above.

ADDRESS

DEPENDENT'S ALLOWANCE, ENTITLED OR NOT Yes

DATE APPLICATION FORWARDED TO DISTRICT PAYMASTER

M.F.M. 14
40/P & S/67 (2966)

IN WHOSE FAVOUR Wife.

CASUALTIES, ETC.

NATURE E. G. Absence, Promotions, Etc.	PART II, D.O.		REMARKS If in Hospital, Note Name Etc.
	No.	Date	
T.O.S. 1 Cadre Wef.	114	10-5-43	14-5-43 Mobile att. 3-T.T.A.I
Rtd from Cmdg. Comm.	144	24-6-43	1047 Secs. 3 Cas. Sec att.
J.G.P.3 Tech. Trg. Hps.			Wef. 24-6-43.
S.O.S. 1 Cadre wef.	150	1-7-43	1-7-43 to 3 x 6 Bn Area
Cas Sec. Mech. M.V.	29	23-7-43	"C" 23 June 43
9 Dys P.L. & R.A.	38	17-Sep 43	21-30 July 43
12 P.W.R.A. Wef	12	10-3-44	3/14/2/44

NAME .....

REGIMENTAL NO. ..... RANK .....

ENLISTED AT ..... PROMOTIONS, ETC. AND DATE.....

DATE .....

IF SERVED PREVIOUSLY, STATE UNIT, ETC.....

MARRIED, WIDOWER, OR SINGLE ..... Married

NEXT OF KIN ..... Wife RELATIONSHIP ..... Mrs. Doreen Agnes Mary Somerville

ADDRESS OF ~~5a Oakhill Rd, Bearbrook, Aston~~ Hill House, Lapworth Rd, Lapworth nr. Birmingham,

ASSIGNMENT OF PAY, $..... C.....

ADDRESS .....

DEPENDENT'S ALLOWANCE, ENTITLED OR NOT.....

DATE APPLICATION FORWARDED TO DISTRICT PAYMASTER .....

IN WHOSE FAVOUR.....

M.F.M. 14

CASUALTIES, ETC.

NATURE E. G. ABSENCE, PROMOTION, ETC.	PART II, D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, ETC.
	NO.	DATE	
T.O.S. 1 C.A.C.R.U. Wef.	114	20-5-43.	14-5-43.
R.T.U. from. C.M.H.Q.	144	24-6-43	1047 wef. 24-6-43.
S.O.S. 1 C.A.C.R.U. wef.	150	1-7-43.	1-7-43. to 32. C.R.C.
Rtd. Dvr. Mech. M.V.	29	23-7-43	"C" wef. 23 Jan 43
9 days P.L. & R.A. wef.	38	17-9-43.	21-30 Jan. 43.

#3

NAME Dommerville John Kormack

REGIMENTAL NO. D76725 RANK Pte Jpr

ENLISTED AT Montreal PROMOTIONS, ETC. AND DATE

DATE Oct 6th 1939

IF SERVED PREVIOUSLY, STATE UNIT, ETC.

MARRIED, WIDOWER, OR SINGLE ~~Single~~ Married 19 SEP 42.

NEXT OF KIN ~~Mrs. Mary Sommerville~~ RELATIONSHIP ~~Mother~~ WIFE

ADDRESS OF ~~2140 Northcliffe Ave Mtl~~

ASSIGNMENT OF PAY, $ ~~20.00 April 1940.~~ ~~23.00 FEB 43~~ $25.00 Oct 43 C.

ADDRESS ~~Mrs. Mary Helena Somerville, 2140 Northcliffe Ave. Montreal.~~

DEPENDENT'S ALLOWANCE, ENTITLED OR NOT ~~Not claimed.~~ Yes - Pte. WIFE

DATE APPLICATION FORWARDED TO DISTRICT PAYMASTER 24 Sep 42.

