E37015
CHATTERTON
GORDON

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MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

MEMORIAL B K

DATE DESP

REGN. NO 398

(1) MEDALS

PERSON ENTITLED TO Mrs. Estella J. CHATTERTON (Mother)

ADDRESS: HOPETOWN, BONAVENTURE CO. ~~New Carlisle, Que.~~ P.Q.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. Stella Chatterton ENGLISH

1868

ADDRESS: New Carlisle, Quebec

(1)

(2)

(3)

DESP. MAR 7 1945

REGN No. 15774

6.1.45 1868 D.W.

AWARDS—CANADIAN ARMY (ACTIVE) M

500M—1-44 (3467)
H.Q. 1772-45-8

FILE NO. 405-C-23323

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
CHATTERTON,	Gordon	E.37015	Pte.	Irish

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
Italy Star	7456 18-1-50
Defence Medal	
War Medal	
CVSM & Clasp	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MILITIA BOOK M. 1.
40/P&S/279

CANADIAN MILITIA

SOLDIER'S SERVICE
AND
PAY BOOK

E 37015. CHATTERTON G.
R SEC

Militia Book M-1. (Part I)
40/P&S/279 (12/42)

SOLDIER'S SERVICE BOOK

(Soldier's Pay Book, Militia Book M. 1 (Part II) will be issued for active service.)

Every entry in this book (other than those on page 24 of this part of Militia Book M. 1, connected with the making of a Soldier's short form of Will) is to be made under the superintendence of the Officer Commanding the Squadron, battery or company to which the man belongs or is attached.

Alterations in any of the entries will be initialled by an officer.

INSTRUCTIONS TO SOLDIER

1. You will be held **personally responsible** for the custody of this book.

2. You will **always carry this book** on your person when on duty, and on active service.

3. You must produce this book whenever called upon to do so by a competent authority, viz.: Officer, Warrant Officer, N.C.O., Military Policeman or Civilian Police.

4. You must not alter or make any entry in this book (except as regards short form of Will on page 24; see instructions on pages 20 to 23), and disobedience of this order will be treated as a serious offence,

5. Should you consider that any entry is lacking or incorrect, or should you lose the book, you will report the matter to your immediate military superior.

6. You will be permitted to retain this book after discharge as a record of your services, but should you lose the book after discharge it cannot be replaced.

E 37015. CHATTERTON G.
2 SEC

(XIV) PARTICULARS OF DENTAL TREATMENT

Date	Re-quired	Com-plet-ed	SPECIFICATION Use authorized Abbreviations and Symbols	Signature of Dental Officer
14-Dec-43		✓		G. J. Smith Capt.
6 Jan 44		✓		G. H. McElhon Capt

(1) SOLDIER'S NAME AND DESCRIPTION ON ATTESTATION

Regtl. No. E 37015

Surname (in capitals) CHATTERTON

Christian Names (in full) GORDON

Date of Birth 24 SEPT 1918

Place of Birth HOPETOWN CO BONAVENTURE PQ CAN

Trade on Enlistment

Nationality of Father at birth CANADIAN

Nationality of Mother at birth CANADIAN

Religion CHURCH OF ENGLAND

Enlisted at NEW CARLISLE PQ CANADA

Date 29 JULY 40

Particulars of former service (if any) i.e. Regtl. No., Corps and period. NIL

Signature of Soldier G. Chatterton

Signature of Officer W. E. Hilliard Lieut

Place FIELD Date 22 JUNE 43

E 37015. CHATTERTON. G.

2 SEC

(II) NEXT OF KIN

Any change becoming known is to be duly noted with date of **NOW LIVING** such change and reported by O.C. Unit to the Officer i/c Records.

NOTE.—No entry in these pages has any legal effect as a Will (see pages 20 to 23)

Nearest degree of relationship		Names	Date	Latest known Address in full
1st	Wife			
	Children			
2nd	Father			
	Mother	MRS STELLA CHATTERTON		NEW CARLISLE P.Q. CANADA
3rd	*Brothers and Sisters	GEORGE CHATTERTON		HOPE TOWN C.O. BONAVENTURE P.Q. CANADA
		ASTA CHATTERTON		" " " " " "
		EILEEN CHATTERTON		" " " " " "
4th	Other Relations (stating) relationship)			

*State whether brothers are older or younger.

E 37015 CHATTERTON G.

2 SEC

(III) RANK and APPOINTMENT

Date	Rank and Appointment	Substantive, Temporary, Acting or Local (with or without pay)	Authority of Part II Orders	Signature of Officer
29 JULY 40	PRIVATE		19F 4 AUG 40	W.E. [illegible] Lieut

(IV) Certificate Applicable to all Arms, to be completed and signed by the C.O. Bn., etc., before a Soldier proceeds Overseas

TRAINED (passed Recruit's Course as laid down for his arm of the Service) ~~*except that he requires further training in:*~~ *

GENERAL TRAINING

Completed ~~weeks training~~

Qualified in addition as under :—

Date 14-10-44 S. C. Howard Lieut

* If no further training required, strike out words in italics and initial.

E 37016 CHATTERTON G.
2 SEC

(V). PARTICULARS OF TRAINING

Courses and Schools. Specialist Qualifications. Swimming, etc., show'g result	Date	Signature of Officer
CDN E.H.U. REFRESHER COURSE 14	27 JULY 41	W E Hilliard Lieut
TRADES TEST PIONEER "C" DOGS	19 DEC 41	〃
Completed 8 wks Basic & Adv. Trng #1 C.E.R.U.	27/7/44	F E Mills Lt.

(VI) SMALL ARMS RANGE COURSES

Year	Classification	If Table not completed, state parts fired	Signature of Officer
1941	3rd.	3 AT. PAR 18 APP II PTC # 185 I EHU	W E Hilliard Lieut
21/6/42	F	Rifle 15	[illegible] Lt
〃	2.	Bren 1-4	
17/6/42	Rifle	Zeroed	
19-10-44	Rifle I		S C Howard LT.
20-10-44	Bren II		S C Howard LT.
24-10-44	GUIDE 45 cal		
24-10-44	PIAT		
24-10-44	2" MOR	2 HIE. 2 SM.	S C Howard Lieut.
24-10-44	GRENADE	36, 69, 77 - 2 EACH	

R SEC

E 37055. CHATTERTON. G.

(VII) EDUCATIONAL QUALIFICATIONS

Certificate, Specialist Qualifications, etc.	Place	Date	Signature of Officer
2 YEARS	NEW CARLISLE	P2 CAN	W E Hilliard Lieut

(VIII) TRADE RECORD

(For men in receipt of tradesmen's rates of pay only)

Trade	Group	Class	Remarks, e.g., On enlistment; Re-classified; Re-mustered, etc.	Date	Signature of Officer

E 37015. CHATTERTON. G.

2 SEC

(IX) EMPLOYMENT WHILST SERVING

Period From	Period To	Nature of Employment	Remarks and Signature of O.C. Coy., etc.
29 July 40	5 FEB 41	PRIVATE	W. E. Hilliard Lieut
6-9-44	24-10-44	Gen Duty	S. O. Howard Lieut

To include (1) Regimental, (2) as Skilled Tradesmen, (3) as Specialist, e.g., Signaller or M. Gunner.

