D86046
MCASKILL
DONALD

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OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full MCASKILL Donald (b) Reg'l. No. D-86046
2. (a) Arm of service ARMY (b) Unit 2nd. Bn. R.N. (RHR) CA (c) Rank PTE.
3. (a) Date of birth Oct. 20/08 (b) Have you any dependents? 1 (c) Place of residence at time of enlistment MERDUN P.Q. CAN.
4. (a) Place of enlistment MONTREAL SOUTH QUE. (b) Date of enlistment 16-4-42

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 14 (b) Were you attending school or college up to the time of enlistment? NO
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) 7 Yrs. Public School
7. If you attended a university, give name of university and standing or degree secured
8. (a) Did you ever enter upon a trade apprenticeship? - (b) If so, for what occupation? - (c) Did you finish it? (d) If you did not finish it, how long did you serve at it? -
9. (a) What languages do you speak fluently? ENGLISH (b) What languages do you read well? ENGLISH

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

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

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

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

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

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

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

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

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

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

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

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? NO (b) Do you feel competent to operate a farm? NO (c) If so, in what kind of farming? --
25. (a) Were you born on a farm? NO (b) How many years' actual farming experience have you had? NONE (c) In what provinces did you have experience? --

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? NO
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.) --
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form NONE

DATE APR. 16th. 42 194 SIGNATURE + Donald McAskill

"O" CARD COMPLETE

This form will accompany the soldier's regimental documents at all times.

DEPARTMENT OF NATIONAL DEFENCE
(Army)

Personnel Selection Record

2nd Bn. Black Watch
Arm or Corps

Trade (if Tradesman or Trade Trainee)

Work in Arm (if Non-Tradesman)

I.

D 86046	L/Cpl	McASKILL, Donald	A	33	A1
Regt. No.	Rank	Name (surname first)	A or R	Age	Med. Cat.

English		D.R.O. Halifax, N.S.	13 May '43
Main Language	Other Language(s)	Place (Unit) Interviewed	Date Interviewed

II. Revised Examination "M"

St. Johns, P.Q. 17-7-42
Place Tested Date Tested By Whom

172	II	Subtests	14	14	16	26	31	13	26	32	Subtotals	44	57	71	English
Total	Group		1	2	3	4	5	6	7	8		1-3	4-5	6-8	English or French

Other Tests

III. Educational Background

Finished Grade VIII (town,P.Q) at the age of 14. 3rd in Class.
Had to start work.

IV. Occupational Background

20 years - Canadian Fairbanks Motors - accountant, cashier, and working into sales end.

V. Military Background N.P.A.M¢ 2nd Bn. B.W. June '40-Apr '42.
Enlisted 22 April '42, 2nd Bn. B.W. A/L/Cpl. 16 Apr '42.
A 30 - A1 Course - Sept-Oct '42. QII
No.IVTS - Dec 42-Feb '43, thinks Q II. L/Cpl 9 Feb '43.
M.F.M. 6 clear.

VI. Other Personal History and Appraisal

Height 5 ft. 6 in., weight 197 lbs.
No ill health. Stout man but seem to be in good shape.
Swims, skais, does a lot of reading, especially autobiography.
Single.
Superior learning ability, very keen, pleasant manner. Excellent stability indicated by civilian record.
QII on A.I's course, prefers field training to O.R. work.
Especially keen to get some mechanical work. Attitude excellent and appears to be quite able. Potential senior N.C.O.

VII. Recommendations

Appears suitable for overseas service.

(Signed) S. L. Fountain Lieut
for J. R. Grant, Lieut. Army Examiner

M.F.M. 196
200M—1-43 (8312)
H.Q. 1772-39-1916

See reverse side for further information and follow-up

Soldiers Qualification Card

CONFIDENTIAL

D86046. | McASKILL | DONALD.

Regimental Number | Last Name (Block letters) | First Name | Middle Names

Unit 5th C.I.R.U. A.T. 61

1 Corps INFANTRY (R.H.C)

CODED

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

3 Father Racial Origin: BRITISH - SCOTCH. Mother: " - "

4 Language spoken in home: French ..... English ✓ Other .....

5 Age 34/11 20.10.08. 6 Height 5' ft. 6 in. 7 Weight 203. 8 Silhouette [1] [2✓] [3] [4]

Eyes 9 Colour of BLUE 10 Acuity [1] [2✓] [3] 10 Glasses - 11 Colour Vision [1] [2] [3] [4]

12 Hearing: Acuity [1✓] [2] [3] 13 Speech Defects .....

14 Handedness [R✓] [L] [A] 15 Med. Category A-1.

Cause .....

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

Health History Sinus operation 1930.

16 Education Level: Illiterate ..... El. 8 (4) Sec. ( ) (Grade completed)

Conduct during school life —

17 18 University or Professional Institution	Course Taken	Years completed	Degree	Year

19 Post Graduate	Course	From—To	Degree	Year

20 Specialized Training:

1. (Course) ACCOUNTANCY.

At CORRESPONDENCE From—To 1932 - 1934. Completed ? No.

21 2. (Course) .....

At ..... From—To ..... Completed ? .....

22 3. (Course) .....

At ..... From—To ..... Completed ? .....

Other trades papers, Diplomas Certificates or Qualifications .....

23 Languages: Spoken fluently ENGLISH,

Written well "

24 Main occupation: Description ACCOUNTANT AND CASHIER.

Estimate of skill limited.

Duration (from—to) 1922 — 1942. Weekly Wage $20

Employer's Name and Address CANADIAN FAIRBANKS MOTORS. MONTREAL, QUE, CAN.

50 "M" Test | Score | S.M. | Test 9 Score

Test	Score	S.M.	
1	14		Sub-total 44
2	14		S.M.
3	16		
4	26		Sub-total 57
5	31		S.M.
6	13		Sub-total 71
7	26		S.M.
8	32		
Tot.	172		Grade B.

English ✓ French .....

51 OTHER MENTAL

Test .....

Score ..... Grade .....

Date .....

52a MECHANICAL APT.

Test .....

Score ..... Grade .....

Date .....

52b CLERICAL APT.

Test .....

Score ..... Grade .....

Date .....

53 TRADE TESTS

Trade and Grading	Date

54 OTHER

Test .....

Score ..... Grade .....

Date .....

25 Second Most Important Occupation: Description: ..... Estimate of skill .....

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

Employer's Name and Address .....

26 Third Most Important Occupation: ..... Estimate of skill .....

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

Employer's Name and Address .....

Trade Union or Professional Society .....

Vehicles: 27 Heavy Truck — 28 Light Truck — 29 Auto W 30 Motorcycle —

31 Farm Tractor — 32 Tracked Vehicle — 33 Power Launch D 34 Aeroplane —

35 Accident Prone — Teamster —

Farming Experience: Wide ..... Limited ..... None ✓

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

Job promised after discharge ? YES By whom? Name 24.

Job 24. Address: .....

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

Type of work desired 24.

Occupational history: Ambitious ..... Stable ✓ Accidental ..... Erratic .....

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

Marital Problems .....

Wife's or Husband's Age ..... Attitude to Service ..... Health .....

37 No. of Children ..... 38 No. of Dependents —

Relationship of Dependents [illegible]

No. of Brothers ..... No. of Sisters ..... Position in family .....

Status of home in childhood —

Religious Denomination PRESBYTERIAN.

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

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

40 Sports: (1) SWIMMING (2) TENNIS (3) SKIING.

Team Games and Position (1) BASKETBALL (WING AND DEFENCE)

(2) SOCCER (HALF BACK) (3) HOCKEY (DEFENCE)

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

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

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

42 Previous Experience in Armed Forces

ARM or CORPS	Type (C.E.F., N.P., etc.)	Years	Highest Rank	Last Discharge (Yr.)	Special Training Received
INF.	(R.F) 2ND.BN.R.H.C.	2	L/CPL.	1942.	