IN WHOSE FAVOUR WIFE:

A.P. to wife: Mrs. Doreen Agnes Mary Sommerville, Pte. No. W132400

~~2140 Northcliffe Ave, Montreal, Que.~~

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.
SEC 40 (A.A)	E078	3-10-41	FORF. 4 days pay
Remission to money o.c.f 26 Aug 42.	53	9-7-42.	Duties Ration Agreed Accepted
Quad. Ldr 1/C 7 Days P/L with R.A.	44 E.O.6	28-8-42 27 Feb. 43	13 to 20 Jan 43
1 Jan 43 Dec Pay to $1.50	8A	29-3-43	
Quad. Ldr 1/C (T) 25.2.43	10	7-4-43	
S.O.S. to 1 Can Rec mef. 13 May 43	AFW 3011	13 May 43	
S.O.S. 1 C.A.C.R.U. to 32 C.R.D.	149	1-7-43	mef 1-7-43

File No 405-5-28049

P.A.

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. D 76725 Name Somerville, John Kermack

Rank on Discharge _____ Date of Discharge _____

Authority for Discharge or Retirement Deceased

Served in:

				Non-qualifying service
Canada	from	6-10-39	to 8-12-39	
	from		to	
United Kingdom	from	9-12-39	to 22-7-44	
	from		to	
Italy	from		to	
Northwest Europe	from	23-7-44	to 10-10-44	K/A
	from		to	
	from		to	

Eligible for award of:

1939 - 45 Star Ok

~~Italy Star~~

France-Germany Star Ok

Defence Medal Ok

War Medal Ok

Canadian Volunteer Service Medal with clasp Ok

M

NO RIBBON DESPATCH

Verified by Edna Lawe

Date AUG 30 1946

Carded AUG 31 1946

IIA 165

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

APPLICATION FOR PERMISSION TO MARRY

(one copy only to be completed)

June 25th 1942
(Date)

1. I, D76725 (Number) Private (Rank) Somerville (Name) J. K. (Initials)
Royal Montreal Regt. (M.G.) "C" Company (Unit) hereby apply for permission to marry Private Doreen Agnes Mary Oldam W/132400 (Proposed wife's name in full) of A.T.S. Signals Gatesby House Lapworth Rd. Lapworth Nr. (Birmingham) 54 OAKHILL ROAD SUTTON SURREY. (Proposed wife's address in full)

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

(a) PARTICULARS OF SOLDIER

(i) Date of birth July 17 1920

(ii) Date of enlistment Oct. 6 1939

(iii) Domicile (place of permanent residence) immediately prior to enlistment
2140 Northcliffe Ave. N.D.G. Montreal Quebec Canada.

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

Bachelor

~~Widower~~

Name of deceased wife .....

Date of death of deceased wife .....

Divorced

Name of former wife .....

Date of divorce decree .....

Place where divorce granted .....

(v) Educational standing 1st. Year High.
(Highest standing secured at school)

(vi) Training .....
(State qualifications for profession, business, trade, etc.)

.....

(vii) Employment at time of enlistment Stock-keeper

(viii) Average weekly earnings at enlistment $12.50

(ix) If unemployed on enlistment give particulars of prior employment and earnings .....

.....

.....

(x) If history does not disclose probable ability to maintain family after discharge from Army state how it is proposed to do this Proposed that wife remain with parents here after my return to Canada until I have established myself

.....

RECEIVED
JUL 10 1942
Canadian Records
LONDON.

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

(1) Name or names of dependents .....

.....

(2) Relationship of dependents ..... N/A .....

.....

(3) Amount of dependents allowance .....

(4) Amount of assigned pay ..... $20.00 .....

(5) How and by whom will dependents be supported after marriage .....

N/A.

.....

(b) PARTICULARS OF PROPOSED WIFE

(i) Date and place of Birth ..... July 12 1923 .....

(ii) Name and address of nearest relative ..... Mrs E. Oldam .....

..... 52 Oakhill Road Sutton Surrey Eng. .....

(iii) How long have you known her ..... 21 months .....

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

as set out in Para. 2(a) (iv) above, and that I am legally free to marry ..... Doreen Agnes .....

