ARMSTRONG, Donald Eric P16426

27-12-43
(O.C.L.-427)

AWARDS—CANADIAN ARMY (ACTIVE) (1548)

FB

100M—10-41 (2195)
H.Q. 1772-45-8

FILE NO. 832-A-236

SURNAME (IN BLOCK LETTERS) CHRISTIAN NAMES	REG. NO	RANK ON DISCHARGE	C.A.S.F. UNIT
ARMSTRONG, Donald Eric	P-16426	L/Sgt.	Roy. Cdn. 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 ~~C.V.S.M. & Clasp~~	40 7-10-49

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO: Mrs. Bertha K. ARMSTRONG (MOTHER)

ADDRESS: 84 Maricourt Rd.,
HULL, Que.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER: Mrs. Kathleen ARMSTRONG,
(1548)

ADDRESS: 84 Maricourt Rd., HULL, Que.

MEMORIAL BAR
(1)
DATE DESP
REGN. NO 2153

(2)

DESP. FEB 28 1944
REGN No. 4960

(3)

RE-ENGAGEMENT PAPER

DECLARATION TO BE MADE BY SOLDIER ON RE-ENGAGEMENT

I, (No.) 16426 Rank Private

(Name) Donald Eric ARMSTRONG

(Regt.) The Royal Canadian Regt. hereby agree to re-engage for a further period of three years' service in The Royal Canadian Regt. (Regiment) or for General Service from 21st August, 1938 (Date)

(Signature of Soldier) D E Armstrong

(Signature of Witness) [illegible]

OATH TO BE TAKEN BY MAN ON RE-ENGAGEMENT

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

WITNESS MY HAND:

(Signature of Soldier) D E Armstrong

(Witness present) [illegible]

The said #16426, Pte. Donald Eric ARMSTRONG made the above Declaration and Oath before me at Camp Borden, Ontario this twentieth day of August One Thousand Nine Hundred & Thirty-eight. at 1230 hours. o'clock ~~xxxxMx~~

† Signature of Officer re-engaging or Justice of the Peace } [illegible] Lt. Col. Comdg. The Royal Canadian Regt.

† To be witnessed by an Officer or Justice of the Peace, as laid down in K. R. & O. for Can. Militia, 1926.

NOTE.—The Medical Certificate on the reverse page must first be duly certified to.

To be attached to attestation paper.

M. F. B. 340

10M—4-36

H.Q. 1772-39-42

MEDICAL CERTIFICATE ON RE-ENGAGEMENT

I have examined the above named* man in accordance with the instructions contained in the Regulations for the Canadian Medical Service and find him† fit Category "A" for His Majesty's Service.

*N.C.O. *or* man.
†Fit *or* unfit.

Signature of Medical Officer } J. Young Capt. R.C.A.M.C.

Dated at Camp Borden, Ontario

this 18 day of August, 1938.

NON-PERMANENT ACTIVE MILITIA OF CANADA

CERTIFICATE OF DISCHARGE

This Certifies that No. 1242, Gdsn. Donald Eric ARMSTRONG
(Rank and Name)

of OTTAWA County of CARLETON

Province of ONTARIO served continuously in the

GOVERNOR GENERAL'S FOOT GUARDS of the Non-Permanent Active Militia of
(Regt. or Corps)

Canada, from the twenty-ninth day of April 1932, to

the twentieth day of August 1935, and is now discharged

therefrom, and that he attended and completed Annual Training for the years

1932, 1933, 1934-35
(Each year separately, in figures)

three years, three months twenty-two days.
(Total number of years, in words)

DE Armstrong
(Signature of Soldier)

Place

Date AUG 27, 1935 19

Commanding
(Sqn., Bty., or Coy.)

Thisle Major

for†Commanding G.G.F.G.
(Regt. or Corps.)

The Governor General's Foot Guards
Ottawa, Can.
AUG 27 1935
ADJUTANT'S OFFICE

†NOTE—Not required in the case of an Independent or Detached Squadron, Battery or Company.

M.F.B. 350
5M—10-31
H.Q. 1772—39—62.

PERMANENT FORCE OF CANADA

ATTESTATION PAPER

REGT. No. 16426.

P.F. UNIT THE ROYAL CANADIAN REGIMENT.

QUESTIONS TO BE PUT BEFORE ATTESTATION

[ANSWERS]

1. What is your surname? ARMSTRONG
2. What are your Christian names? Donald Eric
3. What is your present address? 327 Creighton Street, Ottawa, Ont., Canada
4. What are particulars of your birth? (a) 3.6.14 (b) Ottawa (c) Ontario (d) Canada.
   (a) date, (b) town, (c) township or parish, (d) country.
   If naturalized British subject certificate of naturalization or certified true copy thereof is to be submitted which will be returned after a copy is made and attached to Attestation Paper.
5. Are you a British subject? Yes.
   (If not, to what country do you owe allegiance.)
6. What languages, other than English, do you speak? None.
7. Are you single? Yes. Married? No. or Widower? No.
8. What is your trade or calling? Mechanic.
9. What is your religious persuasion? Church of England.
10. You understand that vaccination, re-vaccination and inoculation are compulsory? Yes.
11. Have you served in any Naval, Military or Air Forces? Yes
    (If so, give particulars of former service.)
    Governor General's Foot Guards.
    From 29-4-32 to 20-8-35.
    3 years 114 days.
    Verified from documents produced — Capt. & Bt. Major. — Signature.
12. Are you willing to be attested in the Permanent Military Forces of Canada? Yes.
13. Have you ever been discharged from any branch of H.M. Forces as medically unfit? No.
14. If so, what was the nature of the disability? N.A.
15. Have you ever offered to serve in any branch of H.M. Forces and been rejected? No.
16. If so, what was the reason? N.A.
17. Are you willing to enlist or re-engage under such conditions as to Pay and Service as may be authorized and laid down from time to time by the Governor in Council Yes.

