E29132
WOODS
AIME

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Received ..... OCCUPATIONAL HISTORY FORM COMPLETED

Checked ..... Card ..... Observations .....

M.F.M. 2
A.F.B. 271
480 M—8-39 (1096)
H.Q. 1772-45-18

~~ORIGINAL~~
~~DUPLICATE~~
~~TRIPLICATE~~

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

E.29132
E-29132 2

Unit ..... PIONEER R.C.A. (C.A.S.F.) Regimental Number .....

CANADIAN ACTIVE SERVICE FORCE

01
SPR

ATTESTATION PAPER

1. Surname ..... WOODS
2. Christian Names ..... AIME
3. Present address ..... FAUVEL CO. BONAVENTURE P.Q.
4. Date of birth ..... 14 JANVIER MIL 1919
5. Place of birth ..... CANADA (Country) CO. BONAVENTURE P.Q. (County or Province) FAUVEL (Town or Township)
6. Religion (state denomination) ..... CATHOLIC ROMAIN
7. Trade or Calling ..... JOURNALIER
8. Married, Widower or Single ..... CELIBATAIRE
9. Name of next of kin ..... ALFRED WOODS
10. Relationship ..... PERE
11. Address of next of kin ..... FAUVEL CO. BONAVENTURE P.Q.
12. Have you served in any Naval, Military or Air Force? ..... NIL
13. If previous war service, state arm, force and regimental particulars ..... NIL
14. Do you now belong to or have you served in the Active Militia of Canada? ..... NIL

(Give unit and date of attestation)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

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

Date 7-7-40 ..... Aimé Woods
(Signature of recruit)

TERRE-NEUVE

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Aimé Woods (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 NEW CARLISLE this 7e day of JUILLET 19 40

~~Major~~,
District Recruiting Officer,
Military District No. 5. ..... {Office or Rank and Unit or appointment.

{Signature of Magistrate, Justice or Attesting Officer.

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

Furnished Printed

Record of Service of WOODS (Surname) AIME (Christian Names) Regimental Number E-29 134

Qualifications

Military: NIL

Business or Professional: NIL

Trade or Civil: JOURNALIER

Technical: NIL

Languages: FRANCAISE ET ANGLAISE

Educational Qualifications

High School or Collegiate: 8 ANS (years completed)

Graduation or Matriculation: NIL (specify)

*College: FAUVEL P.Q.

*University: NIL

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

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

Report Date	Report From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
10-7-40	D.D.5.	Joined on appointment Attested & T.O.S.as attached to D.D.5.effect the	Sapper	7-7-40	Ist Pioneer	Quebec	Part.11.No.176	10-7-40
30-7-40	D.D.5.	S.O.S.from D.D.5.on transfer to R.C.E.T.C.at ~~Camp Borden Ont~~	Sapper	30-7-40	" "	Quebec	Part.LL.No.193	30-7-40
31-7-40	D.D.5,	T.O.S. Engineer Training Centre.	"	31-7-40	E.T.C.	Petawawa	E.T.C. # 172,	31-7-40
3402-		Pun: for (AWL) Forf: one dys pay. 2 dysCB	"	4-9-40	E.T.C.	Petawawa	E.T.C. # 202	4-9-40.
1		Granted furlough 2-1-41 to 15-1-41	Spr.	2-1-41	ETC	Petawawa	D.O. #2	3-1-41
022-3		SOS ON PROCEEDING OVERSEAS	SPR.	2-2-41	ETC	Petawawa	D.O. #28	3-2-41
183		SOS CASF (CANADA) ON EMBARKATION AT Halifax ON 4 Feb 41						
1		FEB 5 1941 TOS CASF (OVERSEAS) ON TRANSFER ON 7 March 41 AND DISEMBARKED AT Bourock ON 28 Feb 41 MAR 1 1941						
4		Sol 1 E H U.	Spl.	2 May 41	1 E H U.	Borden	No. 57	7 May 41.
SOS.		S.O.S. to 2 Cdn Bn	Spr.	2 may 41.	2 Bn	Bde	D.O. 102.	2 may 41.
T.O.S.		T.O.S. FROM # 1 E H U.	SPR.	3 MAY 41	2 Bn R.C.E. FD.		33	9 MAY 41
		Privilege leave (CFW) to 24 Jun 41	Spr.	16 Jun 41	2 Bn RCE	U.K.	39	20 Jun 41.

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

Name in full ..... W.O.

Part 1. Informat

1. Age ..... 21 .....

a. Rheumatism 2

b. Tuberculosis .....

c. Bronchitis or asthma .....

d. Heart disease .....

e. Kidney or bladder disea

f. Gastro-intestinal .....

g. Rupture .....

h. Varicose veins .....

i. Flat or deformed feet .....

examiner's remarks re abov

Part 2. Informatio

1. Identification marks or s

2. Height ..... 5 fe

4. Complexion dark

6. Chest measurement—Gir

Ra

7. Vision, right 20/20

9. Condition of mouth and t

10. The abnormalities (conge

P.F.T.x

Part 3. We, the examin

reported in the remarks. We

and Instructions for the med

Special remarks when categ

Date	Brief d
27-7-40	vacc. 4
27-7-40	T.A.B.1
11-9-40	- 2
2-10-40	- 3
27-7-40	T.T.Typhoi
11-9-40	2

J. Rodolphe Lemieux
President

VACCINA

-14-

CERTIFICATE OF MEDICAL EXAMINATION

Name in full Woods Aimée Date July 6th 1940

Part 1. Information obtained from the recruit.

1. Age 21 2. Have you ever suffered from any of the following diseases?

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

Aimée Woods
(Signature of Recruit)

Examiner's remarks re above none

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

1. Identification marks or scars. (If operative obtain history.) none

2. Height 5 feet 7 inches. 3. Weight 130 pounds.

4. Complexion dark Eyes Brn Hair dark 5. Development Good (Good / Fair / Poor)

6. Chest measurement—Girth on full expansion 36 inches.
Range of expansion 1 inches.

7. Vision, right 20/20 left 20/20 8. Hearing, right W.V. 20 left W.V. 20

9. Condition of mouth and teeth Good

10. The abnormalities (congenital and pathological) found on examination are as follows Reflex Defs Urine: normals

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. X

16 JUIL 1940 X-RAY CHEST - NEGATIVE

J Gosselin Major RCAMC (President) Jas. N. Ellis (Member) R Campagna (Member)

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
27-7-40	Vacc. W.M. Pfeffer M.D	8-10-41	TAB 1/2cc
27-7-40	T.A.B.-1 W.M.P.	20 July 42	TAB + T ½ cc A.A.
11-9-40	- 2 / 3 } Complete		
2-10-40	- 3 }		
27-7-40	Tet. Tox. 1cc. W.M.P.		
11-9-40	- 2. J.J.		

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

S.R.D. 3 MAY/41 2 Bn RCE R.D. 9 MAY/41
Gar. 16 Jun 41 2 Bn Regt 20 Jun 41

Fingerprinted photo.

SERVICE AND CASUALTY FORM

PART I (For all ranks)

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

Unit 1st PIONEER BBATTALION R.C.E. (CASF) Regimental Number E-29132

1. Surname WOODS
2. Christian Names Aime FRED
3. *Substantive Rank and Appointment PTE
   *Acting Temporary or Local Rank
   giving date

*To be entered in pencil to facilitate alteration.

4. Place of birth FAUVEL P.Q. 14-1-1919
5. Date of birth as declared on attestation
   (A)
6. Date of enlistment 7-7-40
7. Place of enlistment New Carlisle P.Q
8. Residence at time of enlistment New Carlisle P.Q.
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion Catholique Romaine
12. If married, state date
13. Trade on enlistment Journalier
14. Corps, trade and grade PIONEER "C"
15. (D) Qualifications
16. (E) Miscellaneous entries

(17) Regiment or Corps: CIC

Unit (Battn., etc): L&WREGT

(18) Medical BOARD

Category	Date	Authority
A	6.7.40	~~The~~ Med Bd

(19) Next of kin (entries to be made in pencil) Father
Alfred Woods
Fauvel P.Q. Canada

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

NOTES—

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

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	Army rank as at (e)	(g) Army Form or other authority for entry to be shown
		E.T.C.	SOS ON PROCEEDING OVERSEAS PETAWAWA		2-2-41.	SPR.	D.O. #28 3-2-41.
			SOS CASF (CANADA) ON EMBARKATION AT Halifax ON 5 Feb 41				
			TOS CASF (OVERSEAS) ON TRANSFER ON 5 Feb 41 AND DISEMBARKED AT Gourock ON 1 Mar 41.				
			Std. 1 E H.U.	Border	2 Mar 41	Spr.	Do. 5 K. 7 Mar 41.
		1 E H.U.	SOS to 2nd Bn R C E.	"	2 May 41	"	D 192 - 2 May 41
5 May 41	O C	2nd Bn	T O S 2nd Bn R C E	Field	3 May 41	"	33 d/ 9 May 41
20 June 41	"	"	7 days Privilege Leave	"	16 June 41	"	39 d/ 26 June 41 +
3 July 41	"	"	7 days Pay FP + 2 149(1)(c) AWL (4 hrs 50 min)	"	2 July 41	"	42 d/ 4 July 41
			Qualified Pioneer Group "C"	"	10 June 41	"	47 d/ 1 Aug 41
5 Aug 41	"	"	5 Days CB & Forf 1-2-6 for Damage to Clothing	"	4 Aug 41	"	44 d/ 9 Aug 41 ✓
12 Oct 41	"	"	7 days Privilege Leave MO FTW	"	10 Oct 41	"	60 - 17 Oct 41 x
	"	"	Granted T.P. Leave "C"	"	18 Oct 41	"	64 (21) 14 Nov 41
	"	"	~~Forfeits~~				
	"	"	~~Leave to draw T.P. Leave Group C~~	"	31 Oct 41	"	3 (8) 16 Jan 42
	"	"	~~Qualified Carpenter Helper C~~	"	~~Nov 41~~	"	~~(17) Dec~~
	"	"	P-3 7 days Leave FTW	"	8 Jan 42	"	17 (20) 17 Jan 42
	"	"	P-4 7 days Leave FTW	"	21 May 42	"	35 - 14 Jul 42
	"	"	~~Std. to Qualified Carpenter~~	"	~~11 Feb 42~~	"	~~47 3 Feb 42~~
	"	"	~~T.O.S. 2nd Bn R.C.E.~~	"	~~15 Feb 42~~	"	~~47 3 Feb 42~~
	"	"	~~Granted Trade of Carpenter Helper "C"~~	Field	15 May 42	Sapper	48 - 16 Sep 42
2 Sept 42	"	"	Leave - 7 days F-3.	"	18 Aug 42	"	52 - 20 Sep 42
8 Dec 42	"	"	~~S.O.S. 2 Bn R.C.E.~~	"	~~6 Dec 42~~	"	~~66 14 Dec 42~~
"	"	"	~~Granted FP Carpenter Helper "C"~~	"	~~6 Dec 42~~	"	~~66 14 Dec 42~~
"	"	"	~~T.O.S. 2 Bn R.C.E.~~	"	~~6 Dec 42~~	"	~~66 14 Dec 42~~
18 Dec 42	"	"	Leave 7 days.	"	21 Nov 42	"	67 - 21 Dec 42
			Granted Daily Rates of Pay of $1.50 per diem	"	16 Jan 43	"	16 - 31 Mar 43.
6 Apr 43	"	"	Leave 9 days.	"	28 Mar 43	"	19 - 16 Apr 43
	"	"	Awarded 10 days pay for an offence under sec 15(1) AWL 2 days 22 hrs. Forf 10 days pay F.R. & 3 149(2)				
			Forf 3 days pay F.R. & 3 149(1)(a) Total forf 13 days pay	"	27 Apr 43	"	43 - 14 May 43
	"	"	Leave 9 days	"	16 June 43	"	33 - 15 Jul 43
	"	"	7 days CB + forf 5 days pay for AWL.				
			Total forf 6 days pay	"	2 Oct 43	"	51 - 23 Oct 43
			Awarded Canadian Volunteer Service Medal and Clasp	✓	15 Jan 44	✓	9 - 44
	"	"	7 days CB + forf 3 days pay for AWL. Total forf 4 days pay.	"	31 Mar 44	"	16 - 6 Apr 44