12

(X) MEDICAL CLASSIFICATION

Date	Category or Grade	Medical Examiner of Recruits, or other Medical Authority	Signature of Medical Officer
1 AUG 40	"B1"	MEd BOARD	
29 July 40	"B1"	EARS URINE REFLEXES NORMAL	
1 AUG 40	"B1"	X RAY OF CHEST NEG	Capt
21-7-43		WASSERMAN Negative	

YEAR OF BIRTH	P	U	L	H	E	M	S
18	1	1	1	1	1	2	1

10 May 44

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E 37015 CHATTERTON G.
2 SEC

(XIV) PROTECTIVE INOCULATIONS

Nature of Vaccine, "T.A.B." Cholera, Plague, etc.		Date	Signature of Medical Officer
TAB	1	5 AUG 40	E. M. Steele Capt
TAB	2	13 AUG 40	
TAB	3	23 AUG 40	
TETANUS	1	5 AUG 40	
TETANUS	2	26 SEPT 40	
TET TOX	3	13 JUNE 41	
TABT	4	26 JULY 41	
TABT	1 C.C.	23 OCT 42	
"	½ CC	20-8-43	E. M. Steele
TYPHUS	1-CC	28 FEB 44	Capt
	1-CC	6-3-44	
	1-CC	13-3-44	
TYPHUS	1 CC	27/5/44	
TABT.	½ cc	27-9-44	
Typhus.	1 cc	13-12-44	

(XV) VACCINATION

Date Vaccinated	Signature of Medical Officer
VACC 5 AUG 40	E. M. Steele Capt
28-6-43.	E. M. Steele

(XVI) MISCELLANEOUS ENTRIES

(For entries for which space is not otherwise provided)

NOTE.—No entry on this page has any legal effect as a WILL

Particulars	Date	Signature of Officer
GAS CHAMBER TEST "D.M"	2 JULY 41	W E Hilliard Lieut
PRIVILEGE LEAVE WW (P1)	1 MAR 41	
" " NOW (P2)	9 JAN 42	
" " WW (P3)	4 JUNE 42	
"M" TEST (REV) COMPLETED	25 JUNE 42	
"D" CARD COMPLETED	25 JUNE 42	
PRIVILEGE LEAVE WW (P3)	27 AUG 42	
" " 14 days WW (P4)	3 MAR 43	
" " 9 Days WW (P5)	9 JUNE 43	
Blood DONOR	21-7-43	E. M. Steele
A Group II	"	
FINGERPRINTED—CAIB		
AWARDED V.S.M. CLAP. D.O.5	15-1-44	W E Hilliard Lt
ISSUED M.B.M.I PART III	25-1-44	W E Hilliard Lt
IdenTidy CARd ISSUEd	6-3-44	W E Hilliard Lt
AWARDEd 1. SILVER CHEV.	29-7-44	W E Hilliard Lt
" 3. REd SIRVECE CHEV.	29-7-44	
[illegible] injection	26/6/44	[illegible]
Rifle Zeroed	28/7/44	E. Braun Lt
N.V. TEST GOOD	23/10/44	[illegible] Sgt
~~S.O.S. [illegible]~~	~~26.10.44~~	~~S. C. Howard Lieut~~

E 37015 CHATTERTON G.

2 SEC

No entry is made on this page without special instructions being issued

Particulars	Date	Signature of Officer
X-Ray.	29-10-44.	L.U. Iewais Lt

No entry is made on this page without special instructions being issued

Particulars	Date	Signature of Officer

FINGER PRINTED
PHOTOGRAPHED

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

~~H 6 Employment Plat~~ RCE Cdn Int Corps
Unit ~~7 Cdn Constr Coy~~ RCE

Regimental Number E-37015

1. Surname Chatterton
2. Christian Names Gordon
3. *Substantive Rank and Appointment
*Acting Temporary or Local Rank Pte
giving date
*To be entered in pencil to facilitate alteration.
4. Place of birth Co. Bonaventure, Hopetown, P.Q.
5. Date of birth as declared on attestation
(A) 24 Sept 1918
6. Date of enlistment 29 Jul 40
7. Place of enlistment New Carlisle, P.Q.
8. Residence at time of enlistment
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion Church of England
12. If married, state date
13. Trade on enlistment Farmer
14. Corps, trade and grade Gen Duty
15. (D) Qualifications
16. (E) Miscellaneous entries Reclassified

MFB 227 A - 18 May 44
11 May 44

YOB	P	U	L	H	E	M	S
18	1	1	1	1	1	2	1

(17) Regiment or Corps	Unit (Battn., etc)
C I C	Perth R.
	Irish Regt of Canada

(18) Medical

Category	Date	Authority
"B"1	1 Aug 40	enlistment
		D.M.O.5

(19) Next of kin (entries to be made in pencil) (mother)
Mrs Stella Chatterton
New Carlisle, Que, Can