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, Donald Eric ARMSTRONG, do sincerely and solemnly declare that to the best of my knowledge and belief, the above answers to the foregoing questions made by me are true; and that I am willing to be attested, for general service for the term of three years, provided His Majesty should so long require my services, or until legally discharged, and do understand the nature and terms of this engagement.

Donald Eric Armstrong — Signature of man.

[illegible] L/Cpl. — Signature of witness.

Dated this 21st day of August, 193 5 at Toronto, Ontario.

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Donald Eric Armstrong — 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 Toronto, Ontario this 21st day of August, 193 5

[illegible] — Signature of Magistrate, Justice or Attesting Officer.

Captain & Bt. Major. Commanding, Toronto Station, The R.C.R. — 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

M.F.B. 235.
5 M.—3-32
H.Q. 1772-39-87.

DESCRIPTION OF Donald Eric ARMSTRONG ON ENLISTMENT

AND CERTIFICATE OF MEDICAL EXAMINATION

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 20th day of August 19 35, by the undersigned Medical Board sitting at Ottawa

1. Declared age 21 years 44 days
2. Apparent age 21 years
3. Height 6 feet 5 inches
4. Weight 149 pounds.
5. Chest measurement — Girth when fully expanded 35½ inches; Range of expansion 2 inches
6. Complexion Med. Eyes Hazel Hair Brown
7. Physical Development Good (good / fair / poor)
8. Smallpox marks None
9. Number of Vaccination Marks — Right Arm 0; Left Arm 1
10. When vaccinated last 1927
11. Distinctive marks and marks indicating congenital peculiarities or previous disease None

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

12. Slight defects, but not sufficient to cause rejection

13. The man denies having had (Rheumatism, Tuberculosis, Nervous or Mental disorder. / Epilepsy, Syphilis, Asthma.) (Strike out disease admitted or suspended)

14. We find no evidence of past (Rheumatism, Tuberculosis, Nervous or Mental disorder. / Epilepsy, Syphilis, Asthma.)

We have examined the above named man in accordance with the pamphlet "Physical Standards and Instructions for the Medical Examination of recruits for the Permanent Force of Canada" and he is placed in Category "A"

15.
(a) Vision R. 20/20 L. 20/20
(b) Hearing R. 25 L. 25

.....President.

.....Member. J. Stanley .....Member.

(Any special remarks of Medical Officers may be added below)

Examined at Stanley Barracks, Toronto, Ont. 22/8/35. Fld. Cat. A' Capt. RCAMC.

PARTICULARS OF NEXT-OF-KIN

Name and Relationship	Address	Subsequent Changes
Mrs Kathleen Armstrong (mother).	327 Creighton Street, Ottawa, Ontario.	

CERTIFICATE OF OFFICER COMMANDING UNIT

No. 16426, Private Donald Eric ARMSTRONG having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation, and that his service reckons from the twenty-first day of August, 19 35

Major (Signature of Officer)
Commanding, Toronto Station, The R.C.R.

Date 21st February, 19 36.

Note—Service reckons from date commenced to draw pay. *A.A., Part II, S.S. 100, para. (2).*

Statement of the Services of No. 16426 Name Donald Eric ARMSTRONG

Corps	Squadron, Battery or Company, etc.	PROMOTIONS, DEDUCTIONS, CASUALTIES, ETC.	RANK	DATE	Authority (Pt. II Order) date	Signature of Officers certifying correctness of Entries.
The R.C.R	"B"	Services towards engagement reckons from 21-8-35 Joined at Toronto, Ontario.	Pte.	21-8-1935.	#98, d/ 22-8-35.	Lieut. Capt. & Bt. Major Comdg. Toronto Station The R.C.R.
"	"	Granted ONE Good Conduct Badge.	"	21-8-1937.	#80, d/ 3-9-37.	Commanding, Toronto Station, The R.C.R.
"	"	Re-engaged at Camp Borden Ont., 21-8-38, with effect from 21-8-38.	"	21-8-1938.	#71, d/ 25-8-38.	Major Commanding, Toronto Station, The R.C.R.
R.C.R. (C.A.S.F)	"	Re-attested for R.C.R., C.A.S.F., at Niagara Camp, Ont, and posted to "B" Coy.	"	1 Sep 39.	#4, d/ 12 Sep 39.	Lieut. Comd. "B" Coy. R.C.R.
		Appointed Acting Lance-Sergeant.	Act. L/Sgt.	1-9-1943.	#51, 14-10-43.	Major, O.i-c Records.
RCR	AF	Reverts to rank of Cpl.	Cpl.	26-9-1943.	72/43 RCR	Major O i/c Records
RCR	AF	S.O.S.KILLED IN ACTION	A/L/ Sgt	27-12-1943	RCR #7/1946	Captain Adjt. & Records RCR
		Total Services as above	8	years 129	days	

MILITARY AND FAMILY HISTORY

1. Service at Home and Abroad (including former service of re-enlisted men, when allowed to reckon towards Increased Pay for Length of Service or Pension).

COUNTRY	FROM	TO	YEARS	DAYS	N.B.—The country only to be shown—it is not necessary to show separately the services in the different stations of the same country.
CANADA	21-8-35	27-12-43	8	129	.
		Total.....	8	129	

2. Passed classes of Instruction ..... Passed in English (1st Class) March 1939 D.O.PT.II.NO.59 d/12-6-39 — Initials of Officers Major

3. Campaigns .....

4. Wounded .....

5. Effects of wounds

6. Special instances of gallant conduct.....

7. Medals, Decorations and Annuities Cdn.Vol.Ser Medal(With Clasp)1-3-41 RO 3929/43 — Major

8. Particulars as to Marriage.....

(a) Christian and surname of woman to whom married and whether spinster or widow; (b) Place and date of marriage; (c) Name of officiating Minister or Registrar, and (d) Name of two witnesses.				Date of being placed on Married Roll	Initials of Officers
(a)	(b)	(c)	(d)		

9. Particulars as to Children.....

Christian Name	Date and Place of Birth		Date and Place of Baptism, and Name of Officiating Minister

NOTE—These entries are to be made from time to time as they occur, and initialled by the officer making the entry. Deaths at 8 and 9 to be indicated by deleting in Red Ink, giving date, etc., directly above.

