VINCENT, Paul Emile

Les Fus. de Sherbrooke.

MFM 82A
192M-8-40 (6653)
H.Q. 1772-39-1774

Cat. "A"

LOI DE LA MILICE

Loi de Mobilisation de Ressources Nationales, 1940

ENROLEMENT

MILICE ACTIVE NON PERMANENTE DU CANADA

NO. MATRICULE D450089

471

Pris à l'effectif de N. P. A. M. T.C. 43
(Unité de la Milice)

1. Nom (Caractère d'imprimerie) VINCENT.
2. Prénoms (au long) Paul Emile.
3. Adresse actuelle 5 Clemenceau Sherbrooke. Que.
4. Lieu de naissance Sherbrooke. Date de naissance 10 Avril 1918
5. Religion Catholique. 6. Profession Comptable.
7. Plus proche parent Mde Vincent Henri Mere.
(Nom et adresse)
5 Clemenceau Sherbrooke. Que.
8. Signalement: Taille 5/7 Poids 142
Yeux Bruns Cheveux Chatains.
9. Préférence, le cas échéant, pour le service de la Marine, de l'Armée, ou de l'Aviation (Donnez des détails, aptitudes, etc.)

Nil.

Daté ce 22 jour de Novembre 1940

Centre d'instruction No. 43

Paul E Vincent
(Signature de l'homme)

H. McGall Lt
(Signature et grade de l'officier effectuant l'enrôlement).

N.P.A.M. CENTRE TRAINING
Sceau No. 43
COURSE 8
ENDIN
DEC 21 1940

Sceau du certificat d'instruction

H

Signature de l'officier apposant le sceau

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

WSG COMPLETED

ORIGINAL
DUPLICATA
TRIPLICATA

FINGER — PRINTED

OCCUPATIONAL HISTORY FORM COMPLETED

M.F.M. 2 Fr.
A.F.B. 371
50M—8-41 (1530)
H.Q. 1772-39-1645

Doit être rempli en triplicata, désignant chaque exemplaire en biffant les deux termes inutiles

Unité ~~S.D.E.C.~~ ~~LES FUSILIERS DE SHERBROOKE R.A.~~ N° Matricule ~~D-150013~~

ARMÉE CANADIENNE

FORMATIONS ET UNITÉS ACTIVES
FORMULE D'ENRÔLEMENT

1. Nom VINCENT
2. Prénoms PAUL EMILE
3. Adresse actuelle 5 rue Clemenceau, Sherbrooke, Que, Canada
4. Date de naissance 10 avril 1916
5. Lieu de naissance Canada (Pays) Quebec (Comté ou district) Sherbrooke (Ville ou canton)
6. Religion (indiquez la confession) Catholique romain
7. Métier ou profession Comptable
8. Marié, veuf ou célibataire Célibataire
9. Nom du plus proche parent Madame Eugénie Vincent
10. Degré de parenté Mère
11. Adresse du plus proche parent 5 rue Clémenceau, Sherbrooke, Que. Canada
12. Faites-vous partie d'une unité ou formation de réserve de l'armée canadienne ou y avez vous déjà servi? Regt Fus. de Sherbrooke, depuis janvier 1942 D-450089 C.A.B.T.C. No 43, Sherbrooke
    (Si oui, spécifiez l'unité et les dates de service)
13. Avez-vous servi dans (a) une formation ou unité active de l'armée canadienne? Non (Oui ou non)
    (Si oui, spécifiez le numéro matricule et l'unité)
    (*b*) Quelque autre armée de mer, de terre ou de l'air? Non (Oui ou non)
    (Si oui, spécifiez l'unité et la durée du service)
14. Avez-vous servi pendant la Grande Guerre de 1914-1918? Non
    (Si oui, spécifiez le numéro matricule, l'unité et les dates de service)

DÉCLARATION FAITE PAR LA RECRUE LORS DE L'ENRÔLEMENT

PAUL EMILE Vincent

Je, soussigné, ..., déclare solennellement que les renseignements ci-dessus mentionnés sont vrais et je m'engage, par les présentes, à servir dans toute formation ou unité active de l'armée canadienne, tant qu'il existera ou que l'on aura à craindre une guerre, une invasion, une émeute ou une insurrection, aussi bien que pour la période de démobilisation après que ladite crise aura cessé, et, en tout cas, pour une période d'au moins un an, si Sa Majesté requiert mes services.

Date 16 April 1942. Paul E. Vincent
(Signature de la recrue)

SERMENT PRÊTÉ PAR LA RECRUE LORS DE L'ENRÔLEMENT

paul emile vincent

Je, soussigné, ..., promets sincèrement et jure (ou déclare solennellement) que je serai fidèle et porterai sincère allégeance à Sa Majesté.

Paul E. Vincent
(Signature de la recrue)

CERTIFICAT DU MAGISTRAT, DU JUGE DE PAIX OU DE L'OFFICIER CERTIFICATEUR

J'ai averti l'homme susnommé que s'il répondait faussement à l'une quelconque des questions précédentes, il s'exposerait aux rigueurs de la loi.

Les questions et les réponses ci-dessus lui furent ensuite lues en ma présence.

Je me suis assuré qu'il comprenait chaque question et que sa réponse à chacune d'elles a été dûment inscrite telle qu'il l'a donnée, et il a fait et signé la déclaration ci-dessus et a prêté le serment devant moi,

à Montreal South ce 16th. jour de April 1942. 19.....

.....
(Signature du magistrat, du juge de paix ou de l'officier certificateur)

.....
(Titre, grade et unité ou emploi)

NO. 4 DISTRICT DEPOT A.F.

N.B.—On désire signaler que quiconque répond faussement à l'une quelconque des questions précitées est passible d'un emprisonnement de six mois.

État de service de VINCENT (Nom) PAUL EMILE (Prénoms) N° matricule D-150013

APTITUDES

Militaires NIL

Professionnelles ou commerciales NIL

Civiles ou de métier ACCOUNTANT

Techniques NIL

Langues FRENCH & ENGLISH

DEGRÉ D'INSTRUCTION

École supérieure ou Académie 4 years (années achevées) — Graduation ou Immatriculation: Grad. (Spécifier)

*Collège NIL

*Université NIL

8 years Public (Sherbrooke P.Q.)

(*Mentionnez le nom de l'institution, les années ou cours achevés et les diplômes obtenus)

Toutes les recrues enrôlées le seront comme simples soldats, les nominations et les promotions à un grade supérieur devant être indiquées dans l'espace réservé ci-dessous à cette fin.

Rapport		État des promotions, abaissements de grade, mutations, maladies ou blessures, rapports, etc., à compter de la date de son enrôlement dans l'armée active	Grade indiqué	Prenant date le	Unité	Endroit	Autorisation	
Date	Reçu de						N°, Partie II, Ordres du jour. Liste des morts et blessés, etc.	Daté le
		Affecté lors de son enrôlement						
16-4-42	DRO	NO.4 DISTRICT DEPOT C.A.	PTE	16-4-42	4DD.	MTL.STH.	4DD.PT11.No.90	16-4-42
APR 17 1942		PROCEEDED ON COMMAND AND ATTACHED FOR ALL PURPOSES TO: C.A.(B) T.C.44 ST. JEROME, QUE.		APR 17 1942	4 DD	MTL. SOUTH	D.O. NO.91	17 APR 1942
22-4-42	T.C.44	ATTACHED FOR ALL PURPOSES	"	18-4-42	T.C.44	STJEROME	PT II No. 19	22-4-42
19-5-42	"	PROMOTED A/SGT AND GRANTED STATUS "CADET"	A/SGT	15-5-42	"	"	T II No. 26	19-5-42
8-6-42	"	HAVING BEEN GRANTED STATUS "CADET" IS ENTITLED TO RECEIVE PAY OF $3.00 PER DAY UNDER ART. 144-B F.R. & I.	CDT	15-5-42	"	"	PT II No. 33-A	8-6-42
11-6-42	2	S.OS. ON TRANS TO OTC BROCKVILLE ONT. Posted to OTC Brockville,Ont.for qaalific ations and attached for all purposes.	"	11-6-42	"	"	PT II No.35	11-6-42
			Cadet	12-6-42	O.T.C.	Brockville	Pt.II D.O.#143	18 June 42.