..... Mary Oldam. .....
(Name of proposed wife)

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

..... J.K. Somerville .....
(Signature of applicant)

(NOTE) (i) A certificate of the proposed wife's good character, signed by a responsible citizen, such as a clergyman, public official, school teacher or employer must be attached to the application.

(ii) If the proposed wife is under the age of 21 years the written consent of her parent or guardian must be attached to the application.

(iii) If the applicant is under the age of 19 years the written consent of his parent or guardian must be attached to the application.

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

The foregoing requirements are for military purposes only. The parties to the proposed marriage, particularly when either one or both of them are under the age of 21 years, should consult a local solicitor or other competent authority upon the requirements to conform to the laws of the country where the marriage takes place.

STATEMENT TO BE SIGNED BY PARENT OR GUARDIAN OF PROPOSED WIFE

June 15 ..... 1942.

I, GLADYS EMILY OLDAM MOTHER ..... of D.A.M. OLDAM ..... declare that I have read
(Name in Full) (Mother, Father or Guardian) (Name of Proposed Wife)

over the above application of D/6/25 PTE SOMERVILLE J.K. .....
(Number, Rank, Name and Initials of Applicant)

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

..... M Mrs. E. Oldam .....
(Signature)

52 Oakhill Rd. Sutton. Surrey.
(Address)

RECOMMENDATION OF COMMANDING OFFICER

I recommend that D76725, Pte. Somerville, J.K. be granted permission to marry Miss Doreen Mary Agnes Oldham of Sutton, Surrey

Date 22 Jun 42 Signature J.A. Calder

(J.A. Calder) Lt. Col.
Commanding Commanding R.M.R. (MG)

DECISION OF HIGH AUTHORITY

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

Permission is granted for D.76725 Pte Somerville, J.K. ~~xx~~ to marry Miss Doreen Mary Agnes Oldham on or after 26 August, 1942.

Date 26 June, 1942. Signature A.E. Walford

Brigadier,
Commanding for G.O.C., 1 Cdn Corps.

Reviewed Cadet.

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

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

H.Q. 405-S-28049 f.d. 163
D.R. 2 (C)

CERTIFICATE OF DEATH

THIS IS TO CERTIFY that according to information received at the Department of National Defence from the overseas authorities, No. D.76725, Trooper John Kermack SOMERVILLE, of the Canadian Armoured Corps, Canadian Army, was killed in action on the 10th of October, 1944.

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

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

Department of National Defence,
OTTAWA, Canada.
February 25th, 1946.

5th June, 1945.

Mrs. Mary H. Somerville,
2140 Northcliffe Avenue,
Montreal 28, Quebec.

Dear Mrs. Somerville:

I deeply regret to inform you that no further news has been received relative to your son, D76725 Trooper John Kermack Somerville, who has been officially listed as missing since the 10th day of October, 1944.

The Army Council have been regretfully constrained to conclude that he gave his life in action against the enemy in the Western European Theatre of War, and it is consequently being recorded that D76725 Trooper John Kermack Somerville is now for official purposes presumed to have been killed in action on the 10th day of October, 1944.

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

We pay tribute to the sacrifice he so bravely made.

Mem x - wife - mother
7-6-45

Yours sincerely,

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

/EMA

18

H.Q. 405-S-28,049
D.R. 2(b)

21st September, 1945.

Dear Mrs. Somerville:

Previous correspondence from this Headquarters advised your husband, D.76725 Trooper John Kermack Somerville, was being "presumed killed in action". We have now received additional information from Canadian Military Headquarters which states his records are being amended to indicate he was killed in action on the 10th of October, 1944.

May I take this opportunity to extend my sincere and heartfelt sympathy for the irreparable loss you have suffered.

Yours sincerely,

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

Mrs. Mary H. Somerville,
2140 Northcliffe Ave.,
Montreal 28, Que.

FDB/RC

24

File No 405-S-28049

R E B U R I A L

NO D76725

RANK Tpr.

NAME SOMERVILLE, J.K,

NAME OF CEMETERY Adegem Canadian Military cemetery,

LOCATION OF CEMETERY Adegem, Belgium.

