

D81128
BEST
HARRY PHILIP

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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

Section A—GENERAL INFORMATION

- PLEASE LEAVE BLANK
1. (a) Print name in full..... **BEST Harry Phillip**..... (b) Reg'l. No. **D-81128**
 2. (a) Arm of service..... **Army**..... (b) Unit..... **R.H.R.**..... (c) Rank..... **Cpl**
 3. (a) Date of birth..... **2 May 1918**..... (b) Have you any dependents?..... **No**..... (c) Place of residence at time of enlistment..... **Montreal, P.Q.**
 4. (a) Place of enlistment..... **Montreal, P.Q.**..... (b) Date of enlistment..... **9 Sep 1939**

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school..... **18 yrs**..... (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.)..... **12th 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?..... **Yes**..... (b) If so, for what occupation?..... **Commercial Creso**..... (c) Did you finish it?..... **Yes**..... (d) If you did not finish it, how long did you serve at it?.....
9. (a) What languages do you speak fluently?..... **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)..... **Not 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?..... **Yes**
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked..... **Clerk**..... (b) State how long you had worked at this trade or occupation..... **10 months**
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..... **1938 (May to Oct.)**
15. Give details of last employer, if any: Name..... **Rosemere Golf Club**..... Address..... **Rosemere P.Q.**
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)..... **Golf Club**
17. (a) If your last employment was in a business of your own, state nature and address of business..... (b) Date of discontinuing it.....

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

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

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

18. Name of employer..... Address.....
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.).....
20. (a) Your specific occupation..... (b) Number of years' experience at this occupation with any employer.....
21. (a) Did your employer promise definitely to give you employment on discharge?..... (b) Did your employer refuse to promise you employment on discharge?..... (c) Do you wish to return to your former employment?.....

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

22. (a) State nature of business, or professional practice..... (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?..... **None**..... (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?..... (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..... **Office Work.**

DATE..... **17th June**..... 194..... **3**..... SIGNATURE..... *[Signature]*.....
1st Officer, Records, C.H.R.

Mr. Harry Best,
 5249 St. Urbain St.,
 Montreal, P.Q.

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-B-30,531 FD 252

DEPARTMENT OF NATIONAL DEFENCE
 ESTATES BRANCH
 OTTAWA, ONT.

September 28 1944

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

Best, Harry Philip, Cpl. NO. D.81128

Canadian 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.

HO

C. Stevenson
 Director of Estates.

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT			
		NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative	
1	Widow of the Deceased.....				
2	Children of the Deceased and dates of their Births.....				
3	Father of the Deceased.....	Harry Martin Best	52	5249 St. Urbain St. Montreal, Que.	
4	Mother of the Deceased.....	Catherine Best	52	5249 St. Urbain St. Montreal, Que.	
5	Brothers of the Deceased	Full Blood	Patrick Alfred Best	24	Killed in Action, Italy, Oct. 12th, 1944
			William Albert Best L.A.C.	22	R.C.A.F. Edenvale, Stayner, Ont.
			Michael Kevin Best	19	Merchant Marine, Address Unknown
			Francis Brian Best	14	5249 St. Urbain St. Montreal, Que.
		Half Blood	None		
6	Sisters of the Deceased	Full Blood	None		
		Half Blood	None		
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.	Harry Phillip Best
9	Date of his birth.	May 2nd, 1918
10	Place and date of his marriage.	
11	Place and date of his parents' marriage.	Montreal, Que. May 3rd, 1917

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) Montreal, Que. (b) (c) (d)
14	Nature of employment before enlistment.	
15	State whether he owned the premises in which he lived, and, if so, where situated.	
16	Name place where deceased stated he intended to make his permanent home.	

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	
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?	
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.	
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.	
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

* 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.

H M Best { Signature of Informant
5249 St. Urbain St. Montreal Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief 26. m. Best

See above. { Name of informant } is the father of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at Montreal this 26th day of Oct. 19 44

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

William Byrd Qualification Priest at St. Michael's
Address 5580 St. Urbain St. Montreal

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

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

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

ORIGINAL
DUPLICATE
TRIPLICATE

M.F.M. 2
A.F.B. 271
168M-11-36 (9359)
H.Q. 1772-45-18

6

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

Unit 1st. (13) Bn. The Black Watch (RHR) of Canada D 81128

ACTIVE SERVICE

Regimental Number.....

CANADIAN ~~FIELD~~ FORCE

ATTESTATION PAPER

05
CPL.

- Surname.....BEST.....
- Christian Names.....HARRY PHILIP.....
- Present address.....5437 St Urbain St Montreal Que Canada.....
- Date of birth.....May 2nd, 1918.....
- Place of birth.....Canada Quebec Montreal.....
(Country) (County or Province) (Town or Township)
- Religion (state denomination).....Roman Catholic.....
- Trade or Calling.....Mar tender.....
- Married, Widower or Single.....Single.....
- Name of next of kin.....Mr Harry Best.....
- Relationship.....Father.....
- Address of next of kin.....~~5437 St Urbain St Montreal Que Canada~~.....
- Have you served in any Naval, Military or Air Force?.....No.....
- If previous war service, state arm, force and regimental particulars...No.....
- Do you now belong to or have you served in the Active Militia of Canada?.....No.....

OCCUPATIONAL HISTORY FORM COMPLETED

See chart p

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, HARRY PHILIP BEST 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.....Sept 9th, 1939.....

Harry Philip Best
(Signature of recruit) w. J. Macdonald
G. A. Marshall

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Harry Philip Best (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 9th day of SEPTEMBER 1939

RECEIVED
SEP 27 1940

W. J. Macdonald
Capt. B.W. J.C.

(Signature of Magistrate, Justice or Attesting Officer.)

(Office or Rank and Unit or appointment.)

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

FINGERPRINTED

Record of Service of BEST (Surname)

Harry Philip (Christian Names)

Regimental Number D81128

QUALIFICATIONS

EDUCATIONAL QUALIFICATIONS

Military none
 Business or Professional none
 Trade or Civil Bartender
 Technical none
 Languages English

High School } 2 yrs. } Graduation } Matric
 or } } OF }
 Collegiate } (years completed) } Matriculation } (specify)
 *College none
 *University none

*(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.

5505-

Report		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
9 Sep. 39	Recruit	Joined on appointment 1st Bn. The Black Watch (BWR) of Canada C.A.S.F.	Pte.	9 Sep. 39	1 RHC	Mtl.	B.O. 2	9 Sep. 39
15-3-40		Granted 14 days furlough from 14-3-40 to 28-3-40 (R.O. 82.)	Pte.	14-3-40	1 RHC	Toronto	B.O. 75	15-3-40
17-6-40	NDHQ G S 371	Embarked "ANTONIA"	"	17-6-40	"	Valcartier		
22-6-40	wife 16-6-40	Disembarked	"	22-6-40	"	Botwood fld		
25-7-40		Appointed Lance Corporal with pay.		25-7-40	1 RHC	Mfld. Airport.	B.O. 162.	25-7-40
14-8-40	Mov. 588 dated 3-8-40	Embarked on S.S. Duchess of Richmond.	Pte.	10-8-40	1 RHC	Botwood, fld.		
4-8-40	wire Defensor.	Disembarked at Halifax, proceeded to Aldershotm N.S. MD 6 ITC.	Pte	13-8-40	1 RHC.	Hlfx. N.S.		
22-8-40	H.C./ 23-3 M.D. 6	XXXX EMBARKED ON E/62	PTE	22-8-40	1 RHC	HALIFAX NS		
		S.O.S. C.A.S.F. CANADA	PTE	22-8-40	1 RHC	HALIFAX N.S.	B.O. 177	6-9-40
		T.O.S. C.A.S.F. OVERSEAS ON TRANSFER DISEMBARKED	PTE	23-8-40	1 RHC			
			PTE	4-9-40	1 RHC	GOUROCK SCOTLAND	B.O. 177	6-9-40

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 give details. no

CERTIFICATE OF MEDICAL EXAMINATION

Name in full Best, Harry Philip Date Sept. 9, 1939

Part 1. Information obtained from the recruit.