(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	(f) Army rank as at (e)	(g) Army Form or other authority for entry to be shown
			TOS Cdn army O/S SOS from DDS	Feb 41 UK	5Feb41	Pte	30 d/5 Feb 41
		R.H.C.	Att f.a.p. from 6 Employ Plat	U.K.	1Mar41	Pte	16 d/22 Mar 41
		Blk.W.	Att Black Watch f.a.p.	U.K.	1Mar41	Pte	16 d/22 Mar 41
		Blk.W.	Cease att Blk W & att to 1CIHU	U.K.	28Mar41	Pte	66 d/26 Nov 41
		G.H.U.	Adm to 1 Gen Hosp	U.K.	9Apr41	Pte	d/16 Apr 41
		G.H.U.	Disch from 1 Gen Hosp	U.K.	6May41	Pte	d/ 6 May 41
		G.H.U.	T.O.S. 1 GHU from 6 Emp Platoon	U.K.	29Mar41	Pte	73 d/31 Mar 41
		G.H.U.	Adm to C.M.C.	U.K.	8Apr41	Pte	84 d/12 Apr
		G.H.U.	Transf to 1 Conval Depot	U.K.	9May41	Pte	108 d/12 May 41
		G.H.U.	S.O.S. to 1 RCE H.U.	u.k.	24May41	Spr	119 d/24 May 41
		E.H.U.	T.O.S. from 1 G.H.U.	U.K.	25May41	Spr	121 d/25 May 41
		E.H.U.	Disch from 1 Conval Depot	U.K.	3Jun41	Spr	130 d/ 4 Jun 41
		E.H.U.	S.O.S. to 2 Fd Coy RCE	"	31Jul41	"	179 d/31 Jul 41
		CTHU	Att to 1 C.T.H.U. f.a.p.	"	28Mar41	Pte	70 d/29 Mar 41
		CTHU	Cease att and att G.H.U.	"	29Mar41	Pte	71 d/30 Mar 41
		2FdCoy	T.O.S. from E.H.U.	"	1Aug41	Spr	42 d/8 Aug 41
		"	Qualified Pioneer "C"	"	25Nov41	"	63 D-19 Dec 41
		"	Granted T.P. " "	"	1Aug41	"	3 d/16 Jan42
		H.Q. 2 Div. RCE	Att f.a.p. to H.Q., 2Div RCE	"	17Mar42	"	13 d/27 Mar 42
		2 Fd Coy	Cease att f.a.p. to 2 Fd Coy RCE	"	31 Mar 42	"	16 d/10 Apr 42
		11 Fd Coy	Att f.a.p. exc. Rations from 11	"	11 Jun 42	"	27 d/26 Jun 42
		2 Fd Coy	Granted P/Leave to 16 Jun 42 [illegible]	"	4 Jun 42	"	26 d/16 Jun 42
CHANGE of address NofK		2 Fd Coy	Hapeltown, Quebec, Canada	"		"	29 d/7 Jun 42
		1 R.H.C.	Granted P/Leave to 12 Mar 41 (ww)	"	7 Mar 41	"	16 d/22 Mar 41
		2 Fd Coy	Granted P/Leave to 3 Sept 42	"	27 Aug 42	"	40 d/5 Sept 42
	S.O.S.	2 Fd Coy	S.O.S. to 7 Cdn Constr Coy RCE	"	6 Oct 42	"	45 d/7 Oct 42
	T.O.S.	7 CCC, RCE	T.O.S. from 2 Fd Coy	"	7 Oct 42	"	45 d/7 Oct 42
		7 CCC	Priv. Leave 14 days to 17 Mar 43	"	4 Mar 43	"	18 d/26 Feb 43
		7 CCC	Granted Increase Reg Rate of Pay	"	1 Jan 43	"	27 d/24 Mar 43
		7 CCC	Gr. P/Leave 9 days to 18 Jun 43	"	10 Jun 43	"	49 d/4 Jun 43
17 Jan 44	OC	7 CCC	Awarded Canadian volunteer service medal and clasp	UK	15 Jan 44	Spr	5d/15 Jan 44
		7 CCC	SOS to 1 CERU		31 May 44		46 31 May 44
		7 CAW	Att f.a.p. from 1 CERU		1 Jun 44		1 2 Jun 44
		7 CAW	C.T.B.A. " " "		6 Jun 44		2 6 Jun 44
		1 CERU	TOS from 7 C.C.C.	"	1 Jun 44	Spr.	134 7 Jun 44
		1 CERU	SO [illegible] to CIC & Posted to Cdn [illegible]	✓	6 Oct 44	[illegible]	238 6 Oct 44
		Can Fus	TOS from 1CERU	✓	7 Oct 44	Fus	48 9 Oct 44

SERVICE AND CASUALTY FORM

(PART II)

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

Regiment or Corps: 76 dn Constr Coy RCE　Regimental Number: E-37015

Substantive Rank: ______　Surname: CHATTERTON　Christian Names: Gordon

Acting Temporary or Local Rank: Pte
(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 to be shown
			SOS to 3 C.I.R.U.	UK	26 Oct 44	Pte	60-26 Oct 44
	TOS	3 CIRU	TOS from Cdn. Fus	✓	27 Oct 44	Pte	252-28 Oct 44
		"	SOS to Y Ret/5	"	6 Nov 44	"	259-6 Nov 44
Perth		X List	Embarked and SOS CA (UK)		3 Nov 44		
			TOS CA (CMF)		4 Nov 44		
			Disembarked ITALY and TOS				
			X4 List (3 Bn)	M	18 Nov 44	pte	X.120/44
	~~3 Bn x 4~~	~~Perth~~	~~Reclassified as Gen Duty and to continue to receipt of tradesman's rates of pay for a period of six months from 18 Nov 44 to 17 May 45~~	~~M~~	~~18 Nov 44~~	~~pte~~	~~X.126/44~~
				Cancelled by D.O. 131/44			
16 Dec 44	3 Bn x 4	Perth	Posted to X-4 List (4 Bn)	M	15 Dec 44	pte	X.131/44
	2 Fd Coy		Ceases Trades Pay Pioneer 'C'	~~M~~ UK	6 Oct 42	pte	47-d/15 Oct 42
	3 Bn x 4	Perth	Re-classified as Gen Duty	M	18 Nov 44	pte	X.131/44
16 Dec 44	4 Bn x 4	Perth	SOS to Perth R.	M	17 Dec 44	pte	X.132/44
15 Dec 44	5 CD/703	Perth	TOS from X-4 (4 Bn) Perth	M	18 Dec 44	pte	89-Dec 44
18 Dec 44	AG 153	Perth	SOS to Irish Regt	M	18 Dec 44	pte	90-Dec 44
20 " 44	CR	Irish Regt	TOS from Perth Regt	Field	19 Dec 44	✓	98/44
✓		✓	NOK Verified	✓		✓	98/44
	1 Ls	✓	SOS to X-3 Regt Irish Regt	✓	2 Jan 45	✓	1/45
	✓	IrRC	TOS X-3 List from IrRC	✓	3 Jan 45	✓	X2/45
405/8 Jan 45	AFW 3014	✓	SOS X-3 List DECEASED (Died of Wounds)	✓	3 Jan 45	✓	X5/45

Received.............................Checked **DUPLICATE** Card.....55 PRO Observations 29-7-40

O.F.H. Completed

ORIGINAL
DUPLICATE
TRIPLICATE

M.F.M. 2
A.F.B. 271
480 M—8-39 (1696)
H.Q. 1772-45-18

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

Unit R.C.E. (CASF) No.6. EMPLOYMENT PLATOON. Regimental Number E-37015.

WSG COMPLETED

01.

CANADIAN ACTIVE SERVICE FORCE

ATTESTATION PAPER

1. Surname CHATTERTON
2. Christian Names GORDON
3. Present address NEW CARLISLE CO. BONAVENTURE P.Q.
4. Date of birth 24thnSEPTEMBER 1918
5. Place of birth CANADA (Country) CO. BONAVENTURE P.Q. (County or Province) HOPETOWN (Town or Township)
6. Religion (state denomination) CHURCH OF ENGLAND
7. Trade or Calling FARMER
8. Married, Widower or Single SINGLE
9. Name of next of kin MRS. STELLA CHATTERTON
10. Relationship MAOTHER
11. Address of next of kin ~~NEW CARLISLE P.Q.~~ See Change
12. Have you served in any Naval, Military or Air Force? NIL
13. If previous war service, state arm, force and regimental particulars NIL

NIL

14. Do you now belong to or have you served in the Active Militia of Canada?

NIL

(Give unit and date of attestation)

01 SPR

C.A.A.

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, GORDON CHATTERTON 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 29-7-40 Gordon Chatterton

WITNESS Sgt McPlamondon (Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Gordon Chatterton (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 29th day of JULY 19 40

J. Chamard Major, {Signature of Magistrate, Justice or Attesting Officer.

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

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

Fingerprinted

(P)

Record of Service of CHATTERTON (Surname) GORDON (Christian Names) Regimental Number E-37015.