Pour les inscriptions supplémentaires, se servir de M.F.M. 1 et 2 (a) (Fr.)

CERTIFICAT DE L'EXAMEN MÉDICAL

Nom en entier VINCENT PAUL ¾EMILE Lieu SHERBROOKE

Lieu Sherbrooke P.Q. Date 20-3-42

PARTIE 1. Renseignements obtenus de la recrue.

1. Âge 23 2. Avez-vous déjà souffert de l'une quelconque des maladies suivantes?

a. Rhumatisme NON
b. Tuberculose ou pleurésie NON
c. Bronchite ou asthme NON
d. Affection cardiaque NON
e. Maladie du rein ou de la vessie NON
f. Affection stomacale ou intestinale NON
g. Hernie NON
h. Varices NON
i. Mal aux pieds NON
j. Affection nasale NON
k. Maladie des oreilles NON
l. Maladie des yeux NON
m. Convulsions NON
n. Maladie nerveuse ou mentale NON
o. Syphilis NON
p. Gonorrhée NON
q. Avez--vous déjà porté des lunettes? NON
r. Touchez-vous actuellement ou avez-vous touché antérieurement une pension ou autre indemnité d'invalidité?—Si oui, donnez des détails NON

Paul E. Vincent
(Signature de la recrue)

PARTIE 2. Renseignements obtenus par l'examen médical. LA RECRUE DOIT ÊTRE DÉSHABILLÉE.

URINE: N 20/3/42

1. Marques particulières ou cicatrices (si celles-ci sont opératoires, obtenir les détails) X Ray - Neg - 28662

2. Taille 5 pieds 6 pouces. 3. Poids 144 livres

4. Teint Blond Yeux Bruns Cheveux Chatain

5. Développement { Bon / Passable / Médiocre }

6. Tour de poitrine—Circonférence, pleine expansion 38 pouces Degré d'expansion 4 pouces

7. Vue, droite 20/20 gauche 20/20 8. Ouie, droite C.V.20 gauche C.V.20

Avec lunettes, droite gauche

9. État de la bouche et des dents Bon Upper plate

10. Les anomalies (congénitales et pathologiques) constatées lors de l'examen sont les suivantes:

Ears and throat neg.
Chest: Ne .
G.N. System Norma.

PARTIE 3. Nous les examinateurs, ne trouvons aucune trace des maladies énumérées dans la question 2 de la partie 1, sauf ce qui est mentionné dans les observations. Nous avons examiné la recrue conformément aux instructions de la brochure "Aptitudes physiques et instructions visant l'examen médical des recrues", et elle est jugée apte pour la catégorie A

Observations spéciales lorsque la catégorie est inférieure à A

G.S. Rambourain Capt (Président) L.A. Trudeau Capt (Membre) G.B. Loomis M.D. (Membre)

G.S. Rambourain (Capt) L.A. Trudeau (Capt) G.B. Loomis M.D.

VACCINATIONS, INOCULATIONS, COMMISSIONS, RECLASSIFICATION DE LA CATÉGORIE MÉDICALE

Date	Détails succincts et signature	Date	Détails succincts et signature
APR 16 '42	T.A.B.T. L. d. Rutenberg Capt.	26-5-43	Recheck Cat A Abstract Major
18 SEP '42	1/3 2nd L. d. Rheaume Lieut		
7-12-42	3rd W. Byers Capt		
16 April 43	VACC L. d. R.		

Pour les inscriptions supplémentaires, se servir de M.F.M. 1 et 2 (a) (Fr.)

N° matricule ~~D-150313~~ Grade ~~Lieut~~ PTE Nom VINCENT Prénoms PAUL EMILE

Garnison	Date d'arrivée à la garnison	Date de Admission à l'hôpital Jour	Mois	Année	Date de Sortie de l'hôpital Jour	Mois	Année	Maladie	Nombre de jours à l'hôpital	Détails sur la nature et l'origine de la maladie; dire si elle était bénigne ou grave, si elle est entièrement guérie, et si un traitement spécial a été adopté. Cans le cas des maladies vénériennes, mentionner la nature de la maladie primaire et dire si on a prescrit le mercure. Si la maladie est accidentelle, spécifier si elle fut contractée en service et si un conseil d'enquête a été tenu. Détails et dates au sujet des fausses dents et des appareils chirurgicaux fournis.	Signature du médecin

Statement of the Service of No. D-150013 Rank 2/Lt Sheet No. 2 1

Name VINCENT Paul Emile

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

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
5606-1-1		Having successfully completed his course and having been recommended for promotion and appointment to the rank of 2/Lt. Inf (R) in the Cdn. Army (AF) is hereby, pending promulgation of such appointment in C.A.R.O. granted the provisional rank of 2/Lt. with effect from 5 Sept. 42 Ceases to be attached to the Officers Training Centre, Brockville, Ont. for all purposes including pay and is struck off strength his unit on posting to A 12 (A) Inf T.C. Farnham P.Q.	2/Lt.	5-9-42	OTT.C.	Brockville	Pt. II D.O. # 209	5 Sept. 42
			2/Lt.	11-9-42	O.T.C.	Brockville	Pt. II D.O # 214	11 Sept. 42
16-9-42	A-12	T.O.S. on temp att from O.T.C. Brockville.	"	12-9-42	A-12	Farnham	A-191	12-9-42
		Qual as lieut . Inf Rifle. pending conf.	Lieut.	9-10-42	A-12	Farnham	A-215	12-10-42
		S.O.S. on transfer to).T.C. Brockville Ont.	"	9-10-42	"	"	A-214	10-10-42
		Having been posted for Duty to Officers Training Centre, Brockville, Ont. is attached for all purposes including pay from A-12 Inf. (A) T.C. Eff: 10 Oct. 42.	Lieut.	10-10-42	O.T.C.	Brockville	Pt.II D.O.#243	15 Oct 42
		~~Ceases to be attached to Officers Training Centre, Brockville, Ont. on attachment to Officers Training Wing, A-17 C.M.G.T.C. Three Rivers, P.Q. for all purposes including Pay. Eff: 10 Nov. 42.~~	~~Lieut.~~	~~10-11-42~~	~~O.T.C.~~	~~Brockville~~	~~Pt.II D.O.#265~~	~~10 Nov. 42~~
		Has been tested and qualified as a Third Class Driver of Wheel Vehicles. Effective: 4 Dec.42.	Lieut.	4-12-42	O.T.C.	Brockville	PT.II D.O.!295	15 Dec.42
		~~Ceases to be attached to O.T.C. for all purposes on attachment to A-17 C.M.G.T.C. THREE RIVERS, P.Q.~~	Lieut.					