1. Age 21 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

Harry Philip Best
(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 dorsum right hand
2. Height 5 feet 8 1/2 inches. 3. Weight 139 pounds.
4. Complexion Fair Eyes Blue 5. Development Good Good
Fair
Poor
Hair Blonde
6. Chest measurement—Girth on full expansion 33 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 Good (one filling required)
10. The abnormalities (congenital and pathological) found on examination are as follows
None

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.....

Alfred Ahoy President *J. B. Bennett* Member *Samuel J. de Rosier* Member

VACCINATIONS, INNOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
18 Oct. '39			
25 Oct. '39	T.A.B. <i>Alfred Ahoy</i>		
1 Nov. '39	RE-EXAMINED; NORMAL URINE, EARS, <i>Alfred Ahoy</i>		
NOV 15 '39	REFLEXES; CATEGORY "A" <i>Alfred Ahoy</i>		
NOV 15 '39	VACC. SUCCESSFUL <i>Alfred Ahoy</i>		
NOV 20 '39	CHEST X-RAY NEGATIVE. <i>Alfred Ahoy</i>		
JAN 26 '40	TETANUS TOXOID 1 cc. <i>Alfred Ahoy</i>		
MAR 29 '40	TETANUS TOXOID 1 cc. <i>Alfred Ahoy</i>		
27 Oct. 41	Re Vac		

pension & compensation give details. *NO*

Statement of the Service of No. D. 51128

Rank L/Cpl.

Sheet No.

Name BEST, H.P.

M.F.M. 1 & 2 (a)
700 M-8-39 (1687)
H.Q. 1772-45-13

REPORT		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	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		Disembarked 4.9.40., T.O.S. Eng.,						
		23.8.40.	L/Cpl.	23.8.40	Blk.W.	Aldershot	D.O.177	6.9.40
		landing leave	L/cpl	7.10.40	Blk.W	Field	" 8	8.10.40
		Granted leave to 4 Jan 41	L/Cpl	26 Dec 40	Blk.W	Field	D.O.32	29 Dec 40
	Change of address house of kin.	5219 St. Urbain Street. Montreal, Quebec.	H/cpl	13 Jun 41	Blk W	Field	36	13 Jun 41
		Remanded AWL (8hr) 25 Aug 41 forfeit 1 days pay FRAI 149.4A	L/cpl	26 Aug 41	Blk W	UK	52	5 Sept 41
		Granted Leave (P-2)	L/cpl	18 25 Aug 41	Blk W	UK	62	7 Nov 41
		Arch to wear Good Conduct Badge	L/cpl		Blk W	UK	64	19 Nov 41
		P/leave P3 with war 3-10 Nov 41	L/cpl	3 Nov 41	Blk W	UK	73	24 Dec 41
		To be L/Cpl	L/Cpl	26 Oct 41	Blk W	UK	73	24 Dec 41
		awf up to E/F 86 am. W.T. School while att. course # 34	L/cpl	7 10 Jan 42	BW	UK	5	21 Jan 42
		Qual at Ex St. Cond. W.T. Sch. Course AA 34	L/cpl	10 Jan 42	BW	UK	14	6 Mar 42
		Appointed a/cpl	A/cpl	18 Mar 42	B.W	UK	19	27 Mar 42
		Leave P/4 now to 9 Feb 42	A/cpl	2 Feb 42	Blk W	U.K.	34	29 May 42
	Cancelled DO 48 8 July 42	Att. FAP from 1st B.W.	a/cpl	17 June 42	P. Scots	UK	46	2 July 42
		appt a/cpl	a/cpl	18 June 42	Blk W	UK	41	30 June 42
		Ceases to hold appt of a/cpl	a/cpl	17 June 42	Blk W	UK	41	30 June 42
		Attchd AALMG School. FAP ext pay on CMHQ Conty 2	a/cpl	8 June 42	Blk W	UK	43	10 July 42
		A Ceases to be attached as above	a/cpl	12 June 42	Blk W	UK	43	18 July 42

Statement of the Service of No.....

Rank.....

Sheet No.....

Name.....

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

REPORT		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	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		P/leave 7 days (P 5)	a/cpl	8/15 May 42	BLR W	UK	49	1 Aug: 42
		P/leave 7 days to 17 Aug: 42	A/cpl	10 Aug 42	BLR W	UK	55	28 Aug: 42
		Confirmed in rank of bpl	bpl	19 Sep 42	Blk W	UK	63	26 Sep 42
		Act. I.R.P. to H.Q. 5 C.I.R.U. to 22 Sep 42	cpl	20 Sep 42	Blk W	UK	65	10 Oct 42
		P. Leave 7 days	cpl	9 Nov 42	Blk W	UK	73	24 Nov 42
		att/dep to R.A.F. Regt. (Training of AA) plus AA-Platoon Course #15	cpl	23 Nov 42	Blk W	UK	78	8 Dec 42
		att/dep to Seaford W.I. School #15	cpl	13 Dec 42	Blk W	UK	80	24 Dec 42
		Att. gap to from 5 C.I.R.U.	cpl	1 Feb 43	2 C.I.R.U.	UK	3	4 Feb 43
	SOS	SOS to 5 C.I.R.U. posted to A Coy	bpl	31 Jan 43	Blk W	UK	12	17 Feb 43
	TOS	TOS from Black Watch	bpl	27 Feb 43	5 C.I.R.U.	UK	11	16 Feb 43
		On command to #1 bdm Octu Sel Centre	bpl	28 Jul 43	5 C.I.R.U.	UK	128	29 Jul 43
		On command to 1 COCTU	Cpl	31 Jul 43	5 C.I.R.U.	UK	131	3 Aug 43
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
	SOS	SOS to H. C.I.R.U.	bpl	16 MAR 44	5 C.I.R.U.	UK	58	17 MAR 44
bbs	TOS	TOS from 5 C.I.R.U.	bpl	17 Mar 44	H. C.I.R.U.	UK	79A	19 Mar 44
effo	SOS	SOS to 12 Bn. 2 C.B.R.G.	cpl	1 June 44	4 C.I.R.U.	UK	144	2 June 44
	TOS	TOS from X4 Lint 1 R						

Regimental No. DP 1128 Rank

Sheet No.

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

Name BEST. HP.