QUALIFICATIONS	
Military	NIL
Business or Professional	NIL
Trade or Civil	FARMER
Technical	NIL
Languages	ENGLISH

EDUCATIONAL QUALIFICATIONS	
High School or Collegiate	2 YEARS (years completed)
Graduation or Matriculation	NIL (specify)
*College	NEW CARLISLE 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
3607- 2-8-40.	D.D.5-	Joined on appointment Attested & TOS. as att. to D.D.5- Eff.	PTE.	1-8-40	No.6.EMP-LOYMENT PL.	Quebec.	Part 11 No.197.	2-8-40.
5-2-41	D.D. 5-	S.O.S. from D.D. 5- on proceeding to concentration Point. Eff.	"	5-2-41	D.D. 5-	Quebec	Part 11 No. 30	5-2-41 ~~XXXXX~~
—		708 O/S 16 FEB 41 Pt II ORDERS Att'd f-a-p from 6th Empl. Platoon	Pte	1 Mar 41	R.H.C.	U.K	#16	22 Mar 41
1163		Att'd BlkW (FAP)	Pte	1 Mar 41	BlkW	UK	16	22 Mar 41
5-		Ceases to be Att'd BlkW is att'd 1CIHU AP	Pte	28 Mar 41	BlkW	UK	66	26 Nov 41
—		T.O.S. #1 (GHU) from #6 Emp. Platoon	Pte.	29/3/41	#1 GHU	Bordon	Do 73	31/3/41
		Addmitted #1 Gen. Hosp	Pte.	9 Apr. 41	#1 G.H.U.	Bordon	Cas. List	16 Apr. 41
		Att'd 1 C I Hu FAP	Pte	28 Mar 41	1 C I Hu	Witley	70	29 Mar 41
		Ceases being Att'd on being att'd GHU	Pte	29 Mar 41	"	"	71	30 Mar 41
		Adm C M C	Pte	8 Apr 41	GHU	Bdn	84	12 Apr 41
		Dis. 1 Gen Hosp	Pte	6 May 41			Cas Rep	6 May 41
		Trans to Conv Depot	Pte	9 May 41	GHU	Bdn	108	12 May 41

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

12 May 41 | 108 | Bdn | Gtto | 9 May 41 | PTt | Trans to Conv Depot

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

CERTIFICATE OF MEDICAL EXAMINATION

Name in full Chatterton Gordon Date 29/7/40

Part 1. Information obtained from the recruit.

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

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

Gordon Chatterton
(Signature of Recruit)

Examiner's remarks re above

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

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

2. Height 5 feet 11 inches. 3. Weight 132 pounds.

4. Complexion Clear Eyes Blue 5. Development Fair (Good / Fair / Poor)

Hair Brown

6. Chest measurement—Girth on full expansion 35½ inches.

Range of expansion 3 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

Reflexes Urine Oreilles : Normales

X-RAY CHEST - NEGATIVE. 1 AOU 1940 [signature]

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 B1

Special remarks when category lower than A. Underweight

[signature] President [signature] Member [signature] Member

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
5-8-40	[signature]	9 May 44	YOB 18. P 1 U 1 L 1 H 1 E 1 M 2 S 1 899.931
12-8-40 AUG 23 1940	T A B / 3 [signature]		
5-8-40	Tetanus 1st Vacc. [signature]		
26-8-40	2nd tetanus toxoid [signature]		

Regtl. No. E-37015. Rank PTE. Surname CHATTERTON. Christian Name GORDON.

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)

Statement of the Service of No. E 37015 Rank Pte Sheet No. 2

Name Chatterton J.

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

REPORT Date	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.	Dated
S.O.S		S.O.S to #RCE - HU	Pte	24 May 41	GHU ~~Borden~~	Borden	119	24 May 41
	T.O.S.	TOS from G Hu	Pte	23 May 41	E Hu	Bdn	121	24 May 41
		Discharged 1 Cour: Depot	Pte	3 June 41	E Hu	Bdn	DO 130	4 June 41
		SOS on posting to 2nd Fld Coy R.C.E	Spr	31-7-41	E.H.U.	U.K.	179	31-7-41
		T.O.S. from Eng Holding Unit	Sapper	1 Aug 41	2nd Field	U.K.	42	8 Aug 41
		Qualified Pioneer Group C.	Spr	25 Nov 41	2 Fd. Coy	UK	63	19 Dec 41
		Granted Tradespay Pioneer C	Spr	1 Aug 41	2 Fd Coy	do	DO 3	16 Jan 42
		Attd fap to HQ 2 Div RCE	Spr	17 Mar 42	HQ 2 Div RCE	UK	13	27 Mar 42
		Ceases to be att'd fap to H.Q. 2 Div: RCE	Spr	31 Mar 42	2 Fld Coy	U.K.	16	10 Apr 42
		Att'd f.a.p. except rations 2 Fld Coy	Spr	1/17 June 42	11 Fd Coy	UK	#27	26 June 42
		Granted P/Leave wev	Spr	4/11 June 42	2 Fld Coy	U.K.	#26	16 June 42
Change of address next of Kin		Hopetown, Quebec, Canada	Spr		2 Fd. Coy	U.K.	#29	7 June 42
		Granted P/Leave (wev)	Spr	7/12 Mar 41	1 A.H.C	U.K.	#16	22 Mar 41
		Granted P/Leave	Spr	27 Aug 42 / 3 Sept 42	2 Fld Coy	UK	#40	8 Sept 42
S.O.S.		S.O.S. to 7 Can. Const. Coy	Spr	6 Oct 42	2 Fld Coy	UK	#45	7 Oct 42
	T.O.S	TOS from 2 Cdn Fld Coy	Spr	7 Oct 42	7 C.C. Coy	U.K	45	7 Oct 42
		Ceases Trades pay Pioneer "C"	Spr	6 Oct 42	2 Fld Coy	UK	47	15 Oct 42
✓		✓P leave	Spr	17/4 Mar 43	7 CCC	UK	18	26 Feb 43

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

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

Name ....