43 CURRENT SERVICE: Date Enlisted 16.4.42. Place Enlisted MONTREAL SOUTH, QUE.

Date From—to	Country	Corps	Unit and Sub-unit	Rank 44	Principal Duty	Performance
16.4.42-26.8.43	CAN.	INF.	2ND.BN.R.H.C.	L/CPL.	SECTION L/CPL, CLERK IN BOR(C)	
27.8.43-	ENG	"	5'C.I.R.U.	PTE.	REINFT.	

45 COURSES ATTENDED	PLACE	Date: From—to	Qualified as	Rating
A/1. COURSE,	UTOPIA, N.B.	1.9.42 - 15.10.42	—	"QII"
CLERK'S COURSE.	LONDON, ONT.	10.12.42 - 10.2.42	—	—

46 Crime: Courts Martial Convictions — Major Offences — Minor Offences —

Civil Convictions — Fines — Hospitalization —

49 Psychiatric ☐ ☐ ☐ ☐ ☐

C.M.H.Q. 1000:115
40/P&S/1246(2609)

47 Classification: Military Specialties and Trades

CONFIDENTIAL

Designation	Degree of Proficiency	Date	Authority
Pay clerk.			

55 Type of Service Desired (1) Driver - Mech "C" (2) Driver 1/c(w) (3) Pay clerk.

Remarks re Outstanding or Limiting Factors

Deportment	average.
Disposition	alert, pleasant.
Appearance (grooming)	clean - cut
Physical appearance	overweight.
Map Reading	average
Military Knowledge	average
Mechanical Knowledge	slight.

Seems overweight for rigours of Infantry in field. Keen interest in automotive training. Learning ability suggests he could adjust well in M.T. training. Not capable of long route marches. Keen, ambitious, & willing. Quick thinking & quick performance.

Reason for Joining Cdn. Army Duty

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

Tests Indicated: 51 ..... 52a ..... 52b ..... 53 ..... Other .....

48 Suggested Possibilities (1) Poss. Driver 1/c (w)

for employment (2) Poss Pay Clerk.

Interviewed by T. L. Hoskin capt. Date 7 Sept '43

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

FOR COMPLETION AND RETURN BY

1

Form P. 64

Mrs. Helen McAskill,
357 Galt Avenue,
VERDUN, P.Q.

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

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

and the following number quoted:—

H.Q. 105-M-37210 FD 77

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

7 December, 1944.

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

McASKILL, Donald, Pte.

D-86046 - C.A.

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

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

ESTATES BRANCH DEC 14 1944 H.Q. OTTAWA NATIONAL DEFENCE

GHF/JB

Director of Estates.

13

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

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....				
2	Children of the Deceased and dates of their Births.....				
3	Father of the Deceased.....				
4	Mother of the Deceased.....		HELEN M^cASKILL	65	357 Gatt Ave Verdun Que.
5	Brothers of the Deceased	Full Blood	John Measkill	34	active 2nd. overseas
			Robert Edward Stuart Mc Askill	22	Active Canada Overseas
		Half Blood			
6	Sisters of the Deceased	Full Blood	Margaret Mc Pherson	40	26 & 2nd Ave Longueuil
			Thelma Edmonstone	38	26 Strathyre Ave Montreal
			Christine Cummings	29	3495 Van Horne Ave Montreal
		Half Blood			
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each.		Names and ages of their children (if any)		Address of their children

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Donald McArthill
9	Date of his birth.	Oct. 20 1908
10	Place and date of his marriage.	
11	Place and date of his parents' marriage.	Scotland 1904

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Que. (b) Verdun (c) (d) 35 Years
14	Nature of employment before enlistment.	Clerk
15	State whether he owned the premises in which he lived, and, if so, where situated.	
16	Name place where deceased stated he intended to make his permanent home.	

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	Military Will of which I am Executor Copy
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	
20	Amount of War Savings Certificates held by deceased. Indicate where located.	
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	Cancelled Was paying on a bond Overseas
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	London Life Ins. $1500.00 Mother
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— *(a)* His own separate board and lodging while on service. *(b)* Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	12

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

(PLEASE TURN OVER)

DECLARATION

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

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

*Mother ..... of the deceased.

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

Mrs Helen McAskill ..... Signature of Informant

357 Gabt Ave Verdun Que ..... Address

CERTIFICATE

Mrs Helen McAskill

I hereby certify that to the best of my knowledge and belief x Deceased

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

Dated at VERDUN this 13 day of DECEMBER 1944

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces. C E Harris ..... Qualification Justice of the Peace District of Montreal

Address .....

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

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

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

Would like to get some idea of when his personal belonging may be expected. Have received copy of his will & Memorial Cross but nothing belonging to himself

ecelved.....Checked.....Ca.d Observations.....

OCCUPATIONAL HISTORY FORM COMPLETED

FINGER PRINTED

ORIGINAL
DUPLICATE
TRIPLICATE

M.F.M. 2
A.F.B. 271
500M—7-41 (1131)
H.Q. 1772-39-1645

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

Unit 2nd. Bn. B.W.(RHR) CA. Regimental Number D-86046

ACTIVE FORMATIONS AND UNITS OF THE CANADIAN ARMY

ATTESTATION PAPER

1. Surname McASKILL
2. Christian Names Donald
3. Present address 421 Galt Ave, Verdun, P. Que., Canada
4. Date of birth 20 October 1908
5. Place of birth Canada (Country) Quebec (County or Province) Montreal (Town or Township)
6. Religion (state denomination) Presbyterian
7. Trade or Calling Office Clerk,
8. Married, Widower or Single Single
9. Name of next of kin Miss Helen McASKILL
10. Relationship Mother
11. Address of next of kin 421 Galt Ave, Verdun, P. Que., Canada
12. Do you belong to, or have you served in a Reserve Formation or Unit of The Canadian Army? YES.
D-510392, 2nd Bn. B.W.(RHR) RF. From June 1940 to Date.
(If Yes, Give Unit and Dates of Service)
13. Have you served in (*a*) an Active Formation or Unit of The Canadian Army? NO (Yes or No)
(If Yes, Give Regimental No. and Unit) (*b*) Any other Naval, Military, or Air Force? NO
(Yes or No) (If Yes, specify Unit and Period of Service)
14. Did you serve during the Great War 1914-1918? NO
(If Yes, specify Regimental No., Unit and Dates of Service)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

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

Date 16 April 1942. Donald McAskill
(Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Donald McAskill (Signature of Recruit)

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER

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

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

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

at Montreal South this 16th.- day of April 1942 19.....

A.B. Shawfield Maj — Signature of Magistrate, Justice or Attesting Officer.

NO. 4-DISTRICT DEPOT A.F. — Officer or Rank and Unit or appointment.

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

5500-

Record of Service of McASKILL (Surname) DONALD (Christian Names) Regimental Number D-86046

QUALIFICATIONS		EDUCATIONAL QUALIFICATIONS			
Military	NIL	High School or Collegiate	NIL (years completed)	Graduation or Matriculation	NIL (specify)
Business or Professional	NIL				
Trade or Civil	OFFICE CLERK	*College	NIL		
Technical	NIL	*University	NIL		
Languages	ENGLISH		7 years Public (Montreal, P.Q.)		