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc—	Rank Shown	Effective Date	Unit	Place	Authority	
					DO Number	Dated
<p>^{SOS} CPL TOS TOS from X List (IRHC) Embarked at... UK on... 5 Jul 44</p>	Cpl.	14 Jun 44	1 Bn BW	21A Sp.	32	26 Jun 44
<p>Disembarked at France on 6 Jul 44 Granted perm to marry Miss Marjorie Donnelly on or after 1 Sep 44</p>	Cpl Cpl	10 Jul 44	1 Bn BW 1 Bn BW	21A Sp 21A Sp	37 39	14 Jul 44 20 Jul 44
<p>m-135 SOS to X List IRHC Missing</p>	Cpl	28 Jul 44	R.H.G.	21A Sp	44	9 Aug 44
<p>Severely Reprimanded</p>	Cpl	17 Jul 44	R.H.G.	21A Sp	46	25 Aug 44
<p>SOS deceased - Killed</p>	Cpl	28 Jul 44	R.H.G.	AET	A 482	25 Aug 44
<p>SOS deceased - Killed in action</p>	Cpl	28 Jul 44	1 Bn BW	21A Sp	48	5 Sep 44

No D.81128 Rank Corporal Name BEST, Harry Philip

Unit Black Watch (R.H.R.) Date of death 28-7-44

Died at France

Cause Killed in action.

Death occurred on strength of Forces.H.Q. 405-B-30531

N/K Mr. Harry Best Relationship Father

Address ⁵²³⁴~~5249~~ St. Urbain St., Montreal, Que.

Remains buried in St. Martin de Fonenay Cdn. Cemetery Cemetery
7F/1 022604 Gr. 13, row 1, plot 1

Grave location OVER

BURIAL REPORT TO N.K. MAR 8 1946

RETURN TO BUR. CF STAT. FEB 23 1945

ROYAL MESSAGE DESP'D. SEP 16 1944

CAN. MESSAGE DESP'D. SEP 11 1944

REBURIAL

Bretteville-sur-Laize Cdn. Mil. Cem.,
Bretteville-sur-Laize, France.

Grave 3, Row F, Plot 3.

HI & CR Form Despd. OCT 10 1946

Photographs
Despatched

AUG 9 1947

B

Bw

NAME Best Harry Philip ^{1st wef. 18.6.42. (C.P.)}

REGIMENTAL NO. ^{D-81128} RANK ^{pl cpl 4th}

ENLISTED AT Montreal. PROMOTIONS, ETC. AND DATE ^{18.3.42}

DATE 9 Sep 39

IF SERVED PREVIOUSLY, STATE UNIT, ETC.

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN Harry Best RELATIONSHIP Father

ADDRESS OF ^{5249 5A37} St. Urbain St., Montreal. _(36/11-13/6/41)

ASSIGNMENT OF PAY, \$ ~~20.00~~ 20.00 wef July 1941 ✓

ADDRESS ~~Above~~ above

DEPENDENT'S ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DISTRICT PAYMASTER ~~25 Sep 39~~ M. F. M. 14

IN WHOSE FAVOUR ~~Catherine Best (Mother)~~ 60M-8-39 (1685)
H.Q. 1772-45-18

C

CASUALTIES, ETC.

NATURE E. G. ABSENCE, PROMOTION, ETC.	PART 11, D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, ETC.
	No.	DATE	
L/Cpl.	162	25-7-40	
Barracks Damages 1/5	CR 28/1/41		6/17/41
AWL	CR 28.8.41	52/13	Forfeits 1 days pay
L/Cpl		5/9/41	
		73/8	
Attended SE Command AA course 34	CR	24-12-41	eff 26.10.40
Attended f.o.p. to SE Command WT School	15-1-42	5/6 21/1/42	eff 4.1.42 to 10-1-42
Present at E+SE Command WT School	CR 14/14		
Small arms course AA 34	24.2.42	6-3-42	eff 10-1-42
To be A/cpl	CR 19/10		
Attended London Dist AA-LMCR School	14-3-42	27-3-42	eff 18.3-42
While attending AA-LMCR course no 72	B043/82		
Advanced to the rank of L/Cpl	CR	15.6.42	eff 8.6.42 to 12.6.42
Applied A/cpl with pay	CR	17.6.42	17.6.42
Ret'd from CMHB course H 72			18.6.42
to be confirmed b/cpl.	B043/82	d 10/7/42	eff 12/6/42
	CR	16/9/42	eff 19/9/42 (B063/16 ^b)

CASUALTIES, ETC.

PART II D. O.

NO.	DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
CR	22/9/42	Att to ^{sh} 5 th bdin Inf Bde f.o.p. from 20/9/42 to 22/9/42 (Bo 65/9 th)	
CR	28/9/42	C.T.B.A. to ^{sh} 5 th bdin Inf. Bde f.o.p. wef 27.9.42	
CR	23/11/42	Att to RAF f.o.p. wef. 23 to 28 Nov 42	
CR	30/11/42	C.T. B.A. to RAF. f.o.p. wef. 28/11/42	
CR	14/12/42	Att to Seaford Weapon Trng Sch. f.o.p. wef. 13/12/42	
CR	19/12/42	CTBA to Seaford weapon Trng Sch f.o.p. wef. 19/12/42	
6R	3/2/43	SoA. 18 Watch to 5 CIRU wef 1/2/43	
11	16.2.43	TOS 5 CIRU wef 2.2.43	
50	15.4.43	7 days Ph + 48 hrs from 19.28 Feb 43	
85	3.6.43	7 days Ph + 48 hrs ^{with R.A.} from 31 May to 9 June 43	
178	29.7.43.	On Command to #1 Cdn OCTU Sel Centre wef. 28 July 43.	
131	3.8.43	Ret & Ceases to be On Command to #1 Cdn OCTU Sel Centre wef 31 July 43.	
166	14.9.43	9 dys P.T. with R.A. 27 Aug to 5 Sept 43.	
231	1-12-43	9 dys P.h. with R.A. from 26 Nov to 5 Dec. 43.	
17	21.1.44	Awarded CVSM & clasf wef 15 Jan 44	
26	5.3.44	Command to 176 to 5 Sep 44	
58.	18.3.44	SoS to #4 CIRU wef 16.3.44	
799	19.3.44	T.O.S. 4 C.I.R.U. W.E.P. 17.3.44 from 55 JRU	

NAME BEST H. P. REGT'L NO. D 81128

FIELD UNIT QUE. (R.H.C.) DATE ARRIVED ENGLAND 4 SEPT 40

PLACE OF BIRTH MONTREAL CANADA DATE OF BIRTH 2 MAY 18

CATEGORY A RANK CPL.

DATE OF ENLISTMENT 9 SEPT. 39 MARITAL STATUS S

ENLISTED AT MONTREAL RELIGION R.C.

PREVIOUS SERVICE NIL

PROMOTIONS, ETC, AND DATE CPL. 19 SEPT. 42

NEXT OF KIN HARRY M BEST RELATIONSHIP FATHER

ADDRESS OF 5249 ST. URBAIN ST. MONTREAL
CANADA.

TRADE OR PROFESSION CLERK

EDUCATIONAL QUALIFICATIONS JUNIOR MATRIC

MILITARY QUALIFICATIONS G.D. NCO.