Received ..VI Nov 40.. Checked ..WH.. Card ..✓.. Observations ..✓..

ORIGINAL
DUPLICATE
TRIPLICATE

M.F.M. 2
A.F.B. 271
168M-11-36 (9359)
H.Q. 1772-45-18

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

Unit The Royal Canadian Regiment (CASF) Regimental Number P.16426

CL A30
11 Jan 44

CANADIAN ACTIVE SERVICE FORCE

~~CANADIAN FIELD FORCE~~

ATTESTATION PAPER

OC
A12567

1. Surname ARMSTRONG
2. Christian Names Donald Eric
3. Present address Niagara Camp, Ontario. Canada
4. Date of birth 3 Jun 14
5. Place of birth Canada (Country) Ontario (County or Province) Ottawa (Town or Township)
6. Religion (state denomination) Church of England
7. Trade or Calling Mechanic — Reinfcd
8. Married, Widower or Single Single — D.O. No 44 9 June 43.
9. Name of next of kin Mrs. Kathleen Armstrong
10. Relationship Mother
11. Address of next of kin 84 Maricourt Rd. Val Tetreau, Quebec, Canada
12. Have you served in any Naval, Military or Air Force? Yes
13. If previous war service, state arm, force and regimental particulars Not applicable
14. Do you now belong to or have you served in the Active Militia of Canada? Yes

R.C.R. 21 Aug 35 to 31 Aug 39
(Give unit and date of attestation)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, ...do solemnly declare that the above particulars are true and I hereby engage to serve in the Canadian Field Force as required for the duration of the war now existing between .....and .....and for the period of demobilization thereafter and in any event for a period of not less than one year provided His Majesty shall so long require my services.

Date ....
(Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

D E Armstrong (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 Niagara Camp, Ont. this seventh day of September 1939

..... Signature of Magistrate, Justice or Attesting Officer.

Lieutenant Office or Rank and Unit or appointment.
for Officer Commanding, "B" Coy. R.C.R. (C.A.S.F.)

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

OCCUPATIONAL HISTORY FORM COMPLETED

FINGERPRINTED

Record of Service of ARMSTRONG (Surname) DONALD ERIC (Christian Names) Regimental Number P.16426

QUALIFICATIONS		EDUCATIONAL QUALIFICATIONS	
Military	Nil	Passed in English (1st Class Army Cert.)	
Business or Professional	Nil	High School or Collegiate	Nil (years completed)
Trade or Civil	Mechanic	Graduation or Matriculation	Nil (specify)
Technical	Nil	*College	Nil
Languages	Nil	*University	Nil
			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
1 Sep 39	R.C.R. PF	Joined on appointment Re-attested for R.C.R., C.A.S.F. and posted to "B" Coy.	Private	1 Sep 39	R.C.R. (CASF)	Niagara Camp, Ont	Part II Order #4	12 Sep 39
SOS 12 Jan 40	X	Struck of strength on transfer to H.Q. 1 Cdn Div	Pte	12 Jan 40	RCR	Aldershot Camp. Eng.	R.O.P.T. II No. 12	12 Jan 40
5305		SOS CASF (CANADA) ON EMBARKATION AT HALIFAX ON		18 Dec 39	RCR	Field	Do 4	14 Jan 41
		TOS CASF (OVERSEAS) ON TRANSFER ON 19 Dec 39 AND DISEMBARKED AT GOUROCK ON		30 Dec 39				
	Cert Received	Cert. Received Qualified Sythe Wing S.A.S.	Pte.	19 Jan 41 14 Feb 41	H.Q. Can Corps	Filer		
		Proceeded on Command Small Arms	"	19 Jan 41	HQ Cdn Corps	Do	4	24 Jan 41
X	T.O.S.	T.O.S. HQ 1st Cdn. Div. Ols	Pte	14 Jan. 40	HQ 1st Cd Div	Aldershot	12 ✓	15 Jan. 40
		Promoted A/L/Cpl.	A/L/Cpl	29 Apr. 40	HQ 1st Cdn. Div	Aldershot	109 ✓	29 Apr. 40
		Attchd to #1 CDHU f.a.p. pending auth for SOS	Cpl	8 Apr 41	1 CDHU	Witley	79 ✓	8 Apr 41

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

CERTIFICATE OF MEDICAL EXAMINATION

Name in full Donald Eric ARMSTRONG Date Sept/8/39.

Part 1. Information obtained from the recruit.

1. Age 25 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	D E Armstrong (Signature of Recruit)	

Examiner's remarks *re* above

No Remarks.

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

1. Identification marks or scars. (If operative obtain history.)
Tattoo on left forearm (woman) - Sebourhoea on shoulders.
Tattoo on Rt. forearm (Dancer)

2. Height 6 feet 3 inches. 3. Weight 155 1/2 pounds.

4. Complexion Medium Eyes Hazel 5. Development good ~~Fair~~ ~~Poor~~ Good
Hair Dark Brown.

6. Chest measurement—Girth on full expansion 37 inches
Range of expansion 4 inches

7. Vision, right 20/20 left 20/20 8. Hearing, right Normal left Normal

9. Condition of mouth and teeth Healthy

10. The abnormalities (congenital and pathological) found on examination are as follows

None.

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

Special remarks when category lower than A

President Member Member

VACCINATIONS, INNOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
8-11-39	Recommend for Urine, ears reflexes C+A E Thurnine Williams	11.1.43	T.A.B.T. 1/2 cc
20-11-39	T.A.B. Complete	J.H. Bell Lt.	
17-11-39	X-Ray chest	J.H. Bell, R.C.A.M.C.	
11-12-39	Tetanus Toxoid	Catherine H.	
2-12-39	Vacc.		

Regtl. No..... Rank..... Surname..... Christian Name.....