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

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

Report: Date	Report: From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Rank Shown	Effective Date	Unit	Place	Authority: Part II D.O. No. Cas. List, etc.	Authority: Dated
16-4-42	DRO	Joined on appointment NO.4 DISTRICT DEPOT CA.	PTE	16-4-42	4FD.	MTL.STH.	4DD.PT11.No.90	16-4-42
22-4-42	"	~~PROCEEDING TO JOIN HIS UNIT WESTMOUNT BKS. WESTMOUNT QUE.~~	PTE.	22-4-42	" "	" "	" " 95	22-4-42
23-4-42	4 D.D.	PROC. ON COM TO HIS UNIT 2,BN BW(RHR) CAN. CA. WESTMOUNT,QUE.	PTE	22-4-42	4 D.D.	MTL SUTH	4 DD PT 2 NO 95	22-4-42
24-4-42	"	PROMOTED TO THE RANK OF A/L/CPL ON THE AUTHORITY OF HIS COMMANDING OFFICER TO COMPLETE UNIT ESTABLISHMENT.	A/L/CPL	16-4-42	"	" "	" " " 96	23-4-42
5-5-42	"	S.O.S. ON TRANSFER TO HIS UNIT 2nd BN. BW. (RHR) CAN. CA. WESTMOUNT QUE.	"	30-4-42	"	" "	" " " 104	2-5-42
9-5-42	4DD	T.O.S. on transfer from #4DD	"	1-5-42	2RHC	Westmount Barracks	2RHC-Pt2-#1	9-5-42
31 Aug 42	2RHC	Att'd for all purposes except pay to A-30 Penfield N.B.	"	31 Aug 42	"	Sussex, N.B.	2RHC Pt.II #50-A	31 Aug 42
		Att to A 30 ATC for all purposes while undergoing assistant Instructors' course	"	1-9-42	A-30 ATC	Utopia N.B.	62	9-9-42

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

CERTIFICATE OF MEDICAL EXAMINATION

Name in full ..... McASKILL DONALD ..... Place ..... Mtl. .....

Place ..... Mtl. ..... Date ..... 10 Apr. 42. .....

Part 1. Information obtained from the recruit.

1. Age ..... 33 ..... 2. Have you ever suffered from any of the following diseases?

a. Rheumatism ..... no .....
b. Tuberculosis or pleurisy ..... no .....
c. Bronchitis or asthma ..... no .....
d. Heart disease ..... no .....
e. Kidney or bladder disease ..... no .....
f. Stomach or bowel trouble ..... no .....
g. Rupture ..... no .....
h. Varicose veins ..... no .....
i. Foot trouble ..... no .....
j. Nasal trouble ..... no .....
k. Ear disease ..... no .....
l. Eye disease ..... no .....
m. Fits ..... no .....
n. Nervous or mental disease ..... no .....
o. Syphilis ..... no .....
p. Gonorrhoea ..... no .....
q. Have you ever worn glasses? ..... yes .....
r. Are you now or have you in the past received disability pension or compensation? If so, give details ..... no .....

Donald McAskill
Signature of Applicant.

Part 2. Information obtained by medical examination. **THE RECRUIT MUST BE STRIPPED**

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

1 vac. left arm - scar left knee.

2. Height ..... 5 ..... feet ..... 6 ..... inches.
3. Weight ..... 191 ..... pounds.
4. Complexion ..... Fair ..... Eyes ..... Blue ..... Hair ..... Brown .....
5. Development ..... Good ..... (Good / Fair / Poor)
6. Chest measurement—Girth on full expansion ..... 41 ..... inches.
   Range of expansion ..... 2 ..... inches.
7. Vision, right ..... 20/30 ..... left ..... 20/30 .....
   With Glasses— right ..... left .....
8. Hearing, right ..... cv 20 ..... left ..... cv 20 .....
9. Condition of mouth and teeth ..... Good .....
10. The abnormalities (congenital and pathological) found on examination are as follows .....

COLOR VISION ISHIHARA (CN) EARS NOSE THROAT & REFLEXES NORMAL
DR. W.G. DALPE.

Physicals O.K. Overweight.

URINE 68909. N.

X-RAY 116595 N

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

Special remarks when category lower than A .....

E.S. Harding — President
Geo. W. Runnells — Member
A.G. Morphy — Member

E.S. HARDING M.D. GEO. W. RUNNELLS M.D. A.G. MORPHY M.D.

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
APR 17 '42	TAD T'to Petawawa Capt		
30/5/42	J. M Scrabby Lieut		
17/7/42	J. M		
APR 17 '42	VDC Lab		
MAY 13 1943	CAT. A1 BY BOARD		
16.3.43	DIP Tox 0.1cc Reactor		
JUL 28 1943	CAT. A1 BY BOARD		
JUL 28 1943	Y.O.B. P U L H E M S 08 1 1 1 1 1 1 1		

Regtl. No. D-86046 Rank PTE Surname McASKILL Christian Name DONALD

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

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

EXHIBIT A-6

UNIT COMMITTEE OF ADJUSTMENT REPORT

D-86[illegible] Pte McAskill,D.

The a/m soldier was killed at IFS and was burried by Capt.G.L. Stuart who was Adjutant of the battalion at the time. The effects were deposited in the BOR truck which has not been recovered.

Should this vehicle be recovered at a later time, effects will be forwarded to Cdn Sec GHQ 2 Ech.

31 Jul 44 ????????Capt.Q.M.

Certified True Copy

Craig Roberts.....Capt.

File No. 405-M-3721 D.

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. D 56046 Name MCASKILL DONALD

Rank on Discharge pte Date of Discharge 21-7-44

Authority for Discharge or Retirement Deceased

Served in:			Non-qualifying service
Canada	from 14-4-42	to 26-8-43	
	from	to	
United Kingdom	from 27-8-43	to 4-7-44	
	from	to	
Italy	from	to	
Northwest Europe	from 6-7-44	to 21-7-44 KA.	
	from	to	
	from	to	

Eligible for award of:

1939 - 45 Star OK

~~Italy Star~~

France-Germany Star OK

Defence Medal OK

War Medal 1939-45 OK

Canadian Volunteer Service Medal OK

with clasp OK

IV

EH

NO RIBBON DESPATCH

Verified by Dumoulin

Date 19-10-44

Carded OCT 22 1940

HA 165

H.Q. 405-M-37210 D.R. 2(C)

1st April, 1946.

Mrs. Helen McAskill,
357 Galt Avenue,
Verdun, Quebec.

Dear Madam:

Information has just been received from overseas that the remains of your son, D86046 Private Donald McAskill, have been carefully exhumed from the original place of interment and reverently reburied in grave 12, row G, plot 4, of Bretteville-sur-Laize Canadian Military Cemetery, Bretteville-sur-Laize, France. Marked map is enclosed. This is a recognized military burial ground and will receive care and maintenance in perpetuity.

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

Yours faithfully,

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

/EFH

1940.

FORMULE 6

BUREAU FÉDÉRAL DE LA STATISTIQUE—COPIE DU BULLETIN DE DÉCÈS—QUÉBEC

N'écrivez pas dans cet espace

1. LIEU DU DÉCÈS

Comté municipal: IN THE FIELD (FRANCE)

Nom officiel de la municipalité civile ou du canton:

Apposer un X sur le mot qui s'applique à cette municipalité ou ce territoire
Cité | Ville | Village | Paroisse | Canton

Rue: No.: Hôpital ou institution:

2. SÉJOUR

(a) dans l'hôpital ou l'institution	Années	Mois	Jours	(b) dans la municipalité du décès	Années	Mois	Jours	(c) dans la province	Années	Mois	Jours	(d) au Canada (s'il s'agit d'un immigré)	Années	Mois	Jours

3. NOM DU DÉFUNT

Nom de famille: McASKILL (Lettres moulées)

Noms de baptême ou prénoms: Donald

N'écrivez pas dans cet espace

4. RÉSIDENCE

Rue: Galt Avenue, No. 421

Nom officiel de la municipalité civile ou du canton: Verdun,

Comté municipal: Province: Quebec.