INOC & VACC 30 MAY 44 1 FEB 44

2/21

HOLD-6
40/P & S/69 (4015)

CASUALTIES, Etc

6

NATURE E.G., ABSENCE, PROMOTION, Etc	PART II DO		REMARKS IF IN HOSPITAL, NOTE NAME, Etc
	NO.	DATE	
S.O.S. 4 C.I.R.U. 1 JUNE '44			
T.O.S. 2 C.B.R.G. 2 JUNE '44			
S.O.S X 4 LIST (RHC) (B.W)	wef 13	JUN 44	To RHC (B.W)
T.O.S FROM 11 Bn 2 C.B.R.G	32/4 CR	14 JUN 44	W.E.F 14 JUN 44
GRANTED PERMISSION TO MARRY MISS MARJORIE DONNELLY ON O.R. AFTER 1 SEP 44 (AUTH) CMHQ FORDA 1000-100A D/10 JUL 44			
	CR	10-7-44	
Emb in UK. 5/7/44. disemb SOS to X. b. hat (I-RHC)	37/2E	14/7/44	in France. waf 6/7/44
	BR	28/7/44	missing. waf. 28/7/44

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not
write in
this space

1. PLACE OF DEATH	Municipal county	IN THE FIELD (FRANCE)			Official name of civil municipality or township	Place an X over the word which applies to this municipality or this territory City Town Village Parish Township										
	Street	No.			Hospital or Institution											
2. LENGTH OF STAY	(a) In hospital or institution	Years	Months	Days	(b) In municipality where death occurred	Years	Months	Days	(c) In Province	Years	Months	Days	(d) In Canada (if immigrant)	Years	Months	Days
3. NAME OF DECEASED	Surname	BEST (Block letters)														
	Given names	Harry Philip														
4. RESIDENCE	Street	St. Urbain No. 5437														
	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																
Mar 2 1918 (Month) (Day) (Year)																
12. AGE OF DECEASED																
26 Years Months Days If less than one day old hrs. or min.																
OCCUPATION	13. Trade, profession or kind of work, as spinner, teamster, office clerk, etc.															
	Bar-tender															
	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																
BEST Harry																
MOTHER (Maiden Name)																
19. Place of burial, cremation or removal																
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)																
22. Date of death																
July 28 1944 (Month) (Day) (Year)																
23. I HEREBY CERTIFY that I attended deceased from																
19 to 19																
and last saw him 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																
(b) due to																
(c) due to																
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																
28. Signature of person who fills in the form (curate, coroner, hospital authority, etc.)																
29. Name of clergyman in charge of Register of Civil Status in which registration of this burial was made.																
This signature authorizes the collector to accept this form as authentic.																
(Voir l'autre côté pour le français)																

Director of Records, Dept. of National Defence.

FEB 23 1945

FORM OF WILL No. 1

To be used by a Soldier desirous of leaving a portion of his personal estate
to one person, and the balance of his personal estate
to another person

I Harry Philip Best (Name in full)
Number 181128 of the Canadian Active Service Force
1st (134) Bn. Black Water R.H.R. of Canada C.A.S.F.
(Unit or Corps) (Give full title of Unit)

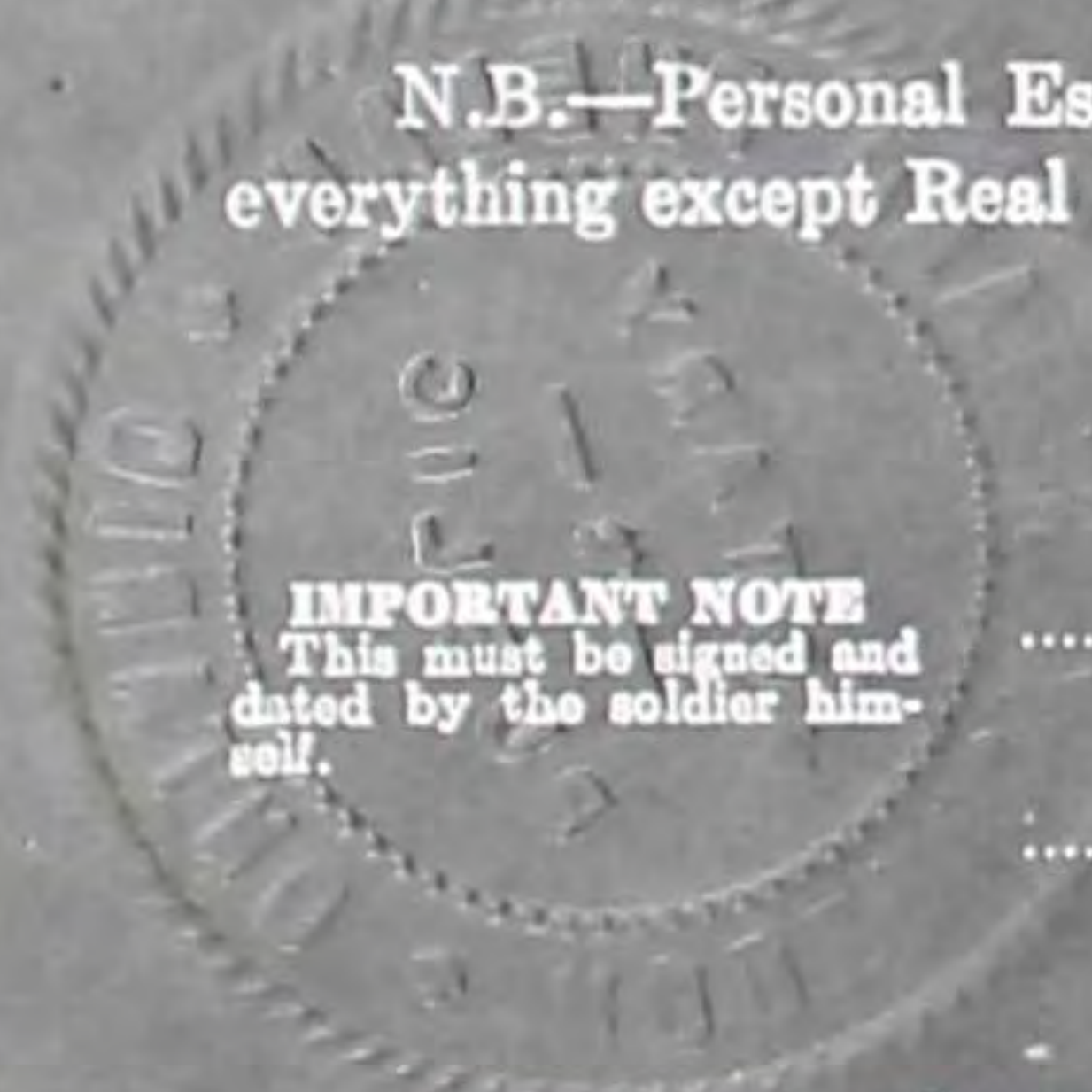
do hereby revoke all former Wills by me made, and declare this to be my LAST WILL. I bequeath
my personal estate consisting of my personal estate

(Here describe fully personal estate)
unto my mother Catherine Best
5437 St Urbain Montreal
Name and Address of person or persons to whom it is to go and relationship.

absolutely, and the residue of my personal estate and everything that I can give or dispose of.....
(Here describe remaining assets)

unto my mother Catherine Best
Name and Address of person or persons to whom it is to go and relationship.

NOTE.—If Soldier owns Real Estate, Form 10A should be completed.
N.B.—Personal Estate includes Pay, Effects, Money in Bank, Stock Certificates, etc., in fact everything except Real Estate.



IMPORTANT NOTE
This must be signed and dated by the soldier himself.

IN WITNESS WHEREOF I have hereunto set my hand this.....
9th day of September A.D. 1939
Harry Philip Best
(Signature of Soldier)

Signed and acknowledged by the Testator, in the presence of us, present at the same time, who, in his presence, at his request, and in the presence of each other, have hereunto subscribed our names as Witnesses.