Statement of the Service of No. C29132 Rank Sheet No.

Name Woods. A

M.F.M.1 & 2A
40/P & S/119

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
		10/16 X4 List R&E	Spr	8 June 44	2 Bn R&E	UK	26	10 June 44
		TOS from X4 List R&E (13 Bn 2 & 3 R.H.)	Spr	23 July 44	1 & E R.H.	UK	176	26 July 44
M144	SOS	SOS on trans per from R.E.E. to C.I.C. 9 list posted to Can Fus	Spr	11 Aug 44	1 C.E.R.H.	UK	191	12 Aug 44
M144	TOS	TOS from C.E.R.H. on transfer to C.I.C.	Fus	12 Aug 44	1 Bn Can Fus	UK	29	23 Aug 44
620		SOS X4 List 616	Fus	15 Sept 44	1 Can Fus	UK	34	15 Sept 44
		(4) TOS X4 List (11 Bn)	Fus	17 Sept 44	1 Can Inf	21 Army	29	27 Sept 44
		Embarked at UK on		17 Sept 44	Can Inf			
		Disembarked at FRANCE	Fus	18 Sept 44	1 Can Inf	21 Army	29	27 Sept 44
	SOS	SOS X4 L (13 Bn) to L & W Regt.	Pte	28 Sept 44	Inf Unall	21 Army	38	11 Oct 44
M186	TOS	from X4 List 113 Bn) Inf Gen Unall	Pte	29 Sept 44	L & W Regt	21 Army	49	17 Oct 44
		Killed 25 Oct 44						
M164		Killed	Pte	25 Oct 44		AEF	A 510	3 Nov 44
M192	SOS	SOS Deceased Killed in Action	Pte	25 Oct 44	L & W Reg	21 Army	53	7 Nov 44

Statement of the Service of No. E·29132 Rank ..... Sheet No. .....

Name H/OWES A

M.F.M.1 & 2A
40/P & S/119

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
	(O/S)	AWL 1-7-41 forf 3 days pay FBR 1 149 (C) AA 150	Spr	2 July 41	2 Bn RCE	UK	42	4 July 41
R.O.	599	Qual. Pioneer (C) Class A	Spr.	16 June 41	2 Bn RCE	UK	47	1 Aug. 41
		Stoppage of Pay £1-2-6 AA 40	Spr.		2 Bn R.C.E.	UK	48	8 Aug. 41
		Pleave (12 d w)	Spr.	10/17 Oct 41	2 Bn.	UK.	60	17 Oct 41
		Trades pay Sapr (C) Pioneer	Spr.	18 Oct 41	2 Bn.	UK.	64	14 Nov 41
		Ceases to draw Trades Pay as Pioneer "C"	Spr.	31 Oct 41	2 Bn	U.K.	3	16 Jan 42
R.O.	(O/S) 599	Qual. Carpenter Helper (C)	Spr	2 Mar 42	2 Bn	U.K.	12	20 Mar 42
		On 6 Bridging course & att Rail Construction Training wing	Spr.	24 March 42	2 Bn	UK	15	3 April 42
		RETD from course to cease TO be attend	Spr.	23 April 42	2 Bn.	UK.	20	4 May 42
		7 days Pleave NW TO 15 June 42.	Spr.	8 June 42	2 Bn.	UK.	17	17 April 42
		Pleave	Spr.	24/28 May 42	2 Bn	UK.	35	14 July 42
Pun.		Tot. forf. 1 Days pay (admonish)	Spr	28 Aug 42	2 Bn	UK	47	3 Sep 42
		Leave	Spr	14/25 Aug 42	2 Bn	UK	52	30 Sep 42
		Prin leave to 26 nov 42	Spr	18 nov 42	2 Bn	UK	67	21 Dec 42
		Granted permission to marry Miss Margaret Lily Jersey, 22 Feb/43	2 Bn	UK	5	1 Feb/43		
		Granted T pay Sapper Helper "C"	Spr.	6 Dec/42	2 Bn	UK	5	1 Feb/43
		~~Total Forf 13 days pay for off Acc 15.1.AA~~	~~Spr.~~	27 April 43	2 Bn.	U.K.	23.	14 May 43.
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER E-29132 RANK Pte SERVICE UNIT Lincoln & Welland Regiment (CA)

NAME WOODS, Aimee

DATE OF BIRTH
DAY 14th MONTH January YEAR 1919 Enlisted: 7-7-40

MARITAL STATUS
Single Religion: Roman Catholic

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Father
ADDRESS Fauvel Co., Bonaventure, Que.
NAME ADDRESS D.A.B. Mr. Alfred Woods

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME
ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. 3026A H.Q.405-W-1458
CASUALTY DETAILS Killed in action DATE 25-10-44

FRANCE

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

M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO S/L 519 O/S with R.C.E.

DATE 8-11-44

OFFICER I/C RECORDS

6

COPY FOR DOCUMENT FILE

SERVICE AND CASUALTY FORM

M.F.M.4 (a) (Part II)
40/P & S/412 (3006)

(PART II)

Regiment or Corps... .....Regimental Number E·29132

Substantive Rank Spr Surname WOODS Christian Names AIME FRED

Acting Temporary or Local Rank.....

(To be entered in pencil to facilitate alteration)

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry shown
	OC	2 Bn RCE	SOS To X4 List RCE	Field	8 Jun 44	Spr	26-10 Jun 44
	X4 (13 Bn)	"	TOS from 2 Bn RCE	"	16 Jun 44	"	23-12 Jun 44
			SOS to 1 CERA	"	22 Jul 44	"	36-28 Jul 44
		1 CE Mn.	TOS from X4 List	"	23 Jul 44	"	176 26 Jul 44
		"	SOS to CIRU Posted Cdn Trans	Fld.	11 Aug 44	"	191-12 Aug 44
			TOS Cdn Trans from 1 CERU	✓	12-8-44	Trans	29 23-8-44
			SOS Cdn Trans to X4 List CIC	✓	15-9-44	✓	29 15-9-44
		Embarked and TOS X4.	UK 17 Sep CIC Disembarked (11 Bn)	Transd	18 Sep 44	←	29 Sep 44
	X4	CIC	13 Bn.	SOS to Sick Leave	Fld.	28 Sep 44	Pte	38 OCT 1944
		L&W	TOS from X4 List 13 Bn Inf Gen Un		SEP 29		4 9 1944
28OCT44	CR #87	3014/152	L&WR	SOS deceased Killed in action	Field	25OCT44	Pte	53 - NOV 44

(10) Vivez-vous en union libre avec une femme — que vous avez toujours fait vivre et reconnue publiquement comme votre épouse?
Have you a common-law wife — whom you have been regularly supporting and publicly representing as you wife?

N.A.

Dans l'affirmative, donnez son nom en entier et son adresse postale N.A.
If so, state her full name and Postal Address.

(11) Est-ce que votre père vit encore? OUI
Is your father alive?

Si oui, donnez son nom et son adresse ALFRED ~~XXX~~ WOODS
If so, state name and address.

FAUVEL CTE BONAVENTURE P.Q.

(12) Si votre père est veuf et complètement incapable de gagner sa vie, êtes-vous son seul soutien? N.A.
If your father is a Widower and is totally incapacitated from earning a living — are you his sole support?

(13) Si vous êtes le seul soutien de votre père qui est veuf, dites quel montant par mois vous lui donniez avant de vous joindre aux troupes canadiennes de campagne. N.A.
If sole support of father who is a Widower — state what amount per month you have given him prior to joining the C.F.F.

Dites aussi pourquoi il n'a pas d'autres moyens de subsistance N.A.
Also state reason he has no other means of support.

(14) Est-ce que votre mère vit encore? OUI
Is your mother alive?

Dans l'affirmative, donnez son nom et son adresse MRS ~~XXXXXXXXX~~ MARY CERTEIR (WOODS)
If so, state name and address.

FAUVEL CTE Bonaventure P.Q.

(15) Si votre mère est veuve, êtes-vous son seul soutien? N.A.
If your mother is a Widow, are you her sole support?

(16) Si vous êtes le seul soutien d'une mère veuve, dites quel montant par mois vous lui donniez avant de vous joindre aux troupes canadiennes de campagne.
If sole support of widowed mother — state what amount per month you have given her prior to joining C.F.F.

N.A.

Dites aussi pourquoi elle n'a pas d'autres moyens de subsistance N.A.
Also state reason why she has no other means of support.

(17) Etes-vous assuré? NON
Are you insured?

Si oui, dites dans quelle compagnie? N.A.
If so, in what company?

Avez-vous pris les dispositions nécessaires pour le payement de votre prime d'assurance? N.A.
Have you made arrangements for payment of your Insurance Premium?