REPORT Date	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
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
SoS		SoS to 1 C.E.R.U.	Spr	31 May 44	7 C C Coy	U.K.	46	31 May 44
	ToS	ToS from 7 Const Coy R.C.E.	Spr	1 June 44	1 C E R U	U.K.	134	7 June 44
		Att to 7 Const Coy R.C.E.	Spr	1/6 June 44	1 C E R U	U.K.	134	7 June 44
C125	SOS	SOS to Cdn School of Arty	Gnr	11 Sept 44	2 CARU	UK	199	12 Sept 44
		TOS						
	SoS	SoS to Cdn Fus trans RCE X CIC	Spr	6 Oct 44	2 CARU	UK	238	6 Oct 44
	TOS	T.O.S. from 1 C.E.R.U.	Fus	7 Oct 44	Cdn Fus	UK	48	9 Oct 44
SOS		(a) SOS to 3 CIRU	Fus	26 Oct 44	Cdn Fus	UK	60	26 Oct 44
	TOS	(a) TOS from Cdn Fus	Pte	27 Oct 44	3 CIRU	UK	25 2	28 Oct 44
SOS		(a) SOS to Excevusé UKIT/5	Pte	6 Nov 44	3 CIRU	UK	259	6 Nov 44
		S.O.S. C.A. (U.K.) on embarkation U.K. 3 Nov 44						
	CMHQ	T.O.S. C.A. ( ) 4 Nov 44						
		Disembarked Italy 18 Nov 44	Pte	—	x L Perth Regt	AA1	120	21 Nov 44
		Re-class as Gen duty 18 Nov 44. So-wnt T/P						
CMHQ	Cancelled DO 31 18/12/44	~~Pioneer C for 6 mths to 17 May 45~~	~~Pte~~	~~18 Nov 44~~	~~x L Perth Regt~~	~~AA1~~	~~126~~	~~6 Dec 44~~
VER N/K	CH3	MRS STELLA CHATTERTON (MOTHER) NEW CARLISLE, P.Q. CANADA					Ech 6.	
28		Reclass'd as Gen Duty (Pioneer)	Pte	18 Nov 44	X L Perth R	AA1	131	18 Dec 44
		Died of Wounds	Pte	6 JAN 45	Irish R	C. L.	A 532	12

D 532
A 532

H.Q. 405-C-23323 D.R. 2(D)

15th June, 1945.

Mrs. Stella Chatterton,
New Carlisle, P.Q.

Dear Madam:

Information has now been received from the overseas military authorities that your son, E37015 Private Gordon Chatterton, was buried with religious rites in grave H-3, of a temporary Military Cemetery located at Ravenna, Italy.

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,

R

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

/EMA

19

405-C-23323

EEB

RECORDS OFFICE OVERSEAS.

CANADIAN MILITARY HEADQUARTERS.

GRAVES REGISTRATION CARD.

NAME CHATTERTON, Gordon

PLACE & DATE OF BIRTH Hopetown, P.Q. 24 Sep 1918

RANK Pte.

REGTL NO E-37015

UNIT Irish Regt. AAI.

NEXT OF KIN & ADDRESS Mother
Mrs. Stella CHATTERTON
New Carlisle, Quebec. Canada.

PARTICULARS OF HOSPITALISATION.

DATE OF ADMISSION

NAME & LOCATION OF HOSPITAL

DIAGNOSIS

PARTICULARS OF DEATH

DATE OF DEATH 6 Jan 45.

PLACE OF DEATH ITALY

HRS

CAUSE OF DEATH DIED OF WOUNDS.

PLEASE PLACE ON FILE AND P.A.

PARTICULARS OF BURIAL

DATE OF BURIAL 8 Jan 45.

CEMETERY Ravenna Military Cemetery

PLOT NO ROW NO GRAVE NO H-3.

DEATH CERTIFICATE NO

DATE OF REGN OF DEATH CERT

RELIGION C. of E.

DATE 20 Oct 45.

(M. BLUTEAU) Capt.,
for Officer i/c Records,
CANADIAN MILITARY HEADQUARTERS.

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

H.Q. 405-C-23323
(D.R. 2(C))

19th August, 1946.

Mrs. Estella Chatterton,
Hopetown,
Bonaventure County, Quebec.

Dear Madam:

Information has just been received from overseas that the remains of your son, E37015 Private Gordon Chatterton, have been carefully exhumed from the original place of interment and reverently reburied in grave 11, row E, plot 4, of 78th Division (Argenta Gap) Cemetery, Argenta, Italy. 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.

/EMA

5/7B CFA 187
40/P & S/2180 (7060)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME E-37015 Pte. Chatterton G. Dec'd

RECEIVED FROM G.H.Q. Cdn. Section 2nd. Ech AAI
M-16018 Pte. Murdoch W.J.
CHECKED BY B-73775 Cpl. Todd F.A. DATE 10 Feb 45

AND

1	Watch Chain		
1	Light Chain		
1	Red "I" Disc.		
1	Wrist Watch "Orris"		
1	Key		
	Misc. Papers		
1	Wallet		
	Snapshots		
1	Propelling Pencil		

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

QUADRUPLICATE—with effects.

F.A. Todd Cpl.
for OC 1 Cdn KSD

CANADIAN MIL
ESTATES
14 FEB 1945
BRANCH
HEADQUARTERS

5/7[illegible] CFA 187
[illegible]0/P & S/2180 (7060)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME E-37015 Pte Chatterton G. (Dec

RECEIVED FROM 2nd Echelon AAI

CHECKED BY C-5591 Pte Patterson L.K. DATE 26 Feb 45

AND M-16018 Pte Murdoch W.J.

1	Leather Manicure CaseW/Nail File		
1	Zipper Case		
1	Brooch Pin (Royal Engineers)		
1	Pin (RCE)Brooch		
1	Pin Badge (VictoryLeague Club)		
1	Pen Knife		
1	Address Book		
1	Picture Folder(Pompie)		
	Personal Letters		
	Snapshots		
2	7th V/L Receipts To O I/C Estates		

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

QUADRUPLICATE—with effects.

L K Patterson Pt
for OC 1 Cdn KSD

CANADIAN ... ESTATES ... 28 FEB 1945 BRANCH HEADQUARTERS

PA 405-C-28,323

KILLED IN ACTION(Continued)
****

CANADIAN POSTAL CORPS

49. DUMMER, HENRY, L/CPL., C97627, MRS. BARBARA DUMMER (MOTHER), 1913 ST. JOHN ST., REGINA, SASK.

==========

DIED OF WOUNDS
****

QUEBEC REGIMENT

50. CHATTERTON, GORDON, PTE., E37015, MRS. STELLA CHATTERTON (MOTHER), NEW CARLISLE, QUE.

REGIMENT DE QUEBEC

51. FORTIN, GEORGES DAVID, SGT., E9024, EDDY FORTIN (FATHER), STE. MARIE DE BEAUCE, QUE.

NEW BRUNSWICK REGIMENT

52. COUGHLAN, KENNETH JAMES, SGT., G50351, MRS. EDNA COUGHLAN (MOTHER), BARNETTVILLE, N.B.

53. MERRITT, NEALE WARREN, PTE., G64632, MRS. MARY MERRITT (MOTHER), R.R.#2, CROSS CREEK, N.B.

BRITISH COLUMBIA REGIMENT

54. BELISLE, JOSEPH OVILA MARCIEN, PTE., K48903, MRS. HELEN M. BELISLE (WIFE), 1687 W. BROADWAY, VANCOUVER, B.C.

ROYAL CANADIAN ARMY SERVICE CORPS

55. NORRIS, HERBERT WILLIAM, L/CPL., C122218, MRS. BETTIE I. NORRIS (WIFE), 1002 ALLARD AVE., VERDUN, QUE.

56. WILLARD, BRUCE, PTE., M41734, MRS. LESLIE E. WILLARD (WIFE), 13 STATION RD., HARLESDON, LONDON N.W. 10, ENGLAND.

MRS MARY WILLARD (MOTHER), THORILD, ALTA.

