D81468 LEGAULT ROBERT

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### CANADIAN ACTIVE SERVICE FORCE

|   | ATTES  | TATION PA.                    | PER                      |  |  |
|---|--|-------------------------------|--------------------------|--|--|
| 1. Surname  | Legault  |                               |                          |  | 2  |
| 2. Christian Names                                  | Robert   |                               |                          | 1  | 0  |
| 3. Present address                                  | 1485 Mar:  | ie Ann St                     | Montreal                 | And Consda   | Z  |
| 4. Date of birth                                    | Dec. 23rd. 19                                      |                               |                          |  | O  |
| 5. Place of birth                                   |  | Que                           |                          | Montresl   |  |
|   | (Country) mination) Roman                          | Catholic                      |                          | (Town or Township)   | 0  |
| 7. Trade or Calling                                 |  | -                             | · /                      |  | 5  |
|   | r Single   |                               |                          |  | I  |
| 100 200 100 100                                     | Ernest Leg   | in the second                 |                          |  | 4  |
|   |  | STOCKED AND ADDRESS OF        |                          |  | 0  |
| 11 Address of next of k                             | in Eauner  | 95 Pare                       | Lafontaun<br>Anna St.    | Montreal Luc Cours   | 1 NI   |
| 12. Have you served in                              |  |                               |                          |  | 5  |
| 13. If previous war serv                            | The Day of the                                     |                               |                          |  | 9  |
| TO. II picvious was serv                            |  | TOSTITUTE P                   |                          |  | 9  |
| 14. Do you now belong                               | to or have von served in                           | the Active V                  | Iilitia of Canada        |  |  |
| 11. Do you now bolong                               | No.  |                               |                          |  |  |
|   | CLARATION TO BE                                    | (Give unit and date           |                          |  |  |
| particulars are true, and i.e., war, invasion, riot | or insurrection, real or exist, and in any event   | e in the Canad<br>apprehended | dian Active Servi        | to solemnly declare that the above ce Force so long as an emergency, the period of demobilization after one year, provided His Majesty |  |
| Pate 20   | 7-14/391   |                               | Signa (Signa             | Jure of recruit, and lock  |  |
| -   | OATH TO BE TAKE                                    | EN BY MAN                     | ONATTEST                 | ATION promise and swear (or solemnly   |  |
| declare) that I will be f                           | aithful and bear true al                           | legiance to H                 | is Majesty.              | promise and swear (or solemny  |  |
|   |  | overs                         | Legan                    | (Signature of Recruit)   |  |
|   |  |                               |                          | ATTESTING OFFICER  Ise answers to any of the above   |  |
| questions he would be la<br>The above question      | iable to be punished as part and answers were then | provided by la<br>read to the | aw.<br>recruit in my pre |  |  |
| entered as replied to, ar                           | nd the said recruit has n                          | hade and sign                 | ed the declaration       | on and taken the oath before me,   | 0 0  |
| at  | real this L  | 14                            | day of                   | plenber 19 8   | 7 SERVINE  |
|   | Muccu  | Zelee                         | e                        | Signature of Magistrate, Justice   |  |
| o M.  | 101  | 13m                           | 3w.                      | or Attesting Officer.  Office or Rank and Unit   | Tought.  |
| RECEIVED  |  | ATT ANIXE DEPO                | ONI BEATETNICE A         | or appointment.  | The state of the s |
| N.B.—ATTENTION IS DE                                | TESTIONS IS LIABLE TO                              | A PENALTY                     | OF SIX MONTH             | FALSE ANSWER TO ANY OF THE<br>S' IMPRISONMENT  | The state of the s |

FINGERPRINTED

|           | I            | Record of Servic                 | e of            | LEGAI  | (Surname)                             | ••••••••         | Robert<br>(Christian Na               | mes)                        |                    | Regi                  | mental NumberD                          | 31468        |
|-----------|--------------|----------------------------------|-----------------|--|---------------------------------------|------------------|---------------------------------------|-----------------------------|--------------------|-----------------------|---|--------------|
|           |              |                                  |                 | QUALIFICATIONS                                       |                                       |                  |                                       |                             | EDUC               | ATIONAL QUAL          | FICATIONS                               |              |
| M         | Iilitary     | None.                            |                 | Sil  | •••••••                               |                  | High Sc<br>or                         | hool)2(.Con                 | (years completed   |                       | Graduation }                            | Hes.         |
| В         | usiness o    | or Professional                  |                 | /W   | •••••••••••••                         |                  | Collegi                               | ate )                       | (years completed   | )                     | Matriculation J                         | (specify)    |
| T         | rade or      | Civil                            | ker (Docl       | (2   | · · · · · · · · · · · · · · · · · · · |                  | *College                              | /                           | u .                |                       | ••••••••••••••••••••••••••••••••••••••  |              |
| T         | echnical     |                                  | //              | <i></i>  |                                       |                  | *Univer                               | sity                        | <u></u>            |                       | ••••••••••••••••••••••••••••••••••••••• |              |
| L         | anguage      | s English                        |                 | •••••••••••••••••                                    |                                       |                  | *(Name of i                           | nstitution, courses or year | ars completed, and | degrees obtained to h | e shown)                                |              |
| A         | ll enliste   | ed personnel will                | be taken o      | n as Private soldiers, a                             | ppointments and prom                  | otions to h      |                                       |                             |                    | No or her             |   |              |
|           |              | Report                           | Record of I     | Promotions, Reductions, Transfers,<br>on Strength of | Casualties, Reports, etc., from da    | te taken         | Rank Shown                            | Effective Date              | Unit               | Place                 | Aut                                     | thority      |
|           | Date         | From whom received               | Joined on appoi |  | - Match (DHQ) of Gar                  | aada G.A.S       | I I                                   | - Effective Date            |                    |                       | Part II D.O. No. Cas. List              | , etc. Dated |
| 14 Se     | p.39         | Recruit                          |                 | 1st Bn. The black                                    | (Mairi (umu) ai că.                   |                  | Pte.                                  | 14 Sep.39                   | 1 RHC              | Mtl.                  | B.0.7                                   | 14 Sep. 39   |
| 153       | -40          | R.O. 82                          | Grante          | d.14 days furl                                       | ough from 14-3                        | -40to            | ···Pte.···                            | 14-3-40                     | IRHG.              | Toronto               | B. 0. 75                                | 1:5-3-40     |
| • • • • • |              |                                  | 28-3-4          | 0(R.082)   | · · · · · · · · · · · · · · · · · · · |                  | · · · · · · · · · · · · · · · · · · · |                             | ••••••             |                       |   |              |
| 1         | -6-40        | R.O. 375.                        | Grante          | d embarkaiton  | leave from 0.83                       | 0. hrs           | P.te                                  | 2-6-40                      | I.RHC              | 7alcartie             | B.0139                                  | 2-6-40       |
| ••••      |              |                                  | 2-6-40          | to 0830 jrs.   | 1-6-40                                |                  |                                       |                             |                    |                       |   |              |
| 17:-      | 6-40         | N.D.H.Q.<br>G.S371<br>re 16-6-40 | Embarke         | edon!!Antonia!!                                      |                                       |                  | P.te                                  | 17-6-40                     | I RHC.             | Valcarti              | er, Que                                 | •••••••      |
| 22-       | 6-40         |                                  | Disemb          | arked  |                                       |                  | P.te                                  | 22-6-40                     | I RHC.             | Botwood,              | Nfld                                    |              |
| 7-8-4     | O MO         | V. 588                           | EMB.ARK         | EDOMS.,S.,DUC  | HESSOFR.I.CHMC                        | O.N.O.           | PTE                                   | -028-40                     | T.RHC              | BOTWOOD.              | NFI,D.                                  |              |
| ••••      | đạt.<br>W.T. | RE BEFENSO                       | R. D.IS.E       | MBARKEDATHAL   | IFAXNSPROC                            | EEDED            | P.T.F                                 | 1.3-8-40                    | IRHC               | HAL.T.F.A             | XNS                                     | ••••••       |
| 7-8-4     | 0            |                                  | TOALDE          | RSHOTN.SMD   | 6. I.T.C                              |                  |                                       |                             |                    |                       |   |              |
| 19-7      | 8740         | MD6 HC./23                       | -3 EMBA         | RKED ON E62  |                                       |                  | Pte                                   | 22-8-40                     | 1 RHC              | HALIFAX               | NS                                      |              |
| •••••     |              |                                  | SOS             | CASF CANADA  |                                       |                  | PTE                                   | 22-8-40                     |                    | HALIFAX               | N.S. BO 177                             | 6-9-40       |
| -         |              |                                  | TOS             | CASF OVERSEA   | S ON TRANSFER                         | Trans delicitant | PTE                                   | F.M. 420 440                | I RHC              | COTTROCK              | SCOTLAND BO                             | 177 6-9-40   |

in the past received, disability pension or compensation? If so give details .....