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. P16426 Rank L/Cpl. Sheet No.

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

Name ARMSTRONG, Donald Eric. P16426.

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
S.O.S.		S.O.S. to Rear Edn. H.Q.	L/Cpl.	14 June 40	1st Edn. H.Q. Div.	Field	1	14 June 40
	T.O.S.	T.O.S. from H.Q 1st. Edn. Div.	L/Cpl.	15 June 40	Rear Edn. H.Q	Field	1	28 June 40
S.O.S.		S.O.S. to 4th Corps.	L/Cpl.	11 July 40	Rear Edn. H.Q	Field	5	19 July 40
	T.O.S.	T.O.S. 4th Corps	L/Cpl	19 July 40	4th Corps	Field	1	9 Aug. 40
		Promoted to A/Cpl. each pay	A/Cpl	1 Sept 40	4th Corps	Field	15	6 Sept. 40
		leave to 6 Jan. 41	A/Cpl	31 Dec. 40	4th Corps	Field	2	10 Jan. 41
		confirmed in rank of Cpl.	A/Cpl	1 Dec. 40	H.Q Edn. Corps	Field	3	14 Jan. 41
		Proceeded on Command Small Arms.	A/Cpl	19 Jan. 41	H.Q Edn. Corps	Field	4	24 Jan. 41
		Returned from Command	A/Cpl	14 Feb. 41	H.Q Edn. Corps	Field	8	21 Feb. 41
S.O.S		S.O.S. to 1 G.H.Q.	A/Cpl.	9 Apr. 41	H.Q Edn. Corps	Field	14	18 Apr. 41
	T.O.S	T.O.S. from H.Q Edn. Corps.	A/Cpl	8 Apr. 41	1 G.H.Q	Witley	81	10 Apr. 41
10-4-41	I.C.I.H.U	T.O.S. I.C.I.H.U from H.Q Edn Corps	A Cpl	8-4-41	I.C.I.H.U	Witley	81	10-4-41
21 July 41	I.C.I.H.U.	proceeded on C.T.S. course # 804 (for N.C.O's. Q.C.)	Cpl.	20-7-41	C.T.S I.C.I.H.U C.T.S	U.K Witley U.K	78 M.O. 16.2 95	24 July 41 21-7-41 31 aug 41
31-8-41	"	Returned from C.T.S. Course 804. Sec 1-A	Cpl.	30-8-41	"	"	" 191	31-8-41
19 Sep 41	O.C.	2nd. Prin. leave. W.W. 10.19.31	Cpl.	15-9-41	I.C.I.H.U.	U.K.	" 203	19-9-41
3-10-41	"	Having attended C.M.G.Q. Course 804 Sec 2) Prof N.C.O's qualifying course - is now shown as qualified Q	Cpl	3-10-41	"	"	" 217	3-10-41
18-12-41	O.C	Posted to R.E. Cpl Instr	"	1-12-41	I.C.D.I.R.U	U.K	" 17	18-12-41
26-12-41	S.O.S	S.O.I.C.D.I.R.U to R.C.R.C.T.U Spl Sec	"	26-12-41	"	"	" 24	26-12-41

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

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

Name.....

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
	TOS	TOS from 1CDIRU (Spec Inc)	cpl	27 Dec 41	RCR	UK	2 ✓	9 Jan 42
		SOS to RCR W.E.	cpl	16 Feb 42	RCR	UK	11 ✓	21 Feb 42
		TOS from RCR (Spec Inc)	cpl	17 Feb 42	RCR	UK	11 ✓	21 Feb 42
		Attd fap ex. pay HMS Northney att'ing Assault Landing Crse to 14 Feb 42	cpl	8 Feb 42	RCR	UK	12 ✓	25 Feb 42
		Priv Leave to 25 Feb 42 W.W	cpl	18 Feb 42	RCR	UK	25 ✓	15 April 42
		Priv Leave W.O.W. to 8 April 42	cpl	1 Apr 42	RCR	UK	32 ✓	13 May 42
		Adm to 9 Fld Amb. Trans to 2CCS	cpl	24 June 42	RCR	UK	45 ✓	3 July 42
		Discharged from 2CCS	cpl	27 June 42	RCR	UK	45 ✓	3 July 42
		Priv. Leave to 19 Aug 42	cpl	12 Aug 42	RCR	UK	69 ✓	9 Oct 42
		Priv Leave to 11 Nov 42	cpl	2 Nov 42	RCR	UK	81 ✓	4 Dec 42
		Aw'd Severe Reprimand AA Sec 40	cpl	4 Dec 42	RCR	UK	1 ✓	5 Jan 43
		Priv Leave to 31 Jan 43	cpl	22 Jan 43	RCR	UK	12 ✓	9 Feb 43
SOS		SOS to 3CIRU Sur-to WE	"	31 Jan 43	RCR	"	13 ✓	43
	TOS	TOS from RCR	cpl	1 Feb 43	3CIRU	UK	4 ✓	9 Feb 43
		Attd fap to RCR to 4 Feb 43	cpl	1 Feb 43	3CIRU	UK	4 ✓	9 Feb 43
		P/Leave (with ma) (9 days)	Cpl	21-29 Apr 43	"	"	65	22 Apr 43
SOS		SOS to RCR (Fd Lmt) Dmd #9443	cpl	20 May 43	"	"	88 ✓	20 May 43
		TOS from 3CIRU	cpl	21 May 43	RCR	UK	39	26 May 43

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

Statement of the Service of No. P-16426 Rank ..... Sheet No. .....