GRAVE LOCATION Grave 4, row F, plot 11

AUTHORITY 54-27-88-2 Vol. 18

Reburial list.

Noted DR 2(a)

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: IN THE FIELD (BELGIUM)

Official name of civil municipality or township:

Place an X over the word which applies to this municipality or this territory

City | Town | Village | Parish | Township

Street: No.: Hospital or Institution:

2. LENGTH OF STAY

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

3. NAME OF DECEASED

Surname: SOMERVILLE (Block letters)

Given names: John Kermack

4. RESIDENCE

Street: Northcliffe Ave. No.: 2140

Official name of civil municipality or township: Montreal

Municipal county: Province: Que.

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

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

10. BIRTHPLACE (Province or Country): Que.

11. DATE OF BIRTH: July (Month) 17th, (Day) 1920 (Year)

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

OCCUPATION

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

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

15. Date deceased last worked at this occupation

16. Total years spent in this occupation

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

19. Place of burial, cremation or removal: 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) 19.... (Year)

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: October (Month) 10th, (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.... Date ....19....
(State which)

Manner of injury....
(How sustained)

Nature of injury....

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

Signed ....M.D.

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

OVERSEAS CASUALTY CANADIAN ARMY

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

E. Jamieson Lieut

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

Director of Records, Dept. of Natl. Defence

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)

JAN 22 1946

C.M.H.Q. 1000 : 42
A.F.A.3676 (Cdn. Revision)

ROAD ACCIDENT REPORT

PART I—DRIVER TO FILL IN IMMEDIATELY AT SCENE OF ACCIDENT

Do not admit liability. Give your name and unit to other party and refer him to Canadian Claims Commission, 2 Cockspur St., Trafalgar Square, London.

Date of Accident..... Aug. 23/41 ..... Time..... 0845 hrs .....
Place of Accident..... Sutton High Street, Sutton Surrey .....
No., Rank and Name of Driver..... D-76225 Pte. J.K. Lamarche .....
Unit..... Royal Montreal Regt (M.G.) ..... Formation..... Canadian Corps Tps .....
Vehicle, W.D. number..... 42-4211497 ..... Make..... Chevrolet ..... Type..... 15 cwt .....
Exact nature of duty..... driving storeman to his duty .....
..... Journey from..... Billets ..... to..... T.O.'s .....
Work Ticket No..... Authorized by .....
Loaded or unloaded..... unloaded ..... Speed of Cdn. Vehicle..... just starting .....
Condition of Road Surface..... dry ..... Speed of other vehicle..... none involved .....
Visibility, (Clear, Foggy, raining, etc.)..... Clear ..... Density of Traffic..... light .....
Warning given, if any, and how .....
LIGHTS. Left front..... State whether full or dim .....
Right front..... .....
Rear..... .....
Was reflector displayed? .....
Was the accident reported to the Police..... No. ..... Where? .....

WITNESSES — NAMES — ADDRESSES (Obtain signed statements and attach)

D-76645 - Pte. J. White - Royal Montreal Reg't (M.G.) HQ Coy.

OTHER VEHICLE(S) PERSONS & PROPERTY INVOLVED: (BE CERTAIN TO OBTAIN NAMES OF DRIVER AND OWNER).

Registration No..... Make..... Type .....
Name of Insurance Company .....
State whether collision coverage with or without excess .....
Name of driver..... Address .....
Name of Owner..... .....
Nature of damage claimed, if any..... .....
....
....

42-44637 M
P

Names — Addresses

Persons injured or complaining of injuries..... .....
.....
Damage to other property..... wooden frame of awning splintered and d
..... iron support bent .....
Owner..... Hiltons ltd ..... Address .....

DRIVER WILL ALSO COMPLETE STATEMENT AND DIAGRAM OVER PAGE

DRIVER'S STATEMENT

BE SURE ALL PREVIOUS QUESTIONS HAVE BEEN ANSWERED

State here fully what actually occurred

On the morning of Aug 23/41 I, D-76725 Pte. J.K. Somerville driving W.D. vehicle CZ-4211997, I drove the lay storeman to his duty at the T.O.'s. After letting him off I turned round and had to back out of the car park.