5. SEXE	6. NATIONALITÉ (Citoyenneté)	7. ORIGINE RACIALE	8. Célibataire, marié, veuf ou divorcé (Ecrire l'un de ces mots)
M			Single

9. Si le défunt était marié, nom de son conjoint:

10. LIEU DE NAISSANCE (Province ou pays): Quebec

11. DATE DE NAISSANCE: October (jour) 20th, (mois) 1908. (année)

12. ÂGE DU DÉFUNT	Années	Mois	Jours	Si âgé de moins d'un jour
	35			....hrs. ou....min.

OCCUPATION

13. Métier, profession ou occupation, ex. tisserand, voiturier, employé de bureau, etc.: Office-clerk

14. Genre d'industrie ou d'entreprise, tel que filature de coton, industrie du bois, banque, etc.:

15. Dernière date à laquelle le défunt vaquait à ce travail:

16. Nombre d'années occupées dans cette profession:

	17. NOM	18. LIEU DE NAISSANCE (Province ou pays)
PÈRE		
MÈRE (Nom de fille)		

19. Lieu de l'inhumation, de l'incinération ou destination du transport: France

20. Date de l'inhumation: ....19....

21. LIEU DE L'ENREGISTREMENT DE CETTE SÉPULTURE

(a) Nom de la paroisse ou église:

(b) Municipalité civile de:

(c) Comté municipal:

Date: (jour) (mois) 19.... (année)

CERTIFICAT MÉDICAL CONFIDENTIEL DE DÉCÈS

22. Date du décès: July (jour) 21st, (mois) 19 44. (année)

23. JE CERTIFIE PRÉSENTEMENT que j'ai donné mes soins au défunt depuis le ....19.... jusqu'au ....19....

que je l'ai vu vivant pour la dernière fois le ....19....

24. CAUSE DU DÉCÈS

I

Cause immédiate Mentionner la maladie, blessure ou complication, causant la mort, **non pas** son syndrome final, tel: syncope, asphyxie, asthénie, etc.

(a) Killed in action.

dû à

États morbides, s'il y en a, ayant produit la cause immédiate (Les indiquer dans l'ordre chronologique inverse de leur apparition).

(b)

dû à

(c)

II

Autres conditions morbides (importantes seulement) ayant contribué au décès mais n'ayant aucune portée sur la cause immédiate.

III Si une maladie contagieuse est mentionnée à ce certificat, donner

(a) Date d'éclosion ....19....

(b) Durée de la maladie ....jours

25. S'il s'agit d'une femme, y avait-il état puerpéral?

26. Y a-t-il eu intervention chirurgicale? Date de l'opération ....19....

Constatations: Y a-t-il eu autopsie?

27. Dans les cas où le décès est attribuable à des causes extérieures (violence):—

Accident, suicide ou homicide (Spécifier) Date ....19....

Manière de la blessure (Dans quelle circonstance)

Nature de la blessure

Indiquer si la blessure a été infligée **au lieu du travail, dans l'habitation ou dans un endroit public**

Signature ....M.D.

Adresse ....**Date** ....19....

28. Signature de la personne qui remplit la formule (vicaire, coroner, autorité d'un hôpital, etc.)

[signature]

Cette signature autorise le collecteur à accepter la formule comme authentique.

29. Nom du ministre du culte gardien du registre de l'État civil où est inscrit l'acte de cette sépulture.

(For English see other side)

Director of Records, Dept. of National Defence.

405-M-37210

OCT 23 1945

P.A.

ORSEAS CASUALTY CANADIAN ARMY

405-M-37,210

RECORDS OFFICE OVERSEAS.

CANADIAN MILITARY HEADQUARTERS.

GRAVES REGISTRATION CARD.

NAME MC ASKILL Donald. PLACE & DATE OF BIRTH Quebec. CANADA. 20 Oct. 1908

RANK Pte. REGIMENTAL NO D.86046

UNIT Black Watch. NEXT OF KIN & ADDRESS MOTHER.

Mrs. Helen MCASKILL,

357 Galt Ave., Verdun, P.Q. CANADA.

PARTICULARS OF HOSPITALISATION

DATE OF ADMISSION NAME & LOCATION OF HOSPITAL

DIAGNOSIS

PARTICULARS OF DEATH

DATE OF DEATH 21 Jul 44. PLACE OF DEATH France

HRS

CAUSE OF DEATH KILLED.

PARTICULARS OF BURIAL

DATE OF BURIAL 28 Dec 44 CEMETERY 5 yds.N.of road Ifs to Fleury-Sur Orne 200yds. W.of road Caen to Ifs France 7F/1 03726354

PLOT NO ROW GRAVE

DEATH CERTIFICATE NO.

RELIGION Presbyterian

DATE 22 Sep 45

M.Bluteau (Capt)

For COLONEL
Officer i/c Records,
CANADIAN MILITARY HEADQUARTERS.

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

- CASUALTY SECTION EXTRACT FORM -

A 475

Message Received from 21/CAS/1740

Date Message Received 30 JUL 44.

AEF

REGIMENTAL NO.	RANK	NAME	FULL CHRISTIAN NAMES
D.86046	PTE	MCASKILL	DONALD

UNIT BLACK WATCH.

UNIT SERIAL # 186

CATEGORY AND DIAGNOSIS

KILLED 21 JUL 44.

Hospital Admitted to ..... Date .....

Hospital Transferred to ..... Date .....

Hospital Discharged from ..... Date .....

NEXT OF KIN MRS HELEN MCASKILL RELATIONSHIP MOTHER

NOTE: If the Next-of-Kin resides in the Br. Isles or U.S.A. Mark RED X in upper left-hand square.

Address 357 GALT AVE

VERDUN P.Q. CAN

HOME TOWN VERDUN P.Q. CAN

Cable # 8600 Inland Tel. # .....

REMARKS:- M30 M-1

Verification Clerk's Signature

H.Q. 405-M-37210 DIR. 2(D)

28th August, 1945.

Mrs. Helen McAskill,
357 Galt Avenue,
Verdun, Quebec.

Dear Madam:

Information has now been received from the overseas military authorities that your son, D86046 Private Donald McAskill, was buried with religious rites in a temporary grave located at Ifs, approximately two and a half miles South of Caen, in the Department of Calvados (Normandy) France. Marked map is enclosed.

The grave will have been temporarily marked with a wooden cross for identification purposes and in due course the remains will be reverently exhumed and removed to a recognized military burial ground when the concentration of graves in the area takes place. On this being completed the new location will be advised to you, but for obvious reasons it will likely take approximately one year before this information is received.

Yours faithfully,

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

B.B./EMA

28

FIELD SERVICE

9/31B Army Form B. 2090A. 40/P & S/2551 (5504)

REPORT of Death of an Officer or a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death. See Table II, Appendix III, Field Service Regulations, Vol. I.

REGIMENT OR CORPS: Black Watch — Squadron, Troop Battery or Company: .....

Officer's Personal No. (if known) Soldier's Army No.: D86046 — Rank: Pte

Surname: McAskill — Christian Names: D.

Died — Date: 21 Jul 44 — Place: France

Cause of Death*: Killed

Nature and Date of Report: 3011c/64A 30 Jul 44

By whom made: BW

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

Burial — Place: 5 yds N of rd Ifs to Fleury sur Orne / 200 yds W of rd Caen to Ifs — Date: 28 Dec 44

By whom reported: Information taken from W3314B serial 20 sheet 7

State whether he leaves a Will or not — (a) in Army Book 64: No.