Name Armstrong DE

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
		S.O.S Cdn Army (UK) Embarked		13 June 43				
		T.O.S Cdn Army		14 June 43				
	✓	Disembarked	Cpl	10 July 43	RCR	N.A	53	27 July 43
	✓	Appt'd A/L/Sgt ✓	A/L/Sgt	28 Aug 43	RCR	NA	65	16 Sept 43
(C2)	✓	wounded in Action	A/L/Sgt	3 Oct 43	R.C.R	N.A.	70	18 Oct 43
(C.26) S.O.S.	✓	S.O.S. to R.C.R X-3 List on adm to Hosp	Cpl	3 Oct 43	RCR	NA	71	23 Oct 43
(C.26)	T.O.S. ✓	T.O.S. from RCR on adm to Hosp	Cpl	4 Oct 43	X-3 List RCR	NA	40A	23 Oct 43
(C.26)	✓	Adm 4 CFd Amb Trfd out	Cpl	3 Oct 43	X List RCR	NA	41A	25 Oct 43
(C.26)	✓	Adm 5 CGH 5 Oct Disch	Cpl	8 Oct 43	X List RCR	NA	46A	6 Nov 43
(C.26)	✓	Adm 7 C.C.S.	Cpl	4 Oct 43	X List R.C.R	NA	48A	9 Nov 43
(C.26)	✓	Adm 15 CCS	Cpl	3 Oct 43	X List RCR	NA	49A	10 Nov 43
(C103)		Adm. 1 CMRS	Cpl.	8 Dec 43	X LIST RCR	NA	68A.	31 Dec 43.
(C2)	✓	Posted to RCR X-4 List Bn from X-3 List Disch Hosp	Cpl	13 Dec 43	X List RCR	NA	66A	26 Dec 43
Trips Compl	✓	Killed CM 7		27 Dec 43			CL A 380 11 Jan 44	
	✓	Disch from CMRS.	Cpl.	10 Dec 43	RCR	NA	2-A	13 Jan 44.
	✓	Appt'd. A/L/Sgt	A/L/Sgt.	18 Dec 43	RCR	NA.	7	24 Jan 44
SOS	✓	SOS. Killed in Action	A/L/Sgt.	27 Dec 43	RCR	NA	7	24 Jan 44

H.Q.832-A-236 (Records - C)

27th January, 1944.

Mrs. Kathleen Armstrong,
84 Maricourt Road,
Hull, Quebec.

Dear Madam:

I deeply regret to inform you that your son, P16426 Lance Sergeant Donald Eric Armstrong, gave his life in the Service of his Country in the Mediterranean Theatre of War on the 27th day of December, 1943.

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

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

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

H. F. G. LETSON
Major - General
Adjutant - General

JAN 24 1944

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

ACB/MEB

19

File No 832-A-236

R E B U R I A L

NO P.16426

RANK L/Sergeant

NAME ARMSTRONG, D.E.

NAME OF CEMETERY Morro River Cemetery

LOCATION OF CEMETERY Ortona, Italy

GRAVE LOCATION Plot 5, Row B, Grave 16

AUTHORITY 54-27-88-2 Vol. 14

Reburial list.

45

CFA 187
40/P & S/2180 (4066)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME ...P-16426..L/Sgt...Armstrong,..D.E.....(Dec'd).....

RECEIVED FROM .....Cdn..Sec...G.H.Q...2nd..Echelon,..C.M.F.....

CHECKED BY ...B-134006 Pte. Burden, R.E.
H-37449..Pte...Cathcart,..M.O.... DATE ....21..Mar..44.....

1	Money Belt	13-10-44
1	Spoon (Souvenir)	H. Joly.
1	Book (Italy)	
1	Book (Soldiers Guide To Italy)	1 pl reg
1	Cotton Vest	
x1	P.O. Savings Book (To O. i/c Estates)	(no letters)
	Snapshots OK	
1	10 Franc Note (Souvenir)	
1	Wallet	
1	Bottle Opener in Tartan Case	
	Case 115 L	
	4-11-44	
		2 Sheets,

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

TRIPLICATE — with effects.

W. E. Fulmer, Capt
.....
for OC 1 Cdn KSD

CFA 187
40/P & S/2180 (4066)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME ....P.16426 L/Sgt. Armstrong D.E. (Dec'd).....

RECEIVED FROM .....Cdn. Sec. GHQ 2nd Echelon C.M.F.....

CHECKED BY .....C.42660 Pte. Haslett W.J. H.64818 Pte. Davidson E..... DATE .....26 Apr. 44.....

1	Pr. Cotton Shorts		
1	Picture Postcard		

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

TRIPLICATE — with effects.

.....
for OC 1 Cdn KSD

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER P16426 RANK L/Sgt. SERVICE UNIT The Royal Canadian Regiment (CA)

NAME ARMSTRONG, Donald Eric

DATE OF BIRTH
DAY 3rd MONTH June YEAR 1914

MARITAL STATUS Single

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Mother NAME Mrs. Kathleen Armstrong,
ADDRESS 84 Maricourt Road, Hull, Quebec. ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. Canrecords 4304 H.Q.832-A-236

CASUALTY DETAILS Killed in Action DATE 27-12-43

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

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

DATE 20-1-44

18

OFFICER I/C RECORDS

5

COPY FOR C.R. FILE

832-A-236
(Records G)

CERTIFICATE OF DEATH

THIS IS TO CERTIFY that according to information received at the Department of National Defence from the overseas authorities, No. P.16426, Lance Sergeant Donald Eric ARMSTRONG, of the Royal Canadian Regiment, Canadian Army, was killed in action on the 27th of December, 1943.

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

Department of National Defence,
Ottawa, Canada.
February 15th, 1944.

RECORDS OFFICE OVERSEAS.

CANADIAN MILITARY HEADQUARTERS.

GRAVES REGISTRATION CARD.

NAME..ARMSTRONG,Donald Eric.8..... PLACE & DATE OF BIRTH....Ontario. 3 JUN 1914.....

RANK....L/SGT..... REGIMENTAL NO....P.16426.....

UNIT....ROYAL CANADIAN REGT..... NEXT OF KIN....MOTHER Mrs. Kathleen ARMSTRONG.

ADDRESS.....Quebec.....

.....

PARTICULARS OF HOSPITALIZATION

DATE OF ADMISSION..... NAME & LOCATION OF HOSPITAL.....

DIAGNOSIS.....