1st witness to sign here J. D. Halliwell
Address in full 620 Prince Arthur St Montreal
2nd witness to sign here P. R. Ritchie
Address in full 1551 St. Mark St. Montreal

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH


OTTAWA, Canada.

The reverse side of this paper is hereby certified to be a true photostat copy of a Will on file in this Branch of HARRY PHILLIP BEST named therein, who died on the 28th day of July, 1944, while serving in the Military Forces of Canada on Active Service.

Dated at Ottawa aforesaid
this 21st day of June 1945.

R. G. Phelan
.....
(R.G. Phelan) Major

A Notary Public in and for the
Province of Ontario.



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..... BEST
(Surname first—Christian names in full—Block capitals)
HARRY PHILIP
- (2) Regimental Number..... 81128
- (3) Unit 1st. (13) Bn. The Black Watch (RHR) of Canada C.A.S.F.
- (4) Are you married?..... No
- (5) If married, state,
(a) Full name of your wife..... NA
(b) Present postal address of wife..... NA
- (6) If married, have you been regularly supporting your wife? If not—state reasons.....
..... NA
- (7) Are you a widower?..... NO
- (8) Have you any children?..... NO
If so, give number of boys and girls..... NA
Also their names and ages..... NA
- (9) If Separation Allowance is claimed in respect of children—state whether you have been regularly supporting them..... NA
Give particulars of Guardian to whom Separation Allowance should be paid—if authorized—
Name..... NA
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.....

NA

(11) Is your father alive? *Yes*

If so, state name and address.....

*MR. HARRY BEST
5437 St. Urbain St.
Montreal, Que.*

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

NA

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

NA

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

NA

NA

(14) Is your mother alive? *Yes*

If so, state name and address.....

*MRS. CATHERINE BEST
5437 St. Urbain St.
Montreal, Que.*

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

NA

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

NA

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

NA

(17) Are you insured? *No*

If so, in what Company?.....

NA

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.

Harry Philip Best
(Signature of officer or *Warrant* *G.A. Mansfield*)

Date *Sept. 9th, 1939*

[Signature]
Officer Commanding

Date **SEP 28 1939**

1st Bn. The Black Watch (RHR) of Canada G.A.S.F.

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 1st (13th) BN The R.W. (R.H.R.) of C. CASF.

Regimental Number D-81128

<p>1. Surname..... <u>Best</u></p> <p>2. Christian Names..... <u>Harry Philip</u></p> <p>3. *Substantive Rank and Appointment..... <u>Capt. 19-9-42</u></p> <p> *Acting Temporary or Local Rank.....</p> <p> giving date.....</p> <p><small>*To be entered in pencil to facilitate alteration.</small></p> <p>4. Place of birth..... <u>Montreal, Que. Canada</u></p> <p>5. Date of birth as declared on attestation..... <u>May 2/18</u></p> <p> (A).....</p> <p>6. Date of enlistment..... <u>Sept. 9/39</u></p> <p>7. Place of enlistment..... <u>Montreal, Que. Canada</u></p> <p>8. Residence at time of enlistment..... <u>5437 St. Urbain St. Montreal, Que. Canada</u></p> <p>9. (B) Special conditions (if any) of enlistment or rate of pay.....</p> <p>10. (C) Any subsequent variations of conditions of service.....</p> <p>11. Religion..... <u>R.C.</u></p> <p>12. If married, state date.....</p> <p>13. Trade on enlistment..... <u>Bar-tender - Clerk</u></p> <p>14. Corps, trade and grade.....</p> <p>15. (D) Qualifications.....</p> <p>16. (E) Miscellaneous entries..... <u>Typewriting only.</u></p>	<p>(17) Regiment or Corps..... <u>CIC</u></p> <p>Unit (Battn., etc)..... <u>RHR</u></p> <p>(18) Medical.....</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Category</th> <th style="width: 20%;">Date</th> <th style="width: 50%;">Authority</th> </tr> </thead> <tbody> <tr> <td><u>A.</u></td> <td><u>Sept. 9/39</u></td> <td><u>Med. Board Intl.</u></td> </tr> <tr> <td><u>A</u></td> <td><u>15 Nov 39</u></td> <td><u>M.F.M. 2</u></td> </tr> <tr> <td><u>A Comfrd.</u></td> <td><u>30 May 44</u></td> <td><u>M.B.M. 1 Pt. 1.</u></td> </tr> </tbody> </table> <p>(19) Next of kin (entries to be made in pencil).....</p> <p><u>(Father) Harry Best.</u></p> <p><u>5249 St. Urbain</u></p> <p><u>Montreal, Que</u></p> <p><u>Canada</u></p> <p>(20) E.....</p> <p>(21) E.....</p> <p>(22) E.....</p>	Category	Date	Authority	<u>A.</u>	<u>Sept. 9/39</u>	<u>Med. Board Intl.</u>	<u>A</u>	<u>15 Nov 39</u>	<u>M.F.M. 2</u>	<u>A Comfrd.</u>	<u>30 May 44</u>	<u>M.B.M. 1 Pt. 1.</u>
Category	Date	Authority											
<u>A.</u>	<u>Sept. 9/39</u>	<u>Med. Board Intl.</u>											
<u>A</u>	<u>15 Nov 39</u>	<u>M.F.M. 2</u>											
<u>A Comfrd.</u>	<u>30 May 44</u>	<u>M.B.M. 1 Pt. 1.</u>											

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		(b)	(c)	(d)	(e)	(f)	(g)
Date	From whom received	Unit	Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	Place of Casualty	Date of Casualty	Army rank as at (e)	Army Form or other authority for entry to be shown
17/6/40	msd 51371		Embarked Antonia	Quebec	17/6/40	Cpl	
22/6/40	msd 16/6/40		Embarked	Belwood	22/6/40		
14/8/40	msd 588 3/8/40		Embarked Duchesne Richmond	"	10/8/40	L/Cpl	
14/8/40	msd 16/6/40		Embarked	Wales	13/8/40	"	
22/8/40	msd 16/6/40		Embarked B 62	"	22/8/40	"	
		1 R.C.B.	Embarked Canada	"	22/8/40	"	Form 177 6.9.40
			Embarked Overseas	"	22/8/40	"	"
			Embarked B 62	Guernsey	4.9.40	"	
21. Sep 40	2 D. 6. 11.	1 R.H.C.	Granted Landing Leave Aldershot		7 Oct 40	L/Cpl	DT 11 #8, 8 Oct 40
26 Dec 40	Ol.	"	Privilege		26 Dec 40	"	" #32-29 Dec 40
26 Jun 41	"	"	Change of address recorded	Filed		"	36-13 Jun 41
28 Aug 41	"	"	Rep. for Abs. 8 hrs. for 1 day's pay FR 2149 (1) (a)	"	26 Aug 41	"	52-5 Sep 41
17 Oct 41	"	"	P. Leave (P-4) with warrant	"	18 Aug 41	"	62-7 Nov 41
15 Oct 41	"	"	Awarded One Good Conduct Badge	"		"	64-19 Nov 41
16 Dec 41	"	"	P. Leave - 7 days - w.w. - P 3	"	3 Nov 41	"	73-24 Dec 41
16 Dec 41	"	"	To be Lance Corporal	"	26 Dec 40	L/Cpl	73-24 Dec 41
15 Jun 42	"	"	Att. f.p. x pay to B.S.C. and W.T. School	"		"	5-21 Jun 42
27 Feb 42	"	"	Att. f.p. x pay to B.S.C. and W.T. School	"	10 Jun 42	"	14-6 Mar 42
19 Mar 42	"	"	Done Acting Corporal	"	18 Mar 42	F/Cpl	19-27 Mar 42
28 Feb 42	"	"	7 days P. Leave to F.T.W. P-4	"	27 Feb 42	"	34-29 Mar 42
17 Jun 42	"	"	Relinquish app't of A/cpl	"	17 Jun 42	P6	41-30 Jun 42
15 Dec 42	"	"	app't A/cpl.	"	18 Jun 42	F/Cpl	
9 Jan 42	"	"	att. London Dist. A.A. & M.C. School att'ing	"	8 Jan 42	"	43-10 Feb 42
17 Aug 42	"	"	P. Leave P-5	"	8 May 42	"	49-1 Aug 42
16 Sep 42	"	"	P. Leave P-8	"	10 Aug 42	"	55- Aug 42
10 Oct 42	"	"	conf'd. in rank as Cpl	"	19 Sep 42	Cpl	63- Sep 42
10 Nov 42	"	"	Att. to H.Q. 5. C.I.B. f.p. to 22 Sep 42	"	20 Sep 42	"	65-10 Oct 42
30 Nov 42	"	"	att. to R.A.F. Sgt. f.p. x pay - using Drug & aa	"	9 Nov 42	"	73- Nov 42
14 Dec 42	"	"	Plus course for period to 28 Nov 42	"	23 Nov 42	"	78- Dec 42
19 Dec 42	"	"	Att. f.p. x pay to Bedford W.T. (A.A. Course)	"	13 Dec 42	"	80- Dec 42
3 Feb 43	"	"	13 to 19 Dec 42	"	19 Dec 42	"	80- Dec 42
			Retel from above course and course to the att.	"	1 Feb 43	"	12 of 17 Feb 43
			S.O.S. A. 5. C.I.R.V.	"		"	