==========

DIED OF INJURIES
****

CORPS OF ROYAL CANADIAN ENGINEERS

57. MACDONALD, ANGUS LORNE, SPR., L19117, JOHN A. MACDONALD (FATHER), EARL GREY, SASK.

==========

PREVIOUSLY REPORTED MISSING NOW REPORTED DIED WHILE PRISONER OF WAR
****

QUEBEC REGIMENT

14

58. JOHNSTON, GERALD MACINTOSH, PTE., D81740, MRS. CLARA MAUD JOHNSTON (MOTHER), 205 E. 78TH ST., APT. 11E, NEW YORK, N.Y., U.S.A.

==========

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: IN THE FIELD (ITALY)

Official name of civil municipality or township:

Place an X over the word which applies to this municipality or this territory: City | Town | Village | Parish | Township

Street: No.: Hospital or Institution:

2. LENGTH OF STAY

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

3. NAME OF DECEASED

Surname: CHATTERTON (*Block letters*)

Given names: Gordon

Do not write in this space

4. RESIDENCE

Street: No.:

Official name of civil municipality or township: New Carlisle

Municipal county: 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: September (Month) 24th (Day) 1918 (Year)

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

OCCUPATION

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

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

15. Date deceased last worked at this occupation:

16. Total years spent in this occupation:

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

19. Place of burial, cremation or removal: Italy

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: 20

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

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: January (Month) 6th (Day) 19 (Year) 45

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) Died of wounds received 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 (State which) Date ....19....

Manner of injury (How sustained)

Nature of injury

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

OVERSEAS CASUALTY CANADIAN ARMY

JUN 27 1945

Signed ....**M.D.**

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

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

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 francais)

Director of Records, Dept. of National Defence

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: Gordon (CHRISTIAN NAMES) CHATTERTON (SURNAME)

REGISTER NO. D-12698
FILE NO. 405-C-23323
DATE 14-8-45
SERVICE NO. E-37015
FINAL RANK OR RATING Pte
DATE OF DISCHARGE 6-1-45

PAYEE: Mrs. Estella CHATTERTON
ADDRESS: Hopetown, Bonaventure Co., P.Q.

DATE OF TERMINATION OF OVERSEAS SERVICE 6-1-45

		$ ¢
A. TOTAL QUALIFYING SERVICE 1620 — NO. OF DAYS 1620/30 EQUAL TO 54 COMPLETE PERIODS AT $7.50		405.00
B. QUALIFYING OVERSEAS SERVICE — No. of Days 1421 LESS INELIGIBLE DAYS, EQUAL TO 1421 DAYS @ 25c. PER DAY (SEE PAR. 2 OVERLEAF FOR EXPLANATION)		355.25
		760.25
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 $ 25.00 $ .83; TOTAL $ 3.58 X7 = $ 25.06; NO. OF DAYS 1421/183 X$ 25.06		194.59
D. WAR SERVICE GRATUITY		954.84
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES $; DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $; OTHER DEDUCTIONS $		—
F. TOTAL AMOUNT PAYABLE		954.84

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
SS	[illegible]

TREASURY	
CHECKED BY	DATE
[illegible]	23-8-45

[illegible] Capt
SERVICE REPRESENTATIVE

COMPUTATION OF WAR SERVICE GRATUITY

MEMBER'S NAME GORDON CHATTERTON (Christian Names) (Surname) — Register No. D-12698

PAYEE'S NAME MRS ESTELLA CHATTERTON (Christian Names) (Surname) — File No. H05-C-23323

Date 10-7-45

ADDRESS HOPETOWN, BONAVENTURE CO., P.QUE. — Service No. E-37015

Final Rank PTE

DATE OF TERMINATION OF OVERSEAS SERVICE 6-1-45 — Date of Discharge 6-1-45

	AMOUNT $	c
A. TOTAL QUALIFYING SERVICE No. of days $\frac{1650}{30}$ = 54 Periods @ $7.50	405	00
B. QUALIFYING OVERSEAS SERVICE No. of days 1421 less ✓ Ineligible days, equal 1421 Days @ 25c per day	355	25
C. SUPPLEMENT FOR OVERSEAS SERVICE Daily Rate of Pay $ 1.50 Subsistence Allowance $ 1.25 Additional Pay $ — Dependents' Allowance 1/30 $ 25.00 $ .83 TOTAL $ 3.58 × 7 = $ 25.06 No. of Days $\frac{1421}{183}$ × $ 25.06	760	25
	194	59
D. WAR SERVICE GRATUITY Computed By Monty	954	84
E. DEDUCTIONS Overpayment of (1) Pay & Allowance $ (2) D.A. & A.P. $ Other Deductions $ Entered By JBC		
F. AMOUNT PAYABLE (This amount is payable in 1 monthly instalments of $ 954.84 each)	954	84

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

$..... × 30 = $.....

REMARKS

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

Director of Estates

Regimental No. E-37015 Rank Pte.

CHATTERTON Gordon
Surname Christian Names

Unit Irish Regiment of Canada (CA)

Date of Death 6 Jan 45 Place of Death OVERSEAS (Mediterranean)

Casualty Details Died of wounds

ESTATES BRANCH JAN 26 1945 D.O.D. OTTAWA NATIONAL DEFENCE

Next-of-kin Mrs. Stella Chatterton Relationship Mother

Address New Carlisle, Que.

M.F.M. 5 Excerpt herewith

WILL Will d/5 Oct. 44 herewith

Date 24 Jan 45

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

JEC/SLG

Mrs. Stella Chatterton,
New Carlisle,
Quebec.

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

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

and the following number quoted:—

H.Q. 405-C-23,323 FD 113

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

January 27 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

Chatterton, Gordon, Pte. E-37015

Canadian Army

ESTATES BRANCH MAY 5 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.

EDM/HO

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.....		Frederick Chatterton (Dead)	69	Hopetown. Que.
4	Mother of the Deceased.....		Mrs Estella Chatterton	47	Hopetown, Que. Bon County
5	Brothers of the Deceased	Full Blood	George Chatterton	22	Hopetown. Bon County. Que.
		Half Blood			
6	Sisters of the Deceased	Full Blood	Leona Chatterton Austa Chatterton Eileen Chatterton	31 13 11	Hopetown. Que Hopetown, Que. Hopetown, Que.
		Half Blood			
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each.		Names and ages of their children (if any)		Address of their children

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Gordon Chatterton
9	Date of his birth.	Sept 24th 1918.
10	Place and date of his marriage.	Not married
11	Place and date of his parents' marriage.	23rd Dec, 1912 Hopetown, Que

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Hopetown, Que
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Que, Bonaventure County (b) (c) Since Birth till enlistment (d)
14	Nature of employment before enlistment.	Farm help.
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.	Hopetown, Que.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	No
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?	Not married
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?	No
20	Amount of War Savings Certificates held by deceased. Indicate where located.	None
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	None
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.	No None
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

*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 Estella Chatterton — Signature of Informant

Hopetown, Que. — Address

CERTIFICATE

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

*See above.

Dated at Hopetown this day of April 1945

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

Rev. P. M. Hamilton Major — Qualification Clergyman & Chaplain

Address McKay Detachment No 5. Quebec P.Q.