#### CERTIFICATE OF MEDICAL EXAMINATION

|     |                        | in fullLegaul<br>t 1. Informatio                  |  |  |                       | ••••••   | Date13                                  | 9/39                                  | ••••• |
|-----|------------------------|---|--|--|-----------------------|--|---|---------------------------------------|-------|
|     |                        | 20 V  |  |  |                       | h- f-11  | 1:                                      |                                       |       |
|     |                        | atism   |  |  |                       |  |   | NTO                                   |       |
|     |                        | ulosis  |  | No                                     |                       |  | ••••••                                  |                                       |       |
|     |                        | itis or asthma                                    |  |  |                       |  | ••••••••••••••••••••••••••••••••••••••• |                                       | N N   |
|     |                        |   |  |  |                       |  | ••••••••••••••••••••••••••••••••••••••• |                                       |       |
|     |                        | disease   |  |  |                       |  |   |                                       |       |
|     |                        | or bladder disease                                |  |  |                       |  | al disease                              |                                       |       |
|     |                        | -intestinal                                       |  |  |                       |  | ••••••••••••••••••••••••••••••••••••••• |                                       |       |
|     |                        | e   |  |  |                       |  | • |                                       |       |
|     |                        | se veins  |  | No                                     | q. Hav                | e you ever w   | orn glasses?                            | NO                                    |       |
|     | 1. Flat or             | deformed feet                                     |  | No_                                    | Ko                    | West,  | Legant                                  | 1                                     |       |
|     |                        |   |  |  |                       |  | (Signature of Recru                     | it)                                   |       |
|     | Examiner's             | remarks re above                                  |  | •••••••••                              |                       |  | ••••••                                  |                                       | ••••• |
|     |                        |   | •••••  |  |                       | ••••••   | •••••••••                               | •••••••                               |       |
|     |                        |   |  |  |                       |  |   | ••••••                                | ••••  |
|     | Par                    | t 2. Informatio                                   | n obtained by  | medical e                              | xaminatio             | n. The rec   | ruit must be                            | stripped.                             |       |
|     | 1. Identif             | ication marks or se                               | cars. (If opera  | ative obtain                           | history.)             |  |   |                                       |       |
|     |                        |   | •••••••  |  |                       |  |   | ••••••                                | ••••• |
|     | •••••                  |   |  |  |                       |  |   |                                       |       |
|     | 2. Height              | 5fe   | et4  | inches.                                | 3. Weigh              | t1   | 24                                      |                                       |       |
|     | 4. Compl               | exionDark   | Eves B   | rown                                   | 5. Devel              | opment   | Fair                                    | G<br>F                                | ood   |
|     |                        |   |  | Lack                                   |                       |  |   |                                       | oor   |
|     | C Obsert               |   |  |  | 11 /                  | : b  |   |                                       |       |
|     | o. Chest               | measurement—Gir                                   |  | -                                      | . /                   |  |   |                                       | ,     |
|     |                        |   | nge of expansio  | V                                      |                       | .inches.   |   | Y                                     | /     |
|     |                        | right 20/20                                       |  |  | /                     | ring, right  | Good le                                 | eftGQ.Q.C                             | 1     |
|     | 9. Condit              | ion of mouth and                                  | teethBac   | 1teeth                                 |                       |  |   | · · · · · · · · · · · · · · · · · · · |       |
|     | 10. The ab             | onormalities (conge                               | enital and path  | ological) fou                          | nd on exam            | ination are a  | s follows                               |                                       |       |
|     | ••••••                 |   | ••••••   |  |                       |  |   |                                       |       |
|     |                        |   |  |  |                       |  |   | /                                     |       |
|     |                        |   |  |  |                       |  |   |                                       |       |
|     | Part 3                 | 3. We, the exami                                  | iners find no e  | vidence of t                           | he diseases           | mentioned in   | n Question 2,                           | Part 1, exce                          | pt    |
|     | reported in            | the remarks. We                                   | e have examine   | ed the Recru                           | it in accord          | ance with th   | e pamphlet "P                           | hysical stan                          | daı   |
|     | and Instru             | ctions for the med                                | ical examination   | on of recruit                          | s" and he is          | found fit for  | r Category                              |                                       |       |
| *   | Special ren            | narks when catego                                 | ry lower than A  | A                                      |                       |  |   |                                       |       |
|     |                        |   |  |  |                       |  |   |                                       |       |
|     |                        |   |  | b.                                     | >//                   |  |   |                                       |       |
| -   | All a                  | Law Lu  | wells 6  | 800                                    | 100                   | 2  | /upor >a                                | well.                                 |       |
|     |                        | President   | TIONS, INOCULAT  | TIONS, BOARDS                          | Member<br>RECLASSIFIC | (1.01 A)   | ICAL CATEGORY                           | Menther                               | PI)   |
|     |                        | 1 Lest  | fed Ca   | 11/1                                   |                       |  | Brief details and signa                 | furo                                  | -     |
| :   | Date                   | Brief   | letails and signature  |  | Date                  |  | Drief details and signa                 | ture                                  | -     |
|     | 18. Oct. '39           | T & D /10/6.                                      | Card-R.C.  | A.M.B.                                 |                       |  |   |                                       |       |
| 0   | 25 Uct. /39            | 3 3 A. J.     | Lieu   |  |                       |  |   |                                       |       |
| X   |                        | RE-EXAMINED;                                      | NOR AL UR  | INE, EARS,                             | alle                  |  |   |                                       |       |
| . \ | NOV 45 '39             | REFLEXES, CAT                                     | EGGETTI  | agu.                                   |                       |  |   |                                       |       |
| •   | 100 -30 '39 NON        | CHEST X-RAY                                       | YNFGATIVE  | all                                    | er l                  |  |   |                                       |       |
| 02  | NAME OF TAXABLE PARTY. | A A Amp Con A A A A A A A A A A A A A A A A A A A | And the second s | ************************************** |                       | and the state of t |   |                                       |       |
| 81  | 26/1/40                | TETANUS TOXI                                      | 010 1 am   | pello                                  | 0                     |  |   |                                       |       |
|     | 26/1/40<br>MAR 29 40   | TETANUS TOXO                                      | old i ce 2   | Of The                                 | 0                     |  |   |                                       |       |
|     | 26/1/40<br>MAR 29 40   | TETANUS TOXO                                      | old i ce 2   | OR The                                 |                       |  |   |                                       |       |

| STATION        | Date of Arrival<br>at the<br>Station | int | Admission<br>to Hospit | DATES OF | Discharge from Hosp   | ital<br>Year | DISEASE                     | Number of<br>days in<br>Hospital        | Remarks on no<br>whether any partic<br>whether mercury has<br>of inquiry was held | ature of the disease; how induced; if mild or severe; if completely recovered from; cular treatment was adopted. In venereal cases state nature of primary disease, and has been given. If an accident, state whether it occurred on duty and whether a Court I. Date of issue and particulars of artificial teeth or surgical appliances supplied. | Signature<br>Medical<br>Officer |
|----------------|--------------------------------------|-----|------------------------|----------|-----------------------|--------------|-----------------------------|---|---|---|---------------------------------|
| Toronter, Out. | 29/12/39                             | 18  | 4                      | 40 6     | 5                     | 40           | (2) Horngules (2) Horngules | 20                                      | toronto   | Wil Hosp. Improved.   |                                 |
|                |                                      |     |                        |          | TO THE REAL PROPERTY. |              |                             |   |   |   |                                 |
|                |                                      |     |                        |          | STILL S               |              |                             |   |   |   | 100                             |
|                |                                      |     |                        |          |                       |              |                             |   |   |   |                                 |
|                |                                      |     |                        |          |                       |              |                             | 0.00                                    |   |   |                                 |
|                |                                      |     |                        |          | 000                   |              |                             | 190                                     |   |   |                                 |
|                |                                      |     |                        |          | OF STATE              |              |                             |   |   |   |                                 |
|                |                                      | 100 |                        |          | 100                   |              |                             |   |   |   |                                 |
|                |                                      |     |                        |          |                       |              |                             |   |   |   |                                 |
|                |                                      | 3   |                        | . 3      | Det S                 |              |                             |   |   | ••••••••••••••••••••••••••••••••••••••  | 3                               |
|                |                                      | 340 |                        |          |                       |              |                             |   |   |   |                                 |
|                |                                      |     |                        |          |                       |              |                             | ••••••••••••••••••••••••••••••••••••••• | •••••••   |   |                                 |
|                |                                      |     |                        |          | B 300                 |              |                             | 1 8                                     |   |   |                                 |
|                |                                      |     |                        |          | 5                     |              |                             | 8 3                                     |   |   |                                 |

#### OCCUPATIONAL HISTORY FORM

是一个人,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就

THIS FORM IS TO BE COMPLETED FOR FACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COM-MITTEE 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   | PLEA<br>LEAN<br>BLAN   |
|---|--|
| 1. (a) Print name in full   |  |
| 2. (a) Arm of service   |  |
|   |  |
| 4. (a) Place of enlistment  |  |
| Section B—EDUCATION AND TRAINING  5. (a) State age on (b) Were you attending school   | Soft day   |
| finally leaving school  | -  |
| 6. State definitely highest standing reached at public, technical or high school  (for instance—"4 years, Public School", "two years, High School", "Junior  Metriculation" or "4 years technical course in printing" etc.) | 200  |
| Matriculation", or "4 years technical course in printing", etc.)  |  |
| university and standing or degree secured   |  |
| enter upon a trade for what (c) Did you finish it, how long apprenticeship?   | Same?  |
| 9 (a) What languages  | Tall Works   |
| do you speak fluently? Inclish & French do you read well? English   | 1000   |
| Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT  10. (a) State whether you were  | September 1  |
| WORKING or NOTWORK- (b) At time of en-  | Of the last  |
| ING at time of enlistment.  (Enter here only "Work-  trade union or   | 1 × 3  |
| ing" or "Not Working", as case may be; particu-  professional society   | 100  |
| lars are asked for below) were you a member?  | 2 - 5  |
| Section D-PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME  | 4  |
| OF ENLISTMENT   | THE REAL PROPERTY.   |
| QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)  | St. Action   |
| 11. Had you ever been employed fairly regularly since leaving school?   | The state of the s |
| 12. (a) If answer to 11 be "Yes", (b) State how long you state exact trade or occupation had worked at this   | 20174  |
| at which you actually workedtrade or occupationtrade or occupation  | State of the state |
| 13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified   | 1  |
| 14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment  | 1  |
| 15. Give details of last employer, if any: Name   | 1 Table 1  |
| 16. Nature of employer's business (for instance, "farmer", or "building   | No.  |
| contractor", or "boot factory", or "iron foundry", or "retail store", etc.)   | 3  |
| in a business of your own, state nature and address of business   | 100  |
| Section E-PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME  | 10.00  |
| OF ENLISTMENT   | W 15   |
| 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  | T. Carre   |
| IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21  | 1 12   |
| 18. Name of employer  | 100  |
| 19. Nature of employer's business (for instance, "farmer", or "building Lumbering.  | 20.00  |
| contractor", or "boot factory", or "iron foundry", or "retail store", etc.)   | 一章   |
| specific 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  to return to your  to return to your  former employment?                                 | The state of the s |
| employment on discharge? employment on discharge?   | -  |
| 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        | 1 3  |
| OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23  22. (a) State nature of business,  (b) Where was  | 1  |
| or professional practice it located?  |  |
| 23. (a) Number of years  (b) Have you made, or will you make plans to engaged in this business return to the same or a similar business on discharge?   |  |
| Section F—PARTICULARS OF FARMING EXPERIENCE   | 1 3  |
| 24. (a) Do you wish to engage (b) Do you feel competent (c) If so, in what in farming after the war? to operate a farm? kind of farming?  | 1 18   |
| in farming after the war?   | 1 40   |
|   | 1  |
| Section G—MISCELLANEOUS  No. 1  | 1 3  |
| 26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?  | Sant.  |
| 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.)   | The state of   |
| 28. State any employment preference or ambition you   |  |
| may have, other than indicated elsewhere in this form Todd Lumber Co, when they reopen after  | che  |
|   |  |
|   |  |
| 30 June   |  |

#### PARTICULARS OF FAMILY OF AN OFFICER OR SOLDIER OF THE CANADIAN FORCE ACTIVE SERVICE

INSTRUCTIONS.

- (a) This form is to be completed immediately an officer or soldier is appointed to, or enlisted in, the THE TRUCK STO WILL BITTER GOVE
- (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 SoldierLegault  |
|--------|--|
|        | (Surname first—Christian names in full—Block capitals)   |
|        | Robert   |
| (2)    | Regimental Number D-81468  |
| (3)    | Unit 1st Bn. The Black Watch (RHR) of Canada C.A.S.F.  |
|        | Are you married?   |
| (5)    | If married, state,   |
|        | (a) Full name of your wife NA  |
| (6)    | (b) Present postal address of wife. N. A.  If married, have you been regularly supporting your wife? If not—state reasons. N. A. |
| (7)    | Are you a widower? N.A.  |
| (8)    | Have you any children? N.A.  |
| , rask | If so, give number of boys and girls. N.A.   |
|        | Also their names and agesN.A.  |
| (0)    | Transpersion Alleman is alsimod in mannest of abildren, atota subathan years have been nomilarly our                             |
| (9)    | If Separation Allowance is claimed in respect of children—state whether you have been regularly supporting them                  |
|        | Give particulars of Guardian to whom Separation Allowance should be paid—if authorized—  |
|        | Name NAME  |
|        | Postal Address   |
|        |  |
|        | ***************************************  |

|    | (10)   | Have you a common-law wife—whom you have been regularly supporting and publicly representing   |
|----|--|--|
| 44 |  | as your wife?  |
|    |  | If so, state her full name and Postal AddressN   |
|    | To be  | •••••••••••••••••••••••••••••••••••••••  |
|    |  |  |
|    | (11)   | Is your father alive? Yes  |
|    | (/   | If so, state name and address. Ernest Legault  |
|    |  | 1485 Marie Ann St. Montreal.   |
|    | 1000   |  |
|    | 1-BAFE   | If your father is a widower and is totally incapacitated from earning a living—are you his sole support?   |
|    |  | 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.  |
|    |  | Also state reason he has no other means of support   |
|    |  | •••••••••••••••••••••••••••••••••••••••  |
|    |  |  |
|    | (14)   | Is your mother alive? Margaret Legault   |
|    |  | If so, state name and address  |
|    |  | •••••••••••••••••••••••••••••••••••••••  |
|    | (15)   | If your mother is a widow, are you her sole support?N.A  |
|    | (16)   | If sole support of widowed mother—state what amount per month you have given her prior to joining  |
|    |  | C.A.S.F.   |
|    |  | Also state reason why she has no other means of support  |
|    |  |  |
|    | (17)   |  |
|    | (17)   | Are you insured? No  |
|    |  | If so, in what Company?  |
|    |  | Have you made arrangements for payment of your Insurance Premium?  |
|    |  | If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned. |
|    |  | I hereby certify that the information given by me on this form is correct in each and every particular.  |
|    |  | 1011911  |
|    |  | Sobert Legand  |
|    |  | A Signature of officer of many   |
|    | Date   | 240114/39-N  |
|    | _  |  |
|    |  | 1 Millenn  |
|    |  | Officer Commanding   |
|    |  | SED DO 1939  |
|    | Date   | 1st Bn. The Black Watch (RHR) of Canada C.A.S.F.   |
|    | The state of the s | water (RHR) of Ganada C.A.S.F.   |

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

Statement of the Service of No. D. 81468 Rank Pto.