(b) as a separate document: Not Received

All private documents and effects received from the front or hospital, as well as A. B. 64, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any report received as to verbal expressions by a deceased officer or soldier of his wishes as to the disposal of his estate should be forwarded to the War Office at once, supported by a certified statement of the person who actually received the information.

In the case of a soldier a duplicate of this report is to be sent to the Paymaster at the Base, together with the deceased's A. B. 64 (after withdrawal of any will from the latter), for transmission to the Paymaster who compiles the soldier's account.

Station and Date: Belgium / 28 Dec 44

Signature of Officer in charge of Section Adjutant-General's Office at the Base: Ernest Robertson

for Officer i/c
Cdn Sec GHQ 2nd Ech 21 A Gp.

DISTRIBUTION OF SERVICE ESTATES

1mw. Estates Form "P. 4"

ARMY

Name: MC ASKILL (Surname) Donald (Christian Names) No.: D-36046

Pte. (Rank) C.A. o/s (Unit) 21 July 44 (Date of Death)

AMOUNT

L.P.C. ..... $ $49.46

Date: 21 May 45.

Other Credits .....

Total $49.46

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Helen McAskill 357 Galt, Ave., Verdun, Que. (Sole beneficiary - Per Will).	$49.46

TO BE FORWARDED BY REG. MAIL DIRECT.

P4. TO TREAS. 6-7-45 QW

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	$49.46

CLASSIFIED BY

Original Signed by
K. L. McCUAIG

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by
P.

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

75M—2-45 (6771)
H.Q. 1772-80-2

ESTATES
BRANCH
DEC 11 1942
DEFENCE
NATIONAL

In the event of my death.
I leave all my estate to
my mother.

Mrs Helen Mitchell
357 Gold Avenue.
Verdun Que. Canada.

Cable 44

Original Received

Donald [illegible] Mitchell
2/Lieut. D-86046
2nd Am Black Watch (RHR)
3/9/43

10

COPY M.C.R.

M.F.M. 5
300M—1-43 (7930)
H.Q. 1772-39-1651

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

INSTRUCTIONS

(*a*) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the Canadian Army (AF) or R.C.A.F. ON ACTIVE SERVICE.
(*b*) All questions, etc., must be completed.
(*c*) Upon completion, the form will, in the case of the Army personnel, be forwarded to the District Records Officer for transmission to Officer i/c Records (Army) N.D.H.Q., Ottawa. In the case of R.C.A.F. personnel the form will be forwarded to R.C.A.F. Records Officer, Dept. of National Defence for Air, Ottawa.

(1) Name of Officer or Other Rank McASKILL DONALD
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Official Number and Rank D86046 Private

(3) Unit 2nd Bn. B.W. (RHR) CA.

(4) Are you married? NO (5) If married, state,

(*a*) Full name of your wife

(*b*) Present postal address of wife

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

(7) Are you a widower? NO

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

Names and ages

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

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

Name

Postal Address

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

If so, state her full name and postal address

2

[SEE OTHER SIDE]

(11) Is your father alive? NO If so state name and address, occupation .....

.....

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

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

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

(14) Is your mother alive? YES If so, state name and address Mrs Helen McAskill

421 Galt Ave., Verdun, P.Q.

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

(16) If sole or partial support of widowed mother—state what amount per month you have given her prior to appointment or enlistment $60.00 per month

Also state reason why she has no other means of support; if partially supported by you, what is your reason for not providing full support? Brothers helping.

(17) Are you contributing to the support of any dependents, other than those shown above? .....
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment. If so, state the following particulars:

Relationship .....

Full Name .....

Postal Address .....

Amount contributed monthly during the past six months .....

(18) Are you insured? YES If so, in what company? LONDON LIFE COMPANY
(Give number of policy)

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

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

Date 16-4-42 (SGD) Donald McAskill
(Signature of officer or man)

(SGD) ? Capt.

Date 16-4-42 Officer Commanding #4.D.D. A.F.

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

Read this whole Form and Instructions on other side before commencing to complete.

WILL

M.F.M. 10
200M—6-41 (693)
H.Q. 1772-39-1656

(1) I, Donald McAskill (Name in Full), of the City (City, Town, Village, Township)

Address in civil life.

of Verdun, in the County District of Verdun

Province of Quebec, Office Clerk (Civil Occupation)

Regimental No D-86046, Unit 2nd Bn. BW (RHR) CA, do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

Relationship, names and address of beneficiaries, and what each is to receive.

(2) I GIVE, DEVISE AND BEQUEATH unto "My Mother " Mrs Helen McAskill.

Residing at;- 421 Galt Ave., Verdun P.Q.

All my estate both real and personal.

X

D.McA.

Relationship, names and address of residuary beneficiaries.

(3) I GIVE, DEVISE AND BEQUEATH all the rest and residue of my estate, both real and personal, of whatsoever kind and wheresoever situate unto

X

D.McA.

(4) I appoint ..... (Name) (Address)

..... (Civil Occupation), to be the Executor / Executrix of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 16 day of April 1942.

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

Donald McAskill
(Signature of soldier)

First witness sign here.

(5) Signature G. Boucher L/C Boucher.

Civil Address Lt. Eulalie Po Nicolet.

Civil Occupation Cpl.

Second witness sign here.

Signature Leon D. Hebert Pte

Civil Address 4309 Chamford St. Montreal P.Q.

Civil Occupation Salesman

(Witnesses are not to be beneficiaries.)

[OVER]

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

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

4
ARMY

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Donald (CHRISTIAN NAMES) MC ASKILL (SURNAME)

REGISTER NO. D-1758
FILE NO. 405-M-37210
DATE 29-6-45
SERVICE NO. D-86046
FINAL RANK OR RATING Pte.
DATE OF DISCHARGE 21-7-44

PAYEE Mrs. Helen MC ASKILL,
ADDRESS 357 Galt Ave., Verdun - P.Q.

DATE OF TERMINATION OF OVERSEAS SERVICE 21-7-44

		$	¢
A. TOTAL QUALIFYING SERVICE 8.0	NO. OF DAYS 828/30 EQUAL TO 27 COMPLETE PERIODS AT $7.50	202.50	
B. QUALIFYING OVERSEAS SERVICE	No. OF DAYS 330 LESS 18 INELIGIBLE DAYS, EQUAL TO 312 DAYS @ 25c. PER DAY	78.00	
	SEE PAR. 2 OVERLEAF FOR EXPLANATION	280.50	

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	$ 1.50			
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$ 1.25			
ADDITIONAL PAY	$			
	$			
	$			
DEPENDENTS' ALLOWANCE 1/30 OF $	$			
TOTAL	$ 2.75	X7 = $	19.25	
NO. OF DAYS 330/183		X$	19.25	34.71

RECEIVED
JUL 10 1945
WAR SERVICE GRATUITY DIVISION, ARMY TREASURY

D. WAR SERVICE GRATUITY — 315.21

E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES $
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $ 20.00 — 20.00
OTHER DEDUCTIONS $

F. TOTAL AMOUNT PAYABLE — 295.21

G. YOUR PORTION OF GRATUITY IS— 100%

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

16

△T

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

PREPARED BY	CHECKED BY
KHH	

TREASURY	
CHECKED BY	DATE
D Cochrane	21-7-45

SERVICE REPRESENTATIVE

COMPUTATION OF WAR SERVICE GRATUITY

MEMBER'S NAME DONALD (Christian Names) M^c ASKILL (Surname) — Register No. D-1758

PAYEE'S NAME MRS HELEN (Christian Names) McASKILL (Surname) — File No. 405-M-37210