Statement of the Service of No. ..... Rank Lieut ..... Sheet No. 2

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

Name VINCENT, Paul, Emile

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
		Proceeded on Weapon Training Course to A-25 C.S.A.T.C. Long Branch, Ont., and attached for all purposes EXCEPT PAY.	Lieut.	8-4-43	O.T.C.	Brockville	Pt.II D.O.#85	9-4-43
		Returned from on Weapon Training Course to S-3 C.S.A.S. Long Branch, Ont. and ceases to be attached there f.a.p. EXCEPT PAY.	Lieut.	7-5-43	O.T.C.	Brockville	PT.II D.O.#110	8 May 43
		Ceases to be attached to OTC for all purposes on return to A-12 Inf. (A) T.C. FARNHAM, P.Q.	Lieut.	19-5-43	O.T.C.	Brockville	Pt.II D.O.#119	19-5-43
		Ceases to be att for all purp O.T.C. Brockville posted to School of Instr.	"	20-5-43	A-12	Farnham	A-118	22-5-43
		Granted special leave R.O. 699(4) from 29-5-43 to 30-5-43 incl ration allow 50¢ per diem Transp Warrant A-298506	"	29-5-43	A-12	Farnham	A-128	3-6-43
		SOS on proceeding to Serial 294E	"	9-6-43	"	"	A-133 A	9-6-43
		S.O.S. Cdn. Army Canada on embark	"	10 Jun 43	6 C IRU	U.K.	120	21 Jun 43
		T.O.S. " " Overseas	"	11 " "	"	"	"	"
		Disembarked in U.K.	"	19 Jun 43	"	"	"	"
		Reported for duty to 6 C IRU	"	19 Jun 43	"	"	120	21 Jun 43
		Completed Qual Qz Offr's Refresher cse	Lieut	3 Sep 43	6 C IRU	UK	184	4 Sep 43
		Att fap to 8 Fd Sgn RCE	Lieut	15 Sep 43	6 C IRU	UK	195	16 Sep 43

M.F.M. 1 & 2A
40/P & S/119 (12/42)

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

Name Vincent, Paul Emile

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
		Cases att fap to 8 Fd Sqn RCE	Lieut	9 Oct 43	6 CIRU	UK	216	11 Oct 43
SoS		SOS to 3 CDS Bn.	Lieut	12 Oct 43	Spec Inc 6 CIRU	UK	219	14 Oct 43
	ToS	ToS from 6 CIRU	Lieut	13 Oct 43	Spec Inc 3 CDSB	UK	32	18 Oct 43
SOS		SoS to 6 CIRU	Lieut	8 Dec 43	Sp Inc 3 CDSB	UK	3	21 Jan 44
M40	TOS	TOS from CH of O Spec Inc	Lieut	9 Dec 43	SI 6 CIRU	UK	267	8 Dec 43
C80 SOS		SOS to R de M Spec Inc	Lieut	10 Jan 44	SI 6 CIRU	UK	8	10 Jan 44
M40	TOS	TOS from 6 CIRU	Lieut	11 Jan 44	R de M (SI)	UK	2	15 Jan 44
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
SoS		SoS to 6 CIRU	Lieut	7 Mar 44	R de M (SI)	UK	15	17 Mar 44
	TOS	TOS from R de Mais	Lieut	8 Mar 44	6 CIRU	UK	58	8 Mar 44
SOS		SOS to Ex Dark	Lieut	22 mar 44	6 CIRU	UK	70	22 mar 44
	TOS	TOS from 6 CIRU	Lieut	23 Mar 44	CGRU	UK	72	25 Mar 44
		SOS to Ex DARK	Lieut	25 Mar 44	CGRU	UK	73	27 Mar 44
		Embarked & SOS C. arm. UK,	Lieut	26 mar 44				
		" OS C dn arm C.Mt.	Lieut	27 mar 44				
C54		Disembarked & TOS. X 4. Lsd. (1 Bn)	Lt	9 Apr 44	R 22 R. X Lsd	AA1	31	2 Apr 44
		- WOUNDED - con'f'd.	LIEUT	24 May 44 DNR	R 22 R		CLA 450 C.L.A 442	9 JUN. 44 27/5/44

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

Name Vincent, Paul Emile

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
SOS								
C54 - TOS		TOS from X4 List L22R.	Lieut	16 May 44	R22R	A.A.1.	21	19 May 44
[illegible] SOS	OS 2 MS 4/708 4 Aug 44 TOS	Trans from 14 C G H.		27 May 44			CLB272	Aug 23 - 44
		Adm 3 C G H.		12 Aug 44				
		Trans. 15 C G H.		12 Aug 44				
		Disch 15 C G H.		19 Aug 44			C-1547	23 Oct 44
		Adm 15 C G H.		1 Sep 44				
		Disch 15 C G H		15 Sep 44			C-1547	23 Oct 44
C129	SOS	SOS X4 List (4 Bn.) to R. 22. Regt	Lieut	5 Oct 44	X List R.22R.	A.A.1.	108	12 Oct 44
C129	TOS	TOS from X4 List R. 22. R.	Lieut	6 Oct 44	R. 22. R.	A.A.1	55	11 Oct 44
		No 54./31 May 44 "TOS X3 List" By D.O. 88/23 Aug 44						
		Deceased, 2 Dec 44						
		Died of Wounds.	Lieut	2 Dec 44.	R22R.	Cas List	A521.	9 Dec 44.
		Sol. Died of Wounds.	Lieut	2 Dec 44.	R22R.	A.A.1.	74.	5 Dec 44

Sheet No.....

POSTINGS FROM O/S CASUALTY LISTS

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

Regt'l No.....Rank Lieut. Surname Vincent Christian Name Paul Emile

Unit	Hospt.	Admitted Day	Admitted Mo.	Admitted Year	Discharged Day	Discharged Mo.	Discharged Year	Hospt. Days	Disease or Injury	Remarks	Cas. List No.
Royal 22nd	3 F. D. Sta	24	5	44					Wounded D.N.K. GSW. Rt. groin and abdominal wounds.	Serious 24.5.44	A. 442
"	—								Date confirmed wounded 24-5-44		A-450
"	14 Can Gen	27	5	44	4	7	44	38	GSW. Rt. T. Lt. loin & abd, Fr. ilium.	I. fr. 3 C.G.H.	B. 272
1 Base Re Dep.	3 " "	12	8	44					Chancroid		b-1547
"	15 " "	12	8	44	19	8	44	7	"	Tr fr 3 Bde Gen.	b-1547
"	"	1	9	44	15	9	44	14	" (R.)		b-1547
Roy 22e Regt	—	—	—	—	—	—	—	—	Wounded 2-12-44 Died of wnds 2-12-44	Second bas	a-521
"	—	—	—	—	—	—	—	—	G. S. W. (M.G.) Comp. frac. lt. arm Pen. wnds. lt. mid. thigh, rt. cheek.		B-357

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

SERVICE AND CASUALTY FORM

PART I (For all ranks)

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

Gen. List

Unit ..... LES FUSILLIERS DE SHERBROOKE CA. ..... Regimental Number ~~D-150013~~

1. Surname ..... VINCENT	(17) Regiment or Corps ..... C.I.C.	Unit (Battn., etc) ..... R22R.
2. Christian Names ..... Paul Emile		
3. *Substantive Rank and Appointment		
*Acting Temporary or Local Rank ..... Lt.		
giving date 9-10-42		
*To be entered in pencil to facilitate alteration.		
4. Place of birth ..... Sherbrooke Quebec Canada	(18) Medical	
5. Date of birth as declared on attestation ..... 10 Avril 1918		
(A)	Category	Date / Authority
6. Date of enlistment ..... 16 April 1942		
7. Place of enlistment ..... Montreal South	"A"	20-3-42 M.F.M. 2
8. Residence at time of enlistment ..... 5 rue Clemenceau, Sherbrooke Quebec Canada		
9. (B) Special conditions (if any) of enlistment or rate of pay		
10. (C) Any subsequent variations of conditions of service		
11. Religion ..... Catholique Romain		
12. If married, state date ..... ~~Single~~ N/A	(19) Next of kin (entries to be made in pencil)	
13. Trade on enlistment ..... Camptable		
14. Corps, trade and grade		
15. (D) Qualifications	Mde Eugenie Vincent (mere)	
16. (E) Miscellaneous entries	5 rue Clemenceau, Sherbrooke	
	(20) E.	
	(21) E. Quebec, Canada	
	(22) E.	