Name Legant Robert

| Name and Address of the Owner, where the Owner, which is the Owner, which is the Owner, where the Owner, where the Owner, where the Owner, which is the Ow | 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 | 2   |            |                  |         |       | Part II D.O. No. Cas. List, etc. | Dated            |  |
| **********   |                    | RR of Pay 120 Pd  | Pte        | 17. Jel. 43      | Ba      | U.K.  | 23                               | 16 apr 4:        |  |
|  |                    | Granted a daily segt'l rate of pay of \$1.50  | P6.        | 11.04 M. 4.3.    |         | V.K   | 4./                              | 28. Juna 4.3.    |  |
|  |                    | and 5. dys. C.B. Joy 5. dys. pay A.R. Sec. 15.6).   | P.5        | 16 aug. 4.3.     | Buk.w   |       | 5.4                              |                  |  |
|  |                    | amd. 5. dyp. C.B F. ory 2 dyp. pay A.A. Sec. 15. (1)  | P.C        | 6. Sep. L. H. J. | .134k.w |       | 5.9                              | .3.0. Sapt. 4.1. |  |
| q s)   |                    | AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP  | P.15       | H. Jan. H.H.     | BUR W   | w14   | 3                                | 21. Jan. 4.4.    |  |
| :-42)  |                    | and a toy of 1 days pay under AA 15.42  | Pla        | 29.37.02.44      | Blk.w.  | K     |                                  | 14 april 44      |  |
| @100   |                    | AA 15(1) and y dus C.B. Josts 5 dystay  | Re.        | 10 Apre 44.      | Belo.   | -ak   | 2/.                              | 26 1124          |  |
| 3  |                    | AA sec 150) Complete membert with award of 29 march 40  | 4d/6       | 29cif44          | Bu      | ak    | 21                               | 26 genification  |  |
| Off.   |                    | AA15-(1) and 21 dys 1= P. Forth 29 dy fay cost of   | aff The    | 1 / 44           | RHR     | 015   | 30.                              | 16 June          |  |
| m 10.6   |                    | Disembarked at. France. on. 6. feelett  | pto        |                  | Bee     | 2189  | 3.7                              | 14 Jul 44        |  |
|  |                    | and 28 days I-P- fort 29 days pay AA 150  | Ru         | 4 Julia          | 1 Blk W | 21 19 | 59                               | 20 Jul 49        |  |
|  |                    | Missing   | Rt         | 8 aug 44         |         | AIE   | A478                             |                  |  |
|  |                    | Killed  | RE         | Sauge 4          | RHS16.  | A1=T  | 1482                             | 25 augu          |  |
|  |                    | Sos deceased - Billed in action   | Rto        | 8 aug 44         | Blk W   | 2R-60 | 48                               | 5 Sep 40         |  |
| *********  |                    |   |            |                  |         |       |                                  |                  |  |
|  |                    |   |            |                  |         |       |                                  |                  |  |
|  |                    | ······································  |            |                  |         |       |                                  |                  |  |

Rank Pte.

Sheet No.....

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

#### Jame LEGAULT, R.

| REPORT   |                    | Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)                               | Rank Shown | Peratina Data  | Unit   | Place    | Authority                        |             |  |
|----------|--------------------|--|------------|----------------|--------|----------|----------------------------------|-------------|--|
| Date     | From whom received | (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)  | Rank Shown | Effective Date | Unit   | Place    | Part II D.O. No. Cas. List, etc. | Dated       |  |
| 5500     |                    | Disembarked 4.9.40., T.C.S. Eng.,  |            |                |        |          |                                  |             |  |
|          |                    | 23.8.40.   | Pte.       | 23.8.40        | Blk.W. | Aldersho | t D.0.177                        | 6.9.40      |  |
|          |                    | Randing Clease   | Pře        | 5.10.40        | BIK: W | Field    | 7022                             | 28 Mov 40   |  |
|          |                    | adu to 15 Gen. Holp  | Phe        | 2/40           | BIK.W. | 4 jeod   | Cal. Rult                        | 26.11.40    |  |
|          |                    | Discharged from alle   | Pte        | 23.11.40       | BIKEN  | Field    | Las. Het                         | 27 11 40    |  |
|          |                    | Granted Privilege leave  | Pto.       | 12 Dec. 40     | Blk.W, | Field    | 0.0.26                           | 9 Dec. 40   |  |
|          |                    | Award. 4 dys CB. AWL. 0600hrs. 26 Dec. to 1830hrs. 27 Dec 40 (Idy. 12hrs. 30hrs) Forfeits. 2dys. pay. 149(1)(A) FR. 1                                | Phe        | 28.Dee.40.     | BIK. W | Lived    | D.O. 2                           | 10.Jan.4.1. |  |
|          |                    | award. Tays, C. B. 9 fined \$5 for drunkenners   | Pa.        | 3 Feb-41       | Blh.w. | Freld    | 0.0.8                            | 14-Feb-41.  |  |
|          | X,                 | AWITH THOME B. Harle pt 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4  | Ple        | 9 James H      | Bla.W. | 46       | 38                               | 32 Jimes H. |  |
|          |                    | Awarded Todays CBANL 100 Rs 18/10/41-0100 Rus H<br>Forgerts 100ys pay. FRAI 149(1)A)   |            | 21 Cet 41      | BIK W  | U.X      | 66                               | 26 1700 41. |  |
|          |                    | awarded 21 Duys dellation awe from 23 30 hrs 1620 41 to 0630 hrs 17 now 41 Fortesto 21 days pay 4RI 149 (17 10) 1 days pay 149 UXW Tatal 27 days pay | Pte.       | 26. Nov. 41.   | BIKW   |          | 69                               | 5 Dac 41.   |  |
|          |                    | ATTIC for all purposes to Che Detu Bardis.   | Ple        | 27200 41       | B/K.W. |          | 6.9                              | 5 Dec 41.   |  |
|          |                    | Ceases to be alld to ldn Data Barracks   |            | 16. Dec 41.    | Blh. w | u.K.     | 7.3                              | 24 Dec 41   |  |
|          |                    | Drunkenness (340ff) Awd 14 days CB, fined \$10.00.<br>A.W. L. 17 mar 42 Tolays C.B. Total forjeir<br>Tolays pay FR. I. 149/2/2 (1/9)                 | Ple        | 5 Jan 42       |        | 4.K      | .3                               | 14 Jan 42   |  |
|          |                    | Jolanspay F.R. I. 149/2/20(1/9)  | 86         | 20 mar 42      | Blh W  | uu       | 20                               | 31 mar 42   |  |
|          |                    | P/Leave (4) with Warrant   | Pte        | 17. Man 42-    | BUL M. | U.K.     | 36.                              | 4. June 42. |  |
|          |                    | P/Leave /days (405)  | % Ce       | 30 June 42     | BURW   | UK       | 5.0                              | 3. aug: 42  |  |
| •••••••• |                    | Sec 40 awarded 14 days CB+ last Thoughtag  | fte        | 15 oct 42      | 13.00  | M        | 68                               | 31 Det 42   |  |
|          |                    | Priv-Leane to 5 Jan 43.  | Ple .      | 21 Dec 42.     | Bekw   | uk.      |                                  | 8 Jan 43    |  |

#### SERVICE AND CASUALTY FORM

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

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

Regimental Number P-81468

| Surname $L \neq GAULT$                                       | (17) Regiment or C   | orps  | Unit (Battn., etc)   |
|--|--|---|--|
| Chilin NT  |  |   |  |
|  |  |   |  |
| *Acting Temporary or Local Rank.                             |  |   |  |
|  | The state of the s |   |  |
| *To be entered in pencil to facilitate alteration            |  |   |  |
| Place of birth MONTREAL GO Canada                            | (18) Medical   |   | ••••••   |
| Date of birth as declared on attestation. DEC. 23, 1918.     |  |   |  |
| (A)  | Category   | Date  | Authority  |
| Date of enlistment   |  |   |  |
| Place of enlistment. Montreally 71.04 Canada                 |  | 13.9.193  | Med Gound Mit.   |
|  |  | 5/11/39   | m m 2  |
| (B) Special conditions (if any) of enlistment or rate of pay | ••••••••   |   |  |
| (C) Any subsequent variations of conditions of service       | The state of the s |   |  |
| R = R  |  |   |  |
|  |  |   | ade in pencil)   |
|  | M. J.  |   |  |
| Corps, trade and grade                                       | Monary   | P   |  |
| (D) Qualifications   |  |   |  |
| (E) Miscellaneous entries                                    |  | 10000   | .s   |
|  | 1 000  | MANA  |  |
| •••••••••••••••••••••••••••••••••••••••                      | (20) E   | 1592  | face Rolen Basel 3   |
|  | (21) E   |   | mio 6 1 0 1  |
|  | (22) E   | ••••••••  |  |
|  |  |   |  |
|  | Christian Names #OFFRT *Substantive Rank and Appointment giving date. *Acting Temporary or Local Rank  giving date.  *To be entered in pencil to facilitate alteration. Place of birth. MONTREAL CO Canada Date of birth as declared on attestation. DEC 23, 1918:  (A)  Date of enlistment. M. 9 1939 Place of enlistment. MILIHAT MACIONALA Residence at time of enlistment. MILIHAT MACIONALA (B) Special conditions (if any) of enlistment or rate of pay.  (C) Any subsequent variations of conditions of service.  Religion.  If married, state date.  Trade on enlistment. LABOUR.  Corps, trade and grade.  (D) Qualifications.  (E) Miscellaneous entries.  | Surname.  Christian Names.  *Substantive Rank and Appointment.  *Acting Temporary or Local Rank.  giving date.  *To be entered in pencil to facilitate alteration.  Place of birth.  *MONTREAL GO Canada  (A).  Category  Date of enlistment.  (B) Special conditions (if any) of enlistment or rate of pay.  (C) Any subsequent variations of conditions of service.  Religion.  (C) Any subsequent variations of conditions of service.  (B) Special and grade.  (D) Qualifications.  (E) Miscellaneous entries.  (20) E.  (21) E.  (22) E. | Christian Names.  *Substantive Rank and Appointment.  *Acting Temporary or Local Rank. giving date.  *To be entered in pencil to facilitate alteration.  Place of birth.  *Mantered on attestation.  *Dec. 23, 198.  (A).  Category  Date  Category  Date  Category  Date  Category  Date  Category  Date  Category  Category  Category  Date  Category  C |