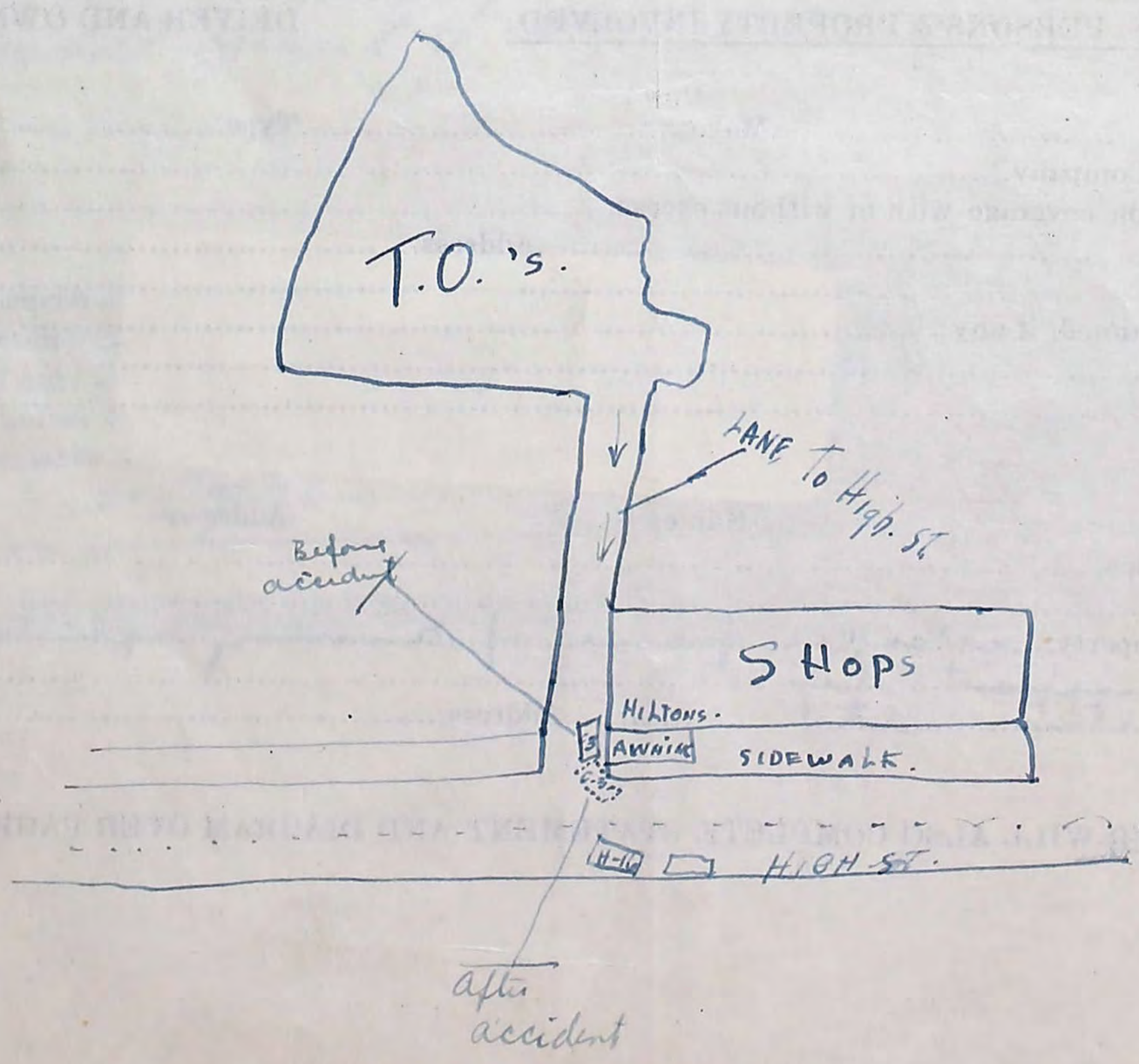
when I got to the High Street, H-16, driven by Pte J. White, D-76645 was just turning to head in. I stopped and he backed out on to the High

