Smaill, Walter Douglas
R94442 Part 1

CALLED OUT FOR SERVICE UNDER G.O.139/39.

FINGER-PRINTED

ORIGINAL
DUPLICATE
TRIPLICATE

M.F.M. 1
100M—5-40 (5235)
H.Q. 1772-39-1644

OCCUPATIONAL HISTORY FORM COMPLETED

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

Unit NO.4 DISTRICT DEPOT CA. Rank 2/Lieutenant

Personal No. ..... Name Walter Douglas SMAILL

CANADIAN ACTIVE SERVICE FORCE

ATTESTATION PAPER

OFFICER'S DECLARATION PAPER

Also applicable to Nursing Sisters

1. Surname SMAILL
2. Christian Names Walter Douglas
3. Present Address 4478 St-Catherine Street West, Apt-11, Montreal Que. Canada
4. Date of birth 19 November 1916
5. Place of birth Canada (Country) Manitoba (County or Province) Winnipeg (Town or Twp.)
6. Religion (state denomination) United Church of Canada
7. Profession or occupation Accountant
8. Married, widower or single Single
9. Name of next of kin Mr Walter SMAILL
10. Relationship Father
11. Address of next of kin 4478 St-Catherine Street West, Apt-11, Montreal Que. Canada
12. (a) State unit of Active Militia in which you are serving or have served 3rd Bn BW., (RHR) RF.

(b) Present rank Second Lieutenant

13. State particulars of former war service None

I, WALTER DOUGLAS SMAILL do solemnly declare that the above particulars are true, that I hold His Majesty's Commission in the Canadian Militia and I am willing to serve in the Canadian Active Service Force if, when and so long as required.

Date 16-9-42 W. Douglas Smaill 2/Lt.
(Signature and rank)

CERTIFICATE OF OFFICER COMMANDING

The application of WALTER DOUGLAS SMAILL (Rank and name) for appointment to the NO.4 DISTRICT DEPOT CA. (Unit) with the rank of 2nd. LIEUTENANT and appointment PROVISIONAL REINFORCEMENT OFFICER (was) (is) recommended, appointment to date from 16 SEPTEMBER 1942 has been approved. is recommended for approval.

The B.W. (RHR) of Canada.

Authority H.Q.332-5-359(Pers.2B1)d/4 September 42.

(Signature of O.C.) (Rank)

(S. ECHENBERG, E. D.) Colonel,
COMMANDING No. 4 DISTRICT DEPOT, (CA).
(Unit)

Date 16 SEPTEMBER 1942

Record of Service of SMAILL WALTER DOUGLAS
(Name)

Active Militia Unit 3rd. Bn. B.W.(RHR) (RF).

Rank 2/Lieutenant Date of Rank 12th. Dec., 1940.

Highest rank for which qualified by examination Lieutenant

Languages ENGLISH

University or College Degrees NIL

Civil Technical Training or qualifications (specify) ACCOUNTANT

Staff College NIL

Militia Staff Course NIL

Advanced Course NIL

Other military qualifications or special courses (specify) 3rd. Bn (BW) (RF) 2/Lieutenant

Report Date	Report From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date of appointment to Field Force	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
9/4/42	Black Watch 3rd Bn. HQ-MD4.	Joined on appointment To A & T Staff	2nd Lt.	9/4/42	Black Watch 3rd Bn.	Montreal	Part II No.10	1942 10th April,
12-5-42.	M11-S-998.	Promoted to the rank of Lieut and to draw pay and allowances of that rank and to remain called out for service under G.O. 139-39 on the A & T Staff of 3 RHC.	Lieut.	22-4-42.	3 RHC	Montreal	Order No. 14	15-5-42.
13-4-42.	DS&TO.	Granted subsistence allowance of $1.70 per diem in lieu of R and Q	Lieut.	9¾-4-42	3 RHC	Montreal		
27-7-42	3 RHC	Ceases to draw Subs allowance while at Farnham Summer Camp.	Lieut.	28-6-42 25-7-42	3 RHC	Montreal	Order No. 23	27-7-42.
27-7-42	"	Continues to draw subs allowance $1.70.	Lieut	26-7-42	"	"	"	"
7-9-42	"	Proceeded to CABTC No.48 St.Johns,Que and is attached there for rations,quarters and duty, continuing under G.O./139 1939 pending further instructions from H.Q.MD.4	"	7-9-42	"	"	Authority: M.11-5-998 APSO d/8 Sept.1942.	
6-9-42	"	Ceases to draw subsistence allowance	Lieut.	6-9-42	"	"	Pt. II No. 34	10-9-42

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

Mtl.

CERTIFICATE OF MEDICAL EXAMINATION

Name in full SMAILL WALTER DOUGLAS Date 8 Apr. 42.

Part 1. Information obtained from the applicant.

1. Age 25 2. Have you ever suffered from any of the following diseases?

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

W. Douglas Smaill
Signature of Applicant

Examiner's remarks *re* above

PART 2. Information obtained by medical examination. The applicant must be stripped.

1. Identification marks or scars. (If operative obtain history.)
2 vac. left arm.

2. Height 5 feet 10½ inches. 3. Weight 179 pounds.
4. Complexion Fair Eyes Blue Hair Fair
5. Development Good (Good / Fair / Poor)
6. Chest measurement—Girth on full expansion 38 inches.
Range of expansion 3 inches.
URINE 86314
X-RAY 116243
7. Vision, right 20/80 left 20/40 8. Hearing, right c.v. 20 left c.v. 20
9. Condition of mouth and teeth Good
10. The abnormalities (congenital and pathological) found on examination are as follows
COLOR VISION ISHIHARA (CN) EARS NOSE THROAT & REFLEXES NORMAL
DR. W.G. DALPE.
R.E. - 4.00 x 15 = 20/20
L.E. - 2.50 x 165 = 20/20
P. OSTIGUY OCULIST
LT-COL RCAMC

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 Applicant 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

H. Aubry Major, President — J.F. Mac Iver Capt., Member — G. Garon M.D., Member

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
SEP 16 '42	T.A.B.T. W. Chapman Lt		Y.O.B. P U L H E M S: 16 1 1 1 1 1 1 1 — Jm Hubecki Maj
16/VIII/42	1/2 cc M.A. Read Capt		
SEP 16 '42	Vac	4.8.43	Cat A. Confirmed
5/8/42	Recheck Cat. A. cmb. marked overleaf		
4/5/43	Vac 1cc M.A. Read Capt		
27-7-43	Y.O.B. P U L H E M S: 16 1 1 1 1 1 1 1		

Rank 2/LIEUTENANT Surname SMAILL Christian Name WALTER DOUGLAS

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. ..... Rank 2/Lieut. ..... Sheet No. .....

Name SMAILL Wlater Douglas.

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
		Ceases to be attached to A-31 C.B.D.C. for R.O.P. & Dn on completion of 2 Draft Course.	2/Lt	15-12-42	A-31	Vernon	A6 58	15-12-42
31-12-42	2 RHC	Ceases to be attached for all purpaos s except pay to A-31 Canadian Battle Drill Training Centre, Vernon, B.C.	2/lt.	15-12-42	2RHC	Halifax, N.S.	2RHC Pt.I 117-A	28-12-42
11-1-43	2 RHC	Qualified Q-2 at the Canadian Battle Drill Training Cener Course held at Vernon B.C.	"	15-12-42	2 RHC	"	" " 4-A	9-1-43
25-5-43	2RHC	Attached for all purpos es excpet pay to A-14 A.I.(R) T.C. Aldershot, N.S. for (4) w eks while attending a qualifying course in Advanced Training.	2/Lieut.	22 May 43	"	"	" " " 102	24-5-43
		Attached for all purposes except pay while attending Officers Qualifying course.	"	22 May 43	#14 IT	Aldershot, NS.	Pt.II #126	25 May 43
		Ceases to be attached for all purposes except pay on completion of course.	"	18 Jun 43	"	"	" #147	18 Jun 43
29-5-43	2 RHC	Qualified as Motorcyclist Class III	"	22-4-43	2 RHC	HALIFAX NS	2 RHC 91	9-5-43
8-7-43	2 RHC	Qualified for rank of Lieut.(inf)(Rifle)AF	Lieut.	18-6-43	2 RHC	"	" " 127	28-6-43
8-7-43	2 RHC	Ceases to be attached to A.14 A.I.(R)T.C.	"	19-6-43	"	"	" " 127	28-6-43
10-7-43	2 RHC	Pt.II Order 127 d/28 Jun 43 amen.to read	2/Lieut		"	"	" " 128	29-6-43
10-7-43	2 RHC	Pt.II Order 127 d/2 8 Jun 43 amended to inc. "Auth:A.14 A.I(R)T.C. Pt.II 150 d/22-6-43	"		"	"	" " 128	29-6-43

~~411 - 11 TRANSIT CAM~~ 168 48 #1 TRANSIT WINNIPEG 5 309 128 29-6-43

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

Name SMAILL WALTER DOUGLAS.

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
22-9-42	4 D.D.	T.O.S. on being appointed 2/Lieut.Prov. Reinf. Officer 2 Inf. Rifle CA while on command to CA (B) TC 48, St.Johns Que.	2/Lieut.	16-9-42	4 D.D.	Mtl.Sth.	4DD PT II 224	16-9-42.
22-9-42	4 D.D.	P.O.C. to CA (B) TC 48 St.Johns Que.,	"	16-9-42	"	" "	" " 224	16-9-42.
22-9-42	4 D.D.	Part II Order No.224 d/16-9-42 sheet 3, para 26 STRENGTH INCREASE unit is amended to read:- "GEN LIST CA" and not as shown.			"	" "	" " 225	17-9-42.
22-9-42	4 D.D.	Part II Order No.224 dated 16-9-42 sheet 3, para 26, Unit is amended to read:- "THE B.W. (RHR) of Canada.	"		"	" "	" " 229	22-9-42.
22-9-42	4 D.D.	Part II Order No.225 dated 17-9-42, sheet 4, para 39, is "CANCELLED".	"		"	" "	" " 229	22-9-42.
23-9-42	4 DD	Part 11 Order No 224, d/16 Sep 42, para 26, s sheet 3, "STRENGHT INCREASE" Unit is amended to read: BW (RHR) Can Ca. and not as shown...	"		"	" "	" " 229	22-9-42
23-9-42	4 DD	Part 11 Order No. 225, d/17 Sep 42, para 39, sheet 4, "AMENDMENTS" is cancelled.	"		"	" "	" " 229	22-9-42
9-11-42.	4 D.D.	Ceases to be On Command to CA (B) T.C.48 St.Johns Que., and is S.O.S. on transfer to his Unit, 2nd Bn. The B.W. (RHR) of Canada, Sussex, N.B.	"	4-11-42.	4 D.D.	Mtl.Sth.	4 DD PT II 270	9-11-42.
10-11-42	2RHC	T.O.S. on transfer from C.A.B.T.C. No. 48 St.Johns Que.	"	5-11-42	2RHC	Sussex N.B.	2RHC Pt.II#92-A	7-11-42
18-11-42	2RHC	Attached for all purposes except pay to C.B.D.T.C. Vernon B.C.	"	19-11-42	2RHC	Sussex N.B.	2RHC Pt.II#98-A	18-11-42
	2RHC	To be prov. 2nd Lieut. Prov.2nd Ly. W.D. Smaill from No.4 DistrictDepot Montreal	2/Lt.	5-11-42	2RHC	Halifaxl N.S.	2RHC Pt.II 103-A	1-12-42

Regimental No..... Rank 2/ Lieut. Sheet No.....