#### 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.

34 Hard

- (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)           | 1                                      | (b)      | (c)   | (d)                  | (e)           | (f)                    | (g)  |
|---------------|--|----------|---|----------------------|---------------|------------------------|--|
| Repo          | ort .                                  |          | 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                   | Place of             | Date of       | A rmyr wonl-           | Army Form or other                                 |
| Date          | From whom received                     | Unit     | 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<br>Casualty | Casualty      | Army rank<br>as at (e) | Army Form or other authority for entry to be shown |
| 6.40          | 2000 g                                 | 1371     | Embled Rukowa aukee   | OD.                  | 17.6.40       | Oke                    |  |
|               |  |          | Desembled " Dolwood   | aped                 | 22.6.40       | "                      |  |
| 7.8.40        | MOU 588 0                              | 7.8-40   | Embed Duch Richmond,  | n.//                 | 10.8.40       |                        |  |
| 2010          | nd 111                                 |          | Ensked 662  |                      | 20 0.40       |                        |  |
| 1.1.8.1.17.19 |  | PHC      | Do Coo 4 Caueda   |                      | 228.4         | 4                      | 130197)  |
|               |  | · /      | 2015 Oversea on tran  | co                   | 23.8.40       | -                      | -1/66.9,40   |
|               |  | ~        | Sino and la   | 2000                 | 1/1000        |                        | <u>_</u> //  |
| 1. Sep. 40.   | 2.A6-11.                               | I.B.H.C. | Granted Landing Teaue al  | derahot              | 30SEP40       | Pt.                    | 071147,2400X                                       |
| 6.0.c.t.4.0.  | 0.C.                                   | 1.R.H.C. | Admonished - Drunkenness  | Eng                  | 1.6.0.ct.40   | te                     |  |
| V3/101/3      | •••                                    |          | there to I flaw bent Hosp. (Rick)   | ·····                | 2, nov40      |                        | aut 11 11 11 - 74 Nov4                             |
| 23/100/40     |  |          |   |                      | 3 mondo       |                        | 1 7 V8 NOV4  |
| 1 Dec40       | •••                                    |          | Ansch frem  | ,                    | 5 Oleyo       |                        | ~ 26-900erso                                       |
| 3 Jun 41      | •                                      | . (      | Owarded 4 days CB for aux from 0 600 hrs  |                      | 28 Deers      | 4                      | #2-10 Janus  |
|               |  |          | 16 Deces to 1830 ars 27 leaso. Its. Vdays pay   |                      |               |                        |  |
| oo Jehu       | ١٠                                     | **       | Fined Son DRUNKENNESS-ZWD OFFENCE   | 4                    | 3 Fet 41      |                        | 8-14 Feb 41  |
| o June        |  |          | dup CB. for Clox 14 pers. First days pay 149(1)(2)  | Tield                | 9 June        |                        | 38-25 Jun 41                                       |
| novy          |  |          | augusta forcella, 14 pm. Jun 1 days pay 149(1)(9)   |                      | 2/ Werus      |                        | 66 06 May 1  |
| P.P. 1000-161 | Y                                      |          | 21 days Better. a. w. L. 1/2 hs.  |                      | 26. 700.00    |                        | 6.9  |
| 287/054       | •                                      | •        | atte to con dete site ? a. p. while much  |                      | 27700-41      |                        | 69 - 5 Dec. 40                                     |
| ,.,           |  |          | Joning Sentince.  |                      |               |                        |  |
| 6 decre       |  |          | akares to be atta to Can Detre Books.   |                      | 16 Decry      |                        | 13-19 plec4  |
| 1 Jany 2      | &c                                     |          | 14 days CD ginew 10 = for asuntemens.   |                      | 5 yange       |                        | 2 June 1   |
| n/ 100 0 (1)  |  |          | TauxCBstort saus Day SRAJ14968 for anh  |                      | 2010000       |                        | 70-31 hose   |
| 10 May        |  |          | Tamper of the party of the party  |                      | De verage     |                        |  |
| 21 hande      | ······                                 | ······   | P-18 and ET IVI. P. France  |                      | 10 marils     | /                      | 36- 4 Jun42  |
| 6             | ······································ | ••••••   | 7 6   | V                    | 23 (74        | 50                     | 50/3 aug   |
| W Oct +v      | V                                      | VX       | (4days 21- for a a 40   | /                    | 160ce 42      |                        | 68- Oct 42   |
| 22 Dec 42     |  |          | 14 days P. L. (++ 48 Ams).  | u                    | 21 Rex 42     | ·                      | 84 - 1 Jun 43 -                                    |
|               |  |          | Granted Restil Rates 1 Pag \$1,40   |                      | 17. Feb 43    |                        | 2.3. d/16 apr 43.                                  |
| 9 June 43     |  |          | Granted Daily Rates of Fay of \$ / 50 per die   | ht                   | 17 0/1 93     |                        | 41 - 28 June 4                                     |
| .7 Jul 43     |  |          | P.L. 9 dyg.   |                      | 16. glan 4.3. |                        | 4.61.9/9dell.43                                    |
|               |  |          | aq 1501 5 days B13. fail 5 days pa  | ·                    | 1.6 aug 4.    | ?                      | S.4 40 - 1. 14 3                                   |

.

M.F.M. 6 (A.F.B. 122) 500M—8-39 (1703) H.Q. 1772-45-18 Date of last entry in Signature O.C. Company, etc. Cases of drunken-Date of award or Date of offence OFFENCE of order dispen-sing with trial Names of Witnesses By whom awarded Punishment awarded Remarks ness When on active service rvice A.W.L. Sjt. / 2 Days C.B. /4/3/40/ Sjt. from breakfast parade. \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* BALANCE STATES (P.T.O.)

| Place     | Date of offence | Rank                                    | Cases of<br>drunken-<br>ness  | OFFENCE                       | Names of Witnesses | Punishment awarded | Date of award or<br>of order dispen-<br>sing with trial | By whom awarded                         | Remarks                     |
|-----------|-----------------|---|---|-------------------------------|--------------------|--------------------|---|---|-----------------------------|
|           | 15-10           | PIE                                     | (1)   | W.O.A.S                       | L/chl.             |                    |   |   |                             |
|           | 40              |   |   | DRUNISENESS. 1. OFFENCE       |                    | admonested         | 16.10.40  | 3 Caufer                                |                             |
| Filld     |                 |   |   |                               | Wellowy            |                    |   | a rung                                  |                             |
|           |                 |   |   | Oech 19.19 15                 |                    |                    |   |   |                             |
|           | اما جطر         | ·                                       |   |                               |                    |                    |   |   | Torfuls 31) ap / ay         |
|           | 26-12           | Phe                                     |   | WOA5 ANK from 0600Hm 26-12-40 | 2)81464            |                    |   |   | for absence                 |
| 0.4       | 40              |   |   | to 1830 km 27-12-46           | and come           | 41) ays 693        | 28-12-40  | - Ceme                                  | 71841149 (1) 9              |
| Tack      |                 |   |   |                               | PATTERSON 1        |                    |   | ·····                                   |                             |
| July 1    | 2//             | ···p/                                   | 121   | 1000                          | 600                |                    |   |   |                             |
| MY I-IGAU | 01-             |   | (~)   | Dunes Des DNO Mence           | 781291             |                    |   | Sul                                     |                             |
|           |                 |   |   |                               | CI-TESSIED DE      |                    |   | many files                              |                             |
|           |                 |   |   | Nect- 19 AA(1)                | DQ1126             | # -00              | 3-2-41  | 2                                       |                             |
| Field     |                 |   |   |                               | Chil FAVES         | Fined 3            | ٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠                  | <b>/</b>                                | Forfeels 4 Days bay         |
|           | 4-6             | PTE                                     |   | WOAS AWL from 0800Km 4JUNE41  | ~                  |                    |   |   | tor absence & Ry 1. 149(1)9 |
|           | HI              | , | The second control of | to 1005 Hm 7 TUNE 41          | 081126             | 14613              |   | Jos aulte                               | Forfeiture 6 days           |
|           |                 |   |   | absent 3 Days 2 Hr 5 willer   | Cepl               | forfeelters        | 9-10NE 41   | James                                   | 7 R+1 149(1)e               |
|           |                 |   |   | - Lect 1517A()                | Earres Est         | 6 Days Pay         |   | V - + - + - + - + - + - + - + - + - + - | Total fortaline 10 Days     |
|           |                 |   |   |                               |                    |                    |   |   | Park                        |

| Place        | Date of offence | Rank | Cases of<br>drunken-<br>ness | OFFENCE  | Names of Witnesses                      | Punishment awarded  | Date of award or<br>of order dispen-<br>sing with trial | By whom awarded | Remarks                |
|--------------|-----------------|------|------------------------------|--|---|---------------------|---|-----------------|------------------------|
| IN THE FIELD | 15 Sept         | Plē  |                              | AA40 Fred neglect to the Fred. In that he was still in Bed at 0630 has after being warned that all | D81056 CSM<br>MURRAY.RP.                |                     |   | Can Can         |                        |
|              | 1443            |      |                              | that he was still in Bed, at 0630  | MURRAY.RP.                              | 7 clays.            | 16 SEPT.  | 11 Cuffer       |                        |
|              |                 |      |                              | por after being warned that all  |   |                     | 1943  |                 |                        |
|              |                 |      |                              | men must be up bufore that hour.   |   |                     |   |                 |                        |
| IN-THE FIELD | 4 JAN           | Pte  |                              | AAžisž(1) WOAS. AWL in That he was AWL. from   | D-81417                                 |                     |   | 0.44            | 1 Forfeits 1 Day P     |
|              | 1444            |      |                              | 0630 HBS 3 JAN. until 1300 HBS 3 JAN. 41.  ABSENT 6 HBS. 30 MINS.                                  | Sqt. BAODELEY C                         | 5 Days C.B.         | 4 Dec. 43   | Whanson 69/     | I under F. R. 91 1490  |
|              |                 |      |                              |  | *************************************** |                     |   | 400 - n.        |                        |
| The Field:   | 26 MAR          | Pte. |                              | AA 15 (1) WOAS AWh in that he was absent from 0800 hrs 26 Mar 44 to 0845 his 26 Mar 44.            | DOCHMENT ARY                            | 7 days bay          | 29 mar 44.  | Trong frankly   | Forfeiture of          |
|              | 44.             |      |                              | was absent from 0800 hrs 26 Mar  |   | ' / /               |   | 1/              | 7 days pay             |
|              |                 |      |                              | 44 to 0845 hrs 26 mar 44.  |   |                     |   |                 | under FRV X            |
|              |                 |      |                              | absent 45 Mins.  |   |                     |   |                 | 149-1 (A).             |
| ://          | -               |      |                              |  |   |                     |   | 400 n.          | A                      |
| the Field 3  | oMar 44         | Pte  |                              | AA SEC 15(1) WOAS AWL In that he   | A Robinson - Lt.                        | Forfeits I days pay | 2 APR 44.   | youngen         | Fronfeiture of Iday    |
|              |                 |      |                              | failed to attend parade from 08 30 hrs   |   |                     |   | Maj             | pay for absence 1 Rid  |
|              |                 |      |                              | 30 Mar 44 until her reported to guard<br>room at 0900 Hes. 31 Mar 44. absent 23 hrov min           | 1)-81350 6pl.                           |                     |   |                 | 1490-1 (A). Front of 7 |
|              |                 |      |                              | room at 0900 Hrs. 31 Mai 44. Ubsent/23hrov mis   | s. Kelly, G-A-                          |                     |   |                 | 149 (2)                |
|              |                 |      |                              |  |   |                     |   |                 | Total forfelles od     |

No. 781468 Name Degacel . R. M.F.M. 6 Service or Corps (A.F.B. 122) 3 40/P & S/136 (2637) or Company Proficiency Pay Date of last entry in No. and date Period not reckoning towards Signature O.C. Sheet No. 3 Company Conduct Sheet Company, etc. of last drunk freedom from extra fine Date of award or Date of Cases of By whom awarded Rank Remarks drunken-OFFENCE Names of Witnesses Punishment awarded of order dispen-Place offence sing with trial A.A. 15 (1) W.O.A.S. lebrent 9.81053 wellout leave in that he c. 9 m. s was absent from o foo hos tullon 9.7 10 leng 43 with 1230 pm 10 youweday (P.T.O.)

Rear H.Q., 1 Cdn Corps. "A"

#### D-S1468 Pte Legault R. I Bn Black Watch (RHR) of C.

- 1. A Maintenance Order has been issued against the m/n soldier by the Petty Sessional Court in the County Borough of Eastbourne, on the complaint of one Mrs. Florence Barrett 9 Lottbridge Drive, Eastbourne.
- 2. The Court finds that the m/n soldier is the father of the child concerned, and the m/n soldier has been ordered to pay 9/- for the costs incurred in obtaining the Order, and further to pay the sum of 7/6 weekly until the child attains the age of 16 years.
- 3. Would you please have the m/n soldier paraded, and obtain from him a statement in writing in answer to this Maintenance Order, so that this matter may receive further consideration at this Headquarters.
- 4. May the m/n soldier's statement be forwarded as soon as possible, please.