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 Black Watch Regimental Number 881128

Substantive Rank Cpl. Surname Best H.P. Christian Names

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

(a) Report		(b)	(c)	(d)	(e)	(f)	(g)
Date	From whom received	Unit	Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations. Volume I	Place of Casualty	Date of Casualty	Army rank as at (e)	Army Form or other authority for entry to be shown
	5CIRU	T.O.S	from Black Watch (RHC) Para G "A" Co	U.K.	27 Feb 43	Cpl.	11. 4/16/43
	5CIRU	5CIRU	Granted PL 9 days 19 Feb 43 - 28 Feb 43	U.K.	19 Feb 43	Cpl.	50-15 Apr 43
	5CIRU	5CIRU	Granted 9 days	U.K.	31 Mar 43	Ratb.	85-3 June 43
		5CIRU	On Command to Jctn OCTU del Centre	U.K.	28 July 43	Cpl.	128 29 July 43
			Retd from Command at 1. Cdr. OCTU del Centre	U.K.	31 Jul 43	Cpl.	181 3 Aug 43
		5CIRU	Granted (9) days P. leave. M.A.	U.K.	27 Aug 43	Cpl.	166-14 Sept 43
		5CIRU	Granted PL with M.A to 5 Dec 43 (7)	U.K.	29 Nov 43	Cpl.	231 1 Dec 43
		5CIRU	Awarded the C.V.S.M. &c	U.K.	15 Jan 44	Cpl.	17 21 Jan 44
	SOS	5CIRU	to 4CIRU	U.K.	16 Mar 44	Cpl.	58 17 Mar 44
		4CIRU	T.O.S from 5CIRU	"	16 Mar 44	"	79A-19 Mar 44
	SOS	4CIRU	to 12Bn - TBRG	U.K.	7-6-44	CPL	144/44
	X 411 B	RHC	T.O.S from 4CIRU	"	13 Jun 44	Cpl.	19 19 Jun 44
	X 4	"	SOS to RHC	"	13 Jun 44	"	21 - Jun 44
	OC	RHC	T.O.S from X-7 list demand 2/176	"	6 Jul 44	Cpl.	37-26 Jun 44
			Embarked U.K. 5-7-44 Disembarked France...	"	6 Jul 44	Cpl.	37-14 Jul 44
			granted permission to marry wife Margaret Donnelly on 5 Oct after 1 Sep 44 with cert no. 1000-1100	"	10 Jul 44	Cpl.	39-20 Jul 44
			Embarked U.K. 5 Jul 44 Disembarked France.	"	6 Jul 44	Cpl.	37-14 Jul 44
			Sgt 15 x 6 in RHC	"	18 Jul 44	Cpl.	44-9 Aug 44
			T.O.S from RHC				
			S.O.S. V. killed in action	U.K.	28 July 44	Cpl.	48/44

Cancelled 46/44
Case 0030 30/8/44 P

No *D-81128*
Company Conduct Sheet
Date of last entry in

Name *BEST H.P.*

Sqn, Battery
or Company

Corps *C.I.C.*

Date of enlistment *9 Sept 39*

GC Badges

Service or Proficiency Pay

MFM 6
(AFB 122)
40/P&S/136 (3438)

Sheet No *1*

Signature OC
Company, etc

Perkins Lieut

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
Incell down	25 Aug 41	Hefl.		W.O.A.S. A.W.L. from 0800 hrs. 25 Aug 41 to 1600 hrs. 25 Aug 41. A.A. sec. 40	D-81142 H.Sgt.	Reprimand	26 Aug 41		For 1 day of pay for absence
<i>Completed 2 years service - Entry of the 25 Aug 41 carried forward and ruled out.</i>									
Field	22 Nov 42	Cpl		W.O.A.S. an act of prof. of 9.0.9 my d. is that he did march in line of march without his own rifle. A.A. sec. 40	D-81518 Sgt. White C.H.	Severe Reprimand	25 Nov 42		
Field	26 Jan 44	Cpl		WOAS, Neglect to the prejudice, etc. (failed to have a man warned for V.D. Treatment parade) A.A. Sec. 40		Severe Reprimand.	1 Feb 44	Lt-col GF Clingan	<i>YTB</i>

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
<i>Field</i>	<i>16 Jul. 44</i>	<i>Pl.</i>		<i>Ar. 40. Neglect to the prejudice of good order and military discipline in that he at 2300 hrs 16 Jul 44 neglected to turn in an Abreast Report.</i>	<i>781086 Sgt</i>	<i>Severely Reprimanded</i>	<i>17 Jul 44</i>	<i>Successor 1st Lt.</i>	

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

CANADIAN NATIONAL TELEGRAPHS

GR

DAY LETTER

NIGHT LETTER

CASUALTY (REPORT DELIVERY)

OTTAWA 23 AUG 44

TO:-

MR HARRY BEST
5249 ST URBAIN STREET
MONTREAL QUE

12880 MINISTER OF NATIONAL DEFENCE DEEPLY REGRETS TO INFORM YOU
THAT D81128 CORPORAL HARRY PHILIP BEST PREVIOUSLY REPORTED
MISSING IN ACTION HAS NOW BEEN OFFICIALLY REPORTED KILLED IN
ACTION ON THE TWENTYEIGHTH JULY 1944 STOP IF ANY FURTHER
INFORMATION BECOMES AVAILABLE IT WILL BE FORWARDED AS SOON AS

RECEIVED


PREPAID

9
DIRECTOR OF RECORDS

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER **D-81128** RANK **Corporal** SERVICE UNIT **1st Royal Highland of Canada (CA)**
 NAME **BEST, Harry Philip**

DATE OF BIRTH **2nd May 1918** DATE OF ENLISTMENT **9-9-39**
 MARITAL STATUS **Single** RELIGION **Roman Catholic**

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP **Father** NAME **Mr. Harry Best**
 ADDRESS **5249 St Urbain St., Montreal, P.Q.** ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME
 ADDRESS
 (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. **8780-9644** H.Q. **405-B-30531** DATE **28-7-44**
 CASUALTY DETAILS **Killed in action**

FRANCE

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.?