M.F.M. 1 & 2 (a)
250M—5-42 (4722)
H.Q. 1772-39-1646

Name SMAILL Walter Douglas

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc.—	Rank Shown	Effective Date	Unit	Place	Authority D.O. Number	Authority Dated
4-8-43 2 RHC Qualified as Driver I/C (Wheeled) Class III	2/Lieut.	14-7-43	2 RHC	HALIFAX NS	144	27-7-43
12-8-43 2 RHC Having qualified for the rank of Lieut. Inf. (R) AF at A.14 A.I.(R)T.C., is promoted to the rank of Lieut.	Lieut.	18- 6-43	"	DEBERT "	152	12-8-43
12-8-43 2 RHC SOS on transfer to No. 1 Transit Camp	"	12-8-43	"	" "	152	12-8-43
		1 b 8 '43	#1 TR NCIT	WINDSOR N.S	209	16 8 43
ATT. NO. 1 TRANSIT CAMP						
SOS. NO 1 TRANSIT CAMP		26 8 '43	#1 TR:NCIT	WINDSOR, N.S.	220	27 8 43
S.O.S. C.A.(A.F.) CANADA ON EMBARKATION ON 26 Aug 43						
T.O.S. C.A.(A.F.) OVERSEAS ON TRANSFER ON 27 Aug 43 AND DISEMBARKED ON 1 Sept 43						
5 C I R U T.O.S. — 5 C.I.R.U.		2 Sept 43	5 C I R U	UK	157	4 Sept 43
Admn to 18 Gen Hosp.	Lt.	2 Sep 43	5 C I R U	UK	158	6 Sep 43
Disch from 2 C.G.H. Hosp	Lieut	8 Oct 43	5 C I R U	UK	189	11 Oct 43
Att Rep to CMH Officers School - CMH Case 12. Serv 6	Lieut	31 Oct 43	5 C I R U	UK	208	2 Nov 43
(662) Ret from 6 RU Inf Bde & CTSA Sup to Officers School	Lieut	4 Dec 43	5 C I R U	UK	236	7 Dec 43
Awarded 6 RU Inf Bde Qual & Lt.	Lieut	11 Dec 43	5 C I R U	UK	239	10 Dec 43
(C85) Proceeded on CMHQ Case 706 (Officers PT) o a/s/d sup to Army School of PT.	Lieut	4 Jan 44	5 C I R U	UK.	5	6 Jan 44
(C85) A/s/d sup to 1 C A S C R U	Lieut	26 Jan 44	5 C I R U	UK	23	24 Jan 44
Ret from CMHQ Case 706. o C/a/s/d sup to Army School of PT	Lieut	27 Jan 44	5 C I R U	UK	24	1 Feb 44
C/a/s/d sup to C A S C R U on being a/s/d sup to C.R.U.	Lieut	13 FEB 44	5 C I R U	UK.	34	15 FEB 44
C/a/s/d to C R U f.a.p	Lieut	16 FEB 44	5 C I R U	UK.	36	18 FEB 44
SOS SOS to 43 Lab on adm to 17 C.G.H.	Lieut.	18 FEB 44	5 C I R U	UK -	38.	22 FEB 44
(C95) TOS TOS from 4 C I R U Y3 Lab on disch from 17 Gen Hosp	Lieut	17 Apr. 44	4 C I R U	UK	105	21 Apr 44
M39 passed on (Offrs P.T.) C M H Q Case 706 - to 27 Jan 44	Lieut	4 Jan 44	5 C I R U	UK	59	18 Mar 44

Regimental No. ..... Rank Lieut Sheet No. .....

M.F.M. 1 & 2 (a)
250M—5-42 (4722)
H.Q. 1772-39-1646

Name Walter Douglas Snaith

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc.—	Rank Shown	Effective Date	Unit	Place	Authority D.O. Number	Authority Dated
Wnd. S.A.S.						
C54 Dvr C.M.H.Q. Course 1234. (Range Finders) also FASH Reference Lieut	Lieut	2 May 44	4 C.I.Bde	U.K.	114	1 May 44
C64 Alert from C.M.H.Q. Case 1234, C and to Reference W.S.as	Lieut	13 May 44	4 C.I.Bde	U.K.	128	16 May 44
C54 T.O.S. from 4 C.I.Bde 31.3. on disch I.C.S. Spec Hosp	Lieut	27 May 44	4 C.I.Bde	U.K.	145	3 June 44
m37 Att. Sup to 1 C.S.R.U. on C.R.M. case 10 Sep 55	Lieut	12 June 44	4 C.I.R.U.	U.K.	133	13 June 44
C64 Ord to 1 C.S.R.U. Cmpl of C.R.M. Course 10.	Lieut	16 June 44	4 C.I.Bde	U.K.	160	20 June 44
6/ Att. Sup to 1 C.I.R.U.	Lieut	24 Jul 44	4 C.I.R.U.	U.K.	192	24 Jul 44
M.146 Att. d C.M.H.Q. Case 1234 Sec 44 (Range finding) 2-11 May 44. (Failed)	Lieut		4 C.I.R.U.	U.K.	189	24 Jul 44
S.O.S. to 24 Sup. 2 C.B.R.D. (Pet. Valet)	Lieut	3 Aug 44	4 C.I.R.U.	U.K.	200	4 Aug 44
C101 Adm 14 C.G. Hosp. 1/Bn from 4 C.I.R.U.	Lieut	18-24 Jul 44	2 Sup Gen Wksp	C.L.	17	25 July 44
Disch 14 C.G. Hosp		15-4-44		C.L.		
SOS MinTOS SOS X4 List (11 Bn) to Cam of Canada.	Lieut	12 Aug 44	1 Bn B.W.	21 a Gp	30.	30 Aug 44
TOS from X4 to C.M.C.	Lieut	13 Aug 44	Q.O.C.B.O.	21 a Gp	38	26 Aug 44
m14 SOS X4 to X4 RHC	Lieut	8 Aug 44	V.K. Dep Overall	21 a Gp	17	25 Aug 44
TOS					C.L.	
Adm to 1 Spec Hosp.		15 May 44			C.L.	
Disc from 1 Spec Hosp.		27 May 44			C.L.	
SOS TOS. SOS X-4 List (11 Bn) to Cam of Can.	Lieut	12 Aug 44	1 Bn B.W. Q.O.C.B.O.	21 A Gp	30	30 Aug 44
M14 M47 Amd by A-493 Wounded.	Lieut 13	5 Sep 44		PET	P492.	
m.54. Adm: to 8. C.G.H.	Lieut.	14 Sep 44	Q.O. Cafe.	C.L.B.	311.	1 Nov 44.
C140 SOS SOS X-4 List (13 Bn) to R.H.C	Lieut	14 Nov 44	X-4 RHC	21 A Gp	75	6 Dec 44
C140 TOS TOS from X-4 List Black Watch	Lieut	15 Nov 44	RHC	21 A Gp	79	6 Dec 44
C140 Wounded (Second Casualty, Remained on duty)	Lieut	24 Dec 44	RHC	C.L.	A5533	14 Jan 45
Deceased 28 Feb 45.						
Killed.	Lieut:	28 Feb 45	RHofC	C.L. A.5.5.1	7 Mar 45	
SOS. SOS. Deceased. Killed in action.	Lieut:	28 Feb 45	RHC	21 A Gp	20.	16 Mar 45

SERVICE AND CASUALTY FORM

PART I (For all ranks)

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

Unit NO. 4 District Depot CA. Regimental Number Lieut

1. Surname SMAILL
2. Christian Names Walter Douglas
3. *Substantive Rank and Appointment
   *Acting Temporary or Local Rank ~~2nd~~ Lieutenant
   giving date 16-9-42

*To be entered in pencil to facilitate alteration.

4. Place of birth Winnipeg, Manitoba, Canada
5. Date of birth as declared on attestation 19-11-16
   (A)
6. Date of enlistment 16-9-42
7. Place of enlistment Mtl. Sth. Que. Canada
8. Residence at time of enlistment 4478 Ste. Catherine St. West, Mtl. Que. Canada.
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion United Church of Canada
12. If married, state date Single
13. Trade on enlistment Accountant
14. Corps, trade and grade
15. (D) Qualifications
16. (E) Miscellaneous entries

(17) Regiment or Corps: Infantry

Unit (Battn., etc)

(18) Medical

Category	Date	Authority
"A"	8-4-42	M F M 1

(19) Next of kin (entries to be made in pencil)
Mrs Walter Smaill
Father
4478 Ste Catherine St West Mtl. Que.

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

NOTES—

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

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry to be shown
			Promoted to Lt.		14.7.43	Lt.	
			D2 - Battle Drill Cse - Vernon Div Ca III (W). Div n/C.				
			S.O.S. C.A.(A.F.) CANADA ON EMBARKATION ON 26 aug 43				
			T.O.S. C.A.(A.F.) OVERSEAS ON TRANSFER ON 27 aug 43				
			AND DISEMBARKED ON 1 Sept 43	U.K	9 Sept 43	Lt.	157 4 Sep 43
			T.O.S. — 5 C.I.R.U.				
		5 C.I.R.U	Adm to 18 C.G.H	U.K.	2 Sep 43	Lt	158 6 Sep 43
		5 C.I.R.U.	Disc. from 2 C.G.H.	U.K.	8 Oct. 43	Lt.	189 - 10 Oct. 43
		5 C.I.R.U	7 day P.L. with ma to 24 Oct	U.K	17 Oct 43	Lt	197 20 Oct 43
		5 C.I.R.U	Proceeded on C.R.U. cse. 12 Ser 6 (C.R.U. offs Refresher) & att. fap to C.R.U. Officers School (Duration 3 to 4 Dec 43)	U.K	31 Oct 43	Lieut	208 2 Nov 43.
		5 C.I.R.U.	Relief from above Cse & C.T.B.A. fap	U.K	4 Dec 43	Lt	236 7 Dec 43
		5 C.I.R.U	attended above C.R.U. cse and Qualified as "Q2"	U.K	4 Dec 43	Lt	239 10 Dec 43.
		5 C.I.R.U	Proceeded on C.M.H.Q. cse. 206 (offs P.T.) 4 to 27 Jan 44 and is att. fap to army School of P.T.	U.K	4 Jan 44	Lt.	D.O. 5 d. 6 Jan 44.
		5 C.I.R.U	att. fap to 1 C.A.S.C.R.U.	U.K	28 Jan 44	Lt	23 29 Jan 44.
		5 C.I.R.U	Returned from above C.M.H.Q. cse & C.T.B.A. fap to army Sch of P.T.	U.K	27 Jan 44	Lt	24 1 Feb 44.
		5 C.I.R.U	C.T.B.A. fap to 1 C.A.S.C.R.U. on being att. fap to 1 C.G.I.R.U.	U.K	13 Feb 44	Lt	34 15 Feb 44.
		5 C.I.R.U	C.T.B.A. fap to 1 C.G.R.U.	U.K.	16 Feb 44	Lt	36 18 Feb 44
		5 C.I.R.U	S.O.S. to Y.L.A.S.T. (Y3) 17 C.G.H.	U.K	18 Feb 44	Lt	38 22 Feb 44
		Y.L.A.S.T.	T.O.S. from 5 C.I.R.U. (Y3)	U.K	19 Feb 44	Lt	11 23 Feb 44
		Y.L.A.S.T.	S.O.S. to C.M.H.Q. 4 C.I.R.U.	U.K	16 Mar 44	Lt	19 18 Mar 44.
		Y-3 L.A.S.T.	T.O.S. from 5 C.I.R.U. (Y-3) L.A.S.T. 17 C.G.H.	"	17 Mar 44	"	14 - 22 Mar 44

SERVICE AND CASUALTY FORM

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

(PART II)

Regiment or Corps ~~Smaill Smaill~~ Regimental Number

Substantive Rank Lieut Surname Smaill Christian Names W. D.

Acting Temporary or Local Rank

(To be entered in pencil to facilitate alteration)

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry to be shown
		~~4 CIRU~~	T.O.S. to 4 C.I.R.U.				75-29 Apr 44
		Y-3	SOS to 4 CIRU on disch from 17 C.G.H.	U.K.	16 Apr 44	Lt	Y19-30 Apr 44
		4 CIRU	SOS from 4 CIRU Y-3 on dis from 17 C.G.H.	U.K.	17 Apr 44	Lt.	105-21 Apr 44
		"	Proc on C.M.H.Q. Case 1234 Ser NFR 44 (Range Finders) + att'd. fap to Netheravon Wing S.A.S. (9 days)	"	2 May 44	"	114-1 May 44
		4 CIRU	Ret from C.M.H.Q. Case 1234 Ser NFR 44 (Range-finders) + C.T.B.A. fap to S.A.S. Netheravon	U.K.	12 May 44	Lt	128 16 May 44
		4 C.I.R.U.	T.O.S. Y-3 List from 4 C.I.R.U. on being adm to 1 Cdn Spec Hospital.	U.K.	15 May 44	Lieut	Y-22-21 May 44
TOS		4 CIRU	From 43 Lieut on disch. from 1 Cdn Spec	U.K.	27 May 44	Lieut	DO 145 3-6-44
SOS		43 Lieut	To 4 C.I.R.U. on disch 1 Cdn Spec	U.K.	27 May 44	Lieut	DO 24 4-6-44
CO		4 CIRU	Attd fap to 1 C.S.R.U. (5 days) on Proceed to C.R.U. Lec + 10 Ser 55 (Ind Offrs Wireless)	U.K.	12 Jun 44	Lieut	153 - 13 Jun 44
		4 C.I.R.U.	Ceases to be attd fap to 1 C.S.R.U. on completion of C.R.U. crse 10 Ser 55 (Ind Offrs Wireless)	U.K.	19 June 44	Lieut	160 - 21 June 44
		5 C.I.R.U.	Passed C.M.H.Q. crse 206 (Offrs P.T.) 4 Jan to 27 Jan 44	U.K.	27 Jan 44	Lieut	59 - 18 Mar 44
CO		4 CIRU	Attd fap to 1 CIRU (Adv C.R.U. Offrs trg Coy) Canning Attended C.M.H.Q. Lec 1234 Ser 55	U.K.	2 Jul 44	Lt	171 — 4 Jul 44
LEO		4 CIRU	Range-finding from 2 to 11 May 44 "Failed"	U.K.		Lieut	189 — 24 Jul 44
LAO		4 CIRU	C.T.B.A. fap to 1 CIRU (Adv C.R.U. Offrs trg)	U.K.	24 Jul 44	Lieut	192 — 27 Jul 44
		"	SOS 4 List 2 C.B.R.C.	"	3-8-44	"	200 4 Aug 44
XY	C.I.C.	11 Bn	TOS 4 C.I.R.U.	"	7 Aug 44	"	16 - 9 Aug 44
XY	"	"	SOS to X.Y.R.H.C. Black Watch	"	"	"	17 - "
XY RHC (Bn)	"	"	TOS from X.Y. C.I.C.	"	"	"	29 - "
			SOS to Can of Can	"	12 Aug 44	"	30 - 12 Aug 44