NOTES—

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

(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
						Lieut	
		"	Granted P.L. with all in 9 days	"	13 aug 43	"	170 - 19 aug 43
amn'd by DO - 194 - 15 sep 43		6 CIRU	Recal "Q 2" Battle Drill Case (27 June 7 aug 43)		3 sep 43		184 - 4 sep 43
		"	Att. Sap to 8 Fd. Sqn. R.C.E.	"	15 sep 43	"	195 - 16 sep 43
		"	Ceases att. Sap to 8 Fd. Sqn R.C.E.	"	9 oct 43	"	216 - 11 oct 43
		"	~~Ceases att. Sap to 8 Fd. Sqn R.C.E.~~	"			
		"	SOS to Cameron Highrs of Canada (Spec. Inc) (auth 99/29/C.H. of O. dtd 7 oct 43)	"	12 oct 43	"	219 - 14 oct 43
7 Oct 43	99/29/CH of O/1 SOS	HQ 3 Div Sp Bn	TOS Spec Inc from 6 CIRU to 6 C.I.R.U.	Fd	13 Oct 43	Lieut	32. 18 Oct 43.
				✓	8 Dec 43	✓	3 Jan 44
		6 CIRU	TOS fr. C.H. of O. (Spec Inc)	U.K.	9 Dec 43	"	267/43
		"	PL 9 days 30 Dec 43 - 8 Jan 44	"	30 Dec 43	"	285/43
		"	SOS to Rde Mais. (Spec Inc) (auth 99/29/Rde Mais/d d/5 Jan 44)	"	10 Jan 44	"	8/44
	QB	Rde Mais	TOS Spec Inc from 6 CIRU	"	11 Jan 44	"	2-44
15 Jan 44	"	"	Awarded Canadian Volunteer Service Medal and Clasp	"	16 " 44	"	4-44
7 Mar 44	"	"	SOS 6 CIRU 99/29/Rde Mais d/28 Feb 44	"	7 Mar 44	"	400 15/44
		6 CIRU	TOS from Rde Mais (Spec Inc)	U.K.	8 Mar 44	Lieut	58/44 70/44
		6 CIRU	SOS Exercise DARK (for Serial 8002 ?)		22-3-44		
		1 CBRU	TOS from 6 CIRU	U.K.	23/3/44	Lieut	72/44
		1 CBRU	SOS to EX "DARK"	U.K.	25-3/44	Lieut	73/44
			SOS OF U.K. OR EMBARKATION AT 26 March 44 OR				
			FROM CMF OR TRANSFER OF 27 March 44 AND DISEMBARKED AT		ON 9 Apr 44.		
	Rad. H.Q.	H.Q.	265 1 Bn on Dismd.	n/m.	9 April 44	Lieut	x 31/44.
9 May 44	CB 1	✓	Posted to x 4 list (4 Bn)	✓	9 May 44	✓	x 45/44
5 May 44	CB 6	x 4 (4 Bn)	SOS to R22eR.	n/m.	15 May 44	Lieut	x 47/44.
	3011 a	R22eR.	T.O.S from x 4 list R22eR (4 BN)	✓	16 May 44	Lieut	21/44.
26 May 44	3010 C	✓	SOS to x 3 list R22eR	F.d.	24 May 44	✓	23/44
26 May 44	3013 A Sec	238 P.I	Wounded	✓	23 May 44	✓	~~x 88/44.~~
	R22eR	x 3	T.O.S from R22eR Regt.	n/m.	25 May 44	Lieut	x 82/44
AFW 3049 Q.1		d/8 June 44	Wounded Confd	n/m.	1 May 44	Lieut	

SERVICE AND CASUALTY FORM

(PART II)

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

Regiment or Corps ... R22eR ... Regimental Number ... Lieut

Substantive Rank ... Surname Vincent ... Christian Names Paul Emile

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 1 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
27 Jan 44	R22eR	x4	Posted from x3 to x4 (1 Bn)	NF	25 Jan 44	Lieut	x79/44.
1 Aug 44	"	"	Posted to x3 List	"	1 Aug 44	"	x86/44.
2 Aug 44	"	"	Posted to x4 (CR)	NF	2 Aug 44	Lieut	x88/44
4 Aug 44	"	"	Posted to x3 List	"	4 Aug 44	"	x93/44
17 Aug 44	"	x3	Posted to x4 (CR)	"	16 Aug 44	"	x98/44
22 Aug 44	"	x4 (1 Bn)	Posted to x4 (4 Bn)	"	21 Aug 44	"	x104/44
5 Oct 44	"	x4 (4 Bn)	Left R22eR	"	5 Oct 44	Lieut	x118/44
6 Oct 44	3010A	R22eR	TOS from x4 List R22eR 4 Bn	"	6 Oct 44	"	55/44.
4 Dec 44	AFW3013 Sec 404 P.1.		Sec Bas BC - Wounded EA.	Fd	2 Dec 44	"	
"	"	—	S.O.S. Died of wounds BC - 9 CCS FA	"	2 Dec 44	"	74/44.

SERVICE AND CASUALTY FORM

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

(PART II)

Regiment or Corps R 22 Regt Regimental Number

Substantive Rank Lieut Surname Vincent Christian Names Paul Emile

Acting Temporary or Local Rank

(To be entered in pencil to facilitate alteration)

HOSPITALIZATION ONLY

(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 1 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
241	R22R	X-3	Adm 3 CFDS	Fd	24 May 44		X57/44
251	"	"	" 14 Cdn Gen	"	27 May 44		X64/44
251	"	"	" 3 Cdn Gen	"	27 May 44		
278	"	"	" 1 CCD	"	6 Jul 44		3/44
293	"	"	Disch 1 CCD	"	25 Jul 44		19/44
Readm							
15/340/10	R22eRegt	X-3	Admitted to 3 CGH (S)	field	12 Aug 44	Lieut	33/44
			" to 15 CGH		12 Aug 44	Lieut	
15/345/14	R22eRegt	X-3	Discharged from 15 CGH	field	19 Aug 44	Lieut	37/44
1 Sep 44	"	X 3				Lieut	
15/359/33	R22eRegt(rt)	X-3	Admitted to 15 CGH (Wd)	field	1 Sep 44	Lieut	51/44
15/360/37			Discharged from 15 CGH		16 Sep 44	Lieut	59/44
408/1	"	"	Adm 9 CLFA (Wd)	"	2 Dec 44	"	129/44

404/1 AFW.1313. Died of wounds 2 Dec 44 9 CLFA

SURNAME	Vincent	CHRISTIAN NAMES	Paul Emile	
C.A. (A.F.)		AUTHORITY	C.A. (R.F.)	AUTHORITY
UNIT	Gen. List (C.I.C)		UNIT	
RANK ON APPT.	2nd Lt. (D.150013)		RANK	
DATE OF APPT.	5 Sep 42		REGIMENTAL & STAFF APPTS. C.A. (O'SEAS)	
T.O.S. C.A. (O'SEAS)	11 Jun 43			
2ND LT.	5 Sep 42	2540c-10		
LIEUT.	9 Oct 42	2563c-10		
CAPT.				
MAJ.				
LT. COL.				

DATE OF BIRTH 10 Apr. 18 RELIGION R.C. MED. CAT. "A"

CIVIL OCCUPATION Accountant

CIVIL RESIDENCE Sherbrooke, Quebec. Lang. Fr. & Eng.

HONOURS & AWARDS

PART II ORDERS

ENTRY					CONTRA			
	UNIT	EFFECTIVE DATE	ORDER No.		UNIT		EFFECTIVE DATE	ORDER No.
TOS	6.CIRU	19Jun43	120	Fr	Canada.			
A.	8 Sqn. RCE	15Sep43	47	Fr	6 C I Ru	K	15Sep43	195
CA	"	9Oct43	47	Fr	"	K	9Oct43	216
TOS	3 Div Sp Br Sp Coy	13Oct43	~~37~~	SOS	6 C I Ru	K	12Oct43	219
TOS	6 C I R 4	4Dec43	267	SOS	3 Div Sp Br Sp Coy	D	8Dec43	3
TOS	R. de Mars (S1)	11Jan44	7	SOS	6 C I R 4	K	10Jan44	8
TOS	6 C I R U.	8Mar44	58	SOS	R. de Mars (S1).	K	7Mar44	15
TOS	1 Div Ru	23Mar44	72	SOS	6 C I Ru	V		
TOS	X-4 C I C (Ex Dark)	26Mar44		SOS	1 Div Ru	K	25Mar44	73
TOS	X-4 R 22 R	2Apr44	31	SOS	X-4 L 26			
TOS	R. 22. R - 16	9May44	21	SOS	X 4. R. 22. R -		15May44	47
TOS	X-3 R 22 R 25	9May44	54	SOS	R 22 R	M	24May44	23
P	X 4 R 22 e R.	25July44	79	FR	X 3 R 22 e R	M	25July44	79
P	X 3 R 22 e R	11Aug44	86	FR	X 4 R 22 e R		11Aug44	86
P	X 4 R 22 e R (A41)	19Aug44	88	FR	X 3 R 22 e R	V	19Aug44	88

P PTO

COURSES & QUALIFICATIONS		CASUALTIES BY RO's, ETC.	AUTHORITY
Offrs Battle Drill Refresher Crse 1Sep43 D.O.184 "Q2"			
CMHQ Crse 105 Ser. E.29 Mine Clearing 9/22Jan44		Killed in Action.	