MCL YES/NO

M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.?

YES/NO

DATE

28-8-44

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

DIRECTOR OF RECORDS

5

COPY FOR C. R. FILE

DISTRIBUTION— 1-CDN. PENSION COMM. 2-CHAIRMAN D.A.B. 3-D.A.B. 4-CHAPLAIN SER. 6-DOC. FILE 7-GRAVES REG. 8-A.B. & C. LISTS.

Mr. Harry Best,
5249 St. Urbain Street,
Montreal, Quebec.

Dear Mr. Best:

It was with deep regret that I learned of the death of your son, D81128 Corporal Harry Philip Best, who gave his life in the Service of his Country in the Western European Theatre of War on the 28th day of July, 1944.

From official information we have received, your son was killed in action against the enemy. You may be assured that any additional information received will be communicated to you without delay.

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

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

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

SEP 8 1944
(H.F.G. Letson),
Major-General,
Adjutant-General.

12

/EMA

W. J. H.

- Navy
 Army
 Air Force

(Mark X opposite Force in which you last served.)

DEPARTMENT OF NATIONAL DEFENCE

M.F.M. 441
 1 Mil. 9-44 (5449)
 H.Q. 1772-39-2326

Application for War Service Gratuity
 (Canadian Armed Forces)

D 4898

A complete reply must be given to every question in this application. If any question is not applicable, "N.A." is to be inserted.

1. Surname on termination of service..... B E S T
 (Print)
2. Christian Names HARRY PHILIP
 (Print)
3. Service No. D - 81128 ✓ 4. Paid rank or rating at date of termination of Service Cpl......

5. Address, in full, to which payments of gratuity are to be forwarded.....
Mrs. Catherine Best,
5249 St. Urbain Street,
Montreal, P.Q.

6. State below ~~your~~ period or periods of service in the Armed Forces of Canada during the present war.

Service (Navy, Army or Air Force)	Service No.	Final Rank or Rating	Date of Commencement of Service	Date of Termination of Service
<u>Army</u>	<u>D-81128</u>	<u>Cpl.</u>	<u>Sept. 9 .39</u>	<u>July 25 .44</u>
.....
.....
.....

7. Have you during the present War, while a member of the Canadian Forces, been attached, loaned or seconded to any of the Naval, Military, or Air Forces of His Majesty or of any power allied or associated with His Majesty?..... No If so, state name of Force or Forces..... N/A

8. Have you during the present War, while *not* a member of the Canadian Armed Forces, been appointed to or enlisted in any of the Naval, Military or Air Forces of His Majesty (other than the Canadian Armed Forces)?..... No If so, state the Force or Forces, with dates of commencement and termination of service. N/A

My son
 Having now ceased to serve on Active Service I hereby apply for payment of the War Service Gratuity.

 (Date) Nov 29 1944 *Catherine Best*
 (Signature of Applicant)



If name signed in space above represents a change from name given in question 1, insert here the name at termination of service. As cheques will be prepared in the name given in question 1, a specific address in question 5 is particularly essential.

My son, Cpl. Harry Philip Best,
 was killed in action 25 July 44

NOTE: When completed this form is to be mailed to the Headquarters of the Service in which you last served. Viz:
 Navy—The Secretary, Naval Board, Naval Service Headquarters, Ottawa. (To be accompanied by Certificate of Service in the case of ratings.)
 Army—The Secretary, Department of National Defence (Army), Ottawa. Attention: Paymaster-General.
 Air Force—The Secretary, Department of National Defence for Air, Ottawa. Attention: Records Officer.

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

4
ARMY

DECEASED
MEMBER'S
NAME

Harry Philip BEST
(CHRISTIAN NAMES) (SURNAME)

REGISTER NO.

D-4898

FILE NO.

405-B-30531

DATE

1-12-45

PAYEE Director of Estates

SERVICE NO.

D-81128

ADDRESS

FINAL RANK OR RATING

Cpl.

DATE OF TERMINATION OF OVERSEAS SERVICE

28-7-44

DATE OF DISCHARGE

28-7-44

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 1783 EQUAL TO 59 COMPLETE PERIODS AT \$7.50

\$ 442.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 1435 LESS 13 INELIGIBLE DAYS, EQUAL TO 1422 DAYS @ 25c. PER DAY
SEE PAR. 2 OVERLEAF FOR EXPLANATION

355.50

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ 1.70
SUBSISTENCE OR LODGING
AND PROVISION ALLOWANCE \$ 1.25

ADDITIONAL PAY \$

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ 2.95 X 7 = \$ 20.65
NO. OF DAYS 1435 X \$ 20.65

798.00

161.93

D. WAR SERVICE GRATUITY

959.93

E. DEDUCTIONS

OVERPAYMENT OF

PAY AND ALLOWANCES \$
DEPENDENTS' ALLOWANCE \$
AND ASSIGNED PAY \$

OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE

959.93

G. YOUR PORTION OF GRATUITY IS—

100%

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

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

PREPARED BY
IRM

CHECKED BY

TREASURY

CHECKED BY

DATE

W Caldwell 4/12/45

Kurke Capt
SERVICE REPRESENTATIVE

COMPUTATION OF WAR SERVICE GRATUITY

MEMBER'S NAME HARRY PHILIP BEST
(Christian Names) (Surname)

Register No. 04898

PAYEE'S NAME ESTATES
(Christian Names) (Surname)

File No. 405-B-30531

Date 26-11-45

ADDRESS

Service No. 0811280

Final Rank CPI

DATE OF TERMINATION OF OVERSEAS SERVICE 28-7-44

Date of Discharge 28-7-44

		AMOUNT	
		\$	c
A. TOTAL QUALIFYING SERVICE No. of day <u>1783</u> ¹³ = <u>59</u> Periods @ \$7.50		442	50
B. QUALIFYING OVERSEAS SERVICE No. of days <u>1435</u> less <u>13</u> Ineligible days, equal <u>1422</u> Days @ 25c. per day		355	50
C. SUPPLEMENT FOR OVERSEAS SERVICE		798	00
Daily Rate of Pay	\$ <u>1.70</u>		
Subsistence Allowance	\$ <u>1.25</u>		
Additional Pay	\$ <u>—</u>		
Dependents' Allowance 1/30 \$	\$ <u>—</u>		
TOTAL \$ <u>2.95</u> × 7 = \$ <u>20.65</u> No. of Days <u>1435</u> × \$ <u>20.65</u> 183		161	93
D. WAR SERVICE GRATUITY		959	93
Computed By <u>Monty</u>			
E. DEDUCTIONS			
Overpayment of (1) Pay & Allowance \$.....			
(2) D.A. & A.P. \$.....			
Other Deductions \$.....			
Entered By <u>my</u>			
F. AMOUNT PAYABLE (This amount is payable in.....monthly instalments of \$.....each)		959	93
G. Monthly instalment not to exceed daily rate of Pay & Allowances per (C) \$..... × 30 = \$.....			