(P.J.Montague) Major-General Senior Officer Canadian Military Headquarters

Levely that I, 181468 the Sugaret . S. 1 - In Black Watch (RAK) of Samuela, attended the Fitty Simonist Sound in Sounty Doneugh of Casthoune and planted quilty to the complaint. I agreed to pay the sum of mine shillings for the rest sucumed and the sum of seven shillings sin funce weekly until the child attains the age of sinten symme. D-81468 Pt. Lepault R.

DEPENDENTS' ALLOWANCE BOARD.

#### Re: D-81468 LEGAULT, R:

An application for War Service Gratuity has been received from Mrs. Margaret Legault, mother of the above-named deceased soldier, and as advice had previously been received from the D.A. and A.P. Branch to the effect that there was an illegitimate child Overseas, Gratuity was paid to Mrs. Florence Barett, mother of this illegitimate child, in trust.

A review of this man's Headquarters file does not indicate that his mother has any knowledge of the illegitimate child, and before advising her that Gratuity has been paid it is requested, please, that your file be reviewed and this office advised whether or not there is any indication thereon to the effect that Mrs. Legault is aware of the child's existence.

> (K.W. Rice) Capt., For Paymaster-General.

/EN

FORM CAS. 3-5M-2-44 (3752) H.Q. 54-27-70-2 VOL. 18 - KP. 1723

#### OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION MISSING PERSONNEL

| NUMBER                 | D-01460 RANK                                | SERVICE UNIT I I I              |  |
|------------------------|---|---------------------------------|--|
| NAME                   | LEGAULT, Robert,                            |                                 |  |
| DATE OF BIRTH          | 23-12-18                                    |                                 |  |
| MARLIAL STATUS PRESENT | Single                                      | MARITAL STATUS ON ENLISTMENT    |  |
| NEXT OF KIN            | Mr. Ernest Legault, (lather)                |                                 |  |
| ADDRESS                | 1895 Parc Lafontaine St.,<br>Montreal, Que. |                                 |  |
| CASUALTY DETAILS       | 9154<br>Missing                             | DATE ()—()—()                   |  |
|                        | Date and place of enlistment:               | 14-9-39 Montreal, Que.          |  |
|                        | Occupation Labourer                         | DIRECTOR OF RECORDS<br>N.D.H.Q. |  |

DISTRIBUTION

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

#### CANADIAN NATIONAL TELEGRAPHS

|        | 100    |
|--------|--------|
| LETTER |        |
|        | LETTER |

NIGHT LETTER



CASUALTY (REPORT DELIVERY)

OTTAWA

25 AOUT 1944

TO:- M ERNEST LEGAULT

1595 RUE PARO LAFONTAINE
MONTREAL QUE

16713 MINISTRE DE LA DEFENSE NATIONALE REGRETTE PROFONDEMENT VOUS INFORMER SOLDAT ROBERT LEGAULT D81468 ANTERIEUREMENT FORTE DISPARU AU COMBAT MAINTENANT OFFICIELLEMENT FORTE TUE AU COMBAT HUIT AOUT 1944 STOP SI NOUS RECEVONS DES RENSEIGNEMENTS SUPPLEMENTAIRES NOUS VOUS LES TRANSMETTRONS AUSSITCT

le directeur des archives militaires

PREPAID

DIRECTOR OF RECORDS

Mr. Ernest Legault, 1595 Parc Lafontaine St., Montreal, Que. Dear Mr. Legault: It was with deep regret that I learned of the death of your son, D81468 Private Robert Legault, who gave his life in the Service of his Country in the Western European Theatre of War on the 8th day of August, 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, Major - General Adjutant - General

> > SEP 26 1944

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

/IAP

File No. 405-2-19788

#### VERIFICATION FORM

WAR SERVICE MEDAIS 1939-45 Rank on Discharge Date of Discharge Deceased Authority for Discharge or Retirement Served in: Non-qualifying service 22-8-40 Canada from from to 5-7-44 United from Kingdom from to Italy from to Northwest from 6-7-44. to 8-8-44. Europe -----from ----from to Eligible for award of: 1939 - 45 Star Italy Star France-Germany Star Defence Medal War Medal 1939-45 Canadian Volunteer Service Medal with clasp Verified by Date 30 Carded



#### 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 Labert Lester  |                                | (Name in full)                                   |
|--|--------------------------------|--|
| Number 2-81468   | of the Cana                    | Active Service<br>adian Force                    |
| (Unit or Corps)  | (Give full title of Unit)      | C.A.S.F.   |
| do hereby revoke all former Wills by me made, and de                             |                                | ILL. I bequeath                                  |
| my personal estate consisting of   | personel a                     | Lat.   |
| (Here describe fully pers  | onal estate)                   |  |
| unto mestes tours  | ret                            |  |
| Sefault, 1485 Ba   | ice armed.                     | ame and Address of person                        |
| Eron beach.  |                                | or persons to whom it is to go and relationship. |
|  |                                |  |
| absolutely, and the residue of my personal estate and ev                         | erything that I can give or di | spose of   |
| (Here describe remaining   | ng assets)                     |  |
|  |                                |  |
| unto mes sets 12 as  | fare (                         |  |
| Lefacet.   | Ne                             | ame 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, Mo<br>everything except Real Estate. | ney in Bank, Stock Certifica   | ates, etc., in fact                              |
| In Witness Whereof I have  | e hereunto set my hand this    |  |
| IMPORTANT NOTE This must be signed and dated by the soldier him-                 | Lest.                          | .A.D. 193.2.                                     |
| self.  Aober   | (Signature of Soldier)         | •••••••  |
| Signed and acknowledged by the Testator, in the                                  |                                |  |
| in his presence, at his request, and in the presence of earlies Witnesses.       | ch other, have hereunto subs   | cribed our names                                 |
| 1st witness to sign here   | 00000                          | 21)  |
| Address in full  | re/(500)                       | rezint   |
| 2nd witness to sign here #-Q: Mai. 1   | Bailie                         | ••••••   |
| Address in full  | lan St.                        |  |

Monsieur Ernest Legault, 1595, rue Parc Lafontaine, Montréal, Québec. Prière d'adresser toute communication subséquente à ce sujet au:

DIRECTEUR DES SUCCESSIONS, MINISTÈRE DE LA DÉFENSE NATIONALE, OTTAWA, ONTARIO

et de citer le numéro suivant:

Q.G. 405-L-19,788 FD.316

#### MINISTÈRE DE LA DÉFENSE NATIONALE DIVISION DES SUCCESSIONS OTTAWA, ONTARIO

11 novembre 1944

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

LEGAULT, Robert, Soldat, .....

D.81468, Armée Canadienne.

il est nécessaire que les renseignements voulus concernant le défunt et les membres de sa famille soient fournis à la Division des successions. Vous êtes donc prié de lire le mémorandum ci-inclus avant de remplir les pages 2 et 3 de cette formule. Les détails exigés doivent être inscrits comme il faut et la déclaration à la page 4 doit être ensuite signée en présence d'un pasteur, prêtre, magistrat de la localité, commissaire instrumentaire, notaire public, ou officier de l'une quelconque des forces de Sa Majesté, que l'on priera de compléter et signer le certificat. Cette formule doit être ensuite renvoyée à l'adresse mentionnée ci-dessus.

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

come of dear to terre enfants (le ces ocinéant)

OG/GC

Le directeur des successions,

Dengi-

E'HI DI

Nouse des (rères on sœurs (ger-

op county att (mon un enister

sound decided to de decides

M.F.W. 77a (French) 3M—10-44 (5704) H.Q. 1772-39-972

Adresse de Jeurs anfants

שלפ ניווא על פנוצ

#### RÉPONDRE AU LONG À TOUTES LES QUESTIONS APPLICABLES

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

|                         |  |   | TÉMOIGNAGE DU   | DECLAR | ANT   |       |
|-------------------------|--|---|---|--------|---|-------|
| Degrés<br>de<br>parenté | PAI<br>à si                              | RENTS                                   | NOM ET PRÉNOMS de tout parent de chacun des degrés mentionnés | Age    | ADRESSE AU LONG<br>de chaque parent survivant, en regard de |       |
|                         |  |   | de tout parent de chacun des degres mentionnes                |        | son nom, et date du décès de tout<br>parent décédé          |       |
| 1                       | Veuve du défur                           | ıt                                      |   |        |   |       |
|                         |  |   |   |        |   |       |
|                         |  |   |   |        |   |       |
|                         |  |   |   |        |   | =     |
|                         |  |   |   |        |   | _     |
| 2                       | Enfants du dé                            | funt et dates de                        |   | plidi; |   |       |
|                         |  | ••••••••••••••••••••••••••••••••••••••• |   |        |   | _     |
|                         |  |   |   |        |   |       |
|                         |  |   | one description. Bonfo.                                       |        |   | _     |
|                         |  |   | 01101101  |        |   |       |
| 2                       | Père du défunt.                          |   | 77 9 0 7 7  |        | 1595 PARCLAFONTAINE   |       |
| 3                       | Pere au aeiunt                           | ••••••••••••••••••••••••••••••••••••••• | ERNEST LEGAULT  | 55     | MONTREL, Que  | _     |
| 4                       | Mère du défunt                           |   | MARGARET FRASER   | 55     | 1595 PARC LAFONTAINE<br>MONTREAL, Que                       | =     |
|                         |  |   |   | 27     | DE SASALLE OAKLANDS-TORON                                   | T1    |
|                         |  |   | ROPOLPHE LEGAULT  | 24     | L/pm. V-5502-55 PRINCE ALBERT DIRTM                         | חטוז  |
|                         |  | Frères                                  | LEO, JEAN LEGAULT   | 22     | D.16446 - Spr Jet Can Field Sylv                            | 7.    |
| 5                       | Frères                                   |   |   | A Page | home of the   | T     |
|                         | défunt                                   |   | FERDINAND LEGAULT   | 14     | Tel V 48160. C. 41332<br>90 F. M. O. Sydery M               | .5    |
|                         |  |   | FERDINAND LEGAULT   |        | 1595 PARCLAFONTAINE. MINTA                                  | 76-40 |
|                         |  | Demi-<br>frères                         |   |        |   |       |
|                         |  | II CI CS                                | AUCUN   |        |   |       |
|                         |  |   | MADELEINE LEGAULT   | 18     | 1595 PARC LAFONTAINE  |       |
|                         |  |   | ESTELLE LEGAULT   |        | MONTREAL Que<br>1595 PARC LAFONTAINE                        |       |
|                         |  | Sœurs<br>germaines                      |   |        | MONTREAL.Qui  | =     |
| 6                       | Sœurs                                    |   | THERESE LEGAULT   |        |   |       |
|                         | défunt                                   |   | MARGARIT LEGAULT  | 10     | 1595 PARC LAFONTAINE<br>MONTREAL, Qui                       |       |
|                         |  |   |   |        | MONTREALGE  |       |
|                         |  | Demi-<br>sœurs                          |   |        |   |       |
|                         |  |   | AUCUNE  |        |   |       |
| 7                       | Noms des frère                           | s ou sœurs (ger-                        | Noms et âges de leurs enfants (le cas échéant)                |        | Adresse de leurs enfants                                    |       |
|                         | mains ou nor sont décédés, de chacun d'e | n) du défunt, qui<br>et date de décès   | Noms et âges de leurs enfants (le cas échéant)                |        |   |       |

RÉPONDRE AU LONG À TOUTES LES QUESTIONS SUR CETTE PAGE

écifiés.

egard de

VTAINE

-, Que.

11332

NTAINE

FAL . Que

NTAINE

PL-AL. Que

RI-AL. Qu

ONTRIVI

REAL, Q.