Sinon, et s'il s'agit d'une prime mensuelle, vous pouvez déléguer le montant de cette prime en plus de toute autre délégation que vous désirez faire pourvu que la délégation totale ne dépasse pas le montant mensuel maximum qui peut être délégué.
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.

Je certifie par la présente que les renseignements par moi donnés sur cette formule sont exacts sous tous rapports.
I hereby certify that the information given by me on this form is correct in each and every particular.

Annie Woods
(Signature de l'officier ou de l'homme)
(Signature of officer or man)

Date 7-7-40

J Allagee Major
Officier Commandant
Officer Commanding

Date 7-7-40

DISTRICT DEPOT. M.D. 5.

Pour être fait en double exemplaire.
To be made out in duplicate.

M.F.M. 5 (Fr.)
100M — 8-39 (1702)
H.Q. 1772 — 45-18

DÉTAILS SUR LA FAMILLE D'UN OFFICIER OU D'UN SOLDAT DES TROUPES CANADIENNES DE CAMPAGNE

PARTICULARS OF FAMILY OF AN OFFICER OR SOLDIER OF THE CANADIAN FIELD FORCE

INSTRUCTIONS

(*a*) Cette formule doit être remplie dès qu'un officier ou un soldat est nommé ou enrôlé dans les troupes canadiennes de campagne.
This form is to be completed immediately an officer or soldier is appointed to, or enlisted in, the C.F.F.

(*b*) Il faut répondre à toutes les questions, et donner tous les détails nécessaires.
All questions, etc., must be completed.

(*c*) Les deux copies de la formule **doivent** être envoyées par le commandant de l'unité, dans le cas de chaque officier et chaque soldat, au payeur ou à l'officier agissant comme tel. Ce dernier enverra une copie par l'intermédiaire du Payeur du district ou du camp au Payeur en chef au quartier général de la Défense Nationale, Ottawa. L'autre copie sera retenue par le payeur jusqu'à ce que l'unité arrive outre-mer, alors que cette copie sera transmise au Payeur en chef à la Base Intermédiaire Canadienne Outre-mer.
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) Nom de l'officier ou du soldat ~~WOODS~~ ~~XXX XXXXXX~~ AIMEE
Name of Officer or Soldier. (Nom de famille — noms de baptême en entier — majuscules moulées)
(Surname first — Christian names in full — Block capitals)

(2) Matricule E-29132
Regimental Number.

(3) Unité 1ST PIONEER BATTALION R.C.E. (CA$_s$f)
Unit.

(4) Etes-vous marié? NON
Are you married?

(5) Dans l'affirmative, donnez
If married, state,
(*a*) Le nom de votre épouse en entier N.A.
Full name of your wife.

(*b*) L'adresse postale actuelle de votre épouse N.A.
Present Postal Address of wife.

(6) Si vous êtes marié, avez-vous toujours fait vivre votre épouse? N.A
If married, have you been regularly supporting your wife?

Si non — donnez-en les raisons N.A.
If not — state reasons.

(7) Etes-vous veuf? N.A.
Are you a widower?

(8) Avez-vous des enfants? N.A.
Have you any children?
Si oui, faites connaître le nombre des garçons et des filles N.A.
If so, give number of boys and girls.

Donnez aussi leur nom et leur âge N.A.
Also their names and ages.

(9) Si une indemnité d'absence est réclamée pour les enfants, dites si vous avez toujours pourvu à leurs besoins
If Separation Allowance is claimed in respect of children — state whether you have been regularly supporting them.

N.A.

Donnez des détails quant au tuteur auquel une indemnité d'absence devrait être payée — s'il existe une autorisation —
Give particulars of Guardian to whom Separation Allowance should be paid — if authorized —

Nom N.A.
Name.

Adresse postale
Postal Address.

[VOIR AU VERSO]
[SEE OTHER SIDE]

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 WOODS Aime (b) Reg'l. No. B-29132
2. (a) Arm of service Army (b) Unit 2nd. Bn. R.C.E. (c) Rank Spr.
3. (a) Date of birth 1 Apr./18 (b) Have you any dependents? Yes (c) Place of residence at time of enlistment Bonaventure, Que.
4. (a) Place of enlistment New Carlisle, Que. (b) Date of enlistment 7 July/40

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 18 Yrs. (b) Were you attending school or college up to the time of enlistment? No
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) 4th Grade
7. If you attended a university, give name of university and standing or degree secured
8. (a) Did you ever enter upon a trade apprenticeship? No (b) If so, for what occupation? (c) Did you finish it? (d) If you did not finish it, how long did you serve at it?
9. (a) What languages do you speak fluently? English-French (b) What languages do you read well? English-French

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

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

22. (a) State nature of business, or professional practice Farming (b) Where was it located? New Carlisle, Que.
23. (a) Number of years engaged in this business 2 Yrs. (b) Have you made, or will you make plans to return to the same or a similar business on discharge? No

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? No (b) Do you feel competent to operate a farm? (c) If so, in what kind of farming? Mixed
25. (a) Were you born on a farm? (b) How many years' actual farming experience have you had? Wide (c) In what provinces did you have experience? Southern Que.

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? No
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.)
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form Office work

DATE 20 Apr. 194 3 SIGNATURE [signature]
for officer i/c of Records C.M.H.Q.

Sheet No.....

POSTINGS FROM O/S CASUALTY LISTS

To be attached to M.F.M. 1 or M.F.M. 2

Regt'l No. E29132 Rank Ste Surname Woods Christian Name Irvine F

Unit	Hospt.	Admitted			Discharged			Hospt. Days	Disease or Injury	Remarks	Cas. List No.
		Day	Mo.	Year	Day	Mo.	Year				
Lin H. Well Regt.									Killed 25-10-44		A 510

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

Army Form B. 122.

Wood[illegible] E-29132 Corps R.C.E. Date of enlistment 7 Jul 40 G.C. Badges Service or Proficiency Pay N/A

Regt., Batty., Company E29132 Wood[illegible] Remee

Entry in Conduct Sheet N/A No. and date of last drunk N/A Period not reckoning towards freedom from extra fine N/A Sheet No. 1 Signature O.C. Company, etc. Jas R Morrison Capt Character

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
	Sheet destroyed 7 Jan 41; Last entry 26 Dec 40; Nil cases of drunkeness.							RLB	
Field	1 Jul 41	Spr.		AA Sec 15(1) WOAS-AWL on 1 Jul 41 from 1300 hrs to 1730 hrs (4 hrs 30 min)	L/Sgt Boudreau	Forf 7 days pay AF A16	2 Jul 41	RLB	
Field	24 Dec 41	Spr		AA Sec 15(1) AWL for 17½ hrs.	2nd Lt Taylor 2/Lt Thatcher	14 days CB	26 Dec 41	Lt Col Sutherland RLB	Forf 1 days pay F.R.1 1149 (1)(a)
Field	27 Aug 42	Spr		AA Sec 15(1) AWL from 2400 hrs 27 Aug 42 Till 1015 hrs 28 Aug 42. (10 hrs-15 min)	Cpl Kelso Spr Carrie	admonished	28 Aug 42	Maj C.E. Brown RLB	Forf. 1 days pay F.R.1. 1149 (1)(a)
Field	23 Apr 43	Spr.		AA Sec 15(1) AWL 23.15 hrs 23 Apr 43 to 0600 hrs 24 Apr 43 (6 hrs-45 min)	Cpl Mcinnis Spr Stuart R.M.	Forfeits 2 days pay	27 Apr 43	Lt Col Orchibald RLB	Forf. 1 days pay F.R.1. 1149 (1)(a)

[P.T.O.

W2980/B82 1,050,000 7/18 M&CLd. E3445

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	
FIELD	16 MAR 44	SPR		AA 15 (1) AWL FROM 0100 hrs 16 MAR 44 TO 0800 hrs 16 MAR 44 (7 hrs)	CSM SHAW SGT. BARCLAY	6 DAYS PAY 7 DAYS C.B.	17 MAR 44	AA AYER MAJOR	FORF 1 DAY FR&I 149(1)(a)
				Awarded C.B. & Int. stop w.e.f. 15 Jan 44 W/Op - d/28 Feb 44					
Field	18 Apr 44	Spr		AA15(1) AWL 0800 hrs 18 Apr till 1700 hrs 18 Apr 44 (9hrs)	CSM Shaw	10days pay 10days C.B.	20 Apr 44	Lt Col Capelle	Forf 1 days FR&I 149(1)

Army Form B. 122.

...S. TIME. F
...OOS. A. F

Company Conduct Sheet } N/A

No. and date of last drunk } N/A

Sqn., Batty., or Company }

Corps R.C.E

Period not reckoning towards freedom from extra fine }

Date of enlistment } 7-7-40

Sheet No. 1

G.C. Badges }

Signature O.C. Company, etc. } Capt R Monson Capt

S.O.S. 16-10-45

Service or Proficiency Pay } N/A

Character

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
				SHEET ~~DESTROYED~~ Verified 24-1-41 ON COMPLETION SIX MONTHS SERVICE. VERIFIED			Pay Ledger 29/32		Words Fine Cancel
				VERIFIED TO DATE FEB 2-41					
FIELD	1-7-41	SPR		A.A 15(1) AWL IN THAT HE WHEN HIS BN WAS OUT ON WORKS ABSENTED HIMSELF WITHOUT LEAVE FROM 1300hrs TO 1730hrs 1-7-41 4 hrs 30 MINS	L/SGT BOUDREAU	FORF 7 DAYS PAY A.A-46	2-7-41	RB	
FIELD	27-8-42	SPR		A.A 15(1) AWL FROM 2400hrs 27 AUG 42 TO 1015 HRS 28 AUG 42	CPL KELSO SPR CARRIE	ADMONISHED	28 AUG 42	MAJOR BROWN RB	FORF 1 DAYS PAY FR 1 14 9(1)(A)
FIELD	27-4-43	SPR		A.A 15-(1) AWL FROM 2300hrs 23 Apr 43 TO 2100hrs 26 Apr 43	CPL McINNIS H CPL STUDHOLME C	10 DAYS PAY	27 APR 43	LT COL S.W ARCHIBALD HB	FORF 3 DAYS PAY FR 1 14 9 (1) (A)

[P.T.O.