PARTICULARS OF DEATH.

DATE OF DEATH..27 DEC 43..... PLACE OF DEATH...Italy.....

HRS.....

CAUSE OF DEATH.....KILLED IN ACTION.....

PARTICULARS OF BURIAL.

DATE OF BURIAL.....29 Dec 43..... CEMETERY...R. side of road MR.316154... SH.141-2

DEATH CERTIFICATE NO..... DATE OF REGN OF DEATH CERTIFICATE.....

LOCATION OF CEMETERY.....

..... PLOT NO..-..ROW.....-....GRAVE..4.....

RELIGION..CHURCH OF ENGLAND.....

SEP 18 1944

DATE.....

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

(B.E.WILLAN) Capt.
For (R.T.E.HICKS-LYNE) Lt.Colonel,
Officer i/c Records,
Canadian Military Headquarters.

Posted 26-10-44

36

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

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

4
ARMY

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Donald Eric (CHRISTIAN NAMES) ARMSTRONG (SURNAME)

REGISTER NO. D-1395
FILE NO. 832-A-236
DATE 22-6-45
SERVICE NO. P-16426
FINAL RANK OR RATING A/L/Sgt.
DATE OF DISCHARGE 27-12-43

PAYEE Mrs. Kathleen ARMSTRONG,
ADDRESS 84 Mariecourt Rd., Val Tetreau, Hull - P.Q.

DATE OF TERMINATION OF OVERSEAS SERVICE 27-12-43

		$	¢
A. TOTAL QUALIFYING SERVICE	1560 NO. OF DAYS 1570/30 EQUAL TO 52 COMPLETE PERIODS AT $7.50	390.00	
B. QUALIFYING OVERSEAS SERVICE	No. of Days 1470 LESS 10 INELIGIBLE DAYS, EQUAL TO 1460 DAYS @ 25c. PER DAY	365.00	
	SEE PAR. 2 OVERLEAF FOR EXPLANATION	755.00	

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	$	1.90
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$	1.25
ADDITIONAL PAY	$	
	$	
	$	
DEPENDENTS' ALLOWANCE 1/30 OF $	$	
TOTAL	$ 3.15	X7 = $ 22.05
NO. OF DAYS 1470/183		X$ 22.05 = 177.12

RECEIVED
JUN 5 1945
WAR SERVICE GRATUITY DIVISION, ARMY TREASURY

D. WAR SERVICE GRATUITY 932.12

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

F. TOTAL AMOUNT PAYABLE 932.12

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
KRM	

TREASURY

CHECKED BY	DATE
	6-7-45

SERVICE REPRESENTATIVE

COMPUTATION OF WAR SERVICE GRATUITY

MEMBER'S NAME Donald Eric (Christian Names) Armstrong (Surname) — Register No. D1395

PAYEE'S NAME Mrs. Kathleen (Christian Names) Armstrong (Surname) — File No. 832-A-236

ADDRESS 84 Mariecourt Road — Date 20-6-45

Val Tetreau — Service No. P16426

Hull — P.Q. — Final Rank A/L/Sgt.

DATE OF TERMINATION OF OVERSEAS SERVICE 27-12-43 — Date of Discharge 27-12-45

	AMOUNT $	c
A. TOTAL QUALIFYING SERVICE No. of day 1570 / 30 = 52 (10) Periods @ $7.50	390	00
B. QUALIFYING OVERSEAS SERVICE No. of days 1470 less 10 Ineligible days, equal 1460 Days @ 25c per day	365	00
	755	00
C. SUPPLEMENT FOR OVERSEAS SERVICE Daily Rate of Pay $ 1.90 Subsistence Allowance $ 1.25 Additional Pay $ ..... Dependents' Allowance 1/30 $ ..... $ ..... TOTAL $ 3.15 × 7 = $ 22.05 No. of Days 1470 / 183 × $ 22.05	177	12
D. WAR SERVICE GRATUITY Computed By Yates	932	12
E. DEDUCTIONS Overpayment of (1) Pay & Allowance $ ..... (2) D.A. & A.P. $ ..... Other Deductions $ ..... Entered By WRBS		
F. AMOUNT PAYABLE (This amount is payable in 1 monthly instalments of $ 932.12 each)	932	12

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

$ ..... × 30 = $ .....

REMARKS

From L/Sgt 18 Dec 43

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

The Administrator of Estates.

Regimental No.....P.16426.....Rank....L/Sgt.....

.....ARMSTRONG.....Donald Eric.....
Surname Christian Names

Unit.....The Royal Canadian Regiment (CA).....

Date of Death.27-12-43.....Place of Death.Overseas(Mediterranean).....

Next-of-kin Mrs. Kathleen Armstrong....Relationship....Mother.....

Address..84 Maricourt Road, Hull, Quebec.....

.....

.....

N.F.M.5....Copy herewith.....

Will.....Original Will d/1-12-39, herewith.....

Date.....Feb. 3rd. 1944.

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

KVB/JEG

M.F.M. 10
160 M—8-39 (1706)
H. Q. 1772-45-18.

FORM OF WILL No. 1

To be used by a Soldier desirous of leaving a portion of his personal estate to one person, and the balance of his personal estate to another person

I, Donald Eric ARMSTRONG (Name in full)

Number P-16426 of the C.A.S.F. Canadian Field Force

"B" Coy. The Royal Canadian Regiment, C.A.S.F.
(Unit or Corps) (Give full title of Unit)

do hereby revoke all former Wills by me made, and declare this to be my LAST WILL. I bequeath my personal estate consisting of personal effects and pay

(Here describe fully personal estate)

unto my mother
Mrs. Kathleen Armstrong
84 Maricourt Rd.
Val Tetreau , Hull, Que. Canada.

Name and Address of person or persons to whom it is to go and **relationship.**

absolutely, and the residue of my personal estate and everything that I can give or dispose of

(Here describe remaining assets)

unto

Name and Address of person or persons to whom it is to go and **relationship.**

NOTE.—If Soldier owns **Real Estate,** Form 10A should be completed.