ADDRESS 357 GALT AVE. VERDUN — P.Q. — Date 26-6-45

Service No. D-86046

Final Rank PTE

DATE OF TERMINATION OF OVERSEAS SERVICE 21-7-44 — Date of Discharge 21 JULY 44

	AMOUNT $	c
A. TOTAL QUALIFYING SERVICE No. of day 828 / 30 = 27 Periods @ $7.50	202	50
B. QUALIFYING OVERSEAS SERVICE No. of days 330 less 18 Ineligible days, equal 312 Days @ 25c per day	78	00
C. SUPPLEMENT FOR OVERSEAS SERVICE	280	50
Daily Rate of Pay $ 1.50 Subsistence Allowance $ 1.25 Additional Pay $ — Dependents' Allowance 1/30 $ — $ — TOTAL $ 2.75 × 7 = $ 19.25		
No. of Days 330 / 183 × $ 19.25	34	71
D. WAR SERVICE GRATUITY	315	21
Computed By Gates		
E. DEDUCTIONS Overpayment of (1) Pay & Allowance $ — (2) D.A. & A.P. $ 20.00 Other Deductions $ —	20	00
Entered By J.P.		
F. AMOUNT PAYABLE (This amount is payable in 1 monthly instalments of $ 295.21 each)	295	21

G. Monthly instalment not to exceed *daily rate* of Pay & Allowances per (C)

$ ..... × 30 = $ .....

REMARKS

25

100M-11-44 (6087)
H.Q. 1764-81-3

FORM No. 1

Register No. [redacted] Nominal Roll No.

H.Q. File No. H09-14-57210

To: P.M.G.

CANADIAN ARMY (ACTIVE)

Computation of Service

WAR SERVICE GRANT

Regt. No.	Rank when S.O.S.	Surname	Christian Name in Full
D-86046	PTE	MCASKILL	DONALD

REASON FOR TERMINATION OF SERVICE:

1st Enlistment KILLED IN ACTION CARO ( )

2nd Enlistment CARO ( )

3rd Enlistment CARO ( )

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. 16 APR 42	T.O.S.	T.O.S.
S.O.S. 21 JUL 44 MD 0/S	S.O.S. MD	S.O.S. MD
Total Days 828	Total Days	Total Days

Total Service 828 DAYS

—	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere	498		498
Overseas Service	330		330
Totals	828		828
Add Non-qualifying Service			
Total Service			828

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 21 JUL 44

2. Date S.O.S. Overseas

REMARKS:

KILLED IN ACTION 21 JUL 44

Computer's Signature

Checker's Signature

Date Computed 21 Jan 45

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

W B Leng, Capt.

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

500M—11-44 (6012)
H.Q. 1772-45-8

14

Details of Non-Qualifying Service

Western Hemisphere—

Forfeits for	From	To	Effective Date	Days	Total

KILLED [illegible]

Total ....

Overseas: T.O.S. 27 AUG 43 T.O.S. .... T.O.S. ....

S.O.S. 21 JUL 44 S.O.S. .... S.O.S. ....

Total ....

CANADA

DEPARTMENT OF NATIONAL DEFENCE
ARMY

In reply quote No. D-86046 Mc Your File Reference:-
H.Q. 405 -M-37,210

D1758

Paymaster-General,
War Service Gratuity Branch,
Room 1500,
New Army Building,
Ottawa, Canada.

April 28, 1945.

May 10.

PAYMASTER GENERAL
W.S.G. Branch
MAY 11 1945
RECEIVED

Re: D-86046 - MCASKILL, Donald

1. Reference your memorandum of March 8th, 1945.

2. The Dependents' Allowance Board has found that Mrs. Helen McA skill was DEPENDENT on the marginally-named at the date of casualty, as required by Section 4 of the War Service Grants Act.

DEPENDENTS' ALLOWANCE BOARD

L. Brooks

For R.O.G. Bennett - Chairman

23

B44:FDR

M.F.A. 1326A
1,000M—5-43 (9996)
H.Q. 1772-39-2009

CASUALTIES ONLY
or purposes of W.S.G.
Casualties include death
subsequent to discharge

Register No. ~~D1758~~

File No. ~~H.Q.405-M-37210~~

WAR SERVICE GRANTS ACT 1944

OTTAWA, ~~December 13th~~ 194~~4~~

TO: Chief Treasury Officer,
Dependents' Allowance and Assigned Pay Branch

Service No. ~~D86046~~

Name ~~D. MC ASKILL~~
Christian Name Surname

Please supply the following information in respect of the marginally named at the time of his discharge or death and return this form in duplicate along with the file to the undersigned.

K.W.Rice
(K.W.Rice) Lieutenant,
for(A.R.Mortimore) Brigadier,
PAYMASTER-GENERAL.

	Name	Amount
Names of persons in receipt of D.A. and amount of monthly award		$
If no D.A. in issue, list names of persons in receipt of A.P., who may be classed as dependents under W.S.G. Act, 1944 and amount of monthly assignment.	Mrs Helen Mc Askill mother	20.00
	A P due 7/8/44	
Names of persons to whom assigned pay was continued by supplementary award after death.		
Amount of overpayment of dependents allowance and/or assigned pay deductible from the War Service Gratuity and name of person to whom paid	Mrs Helen Mc Askill mother	20.00 m/s

JAN 12 1945

_____ 194___

For Chief Treasury Officer,
D.A. & A.P. Branch

C.T.O., D.A. & A.P.

Overpayments of D.A. and/or A.P. recovered from W.S.G. $ 20.00

July 21 1945

L. Washburn
for C.T.O.

18

August 23rd, 1944.

Mrs. Helen McAskill,
357 Galt Ave.,
Verdun, Que.

Dear Mrs. McAskill:

It was with deep regret that I learned of the death of your son, D86046 Private Donald McAskill, who gave his life in the Service of his Country in France on the 21st day of July, 1944.

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

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

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

A.G.L. [illegible]
Major - General
Adjutant - General

AUG 17 1944

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

CR/McL

1

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER D-86046 RANK Private SERVICE UNIT 1st Royal Highland of Canada. (C.A.)

NAME MCASKILL, Donald

DATE OF BIRTH 20th October 1908 DATE OF ENLISTMENT 16-4-42

MARITAL STATUS Single RELIGION Presbyterian

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Mother NAME Mrs. Helen McAskill

ADDRESS 357 Galt Ave.,Verdun,Que. ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. 8600 H.Q. 405-M-37210

CASUALTY DETAILS Killed in action DATE 21-7-44

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 14-8-44 6

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

MCL

DIRECTOR OF RECORDS

5 COPY FOR C. R. FILE

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

DONALD McASKILL, D-86046

MRS. HELEN McASKILL, 554,225

357 GALT AVE.,
VERDUN, P.Q.

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO: Mrs. Helen McAskill,

ADDRESS: 357 Galt Ave.,
VERDUN,
Que.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. Helen McASKILL, (ENGLISH)

(1688)

ADDRESS: 357 Galt Ave., VERDUN, Que.

(1) MEMORIAL BAR
DATE DESP
REGN. NO 1347

(2)

(3) DESP. DEC 4 1914
REGN No. 8772

21-7-44

AWARDS—CANADIAN ARMY (ACTIVE)

M.

(1688)

FB

500M—1-44 (3467)
H.Q. 1772-45-8

SURNAME (IN BLOCK LETTERS) / CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
McASKILL, Donald	D-86046	Pte.	Black Watch Regt.

FILE NO. 405-M-37210

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	6432 21/10/49
~~France & Germany Star~~	
Defence Medal	
War Medal 1939-45	
C.V.S.M. & Clasp	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

No D.86046 Rank Private Name McASKILL, Donald

Unit Black Watch (R.H.R.) Date of death 21st July, 1944.