(a) Report		(b)	(c)	(d)	(e)	(f)	(g)
Date	From whom received	Unit	Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	Place of Casualty	Date of Casualty	Army rank as at (e)	Army Form or other authority for entry to be shown
		C of C	TOS from X 4 List	Field	13Aug44	Lieut	38 Aug 44
		C of C	SOS to X 3 List C of C	Field	13Sep44	Lieut	46 Sep 44
21Sep44	X3	C of C	TOS from Base of Can	"	14 Sep 44	"	38/44
21 Sep 44	X3 X-4(13Bn) + OC	C of C	Posted to X4 13 Bn SOS to Black Watch	FF ✓	25 Sep 44 14 Nov 44	Lieut ✓	54/44 78/44
	✓	Gw. ✓	TOS from X4 Conv of Casy SOS deceased fr killed in action	✓	15 Nov 44 28 Feb 45	Lieut Lieut	79 Dec 44 20 Mar 45

X4(13 Bde) Cams 6
25 Sept 44

HOSPITALIZATION ONLY

SERVICE AND CASUALTY FORM

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

(PART II)

Regiment or Corps Cams of Can Regimental Number LT

Substantive Rank Lieut Surname SMAILL Christian Names W.D.

Acting Temporary or Local Rank

(To be entered in pencil to facilitate alteration)

(a) Report		(b)	(c)	(d)	(e)	(f)	(g)
Date	From whom received	Unit	Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	Place of Casualty	Date of Casualty	Army rank as at (e)	Army Form or other authority for entry to be shown
19 Sept	3013/100	Cams of C	Wounded (Conf D.)	—	13 Sept	Lieut	unit
19 Sept	—	—	Adm 21 Can FDS	—	14 Sept	—	103 - 21 Sept
22 Sept	— 1103	X3 —	Adm 9 Can FDS	—	14 Sept	—	107 - 26 Sept
23 Sept	— 1104	—	Adm 6 Can CCS	—	14 Sept	—	107 - 26 Sept
8 Oct 44	" (115)	—	Disch to Unit & Can Gen	—	23 Sep 44	—	115 - 10 Oct 44
9 Oct "	— 116	—	Adm 1 & 6 Gen	—	14 Sept "	—	116. 11 Oct 44
7 Jan 45	" 194		WOUNDED (Remained on duty) 2nd Can	—	24 Dec 44	—	unit

HOSPITALIZATION ONLY

(a) Report		(b)	(c)	(d)	(e)	(f)	(g)
Date	From whom received	Unit	Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	Place of Casualty	Date of Casualty	Army rank as at (e)	Army Form or other authority for entry to be shown

PART II ORDERS

	ENTRY UNIT	EFFECTIVE DATE	ORDER No.		CONTRA UNIT	EFFECTIVE DATE	ORDER No.
TOS	5 CIRU (RHC)	2 Sep43	157	Fr.	Canada.		
A	1 ASCRU.	28Jan44		fr	5 c i RU.	28Jan44	23
CA	—— .. ——			fr	—— .. ——	13Feb44	34
A	1 Sea RU.				—— .. ——	17Feb44	34
CA	1 Sea RU			fr	—— .. —— K	16Feb44	36
TOS	5 C i RU (Y3	19Feb44		SOS	—— .. —— K	18Feb44	38
TOS	4 C i RU	19Mar44	105	SOS	—— .. —— (Y3 K		
TOS	Y-3 4 C i RU	15May44	22	SOS	4 C i RU	15May44	131
TOS	4 C i RU	27May44	115	SOS	Y-3 - 4 C i RU	26May44	24
A	Sig's RU 12June -	17June44	139	Fr			
a	1 C i RU.	3 July44	151	fr	4 C i RU.	2 July44	171
CA	1 C i RU.			fr	4 C i RU	24Sept44	192
TOS	X 4 C i C (Gen Unoll)	4Aug44	17	SOS	4 C i RU	3Aug44	200
TOS TOS	X4 R.H.G. (2 IAG) beams of ban	9Aug44 13Aug44	29 29	SOS SOS	X4 (Gen Unoll) C i C - X4 RHC	8Aug44 13Aug44	17 30
TOS	X 3 beams of Can	14Sept44	38	SOS	beams of bans	13Sept44	46
P	X4 beams of Cans	25Sept44	54	fr	X3 beams of Cans	25Sept44	54

COURSES & QUALIFICATIONS	PID	CASUALTIES BY RO's, ETC.	AUTHORITY
CMHQ Crse 706 Ser. OW. 52 P.T. Offrs (Short Crse) 4/27Jan44 "BY"			
CMHQ. Crse. 1234. Ser. NRF. 44 Rangefinders. 2-11 May 44. "Fail"			
CMHQ Crse No. 1280 Ser 18 Inf. Offrs. Mines 1 Aug to 15 Aug 44.			

REMARKS Wounded 14 Sep 44 A.492
Wounded & remained on duty (2nd Cas) 24 Dec 44 - A.533
Killed 28 Feb 45 - 3rd Bde. A5-51 0

PLEASE USE ALL NAMES IN FULL

SECRET CS880/A.

NAME;- SMAILL, W.D.

C.F.A. 133
40/P&S/1956

KILLED IN ACTION

SURNAME	Smaill	CHRISTIAN NAMES	Walter	Douglas	
C.A. (A.F.)		AUTHORITY	C.A. (R.F.)		AUTHORITY
UNIT	R.H.C.		UNIT		
RANK ON APPT.	P.2nd Lieut.		RANK		
DATE OF APPT.	16 Sep 42		REGIMENTAL & STAFF APPTS. C.A. (O'SEAS)		
T.O.S. C.A. (O'SEAS)	27 Aug 43				
P.2nd Lt.	16 Sep 42	2557c-6			
2nd Lieut.	16 Mar 43 (Conf)	3534c-3			
LIEUT.	18 Jun 43	3534c-3			
CAPT.					
MAJ.					
LT. COL.					

QUOTE CHRISTIAN NAMES IN FULL

DATE OF BIRTH 19 Nov 16. RELIGION CofE MED. CAT. "A"

CIVIL OCCUPATION Order Clerk

CIVIL RESIDENCE Montreal, P.Q. MD.4. Langs:-French.

HONOURS & AWARDS

SOS

NAME SIMALL, Walter Douglas H.Q. File 332-S-359

RANK ~~2/Lt. (Supt.) (T. Lt.) Prov. 2nd Lt.~~

ACTIVE UNIT R. H. C. No. 4 D.D.

RESERVE UNIT R. H. C. 3rd (Res.) Bn.

Appt. R.O. No. 9557 Date 12-11-42. Effective date of Appt. 16-9-42.

CANADA GAZETTE

TRANSFERS, PROMOTIONS and REVERSIONS

POSTED TO NO.3 D.D. 14-9-42 FROM CDN. ARMY O/S. STGE. PR. 94, 15-10-42.
TO BE PROV. 2ND LT., R.H.C., 2ND BN. 5.11.42 R.O.# 2621. 26.11.42

EMBARKED CANADA - SAILING LIST NO. 310 AUG 26 1943

CONFIRMED IN THE RANK OF 2ND LT. R.H.C. 2ND BN. 16.3.43. R.O. 3534 18.8.43
TO BE LT. R.H.C 2ND BN. 16.6.43 R.O. 3534 18.8.43

Killed in action, 28 Feb 45 Black Watch (RHR) of Can. Western European Theatre of War. Cable # 6796A, 15 Mar 45

1631—9-42 (0257)
H.Q. 1772-45-8

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO: Mrs. Grace Smail — Mother

ADDRESS: 4478 St. Catherine St. W.
Apt. II, Montreal 6, Que.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER: Mrs. Grace SMAILL, (MFM5) (ENGLISH)

1901

ADDRESS: 4478 St. Catherine St. West, Apt. 11, MONTREAL 6, Que.

(1)

MEMORIAL BAR

DATE DESP.....

(2)

REGN. NO. 1493

(3)

DESP. APR 5 1945

REGN. / 7214

28-2-45

AWARDS—CANADIAN ARMY (ACTIVE)

1901 M

FB.

500M—1-44 (3467)
H.Q. 1772-45-8

FILE NO. 332-5-359

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
SMAILL,	Walter Douglas		Lieut.	Black Watch (RHR)

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star France & Germany Star Defence Medal War Medal C.V.S.M. & Clasp	9047 - 19-1-50

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

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

CARD SEQUENCE NO. 2

NO. Officer RANK 2/lieut NAME Smaill Walter Douglas

CASUALTIES, ETC.

PART II D. O. No.	DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
220.	27.8.43	S.O.S. No. 1. TRANSIT CAMP PROCEEDING. OVERSEAS. EFF. AUGUST 26-1943	
157.	4.9.43	T.O.S. C.A./S. 27 Aug. 5 Cir Rec 2 Sept 43.	
158.	6.9.43	admit 18. C.G.H. wef 2. Sept 43.	
189	10.10.43	Rlse 2 C.G.H. " 8 Oct 43.	
197.	20.10.43	7 days P.L. & R.A. 17-24 Oct 43.	
208	2 Nov 43	on C.R.U. Cse 12 Ser 6. att fap C.R.U. Sick. wef 31 Oct 43.	
258.	10.12.43	Cease to be att'd. from. 5. C.R.U. Sick. wef 4-12-43	
236	7.12.43	Ret'd C.R.U. Cse 12 Ser 6 & C.T.B.A. C.R.U. wef 4 Dec 43.	
239	10.12.43	Qual Gr. on C.R.U. Cse 12 Ser 6 wef 4 Dec 43	
5	6-1-44	Proceeded on C.M.H. Cse 706 - 4 to 27 Jan 44 and is att'd Fap & Army Sick of P.T. wef 4 Jan 44	
23	29-1-44	att'd fap 1 C.A.S.C.R.U. wef 28-1-44	
54	25 SEP 44	T.O.S. 13 Res. Q.O.C.H. of C. - 2 C.B.R.G. (Ref. Records Action 13 Dec. 44)	

CASUALTIES, ETC.