N.B.—Personal Estate includes Pay, Effects, Money in Bank, Stock Certificates, etc., in fact everything except Real Estate.

IN WITNESS WHEREOF I have hereunto set my hand this

IMPORTANT NOTE
This must be signed and dated by the soldier himself.

First day of December A.D. 1939

Pte Donald Eric Armstrong
(*Signature of Soldier*)

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.

1st witness to sign here Edwin H. Hunter

Address in full "B" Coy The R.C.R. Valcartier Camp P.Q.

2nd witness to sign here William Samuel Mull

Address in full "B" Coy. The R.C.R. Valcartier Camp. P.Q.

FOR COMPLETION AND RETURN BY

Form P. 64

Mrs. Kathleen Armstrong,
84 Maricourt Road,
HULL, Quebec.

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

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

and the following number quoted:—

H.Q. 832-A-236 FD 10

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

April 5th, 1944

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

ARMSTRONG, Donald Eric, L/Sgt.,

No. P.16426 Canadian Army.

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.

"Rec'd 24/7/44" by hand

R.G. Phelan
(R.G. Phelan) Capt.,
for (L.M. Firth) Lt.-Colonel.
Administrator of Estates.

RGP:TL

M.F.W. 77
5M—1-44 (3371)
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.....		X		
2	Children of the Deceased and dates of their Births.....		X		
3	Father of the Deceased.....		~~Col. J. Alex~~ Armstrong. C.M.G. C.B.E.	68	died Nov. 2nd. 1928.
4	Mother of the Deceased.....		Bertha Kathleen Armstrong.	62	84 Marieconi- Rd. Val Tetreau Hull. Que.
5	Brothers of the Deceased	Full Blood	S/L Gordon Armstrong	31	Edm Army Overseas.
			Robert Bruce Armstrong	28	Kemptville Ont.
		Half Blood	Clifford A. Armstrong	21	died 1913
			Thomas Welbur "		" 1914.
			Walter Meryl. "		(do not Know address.
6	Sisters of the Deceased	Full Blood	Doreen Elsie.	25	84 Marieconi Rd Hull
			Evelyn Kathleen.	24	"
		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
	Clifford A. 1913 Thomas Welbur 1914.				

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Donald Eric Feilde Armstrong
9	Date of his birth.	June 3rd 1914
10	Place and date of his marriage.	X
11	Place and date of his parents' marriage.	Cellarton. July. 1920.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	102 James St. Cellarton.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) (b) (c) (d) Ontario all his life
14	Nature of employment before enlistment.	Permanent Force since 1935 — R.C.A.F.
15	State whether he owned the premises in which he lived, and, if so, where situated.	
16	Name place where deceased stated he intended to make his permanent home.	

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	yes. (Army)
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	none that I know of except the back line pay.
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.	$200 left to his mother already received
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.	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.

Bertha Kathleen Armstrong ..... Signature of Informant

84 Marieeoural Rd. Hull ..... Address

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.

CERTIFICATE

I hereby certify that to the best of my knowlege and belief Mrs Bertha Kathleen Armstrong { Name of informant } is the* mother of the Deceased above described, and I believe the above Declaration and the Statement of Relatives and of Particulars made by the Informant and signed in my presence to be complete and correct.

*See above.

Dated at Ottawa, Ont. this 26th day of July 1944

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces. S.J. Hepenstall ..... Qualification Major - Canadian Army

Address Directorate of Records - NDHQ Ottawa

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

Donald told me several times he had possessed to me. A copy of his will made at A.O.C in England. He sent me. To every month - until June 1943. To help me. Then he applied to get - to where I was. Then he left England for Sicily before I received. Consequently Ohio - money I had held - up. He afterwards broke - & notified me he was returned. As soon as he arrange errands - and - were called attend to it -.

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY

Name: ARMSTRONG, Donald E., No.: P.16426
Surname Christian Names

Rank: L/Sgt., Unit: C.A. O/S, Date of Death: 27-12-43

AMOUNT

L.P.C. ..... $ 285.11

Date: 3-10-44

Other Credits .....

Total 285.11

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
all	Mother	Mrs. Bertha K. Armstrong, 84 Mariecourt Rd., HULL, Quebec. (Sole beneficiary under will)	285.11

P4. TO TREAS.
14-12 mw

TO BE FORWARDED BY REG. MAIL DIRECT.

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	$285.11

CLASSIFIED BY
Original Signed by
K. L. McCUAIG

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by
L. M. FIRTH

(L. M. FIRTH) Lt.-Colonel
Administrator of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

50M—8-44 (5426)
H.Q. 1772-80-2

FORM 6

This form if placed in an envelope, marked "Dominion Statistics—Free, penalty for improper use $300," and properly addressed will pass through the mail "FREE"

PROVINCE OF ONTARIO—CERTIFICATE OF REGISTRATION OF DEATH

1. PLACE OF DEATH County or District of IN THE FIELD (ITALY) Township of .....

If in City, Town or Village ..... (Name) Street ..... (If death occurred in a hospital or institution, give the name instead of street and number) House No .....

2. LENGTH OF STAY (in years, months and days)
(a) In City, Town or Township where death occurred ..... (b) In Province ..... (c) In Canada (if immigrant) .....

3. PRINT FULL NAME OF DECEASED ARMSTRONG (Family name) Donald Eric (Given name or names in usual order)

RESIDENCE No. ..... Street ..... City, Town, Village or Township Niagara Camp Province Ontario
(Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

4. Sex	5. Nationality (Citizenship)	6. Racial Origin	7. Single, Married, Widowed or Divorced (Write the word)
M			Single

8. BIRTHPLACE Ontario (Province or Country)

9. DATE OF BIRTH June (Month) 3rd (Day) 1914 (Year)

10. AGE in	Years	Months	Days	If less than one day old
	29			....hrs. or....min.

OCCUPATION

11. Trade, profession or kind of work as **spinner, teamster, office clerk,** etc. Mechanic

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

13. Date deceased last worked at this occupation ..... **14.** Total years spent in this occupation .....

15. If married give name of wife or husband of deceased .....

FATHER

16. NAME Deceased

17. BIRTHPLACE ..... (Province or Country)

MOTHER

18. MAIDEN NAME .....

19. BIRTHPLACE ..... (Province or Country)

20. Person giving information sign here .....
Address Director of Records, (C.S.)
Relationship to deceased Dept. of National Defence.