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

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY GL

Name CHATTERTON (Surname) Gordon (Christian Names) No. E-37015

Pte (Rank) C.A. O/S (Unit) 6-1-45 (Date of Death)

AMOUNT

L.P.C. $ 120.05

Date Nov. 6-45

Other Credits

Total 120.05

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Estella J. Chatterton, Hopetown, Bon. Co. P.Q. (Sole beneficiary under will)	$120.05

P4. TO TREAS. 23-11-45, q.w.

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	$120.05

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

40M—8-45 (7876)
H.Q.1772-45-27

3/45A MFM 510
40/P&S/254 (8550)

CANADIAN ACTIVE SERVICE FORCE
OVERSEAS

District.....

Dispersal Area.....

LAST PAY CERTIFICATE
(All Ranks)

Regtl No. E37015 Rank and Name CHATTERTON. G. Spr.

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

(Transfer or Discharge) ..... to ..... on 6th Jan: 1945.

Reason Death Authority C.C.L."A" 532 d/12th.Jan.45.

The following is a statement of the account of the above-named from 1st Jan: to 31st Jan: 1945. the inclusive date of transfer or discharge.

Dr Particulars	Amount		Cr Particulars	Amount	
Balance Dr from last account			Balance Cr from last account	68	39
First Monthly Payment			Regimental Pay 31 days at $1.50	46	50
Casual Payments			Tradesmen's Pay ..... days at ..... $		
Payments on Transfer or Discharge			Additional Pay (Give Particulars) ..... days at ..... $		
Assigned Pay	23	00	Allowances (give particulars) ..... days at ..... $		
Regimental Charges					
Public Stoppages (give particulars):			Cash Eff SOCR 38682	28	16
To Balance Cr — Free	120	05			
To Balance Cr — Deferred			By Balance Dr		
Total	143	05	Total	143	05

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

Remarks

A.P. $23.00 (M) Stopped eff Feb.45.

A.P. $8.40 (7th V.L.) Cancelled eff Nov.44.

Compiled by B. McKercher.

Checked by J. M. Crayston

Date 15th Sept. 45. 19

Certified correct W. Blackstock.
for Chief Treasury Officer, Overseas

MW

To be made out in duplicate.

M.F.M. 5

400M—8-39 (1702)
H.Q. 1772-45-18

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

INSTRUCTIONS.

(*a*) This form is to be completed immediately an officer or soldier is appointed to, or enlisted in, the C.F.F.

(*b*) All questions, etc., must be completed.

(*c*) Both copies of the form are to be forwarded by the Officer Commanding the unit for each officer and soldier, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District or Camp Paymaster, to the Chief Paymaster, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster until the unit arrives Overseas, when it will be forwarded to the Chief Paymaster, Canadian Overseas Intermediate Base.

---

(1) Name of Officer or Soldier CHATTERTON GORDON.
(Surname first—Christian names in full—Block capitals)

(2) Regimental Number E-37015.

(3) Unit No6. EMPLOYMENT PLATOON. R.C.E.

(4) Are you married? N.A.

DISTRICT PAY OFFICE
RECEIVED
AUG 12 1940
M.D. No. 5 Quebec

(5) If married, state,

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

(*b*) Present postal address of wife N.A.

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

(7) Are you a widower? N.A.

(8) Have you any children? N.A.

If so, give number of boys and girls

Also their names and ages

(9) If Separation Allowance is claimed in respect of children—state whether you have been regularly supporting them N.A.

Give particulars of Guardian to whom Separation Allowance should be paid—if authorized—

Name

Postal Address N.A.

(SEE OTHER SIDE).

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife? N.A.

If so, state her full name and Postal Address

N.A.

(11) Is your father alive? N.A.

If so, state name and address

N.A.

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

N.A.

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

Also state reason he has no other means of support

(14) Is your mother alive? YES.

If so, state name and address STELLA AGNEZ. (CHATTERTON)

HOPETOWN. CO. BONAVENTURE. P.Q. CA.

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

(16) If sole support of widowed mother—state what amount per month you have given her prior to joining C.F.F. $40.00 a month.

Also state reason why she has no other means of support I was the only boy at home to support her. working on the farm.

(17) Are you insured? N.A.

If so, in what Company?

Have you made arrangements for payment of your Insurance Premium?

If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

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

Gordon L. Chatterton

(Signature of officer or man)

29-7-40 Date 29-7-40.

F. C. McGee Major

Officer Commanding

Date 29-7-40. DISTRICT DEPOT M.D.5--

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 CHATTERON GORDON FREDERICK (b) Reg'l. No. E-37015
2. (a) Arm of service Army (b) Unit 1 Btn R.C.E. (c) Rank Spr
3. (a) Date of birth 24 Sep 18 (b) Have you any dependents? Yes (c) Place of residence at time of enlistment Bonaventure, P.Q.
4. (a) Place of enlistment New Carlisle P.Q. (b) Date of enlistment 29 7 40

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 11 (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.) 3rd Grade
7. If you attended a university, give name of university and standing or degree secured
8. (a) Did you ever enter upon a trade apprenticeship? No (b) If so, for what occupation? (c) Did you finish it? (d) If you did not finish it, how long did you serve at it?
9. (a) What languages do you speak fluently? English (b) What languages do you read well? English

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

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

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

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

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

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

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

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

18. Name of employer Mrs Chatterton (Mother Address Hopetown P.Q.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Farmer
20. (a) Your specific occupation Farmer (b) Number of years' experience at this occupation with any employer 9 Yrs
21. (a) Did your employer promise definitely to give you employment on discharge? No (b) Did your employer refuse to promise you employment on discharge? No (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? Yes (b) Do you feel competent to operate a farm? Yes (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? 9 (c) In what provinces did you have experience? 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 Expects to run Mother farm

DATE 7 Apr 1943 SIGNATURE [illegible]
for Officer i/c Records C.M.H.Q.

TO BE COMPLETED IN DUPLICATE

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

WILL

3/18B MF M10 40/P & S/423 (5415)

(1) I, GORDON FREDRICK CHATTERTON (Names in Full) of the VILLAGE (City, Town, Village, Township)

Address in civil life.

of HOPETOWN, in the County/~~District~~ of BONAVENTURE

Province of QUEBEC, FARMER (Civil Occupation)

Regimental No. E 37015, Unit R.C.E., 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 STELLA JANE CHATTERTON OF HOPETOWN, QUEBEC, ALL MY ESTATE.

Original Received
N.D.H.Q. 25 OCT 1944
DR306

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~~

(4) I appoint STELLA JANE CHATTERTON (Name) of HOPETOWN QUE (Address)

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

IN WITNESS WHEREOF I have hereunto set my hand this 5 day of OCT 19 44

Signed and acknowledged by the Testator as and for his last will 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.

(Signature of soldier) G. F. Chatterton

First witness sign here.

(5) Signature A Keffer
Civil Address Killaloe Ont.
Civil Occupation Mining Engineer

Second witness sign here.