NTAINE

tout

DÉTAILS D'IDENTITÉ Nom et prénoms du défunt. OBERT LEGAULT Date de sa naissance. 23 DE-CEMBRE-1918 10 Lieu et date de son mariage. CELIBATAIRE ONTREAL, QUE, 6 MAI-1916 11 Lieu et date du mariage de ses parents. DÉTAILS DE DOMICILE 12 Lieu où le défunt est né. ONTREAL QUE. 13 Indiquer, par ordre, la province, l'état et/ou le comté où le défunt a résidé avant son engagement, et la durée dans ONTREAL, QUE chaque cas. 14 Nature de son emploi avant son enrôlement. 15 Indiquer s'il était propriétaire de la maison où il demeurait. Le cas échéant, à quel endroit? 16 Indiquer le lieu où le défunt entendait vivre d'une façon permanente. ONTREAL. DÉTAILS DE LA SUCCESSION A-t-il laissé un testament? Si vous en avez la garde, veuillez nous le transmettre. LANDS-TO RONTO. 18 Si le défunt était marié et domicilié dans la province de Québec ou dans un état des États-Unis d'Amérique ou dans un pays où il existe communauté de biens entre les époux, existait-il un PALBERT DA RETMOUTH NS. contrat se rapportant à la propriété? Avait-il un compte d'épargne dans une banque, un bureau de poste-ou autre institution? Le cas échéant, donner le nom et l'adresse de la banque, etc., et le montant déposé. vous qu'il soit administré avec le compte de solde? Montant des certificats d'épargne de guerre que possédait le défunt. Indiquer l'endroit où ils se trouvent. ). Syden y M.S. AINE. MINTREAC.Q Montant des bons de la victoire que possédait le défunt. Indiquer s'ils sont enregistrés ou payables au porteur, ainsi que l'endroit où ils se trouvent. Si le défunt possédait des polices d'assurance-vie, donner les noms des compagnies et la somme payable en vertu de chacune des polices, ainsi que le nom de la personne qui y est nommée bénéficiaire. Décrire les autres valeurs, le cas échéant, et en donner le montant approximatif. Se servir de l'espace à la page 4, au besoin. AUTRES DÉTAILS Après son engagement, le défunt avait-il contracté des dettes: (a) pour ses propres logement et pension pendant qu'il était dans les forces armées. (b) pour habits et équipement militaires. Un état détaillé de chacun de ces comptes doit être annexé à cette formule et, s'ils sont exacts, veuillez y inscrire "approuvé" et signer votre nom. Si vous les croyez inexacts, donnez des détails. Est-ce que les frais funéraires ont été payés, entièrement ou en 25 partie, par vous-même ou un autre parent? Le cas échéant, annexez des états détaillés indiquant les montants payés, et par qui.

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

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

(CERRY UL BIO)

#### DÉCLARATION

Je, soussigné, déclare que tous les renseignements contenus dans cette formule sont exacts et constituent une liste fidèle et complète de tous les parents que le défunt ait jamais eus aux degrés

etc. signalés; et que je suis le/1/4. N.B.—A être signée au long en présence d'un pasteur, prêtre, magistrat de la localité, commissaire, notaire public ou officier de l'une quelconque des forces de Sa Majesté. Signature déclarant CERTIFICAT Je, soussigné, certifie que, autant que je sache..... déclarant \*Voir plus ...du défunt ci-dessus décrit. La déclaration ci-dessus a haut été faite par le déclarant et signée en ma présence. Signature du pasteur, prêtre, magistrat, commissaire, notaire public ou officier de l'une quelconque des forces de Sa Majesté. REMARQUE.—Avant d'accorder le certificat qui précède, il faut veiller à ce que le déclarant donne des détails concernant le décès de tout parent qu'il déclare être décédé et que les nom et prénoms, ainsi que l'adresse et l'âge de chaque parent survivant visé soient inscrits à l'endroit voulu dans la déclaration qui est vis-à-vis. (Si le défunt n'a aucun parent vivant des degrés signalés à la page 2, il faudrait donner ci-après les noms et adresses, et le degré de parenté, d'autres parents.) SE SERVIR DE L'ESPACE CI-DESSOUS SI VOUS DÉSIREZ FAIRE DES REMARQUES SUPPLÉMENTAIRES. 'il existe communauté de biens entre les écour, est tait-il un con trar se rapportant à la propriété? Avrit-il un compte d'éparence dans une banque, un bureau de post eson autre institution? Le cas échéant, donner le nom et l'adresse de la banque, etc., et le montant déposé. Désirezvous qu'il soit administré avec le compte de solde? Montant de revillents d'épargne de guerre que possédait le définir. Ludiquer l'endroit ou les se reguent. Montant des bons de la victoire que posséduit le défunt. Imdiquer s'ils sont enceristres ou payables au porteur, ainsi que l'endroit ou ils se trouvent. is it defunt possodait des polices d'assurance-vie, donner les noms des compagnics et la somme payable en vertu de chacunte des polices, niesi que le nom de la personne qui y est nomme beneficiane. Déceire les autres valeurs, le cas échéant, et en donner le montant approximatif. Se servir de l'espece à la page 4, au AUTRES DÉTAILS

ies lorces a coess. (b) nour bablics et équipament militaires. Un état détaille de chacun de ces compres doit être annexé à cetse forming and sont exacts, venilles y inscrire "approuvé" et errafigher voice from. Si vous les crovez inexacts, donnez des the fundacines out out out payes, entidrement ou en pare-memor ou un autre parent? Le cas delibaux, are détaillés indiquant les montants payés, et Op parent a dejà pané les festenticiones, ceux-ci lui seront reminurese pur le graveruement junqu'à concurrueux

April on angagement, le défant avaiteit contincté des dettes:

(a) pour ses propres iogeneent et pension pendant qu'il était dans

At hour regions of the content, si les frais excellent ce montant, la difference ne sera pas par ic par les univernes ni not) eta a to charge de la suncesion militaire du défunt.)

| COMPUTATION OF WAR SERVICE GRATI   |               |
|--|---------------|
| MEMBER'S ZAME. K.O. D.E.R  |               |
| File No. 40.   | 5-4 19288     |
| EAR MARRIE (Christian Names) (Surname)  EAR MARRIE TERME AND ETTE AREGRULAT. Date              | 8-45          |
| ADDRESS  | 0.1.1.40      |
| TOWN HALL, EAST BOWRNE, SUSSEX England: Final Rank   |               |
| DATE OF TERMINATION OF OVERSEAS SERVICE. S Date of Dischar                                     | rge. 8 8 4.7. |
|  | AMOUNT c      |
| A. TOTAL QUALIFYING SERVICE No. of day =   | 41250         |
| B. QUALIFYING OVERSEAS SERVICE  No. of days  |               |
| equal/3.0.6Days @ 25c per day  | 326 50        |
| C. SUPPLEMENT FOR OVERSEAS SERVICE   | 73900         |
| Daily Rate of Pay \$   |               |
| Subsistence Allowance \$   |               |
| Additional Pay \$  |               |
| Dependents' Allowance 1/30 \$ \$   |               |
| TOTAL \$. $\frac{3.75}{183} \times 7 = \$/9.35$ No. of Days $\frac{13.16}{183} \times \$/9.35$ | 13843         |
| D. WAR SERVICE GRATUITY  | 8-1-143       |
| Computed By  |               |
| E. DEDUCTIONS 2 1/2 Overpayment of  (1) Pay & Allowance \$                                     |               |
| 404- 7 July (2) D.A. & A.P. \$   |               |
| Other Deductions \$  |               |
| Entered By  Meconic for W. S. G.— 1  | VIL-          |
| F. AMOUNT PAYABLE  (This amount is payable in monthly instalments of \$                        | 877 43        |
| G. Monthly instalment not to exceed daily rate of Pay & Allowances per (C)                     |               |
| \$ × 30 = \$   |               |
| DENTADIZO  |               |

REMARKS

|   |          | FORM No. 1     |                                   |   |                             |
|---|----------|----------------|-----------------------------------|---|-----------------------------|
| Register No. D12936                       | <i></i>  |                | Nominal Roll No                   | D 295                                     |                             |
| ro: P.M.G.                                |          |                | H.Q. File No                      | 405-1-19,7                                | 88                          |
|   |          | CANADIAN ARMY  | ACTIVE)                           |   |                             |
|   |          | Computation of | ervice                            |   |                             |
|   |          | WAR SERVICE G  | RANT                              |   |                             |
| Regt. No. Rank when S.O.S.                |          | Surname        |                                   | Christian Name                            | in Full                     |
| D84468/ Pte 1                             |          | Legault        |                                   | Robert 7                                  |                             |
| REASON FOR TERMINATION OF  1st Enlistment |          | E:<br>Deceased | Λ                                 | ARO                                       |                             |
|   | •••••    |                |                                   |   |                             |
| 3rd Enlistment                            |          |                |                                   | CARO                                      | (                           |
|   | /        | Total Service  |                                   |   |                             |
| 1st Enlistment                            |          | 2ND ENLISTM    | ENT                               | 3RD ENLIS                                 | TMENT                       |
| T.O.S. 14 Sep 39 V                        |          | TOS            | T                                 | O S                                       |                             |
| S.O.S. 8 Aug 44/MD                        | di.      | SOS            | MD                                | ) S                                       | MD                          |
| Total Days                                | 1,/      | Total Dave     | To                                | tal Days                                  |                             |
|   |          | I Otal Days    |                                   | rear Day 5                                |                             |
| Total Service                             |          |                |                                   | 179                                       | ZDAYS                       |
|   |          |                | Total Service                     | Less<br>Non-qualifying<br>Service         | Net Service                 |
| VA/andarum Marunian kanya                 |          |                | 2017                              |   | 344                         |
| Western Hemisphere                        | •••••••  |                | 1447                              | 121 12                                    | 13/4 4                      |
| Overseas Service  Totals                  |          |                | 179100                            | 13%                                       | 16602                       |
|   |          |                |                                   |   | 12                          |
| Add Non-qualify                           | ing Serv | ice            |                                   |   | 131                         |
| Total Service                             |          |                |                                   |   | 1191                        |
| EMBARKATION DETAILS:                      |          | · ·            |                                   |   |                             |
| 1. Date S.O.S. Overseas                   | 80       | 2.             | Date S.O.S. Ove                   | rseas                                     |                             |
| REMARKS:                                  |          |                |                                   |   |                             |
|   |          |                |                                   |   |                             |
| Computer's Signature                      |          |                |                                   |   |                             |
| Date Computed                             | More !   | 7.3            |                                   | Stepany 4                                 | 14-                         |
|   |          | Servi          | ce Grants Act, 1 rvice shown bere | nent to benefits<br>944 has been es<br>in | under the Watablished, base |

500M-11-44 (6012) H.Q. 1772-45-8

DIRECTOR OF RECORDS.