W2980/BS2 1,050,000 7/18 M&CLd. E3445

Place	Date of offence	Rank	Cases of Drunkenness	Offence	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
FIELD	30 SEP 43	SPR		AA 15(1) AWL FROM 1000 HRS UNTIL 2045 HRS 30 OCT 43	C SM SHAW L/CPL STURROCK	5 DAYS PAY FRVI 144 7 DAYS C.B	2 OCT 43	LT COL CAPELLE	FORF 1 DAYS PAY FRVI 149 (1) (A)
				Awarded C.C. & Dismissed with Sentence not to be carried into effect					
FIELD	29 MAR 44	SPR		AA 15(1) AWL - 2400 hrs 29 MAR 44 TO 1800 hrs 30 MAR 44 (ABSENT 18 hrs)	DOCUMENTARY CPL JARRATT	7 DAYS C.B 3 DAYS PAY	31 MAR 44	A.D. LANGMOIR MAJOR	FORF 1 DAY PAY FRVI 149 (1)(a)

COMMON TRAINING

Subject	Standard (a)	Remarks	Initials
Drill	Fair		D.F.
Physical Training	Average		D.F.
Marching	Fair		D.F.
Map Reading	Unknown		D.F.
Fundamental Training			
Appl. of Fire			
Bayonet	Fair		D.F.
P.I.A.T.	Fair		D.F.
Sten M.C.	Fair		D.F.
Cooking in the Field	Unknown		D.F.
Field Works			
Field Training	Average		D.F.

SPECIALIST TRAINING (where applicable)

Nature	Standard (a)	Remarks	Initials
Drvg&Mtce(Wheeled)			
Drwg&Mtce(Carrier)			
Drvg&Mtce(M.C.)			
3-in Mortar			
6-pdr.A.Tk.Gun			
Range-taker			

GENERAL REMARKS ON COMPLETION OF TRAINING (a)

Military Efficiency.....Conduct.....Leadership.....

Other Remarks.....

.....

Place In the field..Signature W.A.B. Gabriel...Rank and Appointment Capt. 2/c

Date 13/9/44.....Training Centre or Unit Low Fees.....

Time with unit 32 days.

Temporary - Compiled from MBM PTI

TRAINING RECORD--INFANTRY (RIFLE)

No. E 29132 Rank Pte Name Read Aime F. Woods Grimell

(in full, surname last)

Medical Category A Date of Birth 14 JAN 1919

English Speaking
French Speaking
Bilingual

TESTS OF ELEMENTARY TRAINING

RIFLE	1	2	3	4	Remarks as to Gen Skill
Date	Q 4/9/44				
Initials	RF.				

BREN	1	2	3	4	Remarks as to Gen Skill
Date	Q 4/9/44				
Initials	RF.				

2-in. MORTAR	1	2	Remarks as to General Skill
Date	Q 4/9/44		
Initials	RF.		

3-in MORTAR	1	2	3	4	Detachment Drill 1	2	3
Date							
Initials							

GAS TRG.	Oral	Insp.	Std.	Through Chamber		
Date						
Initials						

RANGE COURSES

	Qualification Standard	Date	Initials		No. of Rds.	Standard (a)	Initials
Rifle	Zeroed	13/8/44	RF.	A.A.			
L.M.G.	2nd	7/9/44	RF.	Grenade No.36	2	Q	RF.
				Grenade No.69	2	Q	RF.
				Gren.St.No.74			
	No. of rds.	Stand(a)	Initials	Grenade No.77	1	Q	RF.
2- in Mortar	3	Q 12/9/44	RF.				
3- in Mortar							
P.I.A.T.	2	Q 12/9/44	RF.				
Sten M.C.	45	Q 12/9/44	RF.				
6-pdr.A.Tk.Gun							

(a) Where no regulation standard is prescribed in manuals, use: Very Good (V.G.)-85% or better: Good (G)-70% to 84%: Average (AV)-50% to 69%: Failed (F) under 50%.

M.F.M.105E

42 Previous Experience in Armed Forces

ARM or CORPS	Type (C.E.F., N.P., etc.)	Years	Highest Rank	Last Discharge (Yr.)	Special Training Received
				✓	

43 CURRENT SERVICE: Date Enlisted 7/7/40. Place Enlisted NEW CARLISLE

Date From—to	Country	Corps	Unit and Sub-unit	Rank 44	Principal Duty	Performance
7/7/40 2/2/41	CAN	R.C.E.	1 CAN PION ~~SCEHR~~	SPR.	TRAINING.	
2/2/41 3/5/41	ENG	R.C.E.	~~1 CAN PION~~	SPR.	TRAINING	
3/5/41 25/2/42	ENG	R.C.E.	2 BTN	SPR.	TRAINING	123
				A		

45 COURSES ATTENDED

	PLACE	Date: From—to	Qualified as	Rating

46 Crime: Number Courts Martial Convictions ..... Hospitalization .....

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

0 Chronic Major Offender ..1/7..... Chronic Minor Offender ..... Occasional Offender .....

49 Psychiatric ☐☐☐☐☐

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

47 Classification: Military Specialties and Trades

Designation		Degree of Proficiency	Date	Authority
SAPPER.	123			
Pioneer	387	Class A C	10/6/41	D 047

55 Type of Service Desired (1) ..PRESENT SERVICE..... (2) .....

Remarks re Outstanding or Limiting Factors

NR.

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

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

.....

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

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

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

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

Interviewed by L.D. Sadler Lieut. Date 25/2/42

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

Soldiers Qualification Card

CODED

Regt'l Number E29132. Last Name WOODS. First Name AIMEE.

CARDS PUNCHED

Middle Names

Unit 2 Btn R.C.E. A. Pcy. 382

2 Nationality	By Birth	By Naturalization	Country of Birth
FRENCH CANADIAN 08	✓		CANADIAN

1 Corps R.C.E.

3 2 Racial Origin FRENCH CANADIAN 4 5 Language spoken in home: French ✓ Other ... English ✓

5 Age 21. (1921) 6 Height 5'8" 7 Weight 160 8 Silhouette 1 2 3 ✓

9 Eyes: ✓ Colour of BROWN. 10 1 Acuity ✓ 2 3 10 Glasses ..... 11 Colour Vision 1 2 3 4

12 Hearing: Acuity ✓ 2 3 13 Speech Defects .....

14 Handedness ✓ R L A 15 1 Med Category A. ✓

Cause .....

Attitude to own health Normal To Medical attention Normal

Health History Normal.

16 Education Level: Illiterate ..... E IV 4 (18) S ..... (Grade completed)

Conduct during school life Normal

17 University or 18 Professional	Course Taken	Years Completed	Degree

19 Post Graduate	Course	From—To	Degree

Specialized Training:

20 1. ..... (Course) At ..... From—To ..... Completed.....

21 2 ..... (Course) At ..... From—To ..... Completed.....

22 3. ..... (Course) At ..... From—To ..... Completed.....

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

23 Languages: Spoken fluently ENGLISH FRENCH 02 11 Written well ENGLISH FRENCH

24 Main occupation: Description FARMING 5914

Estimate of skill .....

Duration (from—to) 1938. 1940. Weekly Wage WORK FOR HIMSELF

Employer's Name and Address A. WOODS - NEW CARLISLE QUE.

50 "M" Test	Score	SM	
1	14		S. Tot. 29
2	9		SM
3	6		
4	15		S. Tot. 38
5	17		SM
6	6		S. Tot. 35
7	12		SM
8	17		
Tot.	96	SM	Grade E
9			

51 OTHER MENTAL

Test .....

Score ..... L. Grade .....

Date .....

52 MECHANICAL

Test .....

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

Date .....

52 CLERICAL APT.

Test .....

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

Date .....

53 TRADE TEST

1. Score .... G. .... Date ....

2. Score .... G. .... Date ....

3. Score .... G. .... Date ....

4. Score .... G. .... Date ....

54 OTHER

Test .....

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

Date .....

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 1 Heavy Truck D. 28 2 Light Truck W. 29 1 Auto D. 30 Motorcycle .....

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

35 Accident Prone .....

Farming Experience: Wide ✓ Limited .....

District SOUTHERN QUE. Type MIXED.

Job promised after discharge No. By whom? Name .....

Address .....

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

..... Type of work desired OFFICE WORK

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

Stable ✓ Erratic .....

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

2 Marital Problems ..... (Remarks)

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

37 No. of Children ..... No. Brothers 2. No. Sisters 1.

Position in family 3. 38 No. Dependents 1.

Relationship of Dependents MOTHER.

Status of home in childhood Normal

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

3 Mechanics ..... Other .....

40 Sports: (1) FISHING (2) HUNTING (3) .....

F Team Games and Position (1) BASEBALL FIELDER

J (2) HOCKEY. CENTRE. (3) .....

3

1

41 1 Ability to Entertain: Music: String VIOLIN Brass .....

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

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

No E.29132 Rank Private Name WOODS, Aimee

Unit Lincoln & Welland Regt. Date of death 25th Oct., 1944

Died at ~~France~~ Holland

Cause Killed in action

Death occurred on strength of Forces H.Q. 405-W-~~1,458~~ 1458

N/K Mr. Alfred Woods Relationship Father

Address Fauvel Co., Bonaventure, Que.

Remains buried in SW of church Cnr Huijbergen sh 23 Cemetery

NE Row 1 Gr. 5 Dutch

Grave location

CWGC ✓

OVER-

BURIAL REPORT TO N.K. FEB 23 1946

RETURN TO BUR. OF STAT. JUL 13 1945

ROYAL MESSAGE DESP'D. NOV 22 1944

CAN. MESSAGE DESP'D. DEC 16 1944

Temp BR sent to NK & Map

REBURIAL

Bergen-op-Zoom Cdn. Military Cem.
4 miles N.E. of Bergen-op-Zoom,
Holland.

Grave 6, row C, plot 4.