As he was I could pass him I had to cut short and doing so my upper left hand corner of my canvas caught on the window shade of Hiltons that Ltd, 132 High St, damaging the shade to the extent of a bent iron arm support and splintered wood from

J.K. Somerville

SPACE FOR DIAGRAM

Show—1. Position of vehicles before and after accident.
2. Direction of Travel
3. Skidmarks
4. Width of Roads
5. Minor & Major Roads
6. Location of traffic lights, warning signs, etc.



DAMAGE AND INJURY REPORT NOTES

PART II DAMAGE TO CANADIAN ARMY VEHICLE

Vehicle No.....Make.....Type.....
Particulars of damage

Nil.

Estimated cost of repairs: Labour (No. of hours) Materials Overhead
TOTAL £_____

Any special remarks

Date..... (Signature).....
(Workshop, Unit or Det.)

PART III—DAMAGE TO OTHER VEHICLE

Vehicle No.....Make.....Type.....
Particulars of Damage. (To be checked by competent officer immediately following accident).

Estimated cost of repairs on the basis of ordinary commercial charges
(Number of hours required to complete repairs.....).
Labour Materials TOTAL £_____
Any special remarks.

Q-Cog.

Date..... (Signature).....
(Workshop, Unit or Det.)

PART IV—DAMAGE TO OTHER PROPERTY

Location ..... Sutton High Street.....
Owner.....Hiltons Ltd..... Address.....132 High Street.....
Particulars of damage.

The wooden frame of awning was splintered and the iron arm support on right hand side bent.

Estimated cost of repairs: Labour Materials
TOTAL £_____

Date..... (Signature).....

.....
(Unit or appointment)

PART V—INJURY TO PERSONS

(NOTE:—The Reporting Medical Officer should state whether or not he has actually examined the injured person, or persons. If he has not, the source of his information should be given.)

Name.....Age.....Occupation.....

Address.....

If under age 21, Name of Parent.....

Address.....

Particulars of injury: history of the case since the accident and present condition:

Period of actual or anticipated absence from work.....

Whether permanent disability is likely to result and, if so, to what extent.....

.....

Any special remarks:

Hospital, if any.....

Date.....Signature of M.O.....

PART VI—FOR COMPLETION BY COMMANDING OFFICER

(i) RESPONSIBILITY: (Opinion must be clear cut and definite with reasons. "THE HIGHWAY CODE" will be found helpful. Fatal or other serious accidents must be reported immediately to the Formation Claims Officer).

Driver of W.D vehicle responsible for causing damage
Store in question is a branch of S. HILTON & SONS LTD. and
manager declined to allow unit to effect repairs without
first consulting their head office. Manager was to
advise unit when H.O. had been consulted but unit
received no further word until bill for repairs, which
had in no way been authorized was received. It is
considered amount of bill exceeds apparent extent of damage.

(ii) Length of experience of driver in Canada 3 years In England 18 months

(iii) Disciplinary action taken and stoppages (if any) awarded or recommended Charged under Sect 40 AA Awarded four days forfeiture of ordinary pay

(iv) Number of previous accidents recorded none

(v) Remarks (will Court of Inquiry be held, etc.?).....

Date 24 Sep 41 (Signature) A. Adams Lt Col.
Command and Unit Coud. RMR (M6)

PART VII—DECISION OR RECOMMENDATION OF FORMATION COMMANDER

.....

Date..... G.O.C.....

Somerville 24 John K.

Solely for use on Active Service. This Will page must NOT be used until you have been placed under orders for Active Service.

WILL

(For use if the soldier has not already made a Will or wishes to alter one already made. See instructions on page 23).