#### Western Hemisphere-

| Forfeits for  | From  | To   | Effective Date  | Days                         | Total                    |
|---|---|--|---|------------------------------|--------------------------|
| 2001 AA 151   | )   | •  | 16 Aug 43   |                              |                          |
|   |   |  |   | •••••••••••                  |                          |
| '   |   |  |   |                              |                          |
| ••••••••••  | •   |  |   |                              |                          |
| •••••••••••••••••••••••••••••••••••••••                       | •   |  |   |                              |                          |
| •                       |   |  |   |                              |                          |
| ••••••••••••  |   |  |   |                              |                          |
|   |   |  |   |                              |                          |
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|   |   |  |   |                              |                          |
|   |   |  |   |                              |                          |
|   |   |  |   |                              |                          |
| •••••••••••   | •   |  |   |                              |                          |
| •••••••••••••••••••••••••••••••••••••••                       | •   |  |   |                              |                          |
| •   |   |  | ••••••  |                              |                          |
|   |   |  |   |                              | •••••••                  |
|   |   |  |   |                              |                          |
|   |   |  |   |                              |                          |
|   |   |  |   |                              |                          |
|   |   |  |   | ••••••                       | •••••••                  |
| ***************************************                       | -   |  | 1   |                              | ••••••                   |
|   |   | 40 T.O.  | S   | TotalT.O.S                   |                          |
| S.O.S   | 8. Aug  | 44s.o.:  | S   | T.O.S                        |                          |
| For AAIS  | 8. aug.   | ##s.o.s  | S   | T.O.S                        | <u>رَ</u> ک              |
| For AAIS  | 8. aug.   | ##s.o.s  | S. 16 leg 43<br>6 Cep 43  | T.O.S                        | <u>رَ</u> ک              |
| For AAIS  | (1)<br>(1)  | ##s.o.s  | S. 16 leng 43<br>6 Cep 43<br>4 Jan 44   | T.O.S                        | <u>رَ</u> ک              |
| For AAIS  | (1)<br>(1)  | ##s.o.s  | S. 16 leg 43<br>6 Cep 43  | T.O.S                        | <u>رَ</u> ک              |
| For AAIS<br>For AAIS  | (!)<br>(!)<br>(!)   | ##s.o.:  | S. 16 Aug 43<br>6 Cep 43<br>4 Jan 44<br>29 mar 44<br>10 apr 44                  | T.O.S                        | ر کی این                 |
| For AAIS<br>For AAIS<br>For AAIS                              | (1)<br>(1)<br>(1)<br>(1)<br>(1)   | ##s.o.s  | 5. 16 leng 43<br>6 Cep 43<br>4 Jan 44<br>29 mar 44<br>10 apr 44<br>2 apr 44     | T.O.S                        | <u>ح</u>                 |
| For AAIS<br>For AAIS<br>For AAIS<br>For AAIS                  | (!) (!) (!) (!) (!) 3 dep   | Concurred  | 16 Clug 43<br>6 Cep 43<br>4 Jan 44<br>19 mar 44<br>10 apr 44<br>2 apr 44        | T.O.S                        | <u>ح</u> رک              |
| For AAIS<br>For AAIS<br>For AAIS<br>For AAIS                  | (!) (!) (!) (!) (!) 3 dep   | Concurred  | 16 Clug 43<br>6 Cep 43<br>4 Jan 44<br>19 mar 44<br>10 apr 44<br>2 apr 44        | T.O.S                        | <u>ح</u>                 |
| Forf AAIS<br>Forf AAIS<br>Forf AAIS<br>Forf AAIS              | (1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>3 dep   | 44. S.O.   | 16 Clug 43<br>6 Cep 43<br>4 Jan 44<br>29 mar 44<br>2 apr 44<br>2 apr 44         | T.O.S.  S.O.S.  7  Yev 44  8 | 57.<br>20.<br>1.<br>3-   |
| Forf AAIS<br>Forf AAIS<br>Forf AAIS<br>Forf AAIS<br>WIL HA PA | (!) (!) (!) (!) (!) 3 dep 24 may 44 24 may 44   | 44. S.O.   | 16 Clug 43<br>6 Cep 43<br>4 Jan 44<br>19 mar 44<br>10 apr 44<br>2 apr 44        | T.O.S                        | 5-,<br>2<br>1<br>3-      |
| Forf AAIS<br>Forf AAIS<br>Forf AAIS<br>Forf AAIS<br>Wa Ha Pa  | (1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>3 dep   | 44. S.O.   | 16 Clug 43<br>6 Cep 43<br>4 Jan 44<br>29 mar 44<br>2 apr 44<br>2 apr 44         | T.O.S.  S.O.S.  7  Yev 44  8 | 5-,<br>2<br>3-<br>3-     |
| For AAIS<br>For AAIS<br>For AAIS<br>For AAIS<br>Wa Ha Pa      | (1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)  | 44. S.O.S. S.O.S | 16 Clug 43<br>6 Cep 43<br>4 Jan 44<br>29 mar 44<br>2 apr 44<br>2 apr 44         | T.O.S.  S.O.S.  7  Yev 44  7 | 5-,<br>2<br>1<br>3-      |
| For AAIS<br>For AAIS<br>For AAIS<br>For AAIS<br>WIL FA        | (!) (!) (!) (!) (!) 3 dep 24 may 44 24 may 44   | 44. S.O.S. S.O.S | 16 Clug 43<br>6 Cep 43<br>4 Jan 44<br>29 mar 44<br>2 apr 44<br>2 apr 44         | T.O.S.  S.O.S.  7  Yev 44  7 | 5-,<br>2<br>3-<br>3-     |
| For AAIS<br>For AAIS<br>For AAIS<br>For AAIS<br>WILL PA       | (1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)  | 44. S.O.S. S.O.S | 16 Clug 43<br>6 Cep 43<br>4 Jan 44<br>29 mar 44<br>2 apr 44<br>2 apr 44         | T.O.S.  S.O.S.  7  Yev 44  7 | 5-,<br>2<br>3-<br>3-     |
| Forf AAIS<br>Forf AAIS<br>Forf AAIS<br>Forf AAIS              | (1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)<br>(1)  | 44 S.O. S.O. S.O. S.O. S.O. S.O. S.O. S.   | 16 Clug 43<br>6 Cep 43<br>4 Jan 44<br>29 mar 44<br>2 apr 44<br>2 apr 44         | T.O.S.  S.O.S.  7  Yev 44  7 | 5-,<br>2<br>3-<br>3-     |
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| For AAIS<br>For AAIS<br>For AAIS<br>For AAIS<br>Wa Ha Pa      | (1)<br>(1)<br>(1)<br>(1)<br>(1)<br>3 dep<br>24 may 44<br>24 may 44<br>24 July 44<br>AA 15 (1)<br>26 Day 44<br>(1)(4)<br>4 June 41 | 44 S.O. S.O. S.O. S.O. S.O. S.O. S.O. S.   | 16 Clug 43<br>6 Cep 43<br>4 Jan 44<br>29 mar 44<br>2 apr 44<br>2 apr 44         | T.O.S.  S.O.S.  7  Yev 44  7 | 5-,<br>2<br>1<br>3-      |
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| Forf AAIS<br>Forf AAIS<br>Forf AAIS<br>Forf AAIS<br>WIL HA PA | (1) (1) (1) (1) (1) (1) (1) 3 dep 24 may 44  24 may 44  24 July 44  AA 15 (1) 26 Day 44  (1)(4) 4 June 41  18 Ore 41              | 44 S.O. S.O. S.O. S.O. S.O. S.O. S.O. S.   | 16 Clug 43 6 Cep 43 4 Jan 44 19 man 44 2 apr 44 2 apr 44 4 July 44 4 July 44    | T.O.S.  S.O.S.  7  Yev 44  7 | 5-<br>2<br>1<br>3-<br>3- |

# 3/45A MFM 510 40/P&S/254 (7012) CANADIAN ACTIVE SERVICE FORCE District

#### OVERSEAS

Dispersal Area....

## LAST PAY CERTIFICATE

(All Ranks)

| Regtl No. D81                          | 468 Rank and Name                       |   | LE                                      | GAULT. R. Pte.   |   |        |
|--|---|---|---|--|---|--------|
|  |   |   |   | 84b Angree 101   |   | •••••  |
|  |   |   |   | on 8th August.194  |   | •••••  |
| Reason                                 |   | •••••                                   | •••••••                                 | Authority: V.V.L."A" 482 d/ 25.  | Aug. 4                                  | Ł.     |
|  |   | e above-name                            | d from                                  | Ist.August to 31st.August.   | 19                                      | 14.    |
| THE HICIUSIVE GA                       | te of transfer or discharge.            | 1                                       | Dr                                      |  | Cr                                      |        |
|  | Particulars                             | Amou                                    | nt                                      | Particulars  | Amou                                    | ant    |
| Balance Dr from                        |   | 61                                      | 86                                      | Balance Cr from last account   |   |        |
| First Monthly P                        | ayment                                  |   |   | Regimental Pay 31 days at \$1.50   | 46                                      | 50     |
| Casual Payment                         | s                                       |   |   | Tradesmen's Paydays at\$   |   |        |
| Payments on Tr                         | ansfer or Discharge \$7.26              | 917                                     | 96                                      | Additional Pay (Give Particulars)  |   |        |
| Assigned Pay                           |   |   | 20                                      | Allowances (give particulars)days  |   |        |
|  | rges                                    |   |   | at\$   |   |        |
| Public Stoppage                        | s (give particulars) :                  |   |   |  |   |        |
|  | ••••••••••••••••••••••••••••••••••••••• |   |   |  | •••••••                                 |        |
| ······································ |   |   |   |  | ••••••                                  |        |
|  |   |   |   |  |   |        |
|  | Free                                    |   |   |  |   |        |
| To Balance Cr                          | Deferred                                |   |   | By Balance Dr  | 42                                      | 62     |
|  | Total                                   | 89                                      | 12                                      | Total  | 89                                      | 12     |
|  |   |   |   | JECT TO ANY CHARGES ON THE REVERSE HEREOF                                |   |        |
| Remarks                                | (1) Assnd Pay                           | 20.00                                   | (M) S                                   | Stopped eff September. 1944.   |   |        |
|  |   | • | • | eting Officer. Town Hall.  |   |        |
|  | Eastbourne                              | Sussex                                  | Engl                                    | land) Stopped eff September.   | 1944.                                   |        |
|  |   |   |   | as been compiled from Treasu   |   | •••••• |
|  | Records, th                             | ae lates                                | st ps                                   | aybook not being available.  |   |        |
|  |   |   |   |  | • |        |
|  |   |   |   |  |   |        |
|  |   |   |   |  |   |        |
|  |   |   |   |  |   |        |
|  |   |   |   |  |   |        |
|  |   |   |   |  |   |        |
|  |   | *                                       |   |  |   |        |
| -                                      | B. Mc. Kercher.                         |   |   |  |   |        |
| Checked by.                            | & Broughton                             |   | . (                                     | Certified correct O. Joech Corrects for Chief Treasury Officer, Overseas |   | -      |
| Date24                                 | th.April.1945.                          | • • • • •                               |   | tor Chief Frenstry Chicer, Carersens                                     | /                                       |        |

# 9

#### PURSUANT TO MAINTENANCE ORDER

(Art. 761 F.R. & I. (Overseas))

REPORT

D.81468

Pte

Legault R.

1 Bn Black Watch (RHR)

of C.

COURT

Order made on 20 Nov 42 by the Petty Sessional Division of Eastbourne on the complaint of Mrs Florence Barrett for the payment of 7/6 per week for the maintenance and education of her child until said child attains the age of sixteen years and 9/- costs incurred in obtaining the Order.

REPORT ON SOLDIER S

|  | 30-day month | 31-day month |
|--|--------------|--------------|
| Daily Rate of Pay @ \$1.30<br>Assigned Pay | \$39.00      | \$40.30      |
|  |              |              |
|  | 19.00        | 20.30        |
| Minimum drawings (Art. 760 F.R. & I(0))    | 9.75         | 10.08        |
| Amount available for stoppage              | \$9.25       | \$10.22      |
|  |              |              |

RESULT OF SOLDIER'S INTERVIEW

The soldier appeared in Court and admitted paternity. The soldier states that he is willing to pay the sum of 9/- costs, and the sum of 7/6 weekly for the maintenance of the child.

DIRECTION

AUTHORITY: Article 760 F.R. & I. (Overseas)

I DIRECT that D.81468 Pte Legault R., 1 Bn Black Watch (RHR) of Canada be placed under stoppages as follows:

For the month commencing 1 Dec 42 the sum of \$9.27 per month Thereafter " 1 Jan 43 " " \$7.26 " "

to be appropriated in liquidation of the amount adjudged to be paid by the above Order, and the provisions of Art. 761(c) be carried out.

DATE Dec 42

EARLIETECHTER PROTECT LEGISTICS .. CEL

pe per ecars of whe six

Min Borgress Man S Lines

(A.W.Beament) Brigadier
D.A.G.

Canadian Military Headquarters

2 copies to:

CHIEF PAYMASTER (in duplicate)

Payment to be made to:

The Collecting Officer,
Harold Glenister Esq.,
Magistrates' Clerk's Office,
Town Hall,
Eastbourne.