PART II D. O. No.	DATE	NATURE AND PARTICULARS	IF IN HOSPITAL NOTE NAME
229	22-9-42	DO 225 Amendments -cancelled	
229	22-9-42	DO 224 Unit amended to read BW(RHR)	
270	9-11-42	Ceases on comand to #48 St Johns & is SOS on trans to 2 Bn BW RHR Sussex NS wef 4-11-42	
92A	7-11-42	TOS 2nd Bn. B.W. (RHR) wef 5-11-42	
98A.	18-11-42	Attached for all purposes except pay to Cdn. B. Drill Tr. Centre, Vernon, BC. wef 19-11-42	
117A	28.12.42.	Ceases to be attached for all purposes except pay to Can B. Drill TR. Centre Vernon B.C. w.e.f. 15-12-42	
5A.	11 Jan. 43.	Qual Q-2 at C.B.D.T.C. Vernon BC 24 Nov. to 15D c. courses. MAR 18 1943	
102	24 May '43	Att A/P. E/P. to A/14 A.I.(R) T.C. Aldershot N.S. wef 22 May '43	
127	28 June 43	Ceases to be att Aldershot wef 19 June 43	
127	28 June 43	Qualified for rank of Lieut wef 18 June 43	
152	12 Aug 43	Promoted to rank of Lt. wef 18 June 43	
152	12 Aug 43.	S O S 2nd B Watch on transfer to M.L. Transit Camp wef. 12 Aug 43.	
209.	16.8.43	T.O.S. No. 1. Transit Camp Aldershot N.S. Aug 13 ~~43~~	

LOWE-MARTIN CO. LIMITED D83960

CONTINUATION CARD M.F.M. 14

Regimental No. Lieut Name Smaill Walter Douglas

Part II D.O. No.	Part II D.O. Date	PARTICULARS OF CASUALTY
160	21.6.44	CTBa fap to 1 Cd R.U. wef 19.6.44
		comp Chy wef 10-5-44
171	4.7.44	attached RU 1 offg Coy wef 2 July 44
189	24.7.44	attend Cmd Cse 1236 - 46 Faild
192	27.7.44	CTBa fap to 1 Cd Ry wef 24.7.44
200	4.8.44	S.O.S. 4 C.I.R.U. W.E.F. 3.8.44 to X4 list 13 Bn 25 Aug 44
		To 31 Bn X4 list W.e.f 4/8/44
		SOS " " " to 13 Bn 2 Div Sigs RHQ Coy " 9.8.44
		SOS 13 Bn & Com Highrs of Com 12 Aug 44
		Tos. 6 of 6 from 11 OBK. Bn wef 13 Aug '44
		SOS Com of Com No X3 list wef 13 Sep '44 "Wounded"
54	Oct 44	Posted to X4 13 Bn wef 25 Sep 44

M.F.M.—14A
40/P&S/67 (3400)

Part II D.O.		PARTICULARS OF CASUALTIES
No.	Date	
CR	8 Nov 44	TOS 1RHC from x4 list wef 8 Nov '44
CR	4 Jan '45	Wounded wef 24 Dec 44 But remained on duty
DA	2-3-45	SOS 1RHC "Deceased" Killed in Action wef. 28th Feb 45

CASUALTIES, ETC.

NATURE E. G. Absence, Promotions, Etc.	PART II, D.O.		REMARKS If in Hospital, Note Name Etc.
	No.	Date	
att 'e' sqn 1 CASC RU wef 28 Jan 44	23	29-1-44	
Ret from CMH 2 Coy 706 and	24	1-2-44	CTBA Jap to Army Sch of P.T.
CTBA Jap to CASC RU on being	34	15/2/44	wef 27-1-44
CTBA Jap to 1 CG RU	36	18/2/44	att Jap to 1 CG RU 13/2/44
			wef 16-2-44
Dos to y list on adm to	38	22/2/44	17 CG H. wef 18.2.44
TOS from SCIRU remains in	11	22/2/44	17 CG H wef 19/2/44
SO.S to y list (y3) 4 CIRU	19	18/3/44	Remains in 17 CGH. M.E.F. 16-5-44
T.O.S. 4 C.I.R.U. W.E.F. 17.3.44	y14	22.3.44	Fm 5 Cdn Regt y 3 - 17 C.G. Hosp
T.OS fm y3 list Reach 17	105	21.4.44	C.G. Hosp wef 17.4.44
on Cmpltd Class 1234 NFR 44	114	1.5.44	att Jap Netheravon w. SAS wef 25.4.44
Rtrd Cmpltd Class 1234 NFR 44	128	16.5.44	fr Bde SAS Netheravon wef 12.5.44
SOS to y3 list adm/cdn	131	19.5.44	Spec unit 15 May 44
T.OS fm y3 list Reach/cdn	145	3.6.44	Spec Hosp wef 27 May 44
~~S.O.S. 4 C.I.R.U. W.E.F. 4.6.44~~	~~y24~~	~~4.6.44~~	
att Jap 15 Sta Rly on Civil cdn	153	13.6.44	10.55 wef 12 June 44

1 AA Coy organized funded

NAME SMAILL. WALTER. DOUGLAS.

REGIMENTAL NO. RANK LIEUT.

ENLISTED AT PROMOTIONS, ETC. AND DATE

DATE

IF SERVED PREVIOUSLY, STATE UNIT, ETC.

MARRIED, WIDOWER, OR SINGLE

NEXT OF KIN Grace S Smaill. RELATIONSHIP mother

ADDRESS OF St Catherine St, W. Montreal, Que.

ASSIGNMENT OF PAY, $ 22 C. - final 16-5-42 - mother.
5.35 allot 1.12.42 - London Life
ADDRESS 6.03 allot 1.2.43 "

Oth W.L. May-Oct 1942 50.40

DEPENDENT'S ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DISTRICT PAYMASTER

M.F.M. 14
40/P & S/67 (2966)

IN WHOSE FAVOUR

Part II D.O. No.	Date	
10	10-4-42	T.O.S. under G.O.139/39 on the Permanent Staff of the 3rd Bn. The Black Watch (RHR) of Canada wef 9- 4-42.
11	13-4-42	Granted Subsistence Allce.,$1.70 per diem, wef 9- 4-42.
14	15-5-42	Promoted T/Lieut(Auth.M.11-S.998 d/12-5-42)w.e.f. 22-4-42.
23	27-7-42	Ceases to draw Subsistence Allce(At Camp) w.e.f. 27-6-42
23	27-7-42	Continues to draw Subsistence Allowance w.e.f. 26-7-42
34	10-9-39.	Attached to CABTC No. 48 St. John's Que for R.Q.&D w.e.f.7-9-42
34	10-9-39.	Ceases to draw subsistence allowance w.e.f.6-9-42
35	22-9-42.	Ceases to be employed under G.O.139 on appointment to Active Force w.e.f.15-9-42 (Authy) D.D.No. 4. Part 11 order No224 dated 16-9-42.
224	16-9-42	Ceases to be employed under 139 is TOS on appt 2/Lieut Prov Reinf Off 2 Inf Rifle while on command to #48 St Johnswef 6-9-42
225	17-9-42	DO 224 amended to read Gen List

opp 27.25

No. Off. RANK 2/Lieut. NAME SMAILL Walter Douglas *Married *Widower *Single

Place of { *Appointment *Enlistment } Montreal South Que. Date of { *Appointment *Enlistment } 9-4-42

RATE OF PAY

D. O. No.	Date	Rank	Group	P. F. or A. S.	Daily Rate	If Liable Pen. Ded.	REMARKS
10	10-4-42	2/Lt.			4.25		
14	15-5-42	T/Lt.			5.00		

ASSIGNMENTS

Name & Address of Assignee	Effective Date	Amount
Mrs. Grace Smaill		
4478 St. Catherine St., W.		
Apt. 11, Montreal, Que.		
	1-5-42	22.00
London Life Insurance Co.	1-5-42	5.25
Total.....		27.25

DEPENDENTS' ALLCES. No. Deps.....

Date Application Forwarded	Relationship	Amount Awarded	Effective Date
	Mother	15 00	1-4-42

*Outfit *Clothing } Allce. $ 50.00 May ..... Paid on.....

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

*Delete words which are inapplicable.

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

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

Occupational Form Completed..... Yes

~~M. F. 1-14~~

300M-5-41 (323-4)

H. Q. 1772-39-1662

NO. OFFICER RANK Lieut NAME SMAILL, Walter Douglas

40

*~~MARRIED~~ *~~WIDOWER~~ *SINGLE

PLACE OF ENLISTMENT Montreal South, Que. DATE 16:Sep:42

RATE OF PAY

D. O. NO.	DATE	RANK	GROUP	P. F. OR A. S.	DAILY RATE	IF LIABLE PEN. DED.	REMARKS
					4.25		
152	12AUG43	LIEUT			5.00		~~WB~~ · 18 JUNE 43

ASSIGNMENTS

ASSIGNEE	EFFECTIVE DATE	AMOUNT		TOTAL
MRS GRACE SMAILL, 4478 ST. CATHERINE ST. W. MONTREAL, Que	16:Sep:42	22	-	
LONDON LIFE INS. CO. 1184 ST. CATHERINE ST. W. MTL, Que	1:Dec:42			
Pol. No. 606902 N	~~1:Sep:42~~	5	35	
" " 381756 N	1:FEB:43	6	03	33.38

DEPENDENTS' ALLOWANCES NO. 1

DATE APPLICATION FORWARDED	RELATIONSHIP	AMOUNT AWARDED	EFFECTIVE DATE
29-9-42	~~MOTHER~~	~~45~~	
	~~ALLOWANCE~~	~~1 42~~	

OUTFIT OR CLOTHING ALLOWANCE $ 50.00 M.D 4 / $100.00 M.D 6 PAID ON

REHABILITATION GRANT $ PAID

*DELETE WORDS WHICH ARE INAPPLICABLE

IN RECEIPT OF PENSION UNDER PENSION ACT OR MILITIA PENSION ACT (1910) $ P.A.

OCCUPATIONAL FORM COMPLETED Yes

NO. Rank Lieutenant Name SMAILL, Walter Douglas

Unit Black Watch (RHR) Date of death 28th Feb., 1945.

Died at Germany

Cause Killed in action

Death occurred on strength of Forces H.Q. 332-5-359

N/K Mr. Walter Smaill Relationship Father

Address 4478 St. Catherine St.W., Apt. 11, Montreal 6, Que.

Remains buried in Germany Temp Cdn Mil nr Bedburg Cemetery
P 1 R 4 Grave 10.

CHK ✓

Grave location

- OVER -

BURIAL REPORT TO N.K. SEP 4 1946

RETURN TO BUR. OF STAT. JUL 23 1945

ROYAL MESSAGE DESP'D. APR 17 1945

CAN. MESSAGE DESP'D. APR 3 1945

Temp BR sent to NK & Map

REBURIAL

Nijmegen Canadian Military Cemetery,
4 miles S.E. of Nijmegen, Holland.

Grave 7, row E, plot 7.

H & CR Form Despd. JAN 23 1947

Photographs
Despatched
FEB 4 - 1948

10M-1-45 (M-4608)

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

WSY-431 2
7139 ARMY

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Walter Douglas (CHRISTIAN NAMES) ~~SMAIL~~ SMAILL (SURNAME)

REGISTER NO. D-13637
FILE NO. A 332-5-359
DATE 14-11-45
SERVICE NO. D-902340
FINAL RANK OR RATING Lieut.
DATE OF DISCHARGE 28-2-45

PAYEE Director of Estates
ADDRESS

DATE OF TERMINATION OF OVERSEAS SERVICE 28-2-45

	$	¢
A. TOTAL QUALIFYING SERVICE NO. OF DAYS 1057/30 EQUAL TO 35 COMPLETE PERIODS AT $7.50	262.50	
B. QUALIFYING OVERSEAS SERVICE No. OF DAYS 552 LESS 7 INELIGIBLE DAYS, EQUAL TO 545 DAYS @ 25c. PER DAY — SEE PAR. 2 OVERLEAF FOR EXPLANATION	136.25	
	398.75	
C. SUPPLEMENT FOR OVERSEAS SERVICE		
DAILY RATES AT DISCHARGE		
PAY	$ 5.00	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$ 1.70	
ADDITIONAL PAY	$	
	$	
	$	
DEPENDENTS' ALLOWANCE 1/30 OF $	$	
TOTAL $6.70 X7 = $ 46.90		
NO. OF DAYS 552/183 X $ 46.90	141.47	
D. WAR SERVICE GRATUITY	540.22	
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $		
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $		
OTHER DEDUCTIONS $		
F. TOTAL AMOUNT PAYABLE	540.22	

G. YOUR PORTION OF GRATUITY IS— 100%

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

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

△T

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

PREPARED BY	CHECKED BY
KRM	

TREASURY

CHECKED BY	DATE
R.C. Joffe	NOV 19 1945

K. R. Lee Capt
SERVICE REPRESENTATIVE

ESTATES BRANCH NOV 26 1945 H.Q. OTTAWA NATIONAL DEFENCE

Personal Effects of W.D.SMAILL,Lieut.(Dec'd)

1 Wardrobe trunk
1 Suitcase (large,black)Damaged
1 Kit Bag
1 Serge Dress,Highland,Tunic W/ 4 metal pips,brass RHCs.collar badges,and btns.
1 Pr. Tartan Trews,with braces
1 Kilt
1 BD uniform complete
1 Regtl.Blazer Coat
1 Pr. Oxfords (Brogues),with Trees
1 Offrs.Greatcoat,W/4 metal pips, cloth canadas, and buttons
1 Pr. Grey flannel trousers
1 Trench coat
1 Pr. camp shoes
1 Offrs.haversack
1 Trench Coat lining
1 Football
1 Dressing gown
1 Windbreaker Jacket
1 KD Tunic, W/brass RHCs,collar badges & buttons
2 Pr. KD shorts
1 Sweat shirt
2 Pr. gym shorts
1 Basketball sweater
1 Pr. swim trunks
missing X1 Sweater
1 Balmoral Hat,with plume
1 Glengarry Cap & badge
1 PT suit (long drawers & sweater)
3 Shirts
7 Neck Ties
13 Pr. Socks
2 Pr.Hose Tops
3 Jock straps
1 Under shirt (summer)
1 Pr. gloves (kid leather)
1 Pr. gloves (work,leather)
1 Set (3 brushes),in leather zipper case.
1 Toilet Set,complete,in leather zipper case.
1 Leather case
1 Leather Sporran,with badge
1 Pr. Running shoes
1 Pr. slippers