In the event of my death I give the whole of my effects to my Step-mother Mrs. Mary H. Somerville 2140 Northcliffe ave. Montreal Que. Canada

Signature John K. Somerville

Rank, Regt'l Number Private O 76725

Regiment Royal Montreal Regiment

Date December 10, 1939

FORM No. 1

Register No. D-14561 Nominal Roll No. D-350

H.Q. File No. 405-S-28049

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
D76725	TPR	SOMERVILLE	JOHN KEARMACK

REASON FOR TERMINATION OF SERVICE:

1st Enlistment ..... (Presumed Killed) ..... CARO ..... ( )

2nd Enlistment ..... CARO ..... ( )

3rd Enlistment ..... CARO ..... ( )

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. 6 OCT 39	T.O.S.	T.O.S.
S.O.S. 10-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	64	nil	64
Overseas Service	1768	4	1764
Totals	1832	4	1828
Add Non-qualifying Service			4
Total Service			1832

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 10-OCT 44 2. Date S.O.S. Overseas .....

REMARKS:

KILLED IN ACTION 10-OCT 44

Computer's Signature Peter Acorth (CPC)

Checker's Signature .....

Date Computed 10 AUG 45

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

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

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. 10-OCT44 S.O.S. S.O.S.

AWP			23 AUG 41		4
				Total	4

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER D.76725 RANK Trooper SERVICE UNIT 28th Armoured Regiment (BC Regt). C.A.C. (C.A.).

NAME SOMERVILLE, John Kermack

DATE OF BIRTH 17-7-20 DATE OF ENLISTMENT 6-10-39

MARITAL STATUS Married RELIGION Presbyterian

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Wife NAME Mrs. Doreen A.M. Somerville,

ADDRESS 52 Oak Hill Rd., Sutton , Surrey, England. ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME Mrs. Mary H. Somerville (Mother),

ADDRESS (IF SOLDIER MARRIED OVERSEAS) 2140 Northcliffe Ave., Montreal 28, Quebec.

AUTHORITY CAS. SIG. NO. 9568A H.Q. 405-S-28,049

CASUALTY DETAILS DATE

Previously reported missing now for official purposes presumed Killed in action. 10-10-44

WESTERN EUROPEAN THEATRE OF WAR

BTC

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

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

O/S with Royal Montreal Regt. DATE 4-6-45

S/L 22

DIRECTOR OF RECORDS

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

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 Somerville John Kermack
(Surname first—Christian names in full—Block capitals)

(2) Regimental Number No.D.76725

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

(4) Are you married? no

(5) If married, state,

(*a*) Full name of your wife N.A.

(*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 N.A.

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? no

If so, state name and address -

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

(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. -

Also state reason he has no other means of support -

(14) Is your mother alive? yes

If so, state name and address Mary Helena Somerville
2140 Northcliffe Ave Montreal

(15) If your mother is a widow, are you her sole support? no

(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? yes

If so, in what Company? Metropolitain Life

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.

J.L. Somerville
(Signature of officer or man)

Date October 7th 1939

J.C. Slessor
Officer Commanding

Date October 7th 1939

OCT 16 1939

THE ROYAL MONTREAL REGIMENT (M.G.)

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

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

4
ARMY

DECEASED MEMBER'S NAME: John Kermack (CHRISTIAN NAMES) SOMERVILLE (SURNAME)

REGISTER NO. D-14561
FILE NO. 405-S-28049
DATE 6-9-45
SERVICE NO. D-76725
FINAL RANK OR RATING Tpr.
DATE OF DISCHARGE 10-10-44

PAYEE Mrs. Doreen A.M. SOMERVILLE,
ADDRESS 52 Oakhill Rd., Sutton, Surrey, Eng.