HI & CR Form Despd FEB 7 1947

Photographs Despatched
NOV 26 1947

5M-10-44 (M-4414)

CONTINUATION CARD TO M.F.M. 14

Regimental No. F-Y913Y Name WOODS AIME (F)

Part 11 D.O. No.	Part 11 D.O. Date	PARTICULARS OF CASUALTY
5Y-56	30-9-4Y	GRANTED 7 DAYS P.L. (F3) W.E.F. 18-8-4Y TO Y5-8-4Y W.I/4 R.A.
67	Y1-1Y-4Y	7 DAYS P.L. PLUS 48 HRS · 9 DAYS R.A. W.E.F. Y1-11-4Y TO 29-11-4Y (CR.40)
19	16-4-43	7 Days P.L & 48 hrs - 9 Days R.A. 28-3-43 to 5-4-43 (CR125)
16	31-3-43	Granted, Increase Rate of Pay $1.50 wef 1-1-43
23	14-5-43	For 13 Days Pay (AWL) wef 27-4-43
33	15-7-43.	7 Days P.L & 48 hrs - 9 Days RA. wef. 16 to 25-6-43 (CR153)
49	7-10-43.	7 Days P.L. & RA wef 23 to 30-9-43 (CR178)
54	23-10-43.	For 6 Days Pay (AWL) wef 2-10-43 (CR179)
2	13-1-44	7 Days P.L & 48 hrs. 9 Days RA wef 20 to 29-12-43 (214)
9	28-2-44	Awarded C.V.S.M. + Clasp 15-12-44
116	6-4-44	7 Days P.L & 48 hrs - 9 Days RA wef 20 to 29-3-44 (41)
16	6-4-44	For 4 Days Pay (AWL) wef 31-3-44 (42)
CR94	8-6-44	SOS-2 Bn RCE to X4 list RCE wef 8-6-44
CR129	9.6.44	TOS X4 List (13 Bn) wef 9.6.44
176	26-7-44	TOS 1 CERU & ATT. FOR R&Q TO 2 CARU WEF 23-7-44
91	12-8-44	SOS & CIC ON TRANS TO CON FUS eff 11 Aug 44
29	23/8/44.	T.O.S. Can Fus from #1 C.E.R.U. wef. 12 Aug 44.
37	15-9-44	SOS-Can Fus to X4 list CIC wef 15 Sept 44

M.F.M. 14A
S/D & S/167

Part 11 D.O.		PARTICULARS OF CASUALTY.
No.	Date	
		TOS 1/Rm Y.O.Y Lost — wef 16.9.44
		Do S " " " " 24-9-44
CR22	29-9-44	SOS/3 Rm to Lune y Well d Kept wef 28-9-44
CR87	28.10.44	S-on-S L.+W. 25-10.44. Killed E.A.

RTA

B/A

NAME Woods A. (Fred) Aime

REGIMENTAL NO. E.29132 RANK Sapper

ENLISTED AT Québec PROMOTIONS, ETC. AND DATE

DATE 7-7-40

IF SERVED PREVIOUSLY, STATE UNIT. ETC.

MARRIED. WIDOWER. OR SINGLE single

NEXT OF KIN Woods Alfred RELATIONSHIP Father

ADDRESS OF Fauvel, Co. Bonaventure P.Q. Canada

~~8.40 Nov-Apr'44 5th Loan~~ ASSIGNMENT OF PAY. $ 20 C xx eff Oct. 40. *8.40 6th V. LOAN MAY-Oct 44

ADDRESS (mother) Mrs. Mary Woods Fauvel P.Q. Bonaventure P.Q. Can.

DEPENDENT'S ALLOWANCE. ENTITLED OR NOT N/E

DATE APPLICATION FORWARDED TO DISTRICT PAYMASTER

IN WHOSE FAVOUR

C703F

M. F. M. 14
100M—6-40 (5616)
H.Q. 1772-39-1662

CASUALTIES, ETC.

NATURE E. G. ABSENCE, PROMOTION, ETC.	PART 11, D. O. No.	PART 11, D. O. DATE	REMARKS IF IN HOSPITAL, NOTE NAME, ETC.
T.O.S.1st.Pioneer Bnt.R.C.E. (CASF)			as attached to
Dist.Depot M.D.5	176	10-7-40	with effect 7-7-40
S.O.S! D.D.M.D. 5	193	30/7/40	with effect 30/7/40
TOS-ETC. from D.D. #5	172	31-7-40	Eff 31-7-40
PUNISHMENT: AWL. 1 day.	202	4.9.40.	Award 2 days C.B FORF 1 day pay
FURL 2/1/41 TO 15/1/41.	2	3/1/41	
SOS E.T.C. Eff 2/2/41	28	3/2/41	On Proceeding Overseas
T.O.S. No.1 E.H.U.	54	7-3-41	Eff 2-3-41
S.O.S. to 2 BN R.C.E.	102	2-5-41	" 2-5-41
T.O.S. YNP. BN. R.C.E FROM No.1 E.H.U.	33	9-5-41	" 3-5-41
FORFEITS 7 DAYS PAY	47	4/7/41	A.W.L. (C.R.3477) 5-7-41
STOPPAGE OF PAY £1-Y-6- THRU M.F.M. 513	48	8-8-41	C.R.358 (5-4-8-41)
GRANTED TRADE PAY - PIONEER - GROUP "C"	64	14-11-41	W.E.F. 18-10-41 (C.R.418)
T.P. CEASES PIONEER. "C"	3	16.1.42	" 31-10-41 (C.R.457)
ON COMM. HVY. BRIDGE COURSE	15	3-4-42	" 24-3-42 (C.R.481)
RET'D. FROM HVY. BRIDGE COURSE	40	4-5-42	" 23-4-42 (C.R.490)
ADMONISHED FORF 1 DAYS PAY	47	3-9-42	AWL. (C.R 545)

25-10-44

AWARDS—CANADIAN ARMY (ACTIVE)

1850 KI

500M—1-44 (3467)
H.Q. 1772-45-8

495340

M

FILE No. 405-W-1458

SURNAME (IN BLOCK LETTERS) / CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
WOODS, Aimee	E.29132	Pte.	L. & W. Regt.

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

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

24/2/86

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

17/3/86

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO Mr. Alfred Woods Father

Fauvel Cte. Bonaventure, Que.

ADDRESS:

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. Mary C. Woods. (MFM-5) (FRENCH)

1850
ADDRESS: Fauvel Cte Bonaventure, P. Q.

5056-27-10-49

MEMORIAL BAR
(1)
DATE DESP.....
REGN. NO 2432

(2)

(3) DESP. FEB 27 1945
REGN No. 14842

Sept 3 / 1950
Fauvel office. 02

Dear Sir

just a few lines
for to ask you. Something
witch i hope you will give
me aidie on to it now
Sir it is about my
Brother AIME F. WOODS. PTE
No E 29132. Canadeen army
and sir he was kilf in
over seas. Now Sir on the
23 of November 1945 y i reseve
from your Estates Branch
a Cheque of $.99. Cents. left to
me By my Brother Will.
now Sir about his gratured
money his mother mother.
Mary. Woods. did i have
a share in that will also
i would like to no from yous

as i was told By the
sunlife Bulding in montread
that i had a share of
the sume of 1. hundure d.50
dollors or more left to me.
on my share and they
told me also my sister
had a share her mame
was annie Woods. she
reseved also 99 cents—
Please sir weill you send
me the amount that
was do to me and her
also my sister he was kilf
on the 25 of october ~~1944~~ 1944
on duttey. for use all
Please unswer me at once
By Returned mail whatis
do to me over

I Reamene Your turley

Cpr Charles Woods.
Fauvel office
Le Bon P2.

i am his Brother.

quote no.

H.Q. 405-W-1458 FD 126.

Yours should have a file
of my in Your office

CFA[redacted]
40/P & S/2180 (4066)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME ....B-29132 Pte Woods A F.... Dec'd

RECEIVED FROM ....Cdn Sec GHQ 2nd Echelon 21 Army Group....

CHECKED BY ....A-117006 Gnr Schwartz M
B-81759 Sgt Graves L.G.... DATE ....29 Jan 45....

	Photos,		
I	Wallet.		
I	Lighter (No Name).		
2	Pens (I No Name & I Streamline)		
I	Wrist Watch (Elgin).		
I	Rosary.		
I	Pencil (Shaeffers).		
I	Chain.		
2	Coins (Souvenier).		
I	Key.		
I	Ring.		
I	Gold Cross.		
3	Religious Medals.		
I	Cap Badge.		

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

TRIPLICATE — with effects.

.....
for OC 1 Cdn KSD

CANADIAN MILITARY
ESTATES
1 FEB 1945
BRANCH
HEADQUARTERS

OTTAWA,
le 26 novembre 1947.

Q.G. 405-W-1458
R. 4 (b)

M. Alfred WOODS,
Fauvel,
Cte Bonaventure, P.Q.

Monsieur,

Je vous envoie sous ce pli une photographie de la tombe et du monument commémoratif qui marque la sépulture de votre regretté fils, le soldat Aimée Woods, matricule E-29132, inhumé dans la fosse 6, rang C, lot 4, du cimetière militaire canadien, à 4 milles au nord-est de Bergen-op-Zoom, en Hollande.

Toute erreur paraissant dans l'inscription sera corrigée au moment de l'érection de la pierre tombale permanente.

Veuillez agréer, Monsieur, mes sincères salutations.

Pièces jointes

(H.M. Jackson) lt-colonel,
Directeur suppléant
des Archives des
services de guerre.

/LL

F.T. please.

DEPARTMENT OF VETERANS AFFAIRS

CANADA

IN YOUR REPLY REFER TO FILE NO.

H.Q. 405-W-1458
R. 4 (B)

Ottawa,

24th November, 1947.

Mr. Alfred Woods,
Fauvel,
Co. Bonaventure, Que.

Dear Mr. Woods:

I am forwarding herewith a photograph of the grave and marker over the burial place of your late son, E29132, Private Aimee Woods, the location of which is grave 6, row C, plot 4, Bergen-op-Zoom Canadian Military Cemetery, 4 miles North-East of Bergen-op-Zoom, Holland.

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

Yours faithfully,

Encl.

JJ
MB

A/Director,
War Service Records.

D. V. A. 1 500M-1946 REQ. 1314

Transit Office
Co F Bon P Q
Sept 14/46

Dept of Veterans
affairs

VETERANS' WELFARE DIVISION
RECEIVED
SEP 17 1946
QUEBEC

Dear Sir

My Son was killed in
action Some where in Holland
His number is 29132 Name Lumley
Woods, Could you tell me
how I can get his Wages Service
Gratuity and how much it is
he was my only Support. And
I would like to Remodle my
home. I Remain Yours Truly

Mrs Alfred Woods.

Transit Office
Co F Bon P Q.

Transl. Office
C. F. Bon T. Q.
July. 22/46

Tresories. Payeurs General-
ministere de la. Defense.

Dear Sir.

One the 4th of January I filled in forms for unemployment insurance and since then have not had any word about it. My only Support was Killed in action in Belgium. his name Emil E. Woods. No E 29132. And as I cannot work and have no way of making a living now could you tell me information as how I could get help for my Belgoud wife. Hoping to hear from you Soon and that I will be able to get Some help.

I remain your Truly

Alfred Woods.

Transl. Office
C. F. Bon T. Q.