REMARKS

P-1 Div Ru (Ex Dark Sec 8002/3) 22 Mar 44 - A-1887
Wounded DNK seriously ill 24 May 44 GSW left groin abdomen wounds
Of serious 26 May 44 CAS/6256 24 May 44 CAS/6626. CAS/6221
Embarked 26 44 SOS CDN ARMY 26 Apr 44 TOS CDN ARMY (CMF) 27 Apr 44
Dis 9 Apr 44 (31 X R 22 R) - Died of Wounds 2 Dec 44
Wounded 2 Dec 44 Sec. Cas

SECRET C3880/A. AS-21

NAME :-

VINCENT, P.E. Killed in Action

D. 150013 SOS

NAME VINCENT, PAUL EMILE H.Q. File 3 3 2 P1-194

RANK CADET ~~2/LT.~~ LT.

ACTIVE UNIT GEN. LIST, (PR) No. 4 D.D.

RESERVE UNIT

Appt. R.O. No. 2540 Date 9-11-42 Effective date of Appt. 5-9-42

CANADA GAZETTE

TRANSFERS, PROMOTIONS and REVERSIONS

TRANS. TO A12 T.C. (PR) GEN. LIST. 11-9-42. R.O.# 2540, 9-11-42.

TO BE LT. : GEN. LIST. - (REINFS.) - No. A.12. T.C. - 9-10-42, R.O. #2563, 14-11-42

EMBARKED CANADA - SAILING LIST NO. 2694 JUN 10 1943

10M—9-42 (6257)
H.Q. 1772-45-8

DIED of WOUNDS 2 DEC 44 Roy. 22nd Regt "M" FORCE Cable #H192A 12 DEC 44

Gen List (P.P) #481

23/7/43

2-12-44

AWARDS—CANADIAN ARMY (ACTIVE) 1855 M FEB.

500M—1-44 (3467)
H.Q. 1772-45-8

FILE NO. 332-110-158

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
VINCENT,	Paul Emile		Lieut.	Roy. 22 Regt.

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star Italy Star Defence Medal War Medal 1939-45 CVSM & Clasp	7525, 18-1-50

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO Mrs. Eugenie Vincent Mother

ADDRESS: 5 Clemenceau St., Sherbrooke, Que.

MEMORIAL BAR
(1) DATE DESP
REGN. NO 4438

(2) MEMORIAL CROSS

WIDOW

(2)

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mme. Eugenie B. Vincent (FRENCH)

1855

ADDRESS: 5 Clemenceau St., Sherbrooke, Que.,

(3) DESP. FEB 27 1945
REGN No. 14861

File No. 339-AM-158

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. _____ Name Vincent, Paul Emile

Rank on Discharge Lt Date of Discharge 2-9-44

Authority for Discharge or Retirement Deceased

Served in:

				Non-qualifying service
Canada	from 16-4-42.	to	10-6-43	
	from	to		
United Kingdom	from 11-6-43	to	26-3-44	
	from	to		
Italy	from 27-3-44	to	2-12-44	Died of Wounds
Northwest Europe	from -	to		
----------	from	to		
----------	from	to		

Eligible for award of:

1939 - 45 Star OK ✓

---------- _____

Italy Star OK ✓

~~France-Germany~~ Star _____

Defence Medal OK ✓

War Medal OK ✓

Canadian Volunteer Service Medal _____ ✓

with clasp OK

Verified by _____

Date SEP 16

Carded SEP 19 1946

HA 165

Inf. R. 27th Quick

M.F.M. 131
10M—1-42](3177)
H.Q. 1772-39-1866

RECOMMENDATION FOR APPOINTMENT TO A COMMISSION

Original
~~Duplicate~~
~~Triplicate~~

1. **Particulars of Candidates:—**

Name VINCENT (Surname) PAUL EMILE (Christian Names) Regtl. No D-450089

Enlisted 21st Nov. 1940 (Date) Sherbrooke Que., (Place) Les Fusiliers de Sherbrooke (R) (Unit)

Present Unit Les Fusiliers de Sherbrooke (R)C.A. Date T.O.S. 21st Nov. 1940

Present Rank Pte. (Substantive) ..... (Acting, if any) 21st Nov. 1940 (Date)

Medical Category "A" Birth Date 10th April 1918

Place of Birth Sherbrooke (Town or Twp.) Quebec. (County or Prov.) Canada. (Country)

Civil Occupation Clerk Religion Cath. Romain. (Denomination)

Married or Single Single. Nationality of Wife N/A

2. **Military Qualifications:—**

Character (certified copy of M.F.M. 6 to be attached): N/A

Courses attended (A.F.) and (R.F.) (state month and year): nil

Technical qualifications in detail (if any):

3. Educational qualifications, including degrees (if any):—

Brother of Sacred Heart St-Jean Baptiste Academy 10 years.
Sherbrooke, Que.,
Diploma of Superior Commercial Studies.

Languages (state if written or spoken): French & English. (speaks & writes)

4. Previous service (state period and length of service):—

(i) P.F.: N/A
(ii) R.F. (years in which training was carried out): 1941-42
(iii) C.E.F.: NIL
(iv) Other British Forces: NIL

5. (*a*) Arm, Corps or Unit in which a Commission is desired by Candidate:

Infantry

Date March 20th 1942 194

Paul E. Vincent
(Candidate's signature)

(*b*) I am prepared to accept this soldier as an Officer if subsequently appointed to this Unit.

H. Gerrard Lt. major
(Signature of Officer Commanding)

6. General Remarks by O.C. making recommendation:—

This man has good character, very good conduct and appearance and will be a very efficient officer.

Date March 20th --- 1942

H. Gerrard Lt. major
(Signature of Candidate's C.O.)

O.C. "Les Fusiliers de Sherbrooke"

7. Remarks by Officers Administering Corps:—

.....

.....

Date.....194.... Corps..... Signature.....

APPROVED
[signature]
DATE.....
JUNIOR OFFICERS' SELECTION BOARD
M. D. No. 4
UNIT | QUOTA

---

8. Remarks by Formation Commander or District Officer Commanding:—

.....

.....

Date 10-4- 1942 District No. 4. Signature

(A.G.White), Major,
For E. de B. Panet, Brig.-General,
District Officer Commanding, M.D.No.4

---

9. For completion by Candidate's C.O.:—

Selected to attend Officers' Training Centre at.....

commencing.....194..... as Candidate for appointment.

(i) as a reinforcement officer in.....(Army or Corps) or

(ii) to.....(Unit) { C.A. (Active)* / C.A. (Reserve)*

*Delete where not applicable.

Date.....194.... Commanding.....Signature.....

---

10. To be completed by Commandant of Officers' Training Centre:—

(a) Report of Candidate:.....

.....

(b) Recommendation.....

Date.....194..... Commanding.....Signature.....

---

11. **To be completed by O.C., Advanced Training Centre:—**

(a) Report on Candidate.....

.....

(b) Recommendation.....

.....

Date.....194..... Commanding.....Signature.....

---

12. Remarks by D.O.C. on interviewing Candidate, reported as unsuitable by O.T.C. or A.T.C.:—

.....

.....