1 Pr. garter flashes
1 Pr. goggles
1 Whisk Broom
1 Pr. braces
1 Woven belt
1 Wash cloth
1 Knee supporter
1 Large shoe brush
1 Roll Movie film
Snapshots & negatives
misc.books & booklets
large shipping tags
military notes & precis
1 Razor blade sharpener
1 Souvenir Regtl.Mug (metal)
2 Polishing Cloths
1 Watch Case
1 Pr. Garters
1 Safety Razor,in case
2 Brushes
1 Hockey Puck
Shoe laces
1 Leather case ,for glasses
1 Change Purse
1 Pr. Garter flashes
1 cloth crest (regtl)
1 Souvenir Key
2 Kit Bag Handles
3 Button Sticks
1 Protractor
1 Tooth brush
1 New Testament
1 Identity bracelet
1 sm screw driver
misc.badges, & pips
2 Bent Clips
1 Padlock
1 Shoe Horn
1 Can Opener
1 Jews Harp
1 Pr. Scissors (small)
1 Book of cheque stubs
1 Sam browne belt & cross strap
1 Photo album,with photos
1 Note book
2 Canvas bedroll straps
1 Leather " strap

2 only

1 only

POSTATES BRANCH OCT 19 1945 O. OTTAWA NATIONAL DEFENCE

Personal Effects of W.D.SMAILL,Lieut (Dec'd)

1	Hackle
2	Badges (German)
17	Souvenir Coins
1	Pr. leather gloves
1	Pr. slippers
1	Pr. shoe trees
1	Officer's haversack
1	Spectacles in Case
1	Magnifying Glass in Case
1	Writing Case (brown,leather)
1	Photo Folder,leather,with 3 photos
1	Handkerchief
1	Roll of Movie film
2	Pr. spectacles in Cases
1	Pr. Sun glasses,in case
	Snapshots
3	Address Books
	Newapaper Clippings

ESTATES BRANCH
OCT 19 1945
H. Q.
OTTAWA
NATIONAL DEFENCE

also missing
1 wrist watch
1 Commando Knife
1 Camera
1 Bedroll and coverall
field glasses

Grace P Smaill

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

WILL

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

(1) I, Walter, Douglas SMAILL, of the CITY
(Name in Full) (City, Town, Village, Township)

Address in civil life.

of MONTREAL, in the County District of JACQUES CARTIER

Province of QUEBEC, ACCOUNTANT
(Civil Occupation)

Regimental No 2"/LIEUTENANT, Unit No.4 DIST.DEPOT 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.Grace SMAILL nee PATTERSON,

App.11

Residing at: 4478 St-Catherine St., West, Montreal, P.Q.,Can.

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

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

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

IN WITNESS WHEREOF I have hereunto set my hand this 16th day of Sept.
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

Civil Address

Civil Occupation

Second witness sign here.

Signature

Civil Address

Civil Occupation

(Witnesses are not to be beneficiaries.)

[OVER]

NOTE

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

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

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

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

"my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont., $.....00, and my household goods and effects,"
"my brother, Thomas Jones, 80 Yonge St., Toronto, Ont., $.....00,"
"my sister, Margaret Jones, 80 Yonge St., Toronto, Ont., $.....00,"
"my friend, John Smith, 60 LaSalle St., Winnipeg, Man., $.....00,"

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

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

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

(5) The soldier will date the Will and sign same. Two witnesses must sign in the presence of the soldier, and each witness should fill in his or her full civil address and occupation. No one who is a beneficiary shall act as a witness. It is preferable, though not essential, that the witnesses be persons not on Active Service.

When completed, leave Will with Commanding Officer for transmission to the Records Office for safe custody.

GENERAL

The laws of all but one of the Provinces of Canada provide that marriage subsequent to the date of the Will revokes that Will. Therefore, a soldier immediately upon his marriage must make a new Will in order that, in the event of his death, his estate may be distributed in accordance with his wishes as set out in such new Will.

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

Small

1. (a) Print name in full SMALL, Walter Douglas (b) Reg'l. No. 2/LIEUTENANT
2. (a) Arm of service ARMY (b) Unit No. 4 DIETICIAN DEPOT CA (c) Rank 2/LIEUTENANT
3. (a) Date of birth 19 Nov. 1916 (b) Have you any dependents? yes (c) Place of residence at time of enlistment Montreal Que.
4. (a) Place of enlistment Mtl 5th Que. Can. (b) Date of enlistment 15-9-42

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 20 yrs old (b) Were you attending school or college up to the time of enlistment?
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 8 yrs public school
7. If you attended a university, give name of university and standing or degree secured Jr. matriWestmount High school
8. (a) Did you ever enter upon a trade apprenticeship? no (b) If so, for what occupation? nil (c) Did you finish it? nil (d) If you did not finish it, how long did you serve at it? nil
9. (a) What languages do you speak fluently? Eng. (b) What languages do you read well? Eng.

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) yes (b) At time of enlistment of what trade union or professional society were you a member? no

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 Shewanigan Water And Power Co. Address Montreal P.Q.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Public Service
20. (a) Your specific occupation Accountant (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? yes (b) Did your employer refuse to promise you employment on discharge? no (c) Do you wish to return to your former employment? yes

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

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

Section F—PARTICULARS OF FARMING EXPERIENCE

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

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? yes
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.) yes
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form return to my former position.

DATE 16-9-42 194

SIGNATURE W. Douglas Small

FOR COMPLETION AND RETURN BY

1

Form P. 64

[redacted] Mr. Walter Smaill,
4478 St. Catherine St. W.
Apt. 11, Montreal, P.Q.

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

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

and the following number quoted:—

H.Q. 332-5-359 FD 13

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

March 29, 1945

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

SMAILL, Walter Douglas, Lieut.

C.A.

ESTATES BRANCH
APR 9 1945
H.Q.
OTTAWA
NATIONAL DEFENCE

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

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

EDM/NM

E. D. Murray Lt.
Director of Estates.

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

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT: NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....		~	~	~
2	Children of the Deceased and dates of their Births.....		~	~	~
3	Father of the Deceased.....		Walter Sydney Snaill	60	4478 St Catherine St Westmount 6 P.Q.
4	Mother of the Deceased.....		Grace Patterson Snaill	56	"
5	Brothers of the Deceased	Full Blood	Bruce Patterson Snaill	32	Baie Comeau, P.Q.
		Half Blood	~	~	~
6	Sisters of the Deceased	Full Blood	~	~	~
		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
			~		~

O/C 10-0 4478 St. Catherine St.
Westmount Oct 18.45

ESTATES BRANCH OCT 19 1945 H.Q. OTTAWA NATIONAL DEFENCE

Dear Capt. Murray

Re A.G. 332-5-3 (Overseas) 13.

Ismail, W.D

Since writing yesterday regarding trunk and suitcase we have been able to open and check the contents with list - In addition to list of such articles sent in letter, yesterday we find the list includes 1 sweater, 1 canvas bedroll straps and 1 button stick not found in luggage. You may be advised accordingly and why these are listed and not found

Morning

Yours truly

Grace P. Small

(Mrs W. S.)

Mrs. Grace Smaill
4478 St. Catherine St.
Westmount 6, Que.

Smaill W.D.

October 17 45

Capt. E. D. Murray
Ottawa Ont

ESTATES BRANCH
OCT 18 1945
H.Q.
OTTAWA
NATIONAL DEFENCE

Dear Sir: Re 1/4/20332 - 359 TD 13

The trunk and suitcase containing personal effects of my late son have been received but there are no keys with them. Also the list omits several items. Wrist watch $75.00 Commando Knife $35.00 Camera 65.00 Bed Roll and Coverall 75.00 Field glasses.

2

there no way of
tracing these articles?
Kindly let us know
what has become of the
Keys.

Yours truly
Grace P. Small

16.10.45

P.S.H.

113 Bruce Street,
Renfrew, Ontario,
October 26th, 1945

Captain E. D. Murray,
Director, Estates Branch,
Dept. of National Defence,
Ottawa.

Ref.: HQ 332-5-359 F.D.13

In re: Personal Effects,
Walter D. Small, Lieut. (N.
L. C. I.

ESTATES BRANCH
OCT 27 1945
H. Q.
OTTAWA
NATIONAL DEFENCE

Dear Sir:

At my parents' request, I write to you concerning missing articles among my late brother's personal effects.

In spite of the apparent hopelessness of such an inquiry, and because my brother's fellow-officers of the Black Watch have reported the receipt of the following articles after his demise, I do ask what are the chances of seeing again his:

√ Wrist Watch √ Commando Knife √ Pistol Flares
√ Lanyard √ Identity Disc ~~Pocket Knife~~ Overall.

Yours very truly,

Bruce V. Small

Mrs. Grace Snaill
4478 St. Catherine St.
Westmount 6, Que.

RECEIVED
FEB 28 1945
DOMINION ARCHIVES
OTTAWA ONT.

Feb. 28, 45

In reply to your letter of Feby 9th last would you kindly forward to me these

Records relating to my late brother Douglas Neville

Yours very truly
Grace Snaill

Mrs. Grace Smaill
4478 St. Catherine St.
Westmount 6, Que.

May 30th 1945

Director of Estates
Department of National Defence
Ottawa. Ont.

ESTATES BRANCH
MAY 30
H. Q.
OTTAWA
NATIONAL DEFENCE

Dear Sir.

Will you kindly forward
copy of
the Will of Lieut. Walter Douglas
Smaill 1st Batt. Black Watch
of Canada (R H R) C. A. O.
Douglas was killed February 28th
1945. Death certificate # 332-5-357
DR. 2(D)
at Ottawa Canada.

Thanking you for the same
I am

Yours Sincerely
Walter Smaill

Mrs. Grace Smaill
4478 St. Catherine St.
Westmount 6, Que.

June 15th 1945

Col. L. M. Firth
Director of Estates
Dept of National Defence
Ottawa, Ontario

Dear Sir.

Re H.Q 332-5-359 Fd 13

Smaill Walter Douglas Lieut Deceased
Canadian Army.

Enclosed letter from Taxation Division
I have received the Will,
but not the #2 statement also
the #3 item I received. will
you have your dept send me
the #2 Statement as previously

letter May 29th 1945. from
Inspector of successor duties.
and what credit account I
can receive on account of the
loss of my son Douglas.
I have not a present received
his personal effects which I
will receive finally later.
Many thanks for your assistance
I am

Yours truly

Walter Small

Mrs. Grace Snaill
4478 St. Catherine St.
Westmount 6, Que.

June 1st 1945

R.O.H. Bennett Esq:
Dependents' Allowance Board
Dept. of National Defence.
Ottawa Ont.

Dear Sir. Re
D-902340 Lieut Snaill
Walter Douglas.

I require:-

1. 2 copies of the Will
2. Balance of pay and allowances due to the deceased at the date of death.
3. Can'd forms S.D.1 + SD14 signed by the Executor of the Estate. according to the provisions of the Will

JUN - 4 1945

these are required by the
Internal Revenue, Taxation Division
If you can assist me in the
matter I will be greatly
appreciate the same

Yours Sincerely,

Wallis S. Pinnell

332-5-359.

Deceased.

Dear Sir:

[redacted] My son, D. B. Small was killed in service in Germany five years ago. Kindly refer to your records for any information as required. We do ex pect officially from Ottawa. Your letter refers to R.C.A.F. He was killed in Black Watch at time of his death. We are English speaking people & would appreciate any communication sent us to be in English - not French - as per enclosure.

Please let us know regarding gratuity. We understood that was settled five years ago - wages for services etc. Is there no way of knowing about a soldier being deceased? If so such a blow to receive a letter addressed to him after 5 years.

Yours
Grace B. Small
(Mrs. W. S.)

R-94442

W.S.G. 4

WAR SERVICE GRATUITY BRAMCH
DEPARTMENT OF VETERANS AFFAIRS

OTTAWA, CANADA
January 19th. 1950

Mr. W. D. Smaill,
4478 St. Catherine Street West,
MONTREAL, Quebec.

Dear Sir:

With reference to your period of service in the R.C.A.F.