File No. 405-W-145-8

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. E 29132 Name Woods, Aimee

Rank on Discharge Pte. Date of Discharge 25-10-44

Authority for Discharge or Retirement Deceased

Served in:

			Non-qualifying service
Canada	from 7-7-40	to 4-2-41	
	from	to	
United Kingdom	from 5-2-41	to 17-9-44	
	from	to	
Italy	from	to	
Northwest Europe	from 18-9-44	to 25-10-44	K/A.
----------	from	to	
----------	from	to	

Eligible for award of:

1939 - 45 Star OK

~~Italy Star~~

~~France-Germany~~ Star OK

Defence Medal Ok

War Medal 1939-45 Ok

Canadian Volunteer Service Medal OK

with clasp

M

NO RIBBON DESPATCH

Verified by Edna Laurie

Date SEP 26 1946

Carded SEP 28 1946

HA 165

H.Q. 405-W-1458
Min File 1034-78

October 16th, 1946

ESTATES BRANCH

Military Secretary,
Department of National Defence,
National Defence Building,
OTTAWA, Ont.

WOODS, Aime, F., Pte.(Deceased)
No. E-29132 C.A.

Reference enquiry below.

This Branch has completely administered the estate of this deceased who died in France intestate 25th October 1944.

The money portion of the estate, being the credit balance of pay and allowances, was only $5.92 and was distributed in accordance with the intestacy laws of the Province of Quebec, the deceased's domicile, in October 1945 to the father, mother, two brothers and one sister.

The personal effects consisting of the following:-

Photos	1 Chain
1 Wallett	2 Coins (Souvenir)
1 Lighter (No name)	1 Key
2 Pens (1 no name & 1 Streamline)	1 Ring
1 wrist Watch (Elgin)	1 Gold Cross
1 Rosary	3 Religious Medals
1 Pencil (Shaeffers)	1 Cap Badge

corresponded exactly with the inventory thereof received from the Army Estates Office, Overseas and were forwarded by this Branch to the father in a small parcel by registered mail on the 18th August, 1945, and we have on file an acknowledgment thereof signed by the father, Alfred Woods, dated 24th August 1945 The effects were those recovered by the Unit in the Field. There were no effects left by this soldier on proceeding to the Continent, at No. 1 C.K.S.D., Aldershot, Hants, England.

(L.M. Firth) Colonel
Director of Estates

LMF:PM

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY GL

Name WOODS Alma F. No. B.29132
Surname Christian Names

PTE C.A. O/S 25-10-44
Rank Unit Date of Death

AMOUNT

L.P.C. $ 5.92

Date 17-4-46

Other Credits

Total 5.92
Prev dist. 4.94
This dist. .98

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Brother	Alexander Woods Fauvel, P.O. Bonaventure Co., P. Que.	.98
		(As next of kin entitled)	

DO NOT REMOVE FROM FILE

P4. TO TREAS. 3-5-46 N.R.#265

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	.98

CLASSIFIED BY

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. Firth) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

30M—1-46 (8630)
H.Q. 1772-45-27

ESTATES BRANCH
APR 15 1946
H. O.
OTTAWA
NATIONAL DEFENCE

apl 12 - 46

Dear Sir

this is a answer to you letter
wich I have recive to day and
you are asking me for my nouber
will it E.29142 pte alexanderwood5
and my Brother no is E29132 he
is de report missing.
and for me I have be back in
canada in sep thr. 11- 1945

frona alfrd Woods
Jarvel Office Lon Bor
P Dr

C
4-1-6

Laurel Office
Jan 2 1945

Dear Sir,

CANADIAN LEGION BRANCH
JAN 5 1946
H. Q. OTTAWA
NATIONAL DEFENCE

i am writing you a few lines for. the life insurance of my. Poor Son that lost his life over seas 1944 this name was. Pte Woods aimee f. No. Re. E 29132. and i did not received anthing for his life insurance yet that is now 14 mounth out he. is dead and i should. have that money By. now. and i want it to at once that was my Boy that give his life for you and his life for me allso. so sir i want answered at once of that money that is due

to. me. from Mrs Mary Woods
[redacted]
Laurel Office

92.

ans Please
at once.

BRANCH
NOV 29 1945
H. Q.
OTTAWA
NATIONAL DEFENCE

Fauvel Office
P.Q.
Nov. 26. 1945.

Dear Sir

i am answering your letter which i resived to night and also the chaque. the sum of 99 cents from my Brother. aime. F. Woods. Sir i find it quite so. you think that my Poor Brothers life is only worth to me as 99 cent. were is my Brother Pay. Book and his Gratuity money. which they are more money Coming to me. we did not resived his Pay Book or all his money yet.

sir my Brother is suppose.
to get 25 Cents a day sence
he is over seas. he severed
43 mounth. and in Canada
he severed 7 mounth witch
makes his dutie 50 mounth.
Service. his Pay is suppose
to be. 1.00.75 over seas or any
in Comeplay. to tle. dere yet.
1.25 00. and telf me this
were is my. share i like to
no. how is that i only.
got 99. centes. answer at.
once Please. thank. you
for the Chaque. of 99¢
Expuse Papper. Please.
from mr Charley woods.
Fauvel office 02.

ESTATES BRANCH
NOV 12 1945
H. Q.
OTTAWA
NATIONAL DEFENCE

Fauvel Office
Nov. 8 1945.

Dear Sir

you wrote to my fathes asking him for my adress i am not aney mose in Campbellton N.B. i am staying down at my home in fauvel now what about my Brothes aime F Woods. let me no at once Please in English as i Cant Read mutch in frenck. and Please send me this letter Back to me that youse send to my father send it to me i will geve it to him. My adress is on the othes side sir ~~Yours~~ Yours

Yours Sincerely,

Charles Woods.

Laurel office

Co. Box. C 2.

DISTRIBUTION OF SERVICE ESTATES

AM Estates Form "P. 4"

ARMY

Name: WOODS, Aime F., No.: E-29132
Surname Christian Names

Pte. C.A. O/S 25-10-44
Rank Unit Date of Death

AMOUNT

L.P.C. $ 5.92

Date: 5 Sept 45

Other Credits.....

Total..... 5.92
Shares retained .98
This Dist. 4.94

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1/4	Father	Alfred Woods, Feuvel Post Office, Bonaventure Co., P.Q.	1.48
1/4	Mother	Mrs. Mary E. Woods, (as above)	1.48
1/6	Brother	Charles Woods, Campbellton, N.B.	.99 R
1/6	Sister	Annie Woods, Gaspe, Que.	.99 R
		(as next-of-kin entitled)	
		SHARES RETAINED	
		For service personnel overseas.	.98

P4. TO TREAS. 13-10-45 DW

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	4.94

CLASSIFIED BY

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

75M—2-45 (6771)
H.Q. 1772-80-2

Mré Alfred Woods,
Fauvel,
Bonaventure Cty., P.Q.

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

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

and the following number quoted:—

H.Q. 405-W-1458 F[D]126

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

January 12 1945

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

WOODS, Aimé, Private,

No. E.29132, Canadian Army

ESTATES BRANCH JAN 22 1945 H.Q. OTTAWA NATIONAL DEFENCE

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

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

/TD

for Director of Estates.

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.....		Alfred Woods	64	Farnel Co Bon P.Q.
4	Mother of the Deceased.....		Mary Elmina Carter	67	" "
5	Brothers of the Deceased	Full Blood	Alexander Woods	31	ouesno
			Charles woods	29	Compbellton N.B.
		Half Blood			
6	Sisters of the Deceased	Full Blood	Annie Woods	22	Gaspe.
		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 EA

PARTICULA

8	Full names of the deceased.
9	Date of his birth.
10	Place and date of his marriage.
11	Place and date of his parents' marriage.

PARTICULA

12	Place where deceased was born.
13	State, in order, the Province, State and/or County in resided before enlistment and the period of time in ea
14	Nature of employment before enlistment.
15	State whether he owned the premises in which he live so, where situated.
16	Name place where deceased stated he intended to permanent home.

PARTICUL

17	Did he leave a Will? If in your custody, please forw
18	If married, and domiciled in the Province of Quebec or in the U.S.A. or in a Country under the laws of whic community of property between spouses,—was there a contract dealing with property?
19	Did he have a Bank, Post Office or other deposit accou give name and address of bank, etc., and the amount o Do you wish it administered with the pay account?
20	Amount of War Savings Certificates held by deceased. where located.
21	Amount of Victory Loan Bonds held by deceased. whether registered or bearer and where located.
22	If deceased had life insurance, name companies an payable under each policy and the person named as b therein.
23	Describe other assets, if any, and estimated value th space on page 4 if necessary.

OTHER P

24	Did the deceased after enlistment incur any debts for *(a)* His own separate board and lodging while o *(b)* Service clothing and equipment. An itemized account for each such debt should be hereto, and if same is correct you should mar "approved" and sign same. If believed incor particulars.
25	Have you or any other relative paid the funeral expen part thereof? If so, attach itemized account amount paid, and by whom.
	(NOTE:—The government pays funeral expense and burial is made Overseas as well as where death zone, and if a relative has already paid those expense authorized in the Regulations. Any amount of suc by the Government nor is it chargeable against the s

ESTIONS

the relatives that the deceased ever

S STATEMENT

	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
64		Fauvel Co Bon P.Q.
67		" "
31		owner
29		Campbellton N.B.
22		Gaspe.

Address of their children

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Aimé Woods
9	Date of his birth.	Jan. 14. 1919
10	Place and date of his marriage.	—
11	Place and date of his parents' marriage.	Bonaventure Apr 22. 1911

PARTICULARS OF DOMICILE

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

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	None at home
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?	nil
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?	None known
20	Amount of War Savings Certificates held by deceased. Indicate where located.	not known
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	not known
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	None
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	None

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.	not to my knowledge
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.	No

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

(PLEASE TURN OVER)

DECLARATION

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

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

*.....father.....of the deceased.

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

.....Alfred Woods..... {Signature of Informant

.....Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief.....Alfred Woods

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

Dated at.....New Carlisle.....this.....19th.....day of.....January.....1945

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

.....D. Law..... Qualification.....secretary-treasurer

Address.....New Carlisle County Council of Bonaventure

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

Fauvel,P.Q.
Jany 30th,1945.

DEPARTMENT OF NATIONAL DEFENCE
Successions Devision,
Ottawa,
ONT.

ESTATES BRANCH FEB 1 1945 H. Q. OTTAWA NATIONAL DEFENCE

Dear Sirs:

Re Q.G.405-W-1458 FD126

In reply to your letter of January,25th,inst, the regimental number of my son overseas is as follows;-

E.29142 WOODS,ALEXANDRE Pte. Army Service Corps.