Date.....194..... District.....Signature.....

Initials of Candidate..... Does he wish to submit a statement?.....

---

13. For use at N.D.H.Q.:—

Appointed.....194.... A.P. & R. No.....Date.....194.....
(Date)

Signature.....
(Director of Personal Services)

RECORD AT SPECIAL TO ARM T.C.

27. Place FARNHAM. P.Q. 28. Date Joined 11 Sep 42 29. Date Left 9 Oct 42.

30. This candidate has successfully completed the course and is qualified for rank of LIEUTENANT

.....and is considered suitable to continue training as an officer in

(arm or service) INFANTRY (RIFLE)

31. He has shown special ability in N/A.

32. His grading is "C" (64.7) (See Note 4.)

Date 9 Oct 42.

A Howard Col. Officer Commanding
A-12 C.I.T.C. - FARNHAM, QUE.

Signature of C.O.

RECORD AT BASIC T.C.

33. Place.....34. Date Joined.....35. Date Left.....

36. During period at this T.C. was employed as.....

37. He has shown special ability in.....

38. His grading is.....(See Note 4.)

Date.....

Signature of C.O.

RECORD AT SPECIAL TO ARM T.C.

39. Place FARNHAM. P Q. 40. Date Returned 19 May 43 41. Date Left 9 Jun 43

42. During period at this T.C. his duties and work consisted of REFRESHER COURSE

43. His grading is C (See Note 4.)

Date 9 June 43

A Howard Col. Officer Commanding
A-12 C.I.T.C. - FARNHAM, QUE.

Signature of C.O.

RECORD OF SCHOOLS OR SPECIAL COURSES

44. School.....45. Date Joined.....46. Date Left.....

47. His grading is.....(See Note 4.)

48. Copy of Report on work at School is attached.
If not, state reason

.....

(See Note 5.)

Signature of Commandant

NOTES FOR USE:—

1. One copy only of the form is to be created.
2. The form will accompany the officer's documents from place to place and will be sent overseas in the case of reinforcement officers.
3. Items 1 to 14 will be filled in by individual reported on.
4. "A"—75% or over (outstanding); "B"—66% to 75% (above average); "C"—55% to 65% (average); "D"—50% to 54%.
   Grading is arrived at by a consideration of all the factors affecting the candidate's qualifications as an all-round officer.
5. Record of other schools or special courses will be appended to this form.
6. This form will not be used as an adverse Report. If a C.O. decides to report adversely on an officer, M.F.M. 242 will be used.

14

CONFIDENTIAL

M.F.M. 136
25M—12-42 (7827)
H.Q. 1772-39-1839

OFFICERS' TRAINING PROGRESS REPORT

FOR ACTIVE FORCE OFFICERS ONLY
(See notes regarding use on page 2)

1. Unit General List 2. Date May 27 1943

3. No. 4. Rank Lieut 5. Name (block letters) VINCENT (Surname) PAUL EMILE (Christian)

6. Date of birth 10 APR 7. Age 25 8. Permanent Address 5 CLEMENCEAU SHERBROOKE

9. Education and technical qualifications Junior Matriculation

ACADEMIE ST JEAN BAPTISTE SHERBROOKE

10. Civil occupation (give brief particulars of last 5 years prior to joining Army)

BOOKEEPER IN WHOLESALE BUSINESS
NATIONAL WALLPAPER CO. LTD. SHERBROOKE.

NA

11. Previous Military Service and Courses B. WING

12. School Cadet? 13. Boy Scout? 14. Hobbies SPORTS

(See Note 3.)

Paul E. Vincent Lieut.
Signature of Individual

RECORD AT PRE-O.T.C. COURSE OR UNIT

15. Place 16. Date Joined 17. Date Left

18. This candidate has successfully completed the course and is qualified for rank of

and is considered suitable to continue training as an officer in

(arm or service)

19. He has shown special ability in

20. His grading is C (See Note 4.)

Date

Signature of Commanding Officer

RECORD AT O.T.C.

21. Place 22. Date Joined 23. Date Left

24. This candidate has successfully completed the course and is qualified for rank of

and is considered suitable to continue training as an officer in

(arm or service)

25. He has shown special ability in

26. His grading is (See Note 4.)

Date

Commandant, O.T.C.

VMB

28

Form P.S. 1

DIRECTORATE OF PERSONAL SERVICES

Original
~~Duplicate~~
~~Triplicate~~
~~Quadruplicate~~

Personal File 332-110-158

Related Unit File H.Q.54-27-20- 143

" Dist File.....

Section of Origin..... 2 B 1 A .....Date Received.....29-10-42.....

(A) PRESENT STATUS

(i) Personal No D.150013..... Rank (R.F.).....Nil.....

Rank (A.F.).... Cadet.....Med. Category.....A"..... (31)

(ii) Name, etc. Paul Emile VINCENT

(iii) Unit (R.F.).....Nil.....

Unit (A.F.).....No. 4 Dist. Depot.....

(iv) Detailed for duty.....

Attached, Posted, or Seconded.....

(v) Federal Civil Servant?..... Concurred in by Treasury Board.....

(B) RECOMMENDATION (A) ACTIVE FORMATIONS

(A) Draft Gazette Entry: DEPOTS

No. 4 Dist. Depot.- (Prov. Reinf.).-

Gen. List.-

To be 2nd Lt. : $ D.150013, Cadet Paul Emile Vincent. 5th Sept., 1942.

and transferred to A.12 T.C.- (Prov. Reinf.).- Gen. List. 11th Sept., 1942.

($ Granted equivalent temp. rank in R.F.).

10

APPROVAL AND NOTIFICATION

(i) Notification sent to.....

Signed..H.D. Alcorn.....Captain, Pers. 2 B 1..A.

Date..26-10-42.....

(D) ACTION TAKEN Initials.....Date.....

(i) Ent'd. in Draft Gazette No.....44.....d/3/11/42 Chr 27/10/42.....Pers. 3a.....

(ii) Ent'd. in Security Precis No.....Pers. 3b.....

(E) VERIFICATION OF DATA

(i) Present Status Checked...W.J.A. 28/10/42.....Pers. 3c.....

(ii) Qualifications Checked.....Pers. 3c....

REMARKS.....

.....

(F) RECORDED

(i) Entered in Ledger Records.....Pers. 3c.

RB.

1

MB

28

Form P.S.1.

DIRECTORATE OF PERSONAL SERVICES

Original
~~Duplicate~~
~~Triplicate~~
~~Quadruplicate~~

Personal File 332-110-158

Related Unit File 54-27-20- 143

" Dist. File

Section of Origin 2 B 1 A Date Rec'd. 2-11-42

(A) PRESENT STATUS

(i) Personal No. Rank (R.F.) Temp. 2nd Lt.

Rank (A.F.) 2nd Lt. Med. Category "A"

(ii) Name, etc. P.E.Vincent

(iii) Unit (R.F.) Gen. List.

Unit (A.F.) A-12 T.C.- (Prov. Reinforcements).- Gen. List.

(iv) Detailed for Duty.....

Attached, Posted or Seconded.....

(v) Federal Civil Servant? .....Concurred in by Treasury Board.....

(B) RECOMMENDATION (A) ACTIVE FORMATIONS

(i) Draft Gazette Entry: ESTABLISHMENTS

A- 12 T.C.- (Reinforcements).-

Gen. List.-

To be Lt. : 2nd Lt. P.E.Vincent. 9th Oct., 1942.

(ii) Data for Security Precis:

12

(C) APPROVAL AND NOTIFICATION

(i) Notification sent to.....

Signed H.D. Aleorn ...Captain, Pers. 2 B 1. A

Date 4-11-42.

(D) ACTION TAKEN

Initials Date

(i) Ent'd. in Draft Gazette No. 46 d/ 10/11/42 HB 5/11/42 Pers. 3a.

(ii) Ent'd. in Sec'y. Precis No.....Pers. 3b.

(E) VERIFICATION OF DATA

(i) Present Status Checked..... Mae 5-11-42 ...Pers. 3c.