As there is no record of completed application for War Service Gratuity having been received from you a copy of M.F.M. 441 is enclosed and it is requested that same be completed and returned to this office for consideration.

Please include regimental numbers and particulars of all service in the Canadian Armed Forces.

Yours truly,

J. McBride
Capt.
WAR SERVICE GRATUITY BRANCH
DEPARTMENT OF VETERANS AFFAIRS.

over.

{ Squadron / Battery / Company / Detachment } Black Watch Staff, Bleury St. Unit or Battalion

MORNING SICK REPORT

Montreal, P.Q. May 7th, 1942.

Regt'l No.	RANK AND NAMES (Christian Name in full)	Age	Religion	Whether for duty a prisoner or defaulter	Married or Single	DISEASE	Medical Officer's Remarks and Initial
2nd/Lieut.	SMAILL, W.D.	25	P		S	Contusion knee one month ago. Limitation move- ment lt. knee.	Duty. To DP & NH at 1100 hrs 9-5-42 Dr. Wilkie.

Copies: DMO
MRC
UNIT
LIEUT.
DP & NH

E.E. Locke Capt.
(E.E. LOCKE) Capt. Medical Officer ..... Orderly N.C.O.

M. F. B. 292
4560M-3-41 (9688-9-90)
H.Q. 1772-39-248

(OVER)

R. C. A. M. C.
M. O. i/c Medical Report Centre M. D. No. 4

RECORD OF DRUGS ADMINISTERED.

DRUG	DOSE	TIME AND DATE GIVEN
A.T. Serum	1cc. forord	14.9.44
A.T. Serum		
MORPHIA		
MORPHIA		

MALARIA TREATMENT.

Date									
Atebrin (grms.)									
Quinine (grains)									
Other Drugs. Date and dosage									

MALARIA:— B.T. ☐ M.T. ☐ Q. ☐ Clinical ☐

DYSENTERY:— B.Ex. ☐ E. Hyst. ☐ Indef. Ex. ☐

SULPHONAMIDES:—If drugs of the sulphonamide group are given, A.F. W3211 "Sulphanilamide label" must be used to record dosages.

No further entries will be made on this form when A.F. I 1220 is taken into use.

(52-9208)

2649

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

FIELD MEDICAL CARD.

*Army No..... Rank Lt. Service 2 1/2 y...

Surname {BLOCK LETTERS} SMAILL Initials W.O

Unit 2.O.C.H.-J.C. Religion C/E Age 27

*In the case of P's.O.W., write Serial No. allotted by A.F. W3000.

Insert X in square alongside CORRECT answer. DO NOT CROSS OUT.

Battle casualty ☒ Battle accident ☐ Injury ☐ Sick ☐

R.A.P. Unit 20 C.H. J.C. Date first seen 13 Sept 44

Date of wound or onset of illness 13 Sept 44

Diagnosis of Unit M.O.:— G.S.W.(R) E.A. hand (through & through)

Transferred to 10 Cas. Clearing Sta.

Date 13 Sept 44 M.O.'s Signature [signature]

Admitted to No.	Diagnosis:—	Date:—
Fd. Amb.		
21 F.D.S.	Same Evac. F.D.S.	14 Sept 44
9 Cas F.D.S.	as above	14 Sept 44

CLINICAL NOTES AND TREATMENT. (Dates and Units in which treated must be stated.)

140500 B ——— 9 Cas T.-DS
dressings checked. evac ———.
6 Can P.C.S. - 141330 hrs. - D Williamson Lieut
Evac. B.S. - Cond sent.
A B Powell Capt

This card must NOT be destroyed. It must accompany the patient if he is evacuated to U.K. together with all temperature charts, additional clinical notes, etc., attached to the patient.

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

Name SMAILL Walter Douglas No. R.94442
Surname Christian Names

AC2/Lieut R.C.A.F. & C.A. 28-2-45
Rank Unit Date of Death

AMOUNT U.S.C. 559.47
L.P.C. $ 675.67

Date April 11th, 1950

Other Credits.....

Total..... 1235.14
Prev. Dist. 1215.89
This Dist. 19.25

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
ALL	MOTHER	Mrs. Grace Smaill, 4473 St. Catherine St. W., Apt. 11, Montreal, Que. (Sole beneficiary per Will) P4 to Tres 1/2/4/50	19.25

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9998 ~~9999~~	247	02	30	777	19.25

CLASSIFIED BY

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(R.J. Orde) Brigadier
(~~K.M.K. Reid~~) Colonel
Director of Estates
JUDGE ADVOCATE GENERAL

AUDITED FOR PAYMENT

For Chief Treasury Officer

50M—5-46 (9153)
H.Q 1772-45-27

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY HG

Name SMAILL Walter D. No.
Surname Christian Names

Lieut. C.A.O/S 28-2-45
Rank Unit Date of Death

AMOUNT

L.P.C. $ 675.67

Date 22-11-45

Other Credits

Total 675.67

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Grace Smaill, 4478 St. Catherines St. W., Apt. 11, MONTREAL, Que. (Sole beneficiary under will)	$675.67

P4. TO TREAS. 8-12-45, p.m.

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	$675.67

CLASSIFIED BY

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

40M—8-45 (7876)
H.Q.1772-45-27

MH

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY

Name: SMAILL, Walter D. No.: D-902340
Surname Christian Names

Lieut. C.A. O/S 28-2-45
Rank Unit Date of Death

AMOUNT

W.S.G. 540.22
L.P.C. $ 675.67

Date: 26-1-46

Other Credits

Total 1215.89

Prev.dist. 675.67
This dist. 540.22

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Grace Smaill, 4478 St. Catherine St. W., Apt. 11, Montreal, Que. (Sole beneficiary per will)	540.22
			WSG

AUTHORITY					
H.Q. R.E. No.	VOTE	PRI	H.Q. SUB	OBJ.	AMOUNT
9999	731	00	00	001	$540.22

CLASSIFIED BY

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

75M—2-45 (6771)
H.Q. 1772-80-2

H.Q. 332-5-359
R. 4 (B).

Ottawa,

4th February, 1948.

Mr. Walter Smaill,
4478 St. Catherine Street West,
Apartment 11,
Montreal 6, Quebec.

Dear Mr.Smaill:

I am forwarding herewith a photograph of the grave and marker over the burial place of your late son, Lieutenant Walter Douglas Smaill, the location of which is grave 7, row E, plot 7, Nijmegen Canadian Military Cemetery, four miles South-East of Nijmegen, Holland.

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

Yours faithfully,

for A/Director,
War Service Records.

Encl.

EMA

File No 132.5-

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. _____ Name Darvill, Walter Douglas

Rank on Discharge Lieut Date of Discharge 21.2.45

Authority for Discharge or Retirement: Deceased

Served in:

				Non-qualifying service
Canada	from	9-4-42	to 26-8-43	
	from		to	
United Kingdom	from	27-8-43	to 12-8-44	
	from		to	
Italy	from		to	
Northwest Europe	from	13-8-44	to 28-2-45 T/O.	
---------	from		to	
-- ------	from		to	

Eligible for award of:

1939 - 45 Star O.K.

---------- _____

~~Italy Star~~ _____

France-Germany Star O.K.

Defence Medal O.K.

War Medal O.K.

Canadian Volunteer Service Medal O.K.

with clasp O.K.

NO RIBBON DESPATCH

Verified by _____

Date _____

Carded AUG 19 19

ZIA 165

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Walter Douglas Snaith
9	Date of his birth.	November 19th 1916.
10	Place and date of his marriage.	
11	Place and date of his parents' marriage.	Vancouver, B.C.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Winnipeg, Man.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Winnipeg 1916-1918 (b) Winnipeg to Montreal (c) to date 1940. (d)
14	Nature of employment before enlistment.	Shawinigan Water & Power Co.
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.	Montreal, P.Q.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	not known
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?	not known
20	Amount of War Savings Certificates held by deceased. Indicate where located.	not known
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	~
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	London Life Ins. Co. Beneficiary - Mother.
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	~

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— *(a)* His own separate board and lodging while on service. *(b)* Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	Nil
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.	~

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

(PLEASE TURN OVER)

DECLARATION

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

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

*FATHER of the deceased.

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

Walter S. Swain — Signature of Informant

4478 St Catherine St West Montreal PQ — Address

CERTIFICATE

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

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

Dated at Montreal this 6th day of April 1945

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

A J MacKenzie — Qualification Commissioner of the Superior Court District of Montreal

Address.....

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

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

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

R 94442

H3

Name SMAILL Walter Douglas

Classification

No. Sex Male Reference

RIGHT HAND

1. Thumb	2. Index finger	3. Middle finger	4. Ring finger	5. Little finger

LEFT HAND

6. Thumb	7. Index finger	8. Middle finger	9. Ring finger	10. Little finger

Impressions taken by: W. Young
(Signature of person taking prints)

Date impressions taken Oct. 27/41.

Note amputations

Signature of printed person: Walter Douglas Smaill

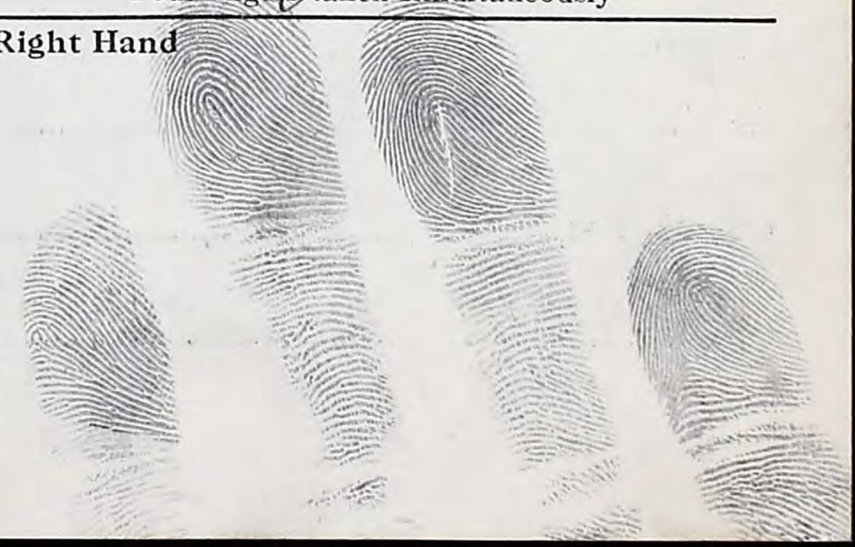
Four fingers taken simultaneously

Left Hand

Left thumb | Right thumb

Four fingers taken simultaneously

Right Hand



ROYAL CANADIAN AIR FORCE

Name SMAILL WALTER DOUGLAS R 94442

Rank AC2 R C A F

Age 24 Height 5'-11" Weight 177

Hair Fair Eyes Blue Hair on face Dark

Marks, scars, etc. Scars on bridge of nose, under left eye, on right cheek and on fourth finger of left hand

Walter Douglas Smaill (Signature of holder)

W. Kennedy F/Lt. (Signature of issuer)

Place #1 M. Depot, Toronto, Ont. Date Oct. 27/41.

Card serial number 107901

Right Index Fingerprint

Impressions forwarded to Headquarters P.I.B. by ..... Rank ..... Date .....

FOR HEADQUARTERS USE ONLY

R.C.A.F. PHOTOGRAPHIC ESTABLISHMENT

Received for Photostat by ..... Rank ..... Date .....

Forwarded to H.Q. P.I.B. by ..... Rank ..... Date .....

HEADQUARTERS FINGERPRINT SECTION

Received at P.I.B by ..... Rank ..... Date .....

Classified at P.I.B. by ..... Rank ..... Date .....

Checker ..... Searcher ..... Date .....

R.C.A.F. R. 159
120M—8-41 (629)
H.Q. 1062-3-114

Mrs. Grace Smaill
4478 St. Catherine St.
Westmount 6, Que.

D. 13637

June 1st 1945.

Army - Paymaster General
War Service Branch
Room 1500 New Army
Ottawa Ont.

Dear Sir

Will you kindly send
the next of Kin Mrs. G. P. Smaill
of Lieut W. Douglas Smaill (RHR
The Black Watch of Canada
C.A.O. Killed February 28th 1945
in Germany. Certificate # 332-5-55
the war Service Gratuity forms. D.R. 2(D)

RECEIVED JUN 4 PAYMASTER GENERAL O.S.C. Branch

Thanking you for the above

I am

Yours sincerely

Walter L. Small

OFFICIAL CANADIAN ARMY OVER[illegible]S CASUALTY [illegible]T[illegible] CAT

NUMBER

RANK Lieutenant

SERVICE UNIT (R.H.A.) or (C.A.O.)