REMARKS

Director of Estates

Regimental No. D.81128 Rank Corporal

BEST Harry Philip
Surname Christian Names

Unit 1st Royal Highland of Canada (CA)

Date of Death 28-7-44 Place of Death Overseas (France)

Next-of-kin Mr. Harry Best Relationship Father

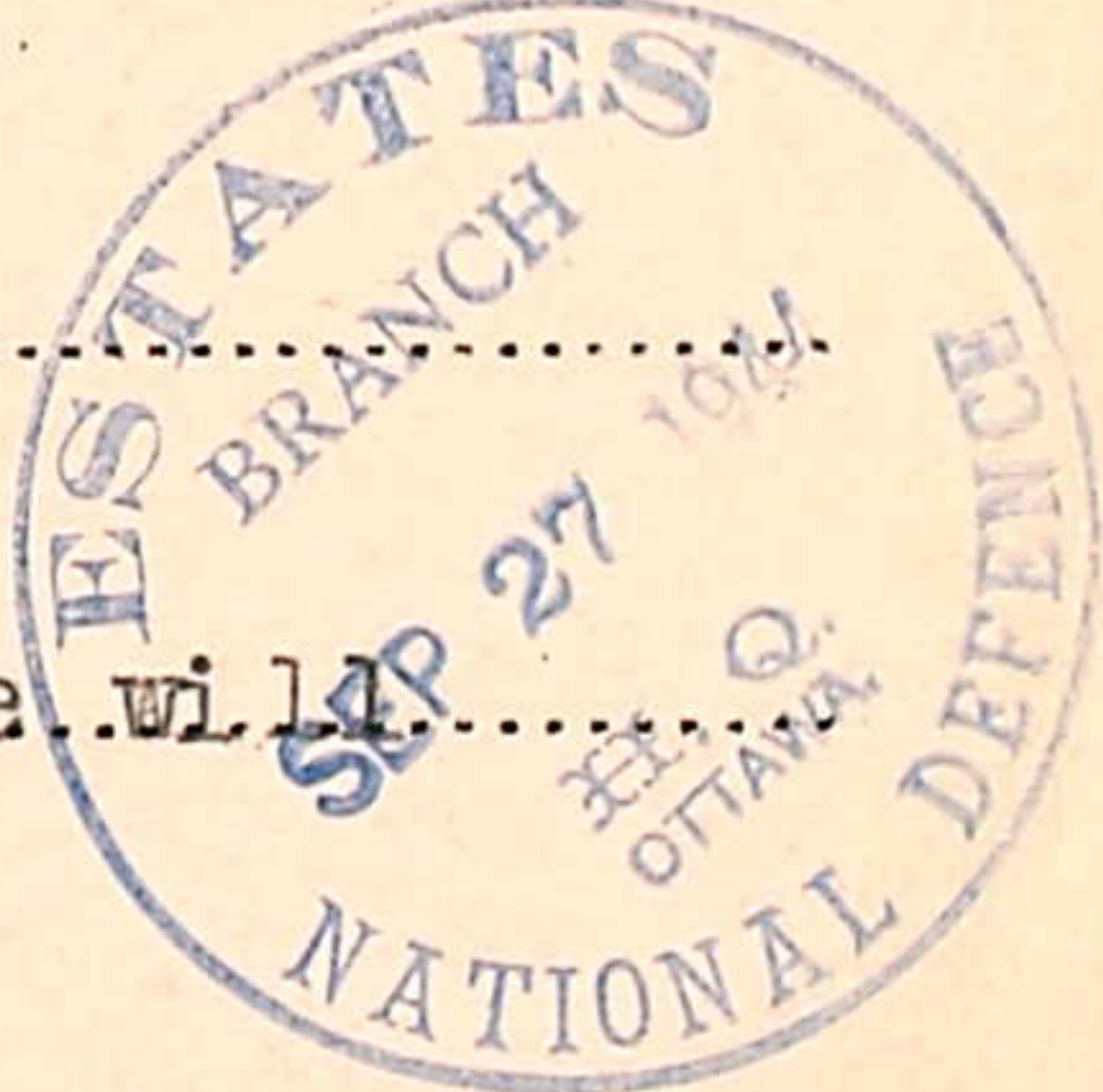
Address 5249 St. Urbain St., Montreal, P.Q.

M.F.M. 5 Copy M.F.M. 5 herewith

Will Will d/9-9-39 herewith also Notation re will

Date 20-9-44

JEC:DM


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

CANADIAN MILITARY HEADQUARTERS

**ESTATES BRANCH
INVENTORY**

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

No., RANK and NAME B-81128 Cpl Best H.P. (Deceased)

RECEIVED FROM 2nd Echelon 21 Army Group

CHECKED BY M-105819 Spr Sparks J.N.
C-5591 Pte Patterson L.K. DATE 9 Dec 44

1	Badge
5	Buttons
1	Sweater
8	Handkerchiefs
	Soup Container
1	Bullet Camera
1	Scarf
1	Deck Of Cards

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

L.K. Patterson Pte

for OC 1 Cdn KSD

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY

Name: BEST, Surname Harry P. Christian Names No.: D-81128
Cpl. Rank C.A. O/S Unit 28-7-44 Date of Death

Date: 5-1-46
 AMOUNT
 W.S.G. 959.93
 L.P.C. \$ 277.24
 Other Credits.....
 Total..... 1237.17
 Prev.dist. 277.24
 This dist. 959.93

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Catherine Best, 5234 St. Urbain St., Montreal 14, Que. (Sole beneficiary per will)	959.93

P4 TO TREAS.
JAN 15 1946

WSG

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	\$959.93
CLASSIFIED BY			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

(Signature)
 (L. M. FIRTH) Colonel
 Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. D 81128 Name BEST HARRY PHILIP
Rank on Discharge Cpl. Date of Discharge 28-7-44
Authority for Discharge or Retirement Deceased

Served in:

Non-qualifying
service

Canada from 9-9-39 to 22-8-40
from _____ to Deceased

United Kingdom from 21-8-40 to 5-7-44
from _____ to _____

Italy from :- _____ to _____

Northwest Europe from 6-7-44 to 28-7-44 Keen in Action

----- from _____ to _____

----- from _____ to _____

Eligible for award of:

1939 - 45 Star OK ✓

~~Italy Star~~ _____

France-Germany Star OK ✓

Defence Medal OK ✓

War Medal OK ✓

Canadian Volunteer Service Medal OK ✓

with Clasp OK ✓



Verified by Curtis Flaherty

Date 11-6-46

Carded JUN 11 1946

NRD

H.Q. 405-B-30531
R. 4 (B).

9th August, 1947.

Mr. Harry Best,
5234 St. Urbain Street,
Montreal, Quebec.

Dear Mr. Best:

I am forwarding herewith a photograph of the grave and marker over the burial place of your late son, D81128 Corporal Harry Philip Best, the location of which is grave 3, row F, plot 3, Bretteville-sur-Laize Canadian Military Cemetery, Bretteville-sur-Laize, France.

Any errors appearing in the inscription will be corrected when the permanent headstone is placed.

Yours faithfully,

Encl.

/EMA

MR
for H.M. Jackson, Lt.-Col ,
Director of Records,
for Adjutant-General.