Yours truly,

Alfred Woods

Alfred Woods.

H.Q. 405-W-1,458 D.R.2(C)

23rd February, 1946.

Mr. Alfred Woods,
Fauvel Co.,
Bonaventure, Que.

Dear Sir:

Information has just been received from overseas that the remains of your son, E29132 Private Aimee Woods, have been carefully exhumed from the original place of interment and reverently reburied in grave 6, row C, plot 4, of Bergen-op-Zoom Canadian Military Cemetery four miles North-East of Bergen-op-Zoom, Holland. 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.

JJJ

BATTLE CASUALTY
CASUALTY SECTION EXTRACT FORM

This Space is for the **RED X** See Below

Message Received from 21/CAS/5214

Time Message Received.....

Date Message Received.....

Theatre **AEF**

E29132

Regimental No.	Rank	Name		Full Christian Names
(E29132)	PTE	WOODS	AIME	F

Unit LINCOLN WELLAND REGT

SERIAL 299

"A" ~~509~~ 510

CASUALTY PARTICULARS

KILLED 25 OCT ~~44~~

Hospital Admitted To.....Date.....

Hospital Transferred To.....Date.....

Hospital Transferred To.....Date.....

Hospital Discharged From.....Date.....

IMPORTANT—Always Give Full Address and Relationship of all Next of Kin—IN PLAIN CLEAR PRINTING

Next of Kin Alfred Woods Relationship Father

Samuel & Bonaventure
P. O. Can

Home Town Same

Cable No. 30264

Inland Tel. No. .....

NOTE: If the Next of Kin resides in the British Isles or U. S. A. MARK RED X in UPPER LEFT HAND SQUARE

IMPORTANT

1140
Verification Clerks Signature

4/20A CFA 48
40/P & S/1568 (6847)

405-20-1,458

RECORDS OFFICE OVERSEAS.

CANADIAN MILITARY HEADQUARTERS.

GRAVES REGISTRATION CARD.

NAME WOODS, Aime F.

RANK Pte.

UNIT Lincoln & Welland Regt.

PLACE & DATE OF BIRTH CAN. Co. Bonaventure, 14 Jan 1919

REGIMENTAL NO. E-29132

NEXT OF KIN & ADDRESS FATHER.
Mr Alfred WOODS, Fauvel, Co. Bonaventure P. Quebec. CANADA.

PARTICULARS OF HOSPITALISATION

DATE OF ADMISSION

DIAGNOSIS

NAME & LOCATION OF HOSPITAL

PARTICULARS OF DEATH

DATE OF DEATH 25 Oct. 44.

HRS

PLACE OF DEATH

CAUSE OF DEATH KILLED.

PARTICULARS OF BURIAL

DATE OF BURIAL 28 Oct 44

PLOT NO ROW 1 GRAVE 5

CEMETERY S.W. of Church Huijbergen SH 23 N.E. on road to Bergen Op Zoom.

DEATH CERT. NO

RELIGION Roman Catholic.

DATE 30 July 45

A R Dillon Lieut

for (L.S. APPLEFORD) Major
for COLONEL
O i/c Records,
CANADIAN MILITARY HEADQUARTERS

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

EMP

P. A.

5M-1-45 (6393) (FR.)
H.Q. 1064-81-3

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

4
ARMY

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Aimee (CHRISTIAN NAMES) WOODS (SURNAME)

REGISTER NO. D-6999
FILE NO. 405-W-1458
DATE 24-8-45
SERVICE NO. E-29132
FINAL RANK OR RATING Pte.
DATE OF DISCHARGE 25-10-44

PAYEE Mrs. Mary WOODS,
ADDRESS Fauvel P.O.,
Bonaventure, Co., P.Q.

DATE OF TERMINATION OF OVERSEAS SERVICE 25-10-44

		$	¢
A. TOTAL QUALIFYING SERVICE			
1530 NO. OF DAYS 1550/30 EQUAL TO 51 COMPLETE PERIODS AT $7.50		382.50	
B. QUALIFYING OVERSEAS SERVICE			
No. of Days 1338 LESS 20 INELIGIBLE DAYS, EQUAL TO 1318 DAYS @ 25c. PER DAY		329.50	
SEE PAR. 2 OVERLEAF FOR EXPLANATION			
		712.00	
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 1338/183	X$ 19.25	140.75	
D. WAR SERVICE GRATUITY		852.75	
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES	$		
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	$		
OTHER DEDUCTIONS	$		
F. TOTAL AMOUNT PAYABLE		852.75	

G. YOUR PORTION OF GRATUITY IS— 100%

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

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

ΔT

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

PREPARED BY	CHECKED BY
[redacted]	

TREASURY	
CHECKED BY	DATE
	30/8/45

Kirkland Capt
SERVICE REPRESENTATIVE

COMPUTATION OF WAR SERVICE GRATUITY

MEMBER'S NAME AIMEE WOODS Register No. D-6999

PAYEE'S NAME MRS MARY WOODS File No. 405-W-1458

ADDRESS FAUVEL P.O. Date 21-8-45

BONAVENTURE CO. — P.Q. Service No. E-29132

Final Rank Pte

DATE OF TERMINATION OF OVERSEAS SERVICE 25-10-44 Date of Discharge 25-10-44

	AMOUNT $	¢
A. TOTAL QUALIFYING SERVICE No. of days 1550 / 30 = 51 (20) Periods @ $7.50	382	50
B. QUALIFYING OVERSEAS SERVICE No. of days 1338 less 20 Ineligible days, equal 1318 Days @ 25¢ per day	329	50
C. SUPPLEMENT FOR OVERSEAS SERVICE Daily Rate of Pay $ 1.50 Subsistence Allowance $ 1.25 Additional Pay $ Dependents' Allowance 1/30 $ $ TOTAL $ 2.75 X 7 = $ 19.25 No. of Days 1338 / 183 X $ 19.25	712	00
D. WAR SERVICE GRATUITY Computed Monty	140 852	75 75
E. DEDUCTIONS Overpayment of (1) Pay & Allowance $ (2) D.A. & A.P. $ (3) Other deductions $ Entered By		
F. AMOUNT PAYABLE (This amount is payable in 1 monthly instalments of $ 852.75 each)	852	75
G. Monthly instalment not to exceed daily rate of Pay & Allowances per (C) $ ..... X 30 = $		

REMARKS

DEPARTMENT OF NATIONAL DEFENCE

ARMY

Your File Reference: Please quote No. E-29132
H.Q. 405-W-1458
Serial No. D-6999

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

July 4th, 1945.

PAYMASTER GENERAL
W.S.G. Branch
JUL 9 1945
RECEIVED

Re: E-29132 WOODS, A.

1. Reference your memorandum of May 4th, 1945.

2. The Dependents' Allowance Board has found that Mrs. Mary Woods 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

D Colewood
For R.O.G. Bennett - Chairman

M.F.A. 1326A
1,000M—1-45 (6496)
H.Q. 1772-39-2009

B44/IH

D.a. 19/5/45

Disp. D6979

☐ Navy
☒ Army
☐ Air Force
(Mark X opposite Force in which you last served.)

DEPARTMENT OF NATIONAL DEFENCE

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

405-W-1454

Application for War Service Gratuity

(*Canadian Armed Forces*)

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

1. Surname on termination of service Woods (Print)

2. Christian Names Aime (Print)

3. Service No. E 29132 4. Paid rank or rating at date of termination of Service Pte

5. Address, in full, to which payments of gratuity are to be forwarded Ste Rose, Gloucester County, N. B.

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

Service (Navy, Army or Air Force)	Service No.	Final Rank or Rating	Date of Commencement of Service	Date of Termination of Service
Army	E 29132	Pte	6 July 1940	25-Oct 1944 dis'd

7. Have you during the present War, while a member of the Canadian Forces, been attached, loaned or seconded to any of the Naval, Military, or Air Forces of His Majesty or of any power allied or associated with His Majesty? N.A. If so, state name of Force or Forces N.A.

8. Have you during the present War, while *not* a member of the Canadian Armed Forces, been appointed to or enlisted in any of the Naval, Military or Air Forces of His Majesty (other than the Canadian Armed Forces)? N.A. If so, state the Force or Forces, with dates of commencement and termination of service. N.A.

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

18 May 1945 (Date)

alphee woods (Signature of Applicant)

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

Aime Woods (Enlisted)
Ste Rose
Gloucester County
N. B.

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

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: IN THE FIELD (HOLLAND)

Official name of civil municipality or township:

Place an X over the word which applies to this municipality or this te[illegible]
City | Town | Village | Parish | Township

Street: No.: Hospital or Institution:

2. LENGTH OF STAY

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

3. NAME OF DECEASED

Surname: WOODS (*Block letters*)

Given names: Aimee

Do not write in this space

4. RESIDENCE

Street: No.:

Official name of civil municipality or township: Fauvel,

Municipal county: Co. Bonaventure Province: Quebec

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

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

10. BIRTHPLACE (Province or Country): Quebec

11. DATE OF BIRTH: January (Month) 14th (Day) 1919 (Year)

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

OCCUPATION

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

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

15. Date deceased last worked at this occupation:

16. Total years spent in this occupation:

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

19. Place of burial, cremation or removal: Holland

20. Date of burial: ....19....

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church:

(b) Civil municipality of:

(c) Municipal county:

(d) Date: ....19.... (Month) (Day) (Year)

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: October (Month) 25th (Day) 1944 (Year)

23. I HEREBY CERTIFY that I attended deceased from

....19.... to....19....

and last saw h....alive on....19....

24. CAUSE OF DEATH

I

Immediate cause Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc.

(a) Killed in action.

due to

Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).

(b)

due to

(c)

II

Other morbid conditions (if important) contributing to death but **not causally related to immediate cause.**

III If a communicable disease is mentioned on this certificate, give

(a) Date of appearance....19....

(b) Duration of disease....days

25. If a woman, was there a puerperal condition?

26. Was there a surgical operation? Date of....19....

State findings.... Was there an autopsy?

27. If death was due to external causes (violence) fill in also the following:—

Accident, suicide or homicide.... Date....19....
(State which)

Manner of injury....
(How sustained)

Nature of injury....

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

Signed....M.D.

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

OVERSEAS CASUALTY CANADIAN ARMY

JUL 13 1945

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

[signature] L.S.

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

29. Name of clergyman in charge of Register of Civil Status in which registration of this burial was made.

(Voir l'autre côté pour le français)

Director of Records, Dept. of National Def.