SMALL, Walter Douglas

DATE OF BIRTH DAY 19th MONTH November YEAR 1916 Date enlisted: 16-3-42

MARITAL STATUS Single Religion: United Church

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Father NAME Mr. Walter Small,

ADDRESS 4478 St. Catherine St. W., Apt. 11, Montreal 6, Que. ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. 6796A H.Q.332-5-359

CASUALTY DETAILS Killed in action. DATE 28-2-45

Western European Theatre of War.

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

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

15-3-45 DATE

[illegible] Lieut.

OFFICER I/C RECORDS

5

COPY FOR C.R. FILE

19th March, 1945.

Mr. Walter Smaill,
4478 St. Catherine Street West,
Apartment 11,
Montreal 6, Quebec.

Dear Mr. Smaill:

It was with deep regret that I learned of the death of your son, Lieutenant Walter Douglas Smaill, who gave his life in the Service of his Country in the Western European Theatre of War on the 28th day of February, 1945.

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

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

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

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

/EMA

88

DR (2)
DR

CENTRAL REGISTRY Army
PERS. SEC.
APR 28 1945
File
Chgd. to DR
Barracks

4418 St Catherine St
Westmount 6 P.Q.
April 26th 1945

HQ. 332-5-359

Major Angus Pearson
Director of Records,
Canadian Army Corps.,
Ottawa, Ont,

Dear Angus.

Lieut W. Douglas Small
killed in Germany February 28th 1945 left
me, three Victory Bonds 100.00 each which
I am depositing in the Royal Bank of Canada
but the Bank of Canada will transfer
them all I get a Certificate of Death.
from your Dept., so will you kindly
forward me this certificate as soon
as possible Thanks

Yours Sincerely
Walter Small

95

(F)

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: IN THE FIELD (GERMANY)

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: SMAILL (*Block letters*)

Given names: Walter Douglas

Do not write in this space

4. RESIDENCE

Street: St. Catherine, W. No. 4178

Official name of civil municipality or township: Montreal

Municipal county: Province: Que.

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): Manitoba

11. DATE OF BIRTH: Nov. (Month) 19th. (Day) 1916 (Year)

12. AGE OF DECEASED	Years	Months	Days	If less than one day old
	28			....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	SMAILL, Walter	
MOTHER (Maiden Name)		

19. Place of burial, cremation or removal: Germany

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: Feb. (Month) 28th (Day) 19 45 (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, etc.

(a) Killed in action

due to

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

(b)

due to

(c)

II

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

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

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

(b) Duration of disease....days

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

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

State findings....Was there an autopsy?....

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

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

Manner of injury....
(How sustained)

Nature of injury....

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

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

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

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 Natl. Defence

File No 3 32-5-359

REBURIAL

NO _____

RANK Lieutenant

NAME Smaill - W. A.

NAME OF CEMETERY Nijmegen Canadian Military Cemetery,

LOCATION OF CEMETERY 4 miles S.E. of Nijmegen, Holland.

GRAVE LOCATION Grave 7 Row E Plot 7

AUTHORITY 54-27-88-2 Vol. 21

Reburial list.

H.Q. 332-5-359
(D.R. 2(C))

4th September, 1946.

Mr. Walter Smaill,
4478 St. Catherine Street West, Apartment 11,
Montreal 6, Quebec.

Dear Sir:

Information has just been received from overseas that the remains of your son, Lieutenant Walter Douglas Smaill, have been carefully exhumed from the original place of interment and reverently reburied in grave 7, row E, plot 7, of Nijmegen Canadian Military Cemetery, four miles South-East of Nijmegen, Holland. Marked map is enclosed. This is a recognized military burial ground and will receive care and maintenance in perpetuity.

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

Yours faithfully,

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

/EMA

M. F. M. 14
480M-10-40 (7443-4)
H. Q. 1772-39-1662

Montreal Que.

No. R.94442 RANK Ac2 NAME Small W.D.

*~~MARRIED~~ PLACE OF ENLISTMENT
*~~WIDOWER~~ AND DATE 1-5-41
*SINGLE

RATE OF PAY

D. O. No.	DATE	RANK	GROUP	P. F. OR A. S.	DAILY RATE	IF LIABLE PEN. DED.	REMARKS
41	5.5.41	Ac2	5.	A.S.	1.30	N.1	

ASSIGNMENTS

ASSIGNEE	EFFECTIVE DATE	AMOUNT	TOTAL
Mrs. Grace Small ~~1.6.41~~ ~~20.00~~			
" (Change)	1-11-41	1.30	1.30
MFM.18 comp.d/20-11-41 EFF. 20-11-41.			

DEPENDENTS' ALLOWANCES

DATE APPLICATION FORWARDED	RELATIONSHIP	AMOUNT AWARDED	EFFECTIVE DATE

OUTFIT ALLOWANCE $ PAID ON
*DELETE WORDS WHICH ARE INAPPLICABLE

IN RECEIPT OF PENSION UNDER PENSION ACT OR MILITIA PENSION ACT. (1910) $ P. A.

CASUALTIES, ETC.

PART II D. O. NO.	DATE	
46	1-5-41	S.O.S Montreal R/C Eff. 3-5-41
		Granted leave w/o Pay Eff 2-5-41. to 3-5-41.
123	6-5-41	T.O.S. Yarmouth Det. Eff 3-5-41.
147	30-5-41	S.O.S. Chc HQs eff 30-5-41.
131	4-6-41	~~Acct. Ill~~ H.Q. Lab eff 31-5-41
1	30-5-41	Lab ~~#~~ U. of N.B. eff. 30-5-41.
22	22.9.41	SOS unb Det. to #4 M. Depot. Que. - eff. 22.9.41
227	23-9-41	TOS#4"M"Depot,Que.post.from RCAF Detachment, University of N.B., Fredericton, N.B. Eff. 23-9-41
246	15-10-41	SOS#4"M"D.Que.on post.to#1"M"D.Toronto,Ont.Eff.14-10-41
247	16-10-41	TOS #I M DEPOT FROM #4 "M" DEPOT QUE. EFF 15-10-41
278	21-11-41	SOS.#1 M DEPOT ON ACCT. DISCHARGED EFF 20-11-41 CHARACTER GOOD. ENT. TO ~~EKTXXMX~~ CLOTHING ALLOWANCE. D.R.O. 280 TO INCLUDE "ENT. TO REHABILITATION GRANT"

CONFIDENTIAL

R.C.A.F. M.2
150M—8-40 (6421)
H.Q. 1062-10-2

ROYAL CANADIAN AIR FORCE

Medical Board held at Quebec City, No. 4 "M" Depot *Date* 25-9-41

FILE NUMBER

Surname SMAIL *Chr. Names* WALTER DOUGLAS
Nature of Commission N.A. *Date of Birth* 19-11-16 *Married or Single* S.
Branch Pilot. R.C.A.F. *Hours Flown* 2 hours as a passenger
Address 4478 Ste Catherine West, Montreal.

HAVE YOU ANY HISTORY OF:—

(i) NERVOUS TROUBLE or Nervous Breakdown NO
Severe or "Sick" Headaches, Migraine NO
Fits or Convulsions of any kind NO
Sun or Heat Stroke NO
Head Injury or Concussion (including "knock-out") Knocked out while playing football once.
Insomnia, Nightmares, Sleep-walking, or Bed-wetting NO
(ii) LUNG TROUBLE or Consumption NO
Bronchitis, Pneumonia or Pleurisy Pneumonia in 1931. –
Asthma or Hay Fever NO
(iii) HEART DISEASE, "Weak or Strained Heart" NO
Fainting Attacks or Giddiness NO
Rheumatism, Rheumatic Fever or "Growing Pains" NO
Frequent Sore Throats or Tonsillitis NO
Diphtheria, Scarlet Fever or Scarlatina Not sure if had scarlet fever.
(iv) STOMACH or BOWEL TROUBLE NO
Chronic Indigestion or Pain after Food NO
(v) KIDNEY or BLADDER TROUBLE NO
Syphilis or Gonorrhœa NO
(vi) TROPICAL DISEASE NO
Malaria NO
Dysentery NO
(vii) EYE TROUBLE or Inflammation of Eyelids NO
Wearing of Glasses Since 1923
Colour or Night Blindness NO
(viii) EAR TROUBLE, Earache or Discharge from Ears Yes, perforation
Deafness, Noises in the Ears, or Dizziness NO
Frequent Colds in Head, Catarrh or Obstruction NO
Prolonged Hoarseness or Loss of Voice NO
Sea, Car or Train Sickness NO
Discomfort on Swings, Roundabouts, Switchbacks Yes
(ix) OPERATIONS NO
(x) Any Illness or Injury not mentioned above Fracture of left ankle at 4 years old – healed correctly.

Education Junior matriculation
Present Occupation Radio mechanic Hobbies Photography
Previous Service 9 months with Black Watch Reg. In the RCAF since 1 May 1941.
Athletics Football (Intensively) Ski, Swimming.
Habits—Smoking No Alcohol Social glass
FAMILY HISTORY—Consumption NO
Nervous Ailments, Mental Trouble, or "Fits" NO

Father Alive—Health	Phlebitis	60	Dead—Cause
Mother Alive—Health	Good	55	Dead—Cause
Brothers (1) Alive—Health	good	(....)	Dead—Cause
Sisters (0) Alive—Health		(....)	Dead—Cause

I hereby declare that I have carefully considered the statements made above, that to the best of my belief they are complete and correct, and that I have not withheld any relevant information or made any misleading statement. I am fully aware that by wilfully suppressing any information I shall incur the risk of not being granted a Commission, or if it is granted, of being required to relinquish it and forfeit any claim to gratuity or other award.

Date 30 Sep 41 *Signature* Douglas Smail *Witness* J Ferris Rcaf

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique ..... good ..... *(b)* Mentality ..... average .....
Body Marks, Scars, Deformities ..... 2 vaccination marks on left arm .....
Size of Thyroid Gland ..... normal .....
Surgical Abnormalities ..... none .....
Results of Wounds, Injuries, Operations ..... broken left ankle at the age of 4: well healed .....

	Date 29-9-41	Assessing Room	Date	Assessing Room	Date	Assessing Room
Height (ins.)	70½					
Weight (lbs.)	177					
Chest Circumference (ins.)	37					
Body Build (lbs.)	+ 27					
Leg Length (ins.)	43					
Pulse Rate — Sitting	56					
Pulse Rate — Standing 1st	76					
Pulse Rate — Standing 2nd	92					
Pulse Rate — After Exercise	72					
Pulse Rate — Time to Normal	15"					
Arterial Walls	N					
Blood Pressure — Systolic	105					
Blood Pressure — Diastolic	80					
Heart — Size	N					
Heart — Sounds	N					
Heart — Rhythm	N					
Lungs	N					
Breath held						
Expiratory Force	220					
Vital Capacity (Best of 5)	4600					
Reflexes — Knee	SL					
Reflexes — Ankle	SL					
Reflexes — Triceps						
Reflexes — Abdominal	SL					
Reflexes — Plantar	Abs					
Cranial Nerves						
Balancing Rod	R. L. SI SI	R. L.	R. L.	R. L.	R. L.	R. L.
Self Balancing	R. L. S S	R. L.	R. L.	R. L.	R. L.	R. L.
Tremors — Fingers	S.F.					
Tremors — Eyelids	S.F.					
Abdomen — Liver	N					
Abdomen — Spleen	N					
Abdomen — Muscular Tone	N					
Urine — Albumen	Neg					
Urine — Sugar	Neg					
Initials of M.O.	H.R.					

Remarks on Any Abnormalities Found

Date .....

Date .....

Date .....

40 mm. Hg. Test ..... 55 secs 6. 667. 766. 666. 67 .....
Date .....
Date .....
Date .....
Date .....

Remarks by Consultant.

EYE EXAMINATION

History	wears glasses since 1923		
Visual Acuity	R.20/40 $^{+2.25}$, c —— = 20/200		
	L.20/80 $^{+2.25}$, c —— = 20/200		
Colour Vision	Ishihara (9) Normal		
Red, Green	Alternating neglect, ortho.		
Diaphragm Test (P.D. = 63)	5/B/5		
Convergence	C. = 12 cms.		
	S. C. = 9 cms.		
Accommodation	R. 12 cms		
	L. 10 cms		
Cover Test	N		
Fundi and Media	N		
Fields	N		
Remarks: with glasses:	R.E. 20/30		
	L.E. 20/30		
	Initials of M.O. E.L.	*Initials of M.O.*	*Initials of M.O.*
	Date 24-9-41	*Date*	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History: Perforated left ear drum, 4 years ago: dry perforation.