DATE OF TERMINATION OF OVERSEAS SERVICE 10-10-44

		$	¢
A. TOTAL QUALIFYING SERVICE	NO. OF DAYS 1828/30 EQUAL TO 60 COMPLETE PERIODS AT $7.50	450.00	
B. QUALIFYING OVERSEAS SERVICE	No. OF DAYS 1764 LESS 28 INELIGIBLE DAYS, EQUAL TO 1736 DAYS @ 25c. PER DAY	434.00	
	SEE PAR. 2 OVERLEAF FOR EXPLANATION	884.00	
C. SUPPLEMENT FOR OVERSEAS SERVICE			
	DAILY RATES AT DISCHARGE		
	PAY $ 1.50		
	SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.25		
	ADDITIONAL PAY $ .25		
	$		
	$		
	DEPENDENTS' ALLOWANCE 1/30 OF $ 37.20 $ 1.24		
	TOTAL $ 4.24 X7 = $ 29.68		
	NO. OF DAYS 1764/183 X$ 29.68	286.10	
D. WAR SERVICE GRATUITY		1170.10	
E. DEDUCTIONS	OVERPAYMENT OF PAY AND ALLOWANCES $		
	DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $		
	OTHER DEDUCTIONS $		
F. TOTAL AMOUNT PAYABLE		1170.10	

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
[illegible]	

TREASURY	
CHECKED BY	DATE
J S Forrest	12/9/45

[illegible]
SERVICE REPRESENTATIVE

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

CANADIAN ACTIVE SERVICE FORCE

District.....

OVERSEAS

Dispersal Area.....

LAST PAY CERTIFICATE

(All Ranks)

Regtl No. D76725 Rank and Name SOMVERVILLE J.K. Pte.

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

~~Transfer~~ or Discharge) ~~to~~ on 10th.October 19 44.

Reason Death Authority : C.C.L." A" 582 d/3rd June.1945.

The following is a statement of the account of the above-named from 1st October. to 31st October. 1944. the inclusive date of transfer or discharge.

Particulars	Dr Amount		Particulars	Cr Amount	
Balance Dr from last account			Balance Cr from last account	238	99
First Monthly Payment			Regimental Pay 31 days at $ 1.50	46	50
Casual Payments			Tradesmen's Pay 31 days at $ .25¢	7	75
Payments on Transfer or Discharge			Additional Pay (Give Particulars) ..... days at $		
Assigned Pay	25	00			
Regimental Charges			Allowances (give particulars) ..... days at $		
Public Stoppages (give particulars) :					
			Def.Pay Interest	13	38
To Balance Cr Free	81	62			
To Balance Cr Deferred	200	00	By Balance Dr		
Total	306	62	Total	306	62

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

Remarks

Assnd Pay $25.00 (W) Stopped eff Nov.44.

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

Compiled by B.Mc.Kercher.

Checked by [illegible]

Date 30th June.1945.

Certified correct D. A. Fowler
for Chief Treasury Officer, Overseas

MW

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY JG

Name: SOMERVILLE. John K. No.: D76725
Surname Christian Names

Tpr. C.A. O/S 10-10-44
Rank Unit Date of Death

AMOUNT

L.P.C. $ 286.62

Date: 6-9-45

Other Credits

Total 286.62

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
½	Step-mother	Mrs. Mary H. Somerville, 2140 Northcliffe Ave., Montreal, Que. (Beneficiary under will)	143.31
½	Widow	Mrs. Doreen Somerville, 52 Oak Hill Rd., Sutton, Surrey, England. (Community of property)	143.31

P4. TO TREAS. 15/10/45

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	286.62

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

20

Montreal, Oct. 8, 1945

Director of Records
Ottawa, Ont.

(1)

Sir:

In reply to your letter of Sept. 21. in which you state that my son D76725 Tpr. John Kennack Somerville was killed in action on Oct. 10, 1944 I would like to know where he was killed as I have had no word from the Capt or Chaplain to let me know the name of the place. After being in the Army five years and four days he should have a grave at least, or a mark where he was killed.

Would you kindly let me know how I can find this out?

Sincerely yours.

Mrs. Mary H. Somerville
2140 Northcliffe Ave.
Montreal, Que.

H.Q. 405-5-28-049
D.R- 2(b)

Taken 14/10/45

(2)

Cas
Passed pls Photo folio 28.
Following
20

13/10/45