H.Q.405-W-1458 D.R. 2(D)

5th July, 1945.

Mr. Alfred Woods,
Fauvel,
Co. Bonaventure, Que.

Dear Sir:

Information has now been received from the overseas military authorities that your son E29132 Private Aimee Woods, was buried with religious rites in grave 5, row 1, of a temporary Cemetery located at Huijbergen, approximately three miles North-East of Ossendrecht, Holland.

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.

JJJ

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405-W-1458

FIELD SERVICE

Army Form B. 2090A.

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: Linc & Welld Regt — Squadron, Troop, Battery or Company:

Officer's Personal No. (if known) / Soldier's Army No.: E-29132 — Rank: Pte

Surname: Woods — Christian Names: A.F.

Died — Date: 25 Oct 44 — Place: Holland

Cause of Death*: K/A

Nature and Date of Report: A.F.W. 3014/152 31 Oct 44

By whom made: Cdn Sec CMO 2 Ech 21 A Gp

* 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: SW of Church cnr Huijbergen, Sheet 23 NE 665189 Row 1 Grave 5 — Date: 28 Oct 44

By whom reported: D.W. Kennedy, C.F. Linc & Welld Regt

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 6 Nov 44

Signature of Officer in charge of Section Adjutant-General's Office at the Base: Eric Robertson Capt for Officer i/c Cdn Sec CMO 2 Ech 21

Wt. 46939/917 500M. 3/40 M. & S., Ltd. 51-6239

33

Form No. 1 #2578

Register No. D6999 Nominal Roll No. D 145

H.Q. File No. 405-W-1458

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
E29132	PTE.	WOODS	AIMEE

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. 7 JUL 40	T.O.S.	T.O.S.
S.O.S. 25 OCT. 44 MD 01S	S.O.S. Nil MD	S.O.S. MD
Total Days 1572	Total Days	Total Days

TOTAL SERVICE 1572 DAYS

	Total Service	Less Non-qualifying Service	Net Service
WESTERN HEMISPHERE	213	1	212
OVERSEAS SERVICE	1359	21	1338
Totals	1572	22	1550
Add Non-qualifying Service			22
TOTAL SERVICE			1572

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 25 OCT. 44

2. Date S.O.S. Overseas

REMARKS: all Docs show above date. T.O.S. Sgt

KILLED IN ACTION 25 OCT. 44

Computer's Signature H.E. Davis, Lgt.

Checker's Signature H Kearsley Sgt

Date Computed 15 Mar. 45

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

27

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

DETAILS OF NON-QUALIFYING SERVICE

WESTERN HEMISPHERE

Forfeits for	from	to	Eff. Date	Days	Total
awl.			4 SEP. 40	1	1

TOTAL 1

OVERSEAS

T.O.S. 5 FEB. 41 T.O.S. ..... T.O.S. .....

S.O.S. 25 OCT. 44 S.O.S. ..... S.O.S. .....

awl.			2 Jul. 41	7	7
awl.			28 Aug. 42	1	1
awl.			27 Apl. 43	13	13

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

Register No. D6999

File No. H.Q.405-W-1458

WAR SERVICE GRANTS ACT 1944

Ottawa March 12th 1945

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

Service No. E29132

Name A. WOODS
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.

Names of persons in receipt of D.A. and amount of monthly award

Name	Amount
	$

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 Mary Woods	$ 20.00 ✓
mother	
Dec 1-11-44	

Names of persons 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.

MAR 20 1945 194___

C. Lindsay

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. $_____

_____194_____

26

for C.T.O.

E 29132.
Pte aimee F woods
Killed on Service
ouer seas

RECEIVED
FEB 5 1945
PAYMASTER GENERAL
W.S.G. Branch

RECEIVED
FEB 5 1945
PAYMASTER GENERAL
W.S.G. Branch

D.6999.

JAN 31 1945-

'Found office
to Box 21

Dear Sir.

Juste a few line to fine
hout abuut my son Pte
aimee F wood Gratuity hein
woue Killed on oct 25 1944
Service four Years and nine
months I ask You for a form
ii Be Juste Justes for me to
Get it he Gene his life for
all is frend and Caanty and
majestys the King I Gis to
Be reth for me for Reseued
et Plaise ame doon to me
. P cnrs cmary woods

'Found office
to Box 02

24

HD/GS

DR 2 (B)

le 19 février 1945.

Monsieur,

Pour faire suite à la lettre du Colonel Cameron datée du 12 février, j'ai le vif regret de confirmer le télégramme que j'ai adressé à votre père le 1er novembre et dans lequel je lui signalais que votre frère, le soldat Aimé Woods, matricule E-29132, avait été tué au combat le 25 octobre 1944.

Notre bureau ne reçoit pas de plus amples détails au sujet des circonstances qui ont entouré le décès d'un officier ou soldat porté tué au combat. Toutefois, à cet égard, je vous informe que, d'après une coutume du service, lorsqu'un membre de l'armée canadienne meurt outre-mer, une lettre contenant tous les détails connus est adressée directement au plus proche parent par le commandant du régiment en campagne, ou en son nom. Cette lettre a été envoyée à votre père le 15 janvier 1945.

D'après les renseignements que nous avons récemment reçus du quartier général militaire canadien outre-mer, le soldat Woods a été inhumé le 28 octobre 1944 parmi un groupe de sépultures temporaires à un endroit situé à environ trois quarts de mille au sud de Huijbergen, en Hollande, qui se trouve à environ un mille de la frontière belge et à quelque cinq milles au sud-est de Bergen op Zoom, en Hollande.

La sépulture a dû être marquée temporairement d'une croix de bois pour fins d'identification et, en temps opportun, la dépouille sera exhumée avec soin et transportée dans un cimetière militaire reconnu, lorsque la concentration des sépultures aura lieu dans cette région. La nouvelle sépulture sera ensuite photographiée et une reproduction sera transmise à votre père, le plus tôt possible. Toutefois, il faut se rappeler qu'il peut évidemment s'écouler une période de temps considérable avant que ceci puisse être effectué.

Je désire vous informer que, en s'engageant dans l'armée canadienne, votre frère a déclaré qu'il se nommait Aimé Woods, et non Aimé-F. Woods, et tous ses documents militaires portent ce même nom. Toutefois, si vous désirez que nous changions le nom de votre frère pour celui de Aimé-F. Woods, il vous sera nécessaire de transmettre au directeur des Archives, soit son certificat original de naissance ou une copie conforme de celui-ci. Dès la réception, nous prendrons les mesures nécessaires en vue d'inscrire son nom comme étant Aimé-F. Woods.

Je vous envoie sous ce pli une enveloppe tout adressée qui n'a pas besoin d'être affranchie et dont vous voudrez bien vous servir pour nous transmettre votre réponse.

PIECE JOINTE

23

M. Alfred Woods,
Bureau de poste Fauvel,
Comté de Bonaventure, P.Q.

(VERSO)

Votre demande de renseignements touchant les effets personnels et la succession militaire de votre frère a été soumise à la division compétente, qui vous écrira directement à ce sujet.

Je vous prie d'accepter mes sincères et vives condoléances pour la perte irréparable que vous avez subie.

Pour l'adjudant général,

Le directeur intérimaire des Archives

(R.T.E. Hicks-Lyne), colonel.

HQ 405-W-1458
DR 2 (B)

F.T.
FOR TRANSLATION PLEASE

PLEASE MAKE THREE CARBONS PLUS ORIGINAL

15th February, 1945.

Mr. Alfred Woods,
Fauvel Post Office,
Bonaventure Co., Quebec.

Dear Mr. Woods:

Further to Colonel Cameron's letter of the 12th instant, I deeply regret to confirm my telegram of the 1st November addressed to your father, in which he was advised that your brother, E.29132 Private Aimee Woods, was killed in action on the 25th day of October, 1944.

No further particulars are received in this Office concerning the circumstances surrounding the death of an officer or soldier reported killed in action. In this connection, however, I wish to advise you that it is a custom of the Service, when a member of the Canadian Army dies, Overseas, for a letter to be written, by or for the Officer Commanding the Regiment in the Field, direct to the next-of-kin giving all available particulars. Such a letter was despatched to your father on the 13th day of January, 1945.

According to information recently received from Canadian Military Headquarters, Overseas, the remains of Private Woods were buried on the 28th October, 1944, among a group of temporary graves located at a point approximately three-quarters of a mile South of Huijbergen, Holland, which is about one mile from the Belgian border and some five miles South-East of Bergen op Zoom, in Holland.

The grave will have been temporarily marked with a wooden cross for identification purposes and in due course the remains will be carefully exhumed and removed to a recognized military burial ground when the concentration of graves in the area takes place. After this has been done, the new grave will be photographed and a print of the picture will be forwarded to your father as soon as it is available. It should be borne in mind, however, that for obvious reasons, it may be some considerable time before this can be carried out.

I wish to inform you that when your brother enlisted in the Canadian Army, he declared his name as Aime Woods, not Aime F. Woods, and all his Military documents are recorded as such. However, if you wish to have your brother's name amended to read Aime F. Woods, it will be necessary for you to forward either his original birth certificate or a certified copy of same to the Director of Records. On receipt of same, the necessary action will be taken to record his name as Aime F. Woods.

A self-addressed envelope which requires no postage is enclosed herewith for the convenience of your reply.

Your enquiry regarding your brother's personal effects and military estate has been passed to the Branch concerned from whom you will hear direct in this regard.

Please accept my sincere and heart-felt sympathy for the irreparable loss you have suffered.

Yours truly,

(R.T.E. Hicks-Lyne) Colonel,
Acting Director of Records,
for Adjutant-General.

EMD
Encl.

FEB 16 1945
Rec'd
Ref'd 1945
BUREAU OF RECORDS
NATIONAL DEFENCE

Remains buried on Oct. 28th, 1944, among a group of temporary graves located at a point approximately three-quarters of a mile South of Huijbergen, Holland, which is about one mile from the Belgian border and some five miles South-East of Bergen op Zoom, in Holland

21

21st November, 1944.

Mr. Alfred Woods,
Fauvel,
Co. Bonaventure, Quebec.

Dear Mr. Woods:

It was with deep regret that I learned of the death of your son, E29132 Private Aimee Woods, who gave his life in the Service of his Country in the Western European Theatre of War on the 25th day of October, 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. E. WALFORD
Major-General
Adjutant-General

NOV 18 1944

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

/EMA

Trans x Zalcan
6-12-44