Died at France

Cause Killed in action

Death occurred on strength of Forces.H.Q. 405-M-37210

N/K Mrs. Helen McAskill Relationship Mother

Address 357 Galt Ave., Verdun, Que.

Remains buried in 5 yds N of rd Ifs to Fleury sur Orne 200 yds W of rd Caen to Ifs. Cemeter

CWGC

Grave location /

OVER-

BURIAL REPORT TO N.A. APR 1 - 1946

RETURN TO BUR. OF STATS OCT 23 1945

ROYAL MESSAGE DESP'D AUG 24 1944

CAN. MESSAGE DESP'D 23-8-44

Temp BR sent to NK & Map

REBURIAL

Brettville-sur-Laize Can.Mil.Cem.
Brettville-sur-Laize, France.

Grave 12, row G, plot 4.

HI & CR Form Despd. NOV 28 1946

Photographs

Despatched

FEB 24 1948

No. D-86046 RANK ~~Pte~~ SWBS ~~A/L/CIL~~ PTE NAME McASKILL SP Donald ~~Married~~ ~~Widower~~ * Single

Place of { * Appointment * Enlistment } Montreal South, Que. Date of { * Appointment * Enlistment } 16-4-42

RATE OF PAY

D. O. No.	Date	Rank	Group	P. F. or A. S.	Daily Rate	If Liable Pen. Ded.	REMARKS
					$1.30		
96	23-4-42	A/L/Cpl			~~1.50~~ 1.60		Eff. 16-4-42.
149	9Aug43	Pte			1.50		wet 8 Aug 43

ASSIGNMENTS

Name & Address of Assignee	Effective Date	Amount
Mrs. Helen McASKILL	1-5-42	
~~421~~ 357 Galt Ave.,		
VERDUN, Que.		20.00
Rec Gen Cas 6/4/2	1/5/44	8 40
Total.....		

DEPENDENTS' ALLCES. No. Deps. 1

Date Application Forwarded	Relationship	Amount Awarded	Effective Date
~~17-4-42~~	~~Mother.~~		
	Declined		10-6-42
	1-M-5571		

* Outfit * Clothing } Allce. $..... Paid on.....

Rehabilitation Grant $..... Paid on..... LL

* Delete words which are inapplicable.

M. F. M. 14
200M—10-41 (2231)
H.Q. 1772-39-1662

In Receipt of Pension under Pension Act or Militia Pension Act (1910) $..... P.A.

Occupational Form Completed..... Yes.

CASUALTIES, ETC.

Part II D.O. No.	Part II D.O. Date	
90	16-4-42	TOS DD4.Posted to "B" Wing.Eff 16-4-42.
95	22-4-42	On comm.to his Unit 2Bn.BW(RHR)Can.Westmount & posted to "C" Wing.Eff 22-4-42.
96	23-4-42	To be A/L/CPL. Eff,16-4-42.
104	2-5-42	SOS on transf. to 2nd Bn BW(RHR) Westmt. Bks. while on com. Eff, 30-4-42.
1	9-5-42	TOS 2nd. Bn. B.W. (RHR) CA Eff. 1-5-42.

P. & A. LED. AGREES

JUL 18 1942

50A	31-8-42	Att'd to A.T.S.-T.C. A30 Penfield N.B. for all purposes wef 31-8-42
62	2-9-42	Att to A30 C I Tc for all purposes eff 1-9-42 amend No 72
96	4-10-42	Ceases to be attached on Transfer to 2nd R[illegible] C eff 9-10-42
75A	12-10-42	Granted 14 days Furlough 16-30 Oct 1942.
75A	12-10-42	Ret'd from Att'd wef 10-10-42
106A	9-12-42	Att all purposes to No 1 Voc. Training School wef 10-12-42
94	18-12-42	Attached to NO.1 V.T.S.?London Ont.Eff 11-12-42

MAR 18 1943

CASUALTIES, ETC.

PART II D. O. No.	PART II D. O. DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
13/13A CR.	29-2-44	PL 22 Feb To 2 Mar 44 (RM).	
804/A	26-1-44	Awd CVS M+C, w.e.f. 15 JAN 44. Auth. R.O. 4167.	
37/2D	14/7/44	Emb in U.K. 14/7/44. Disemb. France 6/7/44.	
BR	28/7/44	S.O.S. 1 RHC. "Released" Killed in Action. WEF 21/7/44	

LOWE-MARTIN CO. LIMITED D83960

M.F.M. 14A
200M-1-42 (2934)
H.Q. 1772-39-1662

CARD SEQUENCE NO. 2

NO. D-86046 RANK A/L/CPL. NAME McASKILL Donald

CASUALTIES, ETC.

PART II D. O. No.	DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
10A	20-1-43	Granted Subsc Allow. of $1.25 per diem eff. 20-1-43.	
19 8	Feb.43	Ceases to draw Subs. Allowe of $1.25 , eff 8 Feb.43	
19 8	Feb.43	Ceases to be attached to No.1VTS.London Ont. on return to 2nd.Black Watch,Halifax N.S.,Eff.8 Feb.43	
29	13 FEB 43	Ceases to be attached for all purps including pay to No 1 V.T.S. London. Ont. wef. 9 Feb. 43	
		MAR 1 8 1943	
79	21 Apr 43	Address next of kin now 357 Galt Ave. Verdun Que	
126	25 June 43	Furl + Le wef 25 June 10 July 43	
149	9 Aug 43	L.O.L to No 1 Z C. 8 Aug 43	
202	9.8.43	ATTACHED TO NO. 1 TRANSIT CAMP FROM.....9.8.43.....	
220	17/8/43	PROCEEDED OVERSEAS.....16-8-43	
14/57	4.9.43.	TOS. CA %. 27 Aug. 5 CIRU 2 Sept 43.	
173	21.9.43	SOS to RHC wef 21 Sep 43.	
59/46 CR.	27.9.43.	To SIRHC from 5 CIRU wef. 22-9-43.	
74/B CR	17.12.43	PL 22 NOV To 1 Dec 43 (RA).	

État de service du N° D-86046 Grade 2/Cpl. Feuille N° 2.
Statement of the Service of No. Rank Sheet No.

Nom McAskill, D
Name

M.F.M. 1 & 2 (a) Fr.
20M—11-40 (7978)
H.Q. 1772-39-1646

Rapport — Report: Date	Rapport — Report: Reçu de — From whom received	Mention des promotions, rétrogradations, mutations et permutations, maladies ou blessures, rapports, etc. (Suite de la page 2, M.F.M. 1 et 2) — Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 and 2)	Grade indiqué — Rank shown	Prenant date le — Effective date	Unité — Unit	Endroit — Place	Autorisation — Authority: N° Partie II, Ordres du jour Liste des morts et blessés, etc. — Part II D.O. No. Casualty list, etc.	Autorisation — Authority: Daté le — Dated
17-2-43	2 RHC	Pt II Order No 106-H d/9-12-42 section "B" para 6, sheet 2, "Attachments" is amended to read w.e.f. 11 Dec 42 and not 10 Dec as shown	2/Cpl		2 RHC	Halifax NS	2 RHC Pt II 9-A	18-1-43
12-3-43	2 RHC	Pt II Order No.29 d/13-2-43, sheet 1, para 3, "Attachments" section "B", is amended to read w.e.f. 8-2-43 and not 9-2-43	L/Cpl.	"	"	"	" " " 46	10-3-43
27-443	2 RHC	Change of address of next -of kin from 421 Galt Ave., Verdun, Que. to 357 Galt Ave., Verdun, Que.	L/Cpl.		2 RHC	Halifax, N.S.	2RHC Pt II 79	21-4-43
1-7-43	2 RHC	Gran ted 14 days furlough plus 48 hrs.leave	"	25-6-43	"	"	" " " 126	25-6-43
9-8-43	2 RHC	Reverts to his substantive rank of Pte. in accordance with R.O.1340, and is to draw daily rate of pay of $1.50	Pte.	8-8-43	"	DEBERT	" " " 149	9-8-43
9-8-43	2 RHC	SOS on transfer to No. 1 Transit Camp	"	8-8-43	"	"	" " " 149	9-8-43
		ATT. NO 1 TRANSIT CAMP		8 8 '43	#1 TRANSIT	WINDSOR, N.S.	202	9. 8 '43
		SOS. NO 1 TRANSIT CAMP		26 8 '43	#1 TRANSIT	WINDSOR, N.S.	220	27 8 '43

État de serv[illegible] N° D 86046 Grade L/cpl [illegible]
Statement of the S[illegible] No. Rank

Feuille N° 1
Sheet No.