(ii) Qualifications Checked.....Pers. 3c....

REMARKS.....

.....

(F) RECORDED

(i) Entered in Ledger Records.....Pers. 3c.

ADJUTANT GENERAL'S OFFICERS SERVICE

1

To be made out in duplicate

M.F.M. 5
150M—7-41 (1122)
H.Q. 1772-39-1651

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

INSTRUCTIONS.

(*a*) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the Canadian Army (AF) or R.C.A.F. ON ACTIVE SERVICE.

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

(*c*) Both copies of the form are to be forwarded by the Officer Commanding the unit for each officer and other rank, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District, Command, or Camp Paymaster, to the Officer i/c Records, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster of the unit, when transferred to another unit the copy retained by the Paymaster will be sent to the Paymaster of the individual's new unit.

---

(1) Name of Officer or Other Rank VINCENT
(Surname first—Christian names in full—Block capitals)
Paul Emile

(2) Regimental or Official Number and Rank D-150013 Pte.

(3) Unit Les Fusilliers De Sherbrooke CA.

(4) Are you married? NO

(5) If married, state,

(*a*) Full name of your wife NIL

(*b*) Present postal address of wife NIL

(6) If married, have you been regularly supporting your wife? If not—state reasons
NO

(7) Are you a widower? NO

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

Names and ages NIL

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

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

Name NIL

Postal Address

[SEE OTHER SIDE]

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife for at least 2 years immediately prior to appointment or enlistment?.....

If so, state her full name and Postal Address.....

NO

.....

(11) Is your father alive?.....NO.....

If so, state name and address, occupation .....N/A.....

.....NO.....

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

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

NIL

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

(14) Is your mother alive?.....YES.....

If so, state name and address.....Mrs Eugenie Vincent.

5 Clemenceau Ave., Sherbrooke P.Q. Canada

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

(16) If sole or partial support of widowed mother—state what amount per month you have given her prior to appointment or enlistment.....$35.00 per Month.

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

(17) Are you contributing to the support of any dependents, other than those shown above?.....NO.....
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment.

If so, state the following particulars:—

Relationship .....NIL.....

Full Name .....

Postal Address .....

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

NIL

(18) Are you insured?.....YES.....

If so, in what Company?.....National Life Co.....
(Give number of policy)

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

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

X Paul E. Vincent

(Signature of officer or man)

Date.....16-4-42.....

A/Sqdn. Ldr.

.....
Officer Commanding

Date.....16-4-42.....

NO. 4-DISTRICT DEPOT A.F.

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

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 VINCENT Paul Emile (b) Reg'l. No. D-150013
2. (a) Arm of service ARMY (b) Unit Les Fusiliers de Sherbrooke (c) Rank PTE.
3. (a) Date of birth Apr.10/18 (b) Have you any dependents? 1 (c) Place of residence at time of enlistment SHERBROOKE P.Q. CAN.
4. (a) Place of enlistment MONTREAL SOUTH QUE. (b) Date of enlistment 16-4-42

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 17 (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.) 4 Yrs. High School
7. If you attended a university, give name of university and standing or degree secured
8. (a) Did you ever enter upon a trade apprenticeship? (b) If so, for what occupation? - (c) Did you finish it? - (d) If you did not finish it, how long did you serve at it? -
9. (a) What languages do you speak fluently? FRENCH & ENGLISH (b) What languages do you read well? FRENCH & 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 NATIONAL WALLPAPER CO. Address SHERBROOKE P.Q. CAN.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) WHOLESALE WALLPAPER
20. (a) Your specific occupation ACCOUNTANT (b) Number of years' experience at this occupation with any employer 6 Yrs.
21. (a) Did your employer promise definitely to give you employment on discharge? YES (b) Did your employer refuse to promise you employment on discharge? (c) Do you wish to return to your former employment? YES

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

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

Section F—PARTICULARS OF FARMING EXPERIENCE

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

Section G—MISCELLANEOUS

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

DATE APR. 16th. 1942 SIGNATURE Paul E. Vincent

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

WILL

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

(1) I, Paul Emile Vincent (Name in Full), of the City (City, Town, Village, Township)

Address in civil life.

of Sherbrooke, in the County District of Sherbrooke

Province of Quebec, Accountant. (Civil Occupation)

Regimental No D-150013, Unit Les Fus.De Sher.CA. do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

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

(2) I GIVE, DEVISE AND BEQUEATH unto "My Mother" Mrs Eugenie Vincent.

Residing at;- 5 Clemenceau St. Sherbrooke P.Q. Canada

X

P.C.V

All my estate both real and personal

Relationship, names and address of residuary beneficiaries.

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

X

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

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

IN WITNESS WHEREOF I have hereunto set my hand this 6 day of April 19 42

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

..... (Signature of soldier)

First witness sign here.

(5) Signature A. Boucher Le Blanc

Civil Address Ste Edwidge Co Drummond

Civil Occupation Clerk

Second witness sign here.

Signature Louis D. Hebert Jr

Civil Address 4 300 Chambord

Civil Occupation Salesman

(Witnesses are not to be beneficiaries.)

OVER]

M.F.M. 268
50M-4-44(41
H.Q. 1772-3 0

CANADIAN PACIFIC TELEGRAPHS

/RB 332-110-158

DAY LETTER [X]
NIGHT LETTER [ ]

CASUALTY (REPORT DELIVERY)

OTTAWA 6 DECEMBRE 1944

TO:-MME EUGENIE B VINCENT
5 RUE CLEMENCEAU
SHERBROOKE QUE

20927 MINISTRE DE LA DEFENSE NATIONALE REGRETTE PROFONDEMENT VOUS INFORMER LIEUTENANT PAUL EMILE VINCENT OFFICIELLEMENT PORTE MORT DEUX DECEMBRE 1944 A LA SUITE DE BLESSURES RECUES AU COMBAT STOP SI NOUS RECEVONS DES RENSEIGNEMENTS SUPPLEMENTAIRES NOUS VOUS LES TRANSMETTRONS AUSSITOT STOP AFIN D'EVITER DE RENSEIGNER L'ENNEMI NE DIVULGUEZ PAS LA DATE DE SA MORT OU LE NOM DE SON UNITE

le directeur des archives militaires

DIRECTOR OF RECORDS

PREPAID

40

le 16 décembre 1944.

Chère madame,

C'est avec un profond regret que j'ai appris le décès de votre fils, le lieutenant Paul-Emile VINCENT, qui a donné sa vie au service de sa patrie sur le théâtre de guerre méditerranéen le 2 décembre 1944.

D'après les renseignements officiels que nous avons reçus, votre fils est mort à la suite des blessures reçues au combat contre l'ennemi. Vous pouvez compter que sur réception de détails supplémentaires, nous vous en aviserons sans délai.

Le Ministre de la Défense nationale et les membres du Conseil de l'Armée me chargent de vous offrir, à vous-même et à votre famille, leurs sincères condoléances dans votre deuil.

Nous rendons hommage au lieutenant Vincent pour son vaillant sacrifice.

Votre bien dévoué,

l'adjudant-général,

OCT 16 1944

(A.E. Walford),
major-général.

45

Mme Eugénie B. Vincent,
5, rue Clémenceau,
Sherbrooke, Québec.

/RB

QG 332-110-156 D.R. 2 (B)

le 20 décembre 1944.

Madame,

Fidèle à la ligne de conduite adoptée par l'Armée canadienne, d'informer le plus proche parent de toutes les circonstances entourant les blessures, la disparition ou la mort au combat des militaires, notre quartier général avait le regret de vous informer par télégramme, en date du 6 décembre 1944, de la mort de votre fils, le lieutenant Paul Emile VINCENT; le paragraphe suivant fait suite à cette dépêche et a trait aux blessures reçues par le lieutenant Vincent.

D'après les renseignements reçus par notre quartier général des autorités médicales militaires canadiennes, votre fils est mort des suites de blessures de balle à la joue droite, au milieu de la cuisse gauche, et d'une fracture composée du bras gauche.