TOWN THE

#### RECOMMENDATION

The soldier has a free pay balance of \$9.25. The soldier has offered to pay costs of 9/- and to pay the sum of \$7.26 monthly (7/6 weekly) for the maintenance of the child pursuant to the Order. It is recommended that the soldier be placed under a pay stoppage as set out in the Direction above.

to be apprendicted in the tentention of the simeout salindes to

H. C. Mustin

30,50

50100

\$40.80

228 00 ---

THE TEST HOUSE THE PARTY OF THE PARTY OF THE PARTY.

(H.A.Martin) Captain
A.G.5a

Canadian Military Headquarters

8 Dec 42

- 100 G 4 7 100

(b) For the common commoncings b boc 48 the amend 48.27 her month

Misconada beapladed under abbapages as rollows:

and the sum of 7/0 weekly for the semintenence of the cilid.

The coldier appeared in Court and admitted othernity. This

PROPER SAFITOR TOLERANGES

MIGHT GENERALIES AND BANKS TOURS

Dania in the to or that the transfer of

pongue ou the constaint of Mrs Figures as Sensit Division the page.

THE THE PERSON NEEDS (MILE)

Paymenter General (5.4.D.) get 4 ile March 1st 1949
No. 8 Lenguage Blog H. O. 405-1-19, 788 Dear cer-I am informed by your Dept. that an aurunh of \$ 877. 43. has been faid to Mrs Flaunce Barett, for the account of Margaret Legaret, & Magistrale o Clerch office, Sounhall, Kastlourur, Sussex, Eugland on the 16th Cuyost 1945. Margaret Legaret, 1595 Pare La Junterin. Montreal, Canada, mother of PTE, ROBERT LEGAULT, D81468, Telled in action on the 8th august 1944, has received assigned Jay up to the first September 1944, Jun ther deceased, ROBERT LEGAULT, D81468, she also holds of shotostat copy of a will from the Estate Dept, at Ottawa, M. F., 10-100 m-8-30 (1706) H.Q 1772-45-18, which well is declaced on file on the faith day of Softenly 1945, and formaled to her, suggesting that she should apply for a gratuity if she had not already denn so-On the 17th February 1947, for other details. I trust you will girs this infamination dur considerations without further delay, James truly Father of deceased, Robert Legault, D.81468 1595 Pace L. Jontons Moultral Que

| Part      | II D.O.  | DADTICIU ADC OF CACUALTIC   |
|-----------|----------|---|
| No.       | Date     | PARTICULARS OF CASUALTIES   |
| Ch        | 8-5-44   | AWARDED TODYS PAY FOR AWL FROM 0800 hrs 26 MAR                              |
|           |          | 44 TO 0845 hrs- 26 MARCH (ABSENT 45 MINS)                                   |
| GR        | 11-4-44  | ON I APRY4 AWARDED AFORF OF GDAYS PAY FOR                                   |
|           |          | ON I APR44 AWARDED AFORF OF BRAYS PAY FOR<br>AN (OFF) UNDER AA 15 (1) ANN.L |
|           | 11-4-44  | ON IOARRY AWARDED JOAYS CB AND FORF S                                       |
|           |          | DAYS PAY FOR AN (OFF) UNDER AA IS (1) AINL                                  |
| B04/2A    | 26-1-44  | AWY CVSMIC, 40.0. P.15 JAN 44 Auth R.O. 4162                                |
| 30/4/E CR | 3 JUN 44 | ON I JUNILLA AND 21 DAYS (P.P.) AND FORFS 29 DAYS PAY                       |
|           |          | ANDPLACED UNDER (STOP) OF PAY IN THE AMT OF £1-0-10                         |
|           |          | FOR A.W.L. AA 18(1)   |
| JA.       | 6 JUN 44 | DA 3 JUST 44 AIN'S 28 DAYS (F.P.) ANDA TOTAL FORF OF                        |
|           |          | 43 DAYS PAY AND TO PAY COST OF (APP) IN THE AM                              |
|           |          | 0F = 3-14-11 FOR A-W-L A. 1.15(4)   |
|           |          | a. &  |
|           |          |   |
|           |          | ,   |

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CONTINUATION CARD M.F.M. 14

Regimental No. 0 8:468 Name LEGAULT.

| Part I                       | I D.O.    | PARTICULARS OF CASUALTY  |
|------------------------------|-----------|--|
| No.                          | Date      |  |
| 93                           | 9- JUL 44 | ON + JUL 44 AWOA FORE OF 28 DAYS PAY FOR<br>ANDFO) UNDER AA 15(1) A.W. ( |
|                              |           | ANDFO UNDER AA 15(1) A.W.C   |
| 6R                           | 8/8/46    | Los to X. b. Last (IRHC) missing well 8/8/44                             |
| CR                           | 14/8/44   | BEVIOUSLY ROTO MISSING NOW PRESUMEO KIA                                  |
|                              |           | wef 5 Aug 44   |
| CR                           | 20/8/44   | RESUMED (KILLED IN ACTION) NOW KILLED IN HERE                            |
|                              |           | wef 5 August   |
|                              |           |  |
|                              |           |  |
|                              |           |  |
|                              |           |  |
|                              |           |  |
| M.F.M.—14A<br>40/P&S/67 3400 |           |  |

#### CASUALTIES, ETC.

| NATURE   | PART 11, D. O. |               | REMARKS  |  |  |
|--|----------------|---------------|--|--|--|
| E. G. ABSENCE, PROMOTION, ETC.                                 | No.            | DATE          | IF IN HOSPITAL, NOTE NAME, ETC.  |  |  |
| DRUNKENNESS.   | 12             | 22-10-40      | 151 offence.   |  |  |
| Aw L.  | 3              | 10/1/41       | FORFEITS & BAYSPAN   |  |  |
| BRUNKENNESS 2ª Offense   | 8              |               | FINED STATE FORFEITS 10 days pay   |  |  |
| atte to Che a Dul a  | CR 10/6/41     | B038  25/6/41 | FORFEITS 10 days pay   |  |  |
| atte to ilde any Duch Ble for<br>noticis quarters + transing   |                | 55/6 26/9/W   | Mr 219/41 619/9/41  At 40/eto 1 days pay.  elf 27-11-41                    |  |  |
| AWL.   | 17.11.41       | 66/14         | M 4 0+   |  |  |
| Cocases believed total - 10                                    | 26-11.41       | 69/7          | of Toyers I day pay.   |  |  |
| le cases beleated tother unit fap. Counts to Cole tete Barrels | CR             | 69 15 12/41   |  |  |  |
| Released from ean Det Barrado                                  | 15.12.11       | 73/           | eff 27-11.41   |  |  |
| Drunkeness 2 2 Offence   |                | 3 15          | W 16.12.41   |  |  |
| AWL.   | CR20 1         | 3 31-3-42     | forfeits 7 days hay  |  |  |
| Offense under AA. Dect 40                                      | CR             | 32-10-H3.     | eff 27-11.41  Uf 16.12.41  foried \$1000  forfeits 7 days pay (80/68/15-7) |  |  |

| NAME Legault Robert  |                                       |
|--|---------------------------------------|
| REGIMENTAL NO.D - 81468 RANK PLE                           |                                       |
| ENLISTED AT Montreal. PROMOTIONS, ETC. AND DATE            |                                       |
| DATE 14 Sept. 39   |                                       |
| IF SERVED PREVIOUSLY, STATE UNIT, ETC.                     |                                       |
| MARRIED, WIDOWER, OR SINGLE Single                         | · · · · · · · · · · · · · · · · · · · |
| NEXT OF KIN Ernest Legault RELATIONSHIP Father             | ~                                     |
| ADDRESS OF 1485 Marie Ann St., Montreal. 1995 Pane         | containe S                            |
| ASSIGNMENT OF PAY, S. 20c. 00 7.26 wer 1 Jan 43            |                                       |
| ADDRESS Above Collecting Officen - Magistrates Clerk       | rne Bussex                            |
| DEPENDENT'S ALLOWANCE, ENTITLED OR NOT                     |                                       |
| DATE APPLICATION FORWARDED TO DISTRICT PAYMASTER. 9 NOV 39 | M. F. M. 14                           |
| IN WHOSE FAVOUR Margaret Legault - Mother                  | 100M—9-39 (1873)<br>H.Q. 1772-39-1662 |

Nob.

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| No D. 81468 Rank Private Name LEGAULT, Robert             |
|---|
| Unit Black Watch (R.H.R.) Date of death 8th August, 1944. |
| Died at France.   |
| Cause Killed in action.                                   |
| Death occurred on strength of Forces.H.Q. 405-L-19788     |
| N/K Mr. Ernest Legault, Relationship Father               |
| Address 1595 Parc Lafontaine Street, Montreal, Quebec.    |
| Remains buried in Cemetery                                |
| MR.022604 St. Martin de Fontenay France.                  |
| Grave location  |
| GAN OUER-   |

y - ---- ---- -----

00 --ROYAL MESSAGE DI RETURN TO BUR BURIAL REPORT MESSAGE

DESP

CAN.

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

Grave: 13, Row G, Plot 1.

rdI & CR Form Despd. DEC 2-1946

Photographs Despatched

(1) MEDALS MEMORIAL PERSON Mrs. Margaret Legault, (1 1595 Park Lafontaine St., (Mother) ENTITLED TO Montreal, P.Q. ADDRESS: (2) MEMORIAL CROSS WIDOW ADDRESS: (3) MEMORIAL CROSS MOTHER Mrs. Margaret LEGAULT, (FRENCH) DESP. NOV 28 19/4 1723 ADDRESS: 1595 Parc Lafontaine St., MONTREAL, Que.

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|---|---|---|------------|---|---|
| 0 | - | - | Service of | - | - |

#### AWARDS-CANADIAN ARMY (ACTIVE)

M

500M-1-44 (3467) H.Q. 1772-45-8 FB

1723

FILE NO. 405-L-19788

LEGAULT, Robert

D-81468

Pte.

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

1st Royal Highrs. of C.

SURNAME (IN BLOCK LETTERS)

CHRISTIAN NAMES

REG. No.

RANK ON DISCHARGE

C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

| CAMPAIGN MEDALS                       | REGISTRATION NUMBER AND DATE DESPATCHED |      |         |  |
|---------------------------------------|---|------|---------|--|
| 1939-45 Star<br>France & Germany Star |   | 93.0 | 4/11/49 |  |
| Defence Medal<br>War Medal 1939-45    |   |      |         |  |
| C.V.S.M. & Clasp                      |   |      |         |  |

## OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

| NU R<br>NAME  | D.81468 RANK Private LEGAULT, Robert   | SERVICE UNIT 1st Royal Highlanders of Canada (C.A.). |  |  |  |
|---|--|--|--|--|--|
| DATE OF BIRTH   |  | DATE OF ENLISTMENT                                   |  |  |  |
|   | 07-19-18                               | 14-9-39  |  |  |  |
| MARITAL STATUS  | Single                                 | RELIGION Roman<br>Catholi                            |  |  |  |
| NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP  ADDRESS | Pather<br>1595 Perc Lafontaine         | NAME Ar. Srnost Legeult.  D.A.B.                     |  |  |  |
| ADDITIONAL PERSON<br>TO BE NOTIFIED                           |  | ADDRESS  |  |  |  |
| PARENTS NAME  ADDRESS  (IF SOLDIER  MARRIED OVERSEAS)         |  |  |  |  |  |
| AUTHORITY CAS. SIG. NO.  CASUALTY DETAILS                     | Canrecords 9644 H.Q. 405-L-19,788 DATE |  |  |  |  |
|   | Killed in action                       | 8-8-44   |  |  |  |
|   | PRANCE.                                |  |  |  |  |

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

YES/NO

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

YES/NO

DATE

28-8-44

DIRECTOR OF RECORDS

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

ME mo

COPY FOR C. R. FILE

TRIBUTION- 1-CON. 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.