Nom Mc Askill Donald
Name

M.F.M. 1 & 2 (a) Fr.
20M—11-40 (7978)
H.Q. 1772-39-1646

Rapport — Report: Date	Rapport — Report: Reçu de — From whom received	Mention des promotions, rétrogradations, mutations et permutations, maladies ou blessures, rapports, etc. (Suite de la page 2, M.F.M. 1 et 2) — Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 and 2)	Grade indiqué — Rank shown	Prenant date le — Effective date	Unité — Unit	Endroit — Place	Autorisation — Authority: N° Partie II, Ordres du jour Liste des morts et blessés, etc. — Part II D.O. No. Casualty list, etc.	Autorisation — Authority: Daté le — Dated
9-10-41		Ceases to be attached for all purposes	L/cpl	9-10-42	A30-ATC	Utopia NB	Part II #96	9-10-41
		on completion of course at S of I						
12-10-42	2 RHC.	Granted 14 days furlough plus 2 days to time						
		under P.O. 699 T.M. No A 208655	L/cpl	16-10-42 20-10-42	2 RHC	Sussex NB	2 RHC Pt II #75A	12-10-42
12-10-42	2 RHC	Ceases to be att to A30 ATC Penfield NB	L/cpl	10-10-42	2 RHC	Sussex NB	2 RHC Pt II #75A	12-10-42
22-10-42	2 RHC	Qualified as Assistant Instructor G II	"	19-10-42	2 RHC	Sussex NB	2 RHC Pt II #81A	22-10-42
23-11-42	2 RHC.	Pt. II #75A is amended to read.	"	16-10-42 to 29-10-42	"	"	2 RHC. Pt. II #100A	23-11-42
		Att. for all purp instead pay to						
		No. 1 Voc. Train School Wolseley Bks London, Ont	"	10-12-42	"	Halifax	" " 106-A	9-12-42.
22-12-42	No.1 VTS	Att. No. 1 VTS f.a.p.i.p. eff.11 Dec 42 from 2 Bn Black Watch Halifax(Clerks course)	"	11-12-42	#1 VTS	London	D. O. No. 94	18-12-42
20-1-43	"	Granted subsistence allowance	"	20-1-43	"	"	" 10A	20-1-43
8-2-43	"	Ceases to draw subsistance allowance	"	8-2-43	"	"	" 19	8-2-43
"	"	Ceases to be att. #1 VTS f.a.p.i.p. on completion of Clerks course at London	"	"	"	"	"	"
16-2-43	2 RHC	Attached for all purposss including pay to No.1 V.T.S. London, Ont. and having completed Clerks ourse ceases to be so attached w.e.f.	L/Cpl.	9-2-43	2 RHC	Halifax, N.S.	2RHC Pt.II 29	13-2-43

Statement of the Service of No. D-86046 Rank L/Cpl Sheet No.

Name McASKILL D

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
		S.O.S. C.A.(A.F.) CANADA ON EMBARKATION ON 26 Aug 43						
✓		T.O.S. C.A.(A.F.) OVERSEAS ON TRANSFER ON 27 Aug 43 AND DISEMBARKED ON 1 Sept 43						
	5 C I R U	T.O.S. — 5 C.I.R.U.	Pte	2 Sept 43	5 C I R U	U K	157	4 Sept 43
SOS ✓		SOS to Bde. W.	Pte	21 Sept 43	5 C I R U	U K	173	22 Sept 43
	✓ TOS	TOS from 5 C I R U	Pte	22 Sept 43	Bde W.	U K	59	30 Sept 43
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
m 106	✓	Embarked at ..... U.K. ..... on .. 4 Jul 44 Disembarked at ... France on. 6 Jul 44	Pte	.	B W.	21 A G	37	14 Jul 44
		Killed	Pte	21 July 44		A E F	A 475	3 Aug 44.
m 106	✓ SOS.	SOS (Killed in action)	Pte	21 Jul 44	B W	21 A G	43	6 Aug 44

(a) Report		(b)	(c)	(d)	(e)	(f)	(g)
Date	From whom received	Unit	Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	Place of Casualty	Date of Casualty	Army rank as at (e)	Army Form or other authority for entry to be shown
			Non tradesman Daily Rate of 1.50.			Pte	
			S.O.S. C.A.(A.F.) CANADA ON EMBARKATION ON 26 AUG 43.				
			T.O.S. C.A.(A.F.) OVERSEAS ON TRANSFER ON 27 AUG 43.				
			AND DISEMBARKED ON 1 SEP 43.				
			T.O.S. — 5 C.I.R.U.	U.K.	2/9/43	Pte.	157 4 Sep 43.
S.O.S		5 C.I.R.U	S.O.S. to R.H.C.	U.K.	21 Sep 43	Pte	173 22 Sep 43
	o.c	1 R.H.C	T.O.S. from 5 C.I.R.U. with Nom. No 8079 d/1 Sep 43.	Field	22 Sep 43	✓	59 - 30 Sep 43.
✓	✓		Awarded Canadian Volunteer Service Medal and Clasp	✓	15 Jan 44	Pte	4 - 26 Jan 44
✓	✓		Embarked U.K. 4 July 44. Disembarked France...		6 July 44	Pte	37 - 14 July 44
✓	✓		S.O.S. Killed in action		21 July 44	Pte	43 - 6 Aug 44

SERVICE AND CASUALTY FORM

PART I (For all ranks)

M.F.M. 4 (Part I)
A.F.B. 103 (Part I)
150M—5-41 (512)
H.Q. 1772-39-1649

Unit 2nd. Bn. R.W. (RHR) CA. Regimental Number D-86046

		(17) Regiment or Corps	Unit (Battn., etc)
1. Surname	MCASKILL		
2. Christian Names	Donald	Infantry	
3. *Substantive Rank and Appointment			
*Acting Temporary or Local Rank			
giving date	16-4-42		
*To be entered in pencil to facilitate alteration.			
4. Place of birth	Montreal Quebec Canada	(18) Medical	
5. Date of birth as declared on attestation	20 October 1908		
(A)		Category / Date / Authority	
6. Date of enlistment	16 April 1942	A- 10-4-42 M.F.M.2	
7. Place of enlistment	Montreal South	A1 28-7-43	
8. Residence at time of enlistment	421 Galt Ave, Verdun. Quebec Canada		
9. (B) Special conditions (if any) of enlistment or rate of pay			
10. (C) Any subsequent variations of conditions of service			
11. Religion	Presbyterian		
12. If married, state date	Single	(19) Next of kin (entries to be made in pencil)	
13. Trade on enlistment	Office Clerk.		
14. Corps, trade and grade		Mrs. Helen McAskill (wife)	
15. (D) Qualifications		357 ~~421~~ Galt Ave. Verdun	
16. (E) Miscellaneous entries		(20) E.	
		(21) E. Dublin. Canada	
		(22) E.	

NOTES—

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