Signature Sydney Ramsay
Civil Address Campbellton NB
Civil Occupation Painter

(Witnesses are not to be beneficiaries.)

(OVER)

Duplicate

NOTE

If you have already made your Will, do not fill in this Will, but mark on the front where your Will can be located or with whom it is deposited.

(1) Example: I, John Charles Jones, of the City of Marlowe, in the County of Carleton, Province of Ontario, Mechanic, Regimental No. 1234, Royal Blankshire Regiment.

(2) If only **one** beneficiary for all your estate, complete as example: "my wife, Mary Jones of 26 Cherry Ave., Ottawa, Ont., all my estate," in which event, strike out clause (3) entirely.

If **more than one** beneficiary, set out in clause (2) what each is to receive, such as

"my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont., $.....00, and my household goods and effects,"

"my brother, Thomas Jones, 80 Yonge St., Toronto, Ont., $.....00,"

"my sister, Margaret Jones, 80 Yonge St., Toronto, Ont., $.....00,"

"my friend, John Smith, 60 LaSalle St., Winnipeg, Man., $.....00,"

and any personal gift, if desired. Then complete clause (3) as to the balance of your estate.

(3) If balance of estate is to one person, complete as example: "my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont." Another example: "my father, Jack Jones, and mother, Jessie Jones, 80 Yonge St., Toronto, Ont., equally," or as desired.

(4) Fill in name of Executor or Executrix, example: "John Doe, 24 Smith Street, Blankville, Ontario, Salesman," or, if Executrix, "Jane Doe" and address. A beneficiary under the Will may be appointed Executor or Executrix. It is preferable that the person appointed as Executor should not be on, or likely to be on, Active Service.

(5) The soldier will date the Will and sign same. Two witnesses must sign in the presence of the soldier, and each witness should fill in his or her full civil address and occupation. No one who is a beneficiary shall act as a witness. It is preferable, though not essential, that the witnesses be persons not on Active Service.
When completed, leave Will (both copies) with Commanding Officer for transmission to the Records Office for safe custody.

RECEIVED
D OF RECORDS
MAR 1 1946
WILL SEC.
N.D. H.Q.

OC-0/8.

STATES
BRANCH
APR 18 1945
H. Q.
OTTAWA
NATIONAL DEFENCE

CARDS PUNCHED

CONFIDENTIAL ✓ Soldiers Qualification Card

CODED

Regt'l. Number	Last Name	First Name	Middle Names
E-37015 (Spr)	CHATTERTON	GORDON.	FREDERICK.

CARDS PUNCHED .. 2

Unit ~~No. 2 CDN FIELD COY.~~ 1 Corps.

1 Corps R.C.E. 2nd DIVISION. 3--

2 Nationality 08 CANADIAN — By Birth ✓ — By Naturalization — Country of Birth CANADA.

3 Racial Origin 1 BRITISH. — 4 1 Language spoken in home: French .... Other .... English ✓

25 — 5 Age 23. — 6 Height 5'-11" — 7 Weight 169. — 8 Silhouette 1 2 3 4

24/9/1918

Eyes: 9 2 Colour of GREY. — 10 1 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 3 Med Category B1

Cause Underweight at time of medical exam, he thinks.

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

Health History ....

16 Education Level: Illiterate .... E 3 (11) S .... (Grade completed)

Conduct during school life ....

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

02 Written well ENGLISH.

24 Main occupation: Description FARMER. (OPERATED FARM FOR HIS MOTHER) — Estimate of skill ....

3016 Duration (from—to) 1930 1939. Weekly Wage ....

Employer's Name and Address MRS. CHATTERTON. (MOTHER) HOPETOWN, P.Q.

50 "M" Test	Score D	SM	
1	8		S. Tot. 17
2	2		SM
3	7		
4	4		S. Tot. 7
5	3		SM
6	3		S. Tot 11
7	1		SM
8	7		
Tot.	35	SM	Grade E-

For other "M" Test.

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 Heavy Truck .... 28 Light Truck .... 29 Auto .... 30 Motorcycle ....
31 Farm Tractor .... 32 Tracked Vehicle .... 33 Power Launch .... 34 Aeroplane ....
35 Accident Prone ....

Farming Experience: Wide ✓ .... Limited ....
District EASTERN. QUE. .... Type MIXED.

Job promised after discharge .... By whom? Name ....
Address ....
Other provision for post-discharge occupation Expects to operate Mother's farm.
.... Type of work desired Farming.
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 1 .... No. Sisters —
Position in family 1st. .... 38 No. Dependents 1 (Partial support)
Relationship of Dependents Mother.
Status of home in childhood —

39 Hobbies: Photography M .... S .... Radio .... Engines ....
Mechanics .... Other ....
40 Sports: (1) .... (2) .... (3) ....
Team Games and Position (1) Baseball.
3 (2) .... (3) ....
41 Ability to Entertain: Music: String .... Brass ....
Woodwind .... Percussion .... Piano .... Vocal ....
Theatrical .... Other ....

14 DEC 1942

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 29-7-40 Place Enlisted NEW. CARLISLE. P.Q.

Date From—to	Country	Corps	Unit and Sub-unit	Rank 44	Principal Duty	Performance
29-7-40	CAN.		No. 6. EMPL. PLATOON.	PTE.	GENERAL TRAINING.	
18-2-41	ENG.		"	"	ATTACHED. BLACK. WATCH.	
25-3-41	"	[illegible]	GEN. H. UNIT.			
4-6-41	"	RCE.	RC.E. H.U.	SPR.	GENERAL TRAINING.	
1-8-41	"	"	No. 2 FLD. COY.	"	GENERAL DUTIES. &	
7-10-42	Eng	"	7 CON. COY	Spr	PIONEER.	SAT. 387

A ✓

45 COURSES ATTENDED	PLACE	Date: From—to	Qualified as	Rating
REFRESHER. COURSE #14.	1 CDN. E.H.U.	4-6-41/27-7-41		

46 Crime: Number Courts Martial Convictions .... Hospitalization 1 — 28 days

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

0 Chronic Major Offender .... ~~Chronic~~ Minor Offender 1 — 5 DAYS. PAY. 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
RIFLE.	CLASS. 3.	1941	PAY BOOK.
PIONEER. 387	GP. "C"	19/12/41	D.O. 63 d.

55 Type of Service Desired (1) Pioneer .... (2) ....

Remarks re Outstanding or Limiting Factors DEPORTMENT. +

APP. ✓ PHYS. APP. ✓ DISP. +

MILIT. — MAP. R. — MECH. —

Satisfied with any job he is given.

Very steady, dependable type, fine attitude, desires to be usefull. Recommended for other Mental test because of lack of education. "Requires constant supervision" (C.O.)

A d G (any) Alloc

13 C.I.B. Remustered & C1C Sep/44. Completed conversion trg. with Can. Inf. SOS to 3 CIRU 26 Oct 44. (Wgm)

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

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

48 Suggested Possibilities for Employment (1) .... (2) ....

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

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

Interviewed by K. D. Faris, Lieut. .... Date 25/6/42.

Reviewed by .... Date ....