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

Votre bien dévoué,

pour l'adjudant-général,

(C.L. Laurin) colonel,
directeur des archives.

49

Mme Eugénie B. Vincent,
5, rue Clémenceau,
Sherbrooke, Québec.

/PL

Additional Notes by Unit M.O. and Field Ambulance.

Morphia—	A.T. Serum—
Dose. Time and date given— Morphine Sulfate. 4500HRS.	Dose and date given—
Date of Wound or onset of illness	Religion— R.C. also C.of E. (GH)

Sulphanilamide. Dose in grammes. Time and date given.

Disease*	Microscopic Diagnosis*			
Malaria	B.T.	M.T.	Q.	Clin.
Dysentry	B. Ex.	Ehyst.	Indef. Ex.	

Malaria Treatment							
Days	1	2	3	4	5	6	7
Ateb. grms.							
Quin. grs.							

NOTES.

ICCR, 9CLFA. 1400HRS. 2 DEC.
This man brought here from RAP. Card evidently lost. On cray ? Puncture wds. left mid-thigh & front whirl veloss haemorrhage. No fracture. ? & F. puncture wds. left arm. with fracture of ulna. Small puncture wds right face. Bandages adjusted and Cramer wire splint to left arm.
Prob. ~~M.S.~~ G.S.W. (M.G.)

* Strike out (where inapplicable.

8 P1

Army Form W3118
R.A.F. Form 3118.
Naval Form M204.

FIELD MEDICAL CARD.

* No. Rank Lieutenant P.E.
Name Vincent R.
Unit R.22.
* In cases of Enemy Prisoners of War serial number allotted by A.F.W. 3000.

Battle Casualty. ~~Accidentally~~ Wounded. ~~Sick.~~
(Strike out description which does not apply.)

Diagnosis of Unit M.O.— (1) COMPD. FRACTURE LEFT ARM. (2) PENETRATING WD. LEFT MID-THIGH. (3) PENETRATING WD. ~~LEFT~~ RT. CHEEK. (4) Secondary suture
Date seen by him— 2 Dec., 1945. G. WALSH, CAPT.

No. of Field Ambulance— 9 Can Lt Fd Amb.
Date of admission— 2 Dec 44, 1730 hrs
Field Ambulance diagnosis—
Dead on arrival. W.R. Schorst. Maj

F.D.S., C.C.S. or M.C.S. diagnosis (if altered from above)—

General or other Hospital diagnosis (alterations or additions)—

Wt. 53183/1306. 1,000m. 4/43. D.P.W. 51-6600.

Date of Admission to F.D.S., C.C.S., M.C.S., or General or other Hospital and designation of medical unit to which admitted must be recorded hereunder immediately on admission. Brief clinical notes should be added later, dated and signed by the M.O.

In severe shock. Could not obtain pulse. 1000 cc plasma given.
Evacuate to A.D.S., 9CLFA. ~~Priority~~
Priority 1. G. WALSH, CAPT.

ADS 9CLFA. 15·30 hrs. 25 Dec 44.
Dead on arrival.
Lt. Myers MC

This F.M. Card must not be destroyed. It must be transmitted with the patient if he is evacuated to U.K. Temperature charts or additional clinical notes may be sent with it, either in the same or in another envelope attached to the patient.

No ..... Rank Lieutenant Name VINCENT, Paul Emile

Unit Royal 22e Regt. Date of death 2nd Dec., 1944.

Died at ITALY.

Cause Died of wounds received in action

Death occurred on strength of Forces H.Q. 332-110-158

N/K Mrs. Eugenie B. Vincent Relationship Mother

Address 5 Clemenceau St., Sherbrooke, Que.

Remains buried in ..... Cemetery

CHK ✓

43-777

Grave location .....

OVER—

REBURIAL

Faenza British Empire Cemetery,
Faenza, Italy.

Grave 1, row E, plot 3.

HI & CR Form Despd. FEB 4 1947

Photographs
Despatched
MAY 23 1947

DEC 19 1945

JUN 13 1946

DEC 22 1944

DEC 26 1944

BURIAL REPORT TO N.K. D

RETURN TO BUR. OF STAT.

ROYAL MESSAGE DESP'D. DEC

CAN. MESSAGE DESP'D. DE

5M-10-44 (M-4414)

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER

RANK Lieutenant

SERVICE UNIT Royal 22eme Regiment (CA)

NAME VINCENT, Paul Emile

DATE OF BIRTH DAY 10th MONTH April YEAR 1918 Date enlisted: 16-4-42

MARITAL STATUS Single Religion: Roman Catholic

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

ADDRESS 5 Clemenceau St., Sherbrooke, Que.

NAME ADDRESS D.A.B. Mrs. Eugenie B. Vincent

ADDITIONAL PERSON TO BE NOTIFIED

ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. 4192A H.Q.332-110-158

CASUALTY DETAILS Died of wounds DATE 2-12-44

MEDITERRANEAN

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

M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO

DATE 12-12-44

OFFICER I/C RECORDS

Encl. 6

COPY FOR DOCUMENT FILE

15163

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: VINCENT, (*Block letters*)

Given names: Paul, Emile,

Do not write in this space

4. RESIDENCE

Street: Clemenceau Street, No. 5.

Official name of civil municipality or township: Sherbrooke,

Municipal county: Province: Quebec.

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

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

10. BIRTHPLACE (Province or Country): Sherbrooke, Quebec.

11. DATE OF BIRTH: April (Month) 10th, (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.: Accountant.

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:

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

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: December, (Month) 2nd, (Day) 19 44. (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) 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: Date ....19....
(State which)

Manner of injury:
(How sustained)

Nature of injury:

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

Signed ....M.D.

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

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

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 Defence.

3 3 2 - 1 1 0 - 1 5 2

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: R.22e Regt — Squadron, Troop, Battery or Company: A521

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

Surname: VINCENT — Christian Names: Paul Emile

Died — Date: 2 Dec 44 — Place: Italy(9 CLFA)

Cause of Death*: DIED OF WOUNDS(BC)

Nature and Date of Report: Telept FS 5 d/2 Dec

By whom made: 9 Cdn Lt Fd Amb

* 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: Opposite side of road from PALAZZO RAMONA FORLI 1/50000 MR 466275 Grave 1 — Date: 2 Dec 44

By whom reported: GE Hooper H/Capt 9 CLFA

State whether he leaves a Will or not — (a) in Army Book 64: Not known

(b) as a separate document: Not known

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: Field 7 Dec 44

Signature of Officer in charge of Section Adjutant-General's Office at the Base: E Mallett Capt for Officer i/c Cdn Sec GHQ 2nd Echelon AAI

PSSN / 315 / 1-44 / 10,000

PA 332-110-158

RECORDS OFFICE OVERSEAS.

CANADIAN MILITARY HEADQUARTERS.

GRAVES REGISTRATION CARD.

/K

NAME VINCENT, Paul Emile

RANK Lieut.

UNIT Royal 22e Regt.

PLACE & DATE OF BIRTH Quebec. 10 Apr 1918

REGIMENTAL NO.

NEXT OF KIN & ADDRESS Mother:
Eugenie VINCENT, 5 Rue Clemenceau,
SHERBROOKE, Quebec.

PARTICULARS OF HOSPITALISATION

DATE OF ADMISSION

NAME & LOCATION OF HOSPITAL

DIAGNOSIS

PARTICULARS OF DEATH

DATE OF DEATH 2 Dec 44

PLACE OF DEATH Italy

HRS

CAUSE OF DEATH DIED OF WOUNDS

PARTICULARS OF BURIAL

DATE OF BURIAL Reburied 26 Mar 45

CEMETERY Faenza Br. Empire Cemetery

PLOT NO 3 ROW E GRAVE 1

DEATH CERT. NO

RELIGION Roman Catholic

DATE 20 Oct 45

(M.Bluteau)Capt.
for COLONEL
O i/c Records,
CANADIAN MILITARY HEADQUARTERS

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

Noted
AFR 1(c)