Hearing	R. Ear	W.V. 20		
	L. Ear	W.V. 20		
External Ear, Meatus Membranes	R. Ear	N		
	L. Ear	Perforation		
Middle Ear, Eustachian Tubes	R. Ear	Patent		
	L. Ear	Non patent		
Cochlear Apparatus	R. Ear	N.A.		
	L. Ear	NA.		
Vestibular Apparatus	R. Ear	N.A.		
	L. Ear	N.A.		
Buccal Cavity		N		
Teeth		3 Molars missing		
Gums		N		
Pharynx		N		
Nasopharynx		N		
Nose		N		
Larynx		N		
Remarks:		*Initials of M.O.* E.L.	*Initials of M.O.*	*Initials of M.O.*
		Date 24-9-41	*Date*	*Date*

HISTORY OF PRESENT CONDITION

Date 1-10-41

History is satisfactory. Overweight. Visual acuity below requirements for aircrew. Ear drum perforation also entitles to rejection.

This candidate is unfit for flying duties as aircrew.

Suggested cat: A 4 B

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date 2-10-41

Unfit for flying duties as pilot or aircrew.
Cat: A 4 B

Pres: J. Stevens. Squad. L/A

Memb: R. E. L. Roberts F/O

E. J. Jeanvalis F/L

AIR FORCE No. R94442

SURNAME: SMAILL, FULL CHRISTIAN NAMES: WALTER DOUGLAS

ENLISTMENT — PLACE Montreal — DATE 1/5/41. RE-ENLISTMENT

C.R. FILE NUMBER

RECORD OF SERVICE AIRMEN

R.C.A.F. FORM R44(B) 30M-3-41 (9782) H.Q. 1062-3-58

1. POSTING (INDICATE S.O.S. AND T.O.S.)

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE			D.R.O.
TOS	M tl. 2/c	1	5	41	Mtl 2/c 39
SOS	Montreal Yc	2	5	41	Mtl Yc 41
TOS	RCAF Sta. Yarmouth N.S.	3	5	41	119 BR 123
SOS	Yarmouth Det (amended)	31	5	41	119 BR 147 (187 A/O)
TOS	(EAc duty at Dep of NR)	30	5	41	U NB 1.
SOS	Yarmouth Det to U. of N.B	30	5	41	119 BR 187 A/O
TOS	Univ of N. Brunswick	30	5	41	U NB 1
SOS	Univ of N Brunswick	22	9	41	U NB 22
TOS	4 "M" Depot, Quebec City	23	9	41	4 M D 227
SOS	4 M Depot Quebec	14	10	41	4 M D 246 (247)
TOS	1 M Depot Toronto	15	10	41	1 M D 247 (248)
SOS	1 MD Toronto (DRO's 278 & 279 cancelled)	20	10	41	1 MD 280 / 1 MD 278/279
	Discharged under Para 392(12)(KR)(Air)				
SOS	1 MD Toronto	20	10	41	1 MD 280
	Discharged under Para 392(12) KR AIR				
	a/o D.				
	4478 St Catherine St. W.				
	Montreal, Que.				
	21-SA-001 M.D. 4.				

C	CH	DATE			PARA	ADD ON DISCHARGE	
S		20	10	41	04B	22302	

5-9

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
ACL	1	5	41	Mtl 2/c 39
8				

3. MEDICAL HISTORY

EXAMINATIONS (IN RED INK)

DATE	FORM	CATEGORY	REMARKS

HOSPITALIZATION (IN BLACK INK)

HOSPITAL	ADMITTED	DISCHARGE	D.R.O.
QUARTERS	CONFINED	RET'N DUTY	
1/5/41	R-100	A+B	
Sta Hosp	9-5-41	14-5-41	119 BR 127-133
22-11-41	B 227	22-11-41	

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
R. Mech Lt.	L	1	5	41	Mtl 2/c 39
R-48	L				

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
2-5-41	2-5-41	1	LWOP	Mtl 2/c 39
6-9-41	20-9-41		Special Leave	U NB 19

RELIGION — R.C.A.F. OVERSEAS — ENLISTMENT MARTIAL STATUS — PRESENT MARTIAL STATUS — HIGH & TECH. SCHOOL EDUCATION — C. OF E. BAP. PRES. R.C. HEB. MIS. OTHER PROT. — U.C. PREV. SERV. — PROVINCE OF ENLISTMENT — DISCHARGE — AC

AIR FORCE No. R94442

SURNAME: SMAILL, FULL CHRISTIAN NAMES: WALTER DOUGLAS

ENLISTMENT PLACE Montreal DATE 1/5/41. RE-ENLISTMENT

C.R. FILE NUMBER

RECORD OF SERVICE AIRMEN

R.C.A.F. FORM R44(B)

7. BIRTH: DATE 19/11/16 | PLACE Winnipeg | CITIZENSHIP British

FATHER (FULL NAME) Walter Sydney Smaill

BIRTHPLACE Montreal

MOTHER (FULL MAIDEN NAME) Grace Patterson

BIRTHPLACE Moulinette, Que.

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE	x Quebec
JUNIOR MATRICULATION	x Quebec
SENIOR MATRICULATION	
TECHNICAL SCHOOL	
UNIVERSITY	
CORRESPONDENCE COURSES	

9. CIVIL OCCUPATIONS OR EXPERIENCE USEFUL TO R.C.A.F.

Clerk 4 years Shawinigan Water & Power Co.

$300

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

Black Watch (R.H.R.) Canada 2/Lt. N.A. Prob. Aug 12/40 to 3/5/41. Left to join R.C.A.F.

11. HONOURS-AWARDS, MENTIONS

	AUTHORITY	DATE

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO Nil DUAL Nil PASSENGER Nil

13. RELIGION Protestant

14. LANGUAGES English

15. SPORTS Football, Skiing, Hockey, Basketball, Swimming, Wrestling

16. SINGLE-MARRIED-WIDOWER-SEPARATED-DIVORCED: Single

WIFE (FULL MAIDEN NAME)

PLACE OF MARRIAGE DATE

AUTHORITY (IF AFTER ENLISTMENT)

17. MARRIED ESTABLISHMENT

REMARKS	RANK	EFFECTIVE	D.R.O.

18. CHILDREN

CHRISTIAN NAMES	BIRTH DATE	D.R.O.	CHRISTIAN NAMES	BIRTH DATE	D.R.O.

19. NEXT OF KIN (ADDRESS AND D.R.O. IN PENCIL)

FULL NAME: Walter Sydney Smaill RELATIONSHIP Father

ADDRESS: 4478 St Catherine St W Montreal D.R.O.

FULL NAME: RELATIONSHIP

ADDRESS: D.R.O.

20. PAY ENTRIES (OFFENCE FORFEITURES, STOPPAGES IN RED INK)

RATE CHANGES ETC.	EFFECTIVE	D.R.O.	RATE CHANGES ETC.	EFFECTIVE	D.R.O.
Pay 1 day					
Subs. allce 1 day	1 5 41				

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
Mobilization	1 5 41				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
att for qtrs & rtns		5-5-41	114 BR 123
Ceases att for qtrs & rtns		30-5-41	114 BR 147 18740
Att'd to Edmn for pay		31-5-41	Edm 131 18740
Special Warrant C 20274		6-9-41	2 NB 19
Discharge Hrs & Services		22-9-41	4 MD 227
Occ. pte. qtrs & draw rtns.		15-10-41	1 MD 247
Discharged RCAF (SR) under Para 392 (12) KR (AIR) (Proceeds 279 Compl Book)		20-11-41	IMD 280 IMD 279/279
Char on Discha. Good. Clothg allce			
Discha RCAF (SR) under Para 392 (12) KR (AIR)		20-11-41	IMD 280
CHAR on discharge Good: Clthg allce			
Rehabilitation Grant.			

22.(A) ADDRESS PRIOR TO ENLISTMENT

4478 St Catherine St W Montreal Que.

22302

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN. CARD	K X.

M. F. D. 930 A
250M—4-40 (4606-7)
H.Q. 1772-39-1548

C.A.S.F. & R.C.A.F.

CANADA

LAST PAY CERTIFICATE

Regtl. No. R94442 Rank and Name AC2 SMAILL W.D.

of R.C.A.F. Company, etc., #1 "M" DEPOT TORONTO ONT. Regiment, etc., on

(Transfer, Posting or Discharge) DISCHARGE to (Unit and Station) on 20-11-41 194

Reason for discharge SERVICES NO LONGER REQUIRED Authority: DRO 280 d/24-11-41

On TRANSFER OF OFFICER or WARRANT OFFICER, Class I

Outfit alowance of $..... has been paid by the Treasury Officer, Military District No..... or..... Air Command.

REMARKS: Discharged-Para. 392(12)KR(Air) Ent. to clothing allowance and Rehab. Grant.

State (1) Date of appointment or enlistment 1-5-41

(2) If individual has dependents eligible for Dependents Allowance, has application been submitted? ~~XX~~ NA

(3) Has assignment of pay been made? YES If so, amount 10.00 effective date 1-8-41 MFC 18 Eff 20-11-41

(4) In the case of Officers in receipt of a Service (P. F.) Pension state monthly deduction $.....

The folowing is a statement of the account of the above named from 1-11-41 to 20-11-41 194 the inclusive date of transfer, posting or discharge.

DR. R.C.A.F. ON A/S RATES CR.

PARTICULARS	AMOUNT		PARTICULARS	AMOUNT	
Balance Dr. from last account			Balance Cr. from last account		
First Monthly Payment	15	25	Regimental Pay 20 days at 1.30 $	26	00
Casual Payments	2	34	Trademen's Pay ..... days at ..... $		
Payment on Transfer, Posting or Discharge	~~XXXXX~~ 3	35	Additional Pay (Give particulars) ..... days at ..... $		
Assigned Pay 20/30 of 10.00	6	67	Allowances (Give particulars) 30 days at REHABILITATION GRANT 1.30	39	00
Regimental Charges					
Public Stoppages (Give particulars):					
MFC 512	1	74	CLOTHING ALL'CE	35	00
CLOTHING ALL'CE	35	00			
REHABILITATION GRANT	39	00			
To Balance Cr. (To be paid by new unit)			By Balance Dr. (To be deducted by new unit)		
Total	100	00	Total	100	00

I certify that the above is a true and correct statement of the account of the above named on transfer, posting or discharge.

TORONTO ONTARIO (Place)

26-11-41 (Date)

W. C. Kavanagh WO1
Paymaster.
FOR ACCOUNTANT OFFICER
#1 "M" DEPOT TORONTO

ROYAL CANADIAN AIR FORCE

Should this Parchment be Lost or Mislaid no Duplicate of it can be obtained

Parchment Certificate *of Discharge of No.* R94442 *(Rank)* AC2

(Name) SMAILL, Walter Douglas

Born in the County of Winnipeg

in the Province of Manitoba

Attested at Montreal, Que. *on the* 1st. May *19*41

for the Duration of War, *at the age of* 24 *years.*

His description is as follows:—

Age 25 years. Height 5 feet 10 ins. Complexion Medium

Eyes Blue Hair Lt. Brown Trade Radio Mechanic Std.

Marks or scars on the face or other parts of the body: None

Signature of Man: W. Douglas Smaill

Service towards completion of engagement - - - years - 201 - days.

He is discharged on 20-11-41 in consequence of Para. 392(12)

K.R.(Air) Having become unfit for his special duties.

Campaigns None

Medals and Decorations None

Discharge confirmed at Toronto, Ontario.

Signature: W.R. Marsh W/C

Date November 20th. 1941.

N.B.—Any person finding this certificate is requested to forward it in an unstamped envelope to the Department of National Defence, Ottawa, Canada

R.C.A.F. R. 15A
5M—12-40 (8728)
H.Q. 1062-3-20

HEADQUARTERS COPY

His conduct and character in the service have been assessed on discharge under K.R.O., R.C.A.F., Para. 415, as:—

GOOD

His qualifications during Air Force service in the trade shown have been assessed under K.R.O., R.C.A.F., Para. 416, as:—

SATISFACTORY

His qualifications for civil employment in the trades shown are assessed from his Air Force service as:—

CLERK

The man's address on discharge is:—

4478 St. Catherine St. W.,
Montreal, Que.

Place Toronto, Ont.

Date Nov. 20th. 1941

G. E. Marsh W/C

No. 1 "M" Depot, Officer Commanding
R.C.A.F.

April 10th 1941.

Recruiting Officer,
R. C. A. F.,
Montreal, P.Q.

Dear Sir,

This is to certify that my son, Walter Douglas Smaill, was born in Winnipeg, Man. on November 19th 1916.

Very truly yours
Grace P. Smaill

Duly sworn to. April 10-41

447 St. Catherine St.,
Westmount, P.Q.