21. Place of Burial, Cremation or Removal Italy
Date of burial or removal .....

22. Burial Permit was issued by .....
Address .....

23. UNDERTAKER ..... (Name and address)

MEDICAL CERTIFICATE OF DEATH

24. DATE OF DEATH December (Month) 27 (Day) 19 43 (Year)

25. I HEREBY CERTIFY that I attended deceased from:
.....19.....to.....19.....
and last saw h.....alive on.....19.....

CAUSE OF DEATH

I.
Immediate cause Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc. (a) Killed in action

due to

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

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

PHYSICIAN Underline the cause to which death should be charged statistically

26. If a communicable disease is mentioned on this certificate, give (a) Date of appearance .....19..... (b) Duration of disease .....days

27. If a woman, was the death associated with pregnancy? .....

28. Was there a surgical operation? .....Date of operation .....19.....
State findings .....Was there an autopsy? .....

29. If death was due to external causes (violence) fill in also the following:—
Accident, suicide or homicide? .....Date of injury .....19.....
(State which)
Manner of injury .....
(How sustained)
Nature of injury .....
Specify whether injury occurred in **industry,** in **home,** or in **public place** .....

Signed by .....**M.D.**
Address ..... **Date** .....19.....

30. Division Registrar's Record No. .....

31. Filed .....19..... .....
(Division Registrar)

Every item of information should be carefully supplied. (See reverse side for instructions)

THIS FORM MUST BE FILED FORTHWITH WITH THE DIVISION REGISTRAR OF THE DIVISION IN WHICH THE DEATH OCCURRED BEFORE A BURIAL PERMIT CAN BE ISSUED

WRITE PLAINLY WITH UNFADING INK
THIS IS A PERMANENT RECORD

H.Q. 832-A-236
R. 4 (B).

19th June, 1947.

Mrs. Kathleen Armstrong,
84 Maricourt Road,
Hull, Quebec.

Dear Mrs. Armstrong:

I am forwarding herewith a photograph of the grave and marker over the burial place of your late son, P16426 Lance Sergeant Donald Eric Armstrong, the location of which is grave 16, row B, plot 5, Morro River Cemetery, Ortona, Italy.

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

Yours faithfully,

for H.M. Jackson, Lt.-Col.,
Director of Records,
for Adjutant-General.

Encl.

/EMA

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 ARMSTRONG, Donald Eric. (b) Reg'l. No. P.16426
2. (a) Arm of service Army (b) Unit R.C.A.R. (c) Rank Cpl.
3. (a) Date of birth 3 Jun.1914 (b) Have you any dependents? Yes (c) Place of residence at time of enlistment Niagara Camp, Ont.
4. (a) Place of enlistment Toronto (b) Date of enlistment 1 Sep.1939.

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school Not stated (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.) Grade 9.
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 Dominion Govt of Canada. Address Ottawa, Ont.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Dept. of National Defence.
20. (a) Your specific occupation Soldier (b) Number of years' experience at this occupation with any employer 4 yrs.
21. (a) Did your employer promise definitely to give you employment on discharge? (b) Did your employer refuse to promise you employment on discharge? (c) Do you wish to return to your former employment? 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? (c) If so, in what kind of farming?
25. (a) Were you born on a farm? (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 Permanent Force - Ordnance.

DATE 9 June 1943 SIGNATURE for Officer i/c Records, C.M.H.Q.

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER [illegible] L/Sgt.

SERVICE UNIT The Royal [illegible] Regiment (CA)

NAME ARMSTRONG, Donald Eric

DATE OF BIRTH
DAY 3rd MONTH June YEAR 1914

MARITAL STATUS Single

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

NAME Mrs. Kathleen Armstrong,
ADDRESS
D.A.B.

ADDRESS 84 Mariocurt Road, Hull, Quebec.

ADDITIONAL PERSON TO BE NOTIFIED

ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. Canrecords 4304 H.Q.832-A-236

CASUALTY DETAILS Killed in Action

DATE 27-12-43

30

N

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

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

DATE 20-1-44

OFFICER I/C RECORDS

6

COPY FOR DOCUMENT FILE

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~~ THE CANADIAN ACTIVE SERVICE FORCE

INSTRUCTIONS.

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

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(1) Name of Officer or Soldier ARMSTRONG, DONALD ERIC

(Surname first—Christian names in full—Block capitals)

(2) Regimental Number P.16426

(3) Unit The Royal Canadian Regiment (C.A.S.F.)

(4) Are you married? No.

(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? No.

(8) Have you any children? No.

If so, give number of boys and girls N.A.

Also their names and ages N.A.

(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 N.A.

Postal Address

(SEE OTHER SIDE).

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife? No.

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

(11) Is your father alive? No.

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.A.S.F.~~ C.A.S.F. N.A.

Also state reason he has no other means of support N.A.

(14) Is your mother alive? Yes.

If so, state name and address Mrs. Kathleen Armstrong
84 Maricourt Rd., Val Tetreau, Quebec.

(15) If your mother is a widow, are you her sole support? No.

(16) If sole support of widowed mother—state what amount per month you have given her prior to joining ~~C.A.S.F.~~ C.A.S.F. N.A.

Also state reason why she has no other means of support N.A.

(17) Are you insured? Yes.

If so, in what Company? Sun Life Assce. Co.

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.

E E Armstrong
(Signature of officer or man)

Date 11th September, 1939

W. J. Snook Lieutenant,
for Officer Commanding "B" Coy. R.C.R.(C.A.S.F)

Date 11th September, 1939.