TRENHOLME, WILLIAM
HENRY

Afternoon

now serving Overseas

ATTESTATION PAPER

McGILL CONTINGENT, C. O. T. C.

Reg. No. 5-C

Surname (Block Capital) TRENHOLME

Given Names (in full) William Henry.

Permanent Address 204 Quebec St., Sherbrooke, Que.

City Address 3429 Peel St.

Date of Birth Feb. 3, 1916 Tel. No. PL 7385

Religious Denomination Presbyterian Languages ENGLISH

Faculty Commerce Class IV University McGill

Occupation Name of Employer

Address of Employer James Graham

Next of Kin (Relationship) Father (Name) J. G. Trenholme

Address of next of Kin 204 Quebec St., Sherbrooke.

Training desired (Infantry, Artillery, etc.) Artillery

DETAILS OF PREVIOUS TRAINING:

NATURE	YRS.	MOS.	Rank on Discharge	REMARKS
War Service				
Militia				
C.O.T.C.	1		Private	BISHOP'S
Cadet				

1. I hereby apply to join the McGill University Contingent, Canadian Officers' Training Corps, and agree to take the Oath of Allegiance and abide by the conditions prescribed on the Attestation paper I sign.

2. It is understood that I pass a recruit class before being finally accepted and receiving my uniform and equipment.

3. I agree to return all articles of uniform and equipment which I may receive, and for which I sign, or pay for them at current Government rates.

4. I am a British subject and do not belong to any unit of His Majesty's Forces at the present time.

5. It is understood that none of the conditions above mentioned shall prejudice in any way my responsibility to the Corps as set forth in the Declaration I am to make and sign on becoming a member of the Corps.

6. It is understood that I am personally responsible for keeping myself posted as to Contingent and Company orders and that ignorance of same will not be taken as an excuse.

7. I agree to contribute to the funds of the McGill University C.O.T.C. the pay received in respect of the annual training or trainings performed during my service with the unit.

8. I declare that personal details given on this form are correct.

Witness: E.K. McDougall Signed W. Henry Trenholme

Date Oct. 3/39

OATH:

"I, William Henry Trenholme (Name in full) do sincerely promise and swear that I will be faithful and bear true allegiance to His Majesty The King.

DECLARATION:

"I, William Henry Trenholme whose name is hereunto subcribed, declare that I have taken the above oath to which I have affixed my name hereunder. and that I agree to serve in the McGill Contingent, C.O.T.C. for a course of one consecutive year's training, or until legally discharged therefrom, dismissed or removed, or until my resignation is accepted, under the conditions of service prescribed by the Government for the Active Militia of Canada, and as set forth in the Militia Laws existing, and in the regulations for the Canadian Officers' Training Corps prescribed or hereafter to be prescribed for the same; and I agree that upon my enlistment in the C.O.T.C that I will be governed by the Standing Orders and Regulations of the Contingent.

Witness, my hand this OCT - 3 1939 day of 19

W B Keith Lieut — Witness

W. Henry Trenholme — Signature

W E Ross Major — O.C. McGill C.O.T.C.

Resworn this day of 19

Witness — Signature — O.C. McGill C.O.T.C.

Resworn this day of 19

Witness — Signature — O.C. McGill C.O.T.C.

Reg. No.....

Name Trenholme W.H.

Resworn this.....day of.....19.....

.....Signature

.....Witness

.....O.C. McGill C.O.T.C.

Resworn this.....day of.....19.....

.....Signature

.....Witness

.....O.C. McGill C.O.T.C.

REGIMENTAL RECORD

Enrolled.....Lance Corporal.....Corporal.....

Lance Sergeant.....Sergeant.....P. Sgt.....Colour Sergeant.....

Company Sergeant Major.....Company Q.M. Sergeant.....

Battalion Sergeant Major.....Battalion Q.M. Sergeant.....

Lieutenant.....Date of promotion and number of certificate.....

Whether in possession of Certificate "A".....Date and year of award.....

" " " "B".....

		1st yr.	2nd yr.	3rd yr.	4th yr.		1st yr.	2nd yr.	3rd yr.	4th yr.
Musketry Qualification	Service Range					Miniature Range				
Attendance										

Efficient.....1st yr.....2nd yr.....3rd yr.....4th yr.....

Left Contingent.....Discharge Number.....

REMARKS Now serving Que Regt '41

D. P. E. Category..... Cat.....19..... Cat.....19..... Cat.....19..... Cat.....19.....

CERTIFICATE OF MEDICAL EXAMINATION

Height 5' 9½" Weight 139 Chest (Max) 37 (Min) 35

Eyes 20/20 20/30 Heart and Lungs neg.

Descriptive marks.....

I have examined the above named cadet in accordance with instructions laid down in "Regulations for the Canadian Medical Services" and find him fit,

Category B.V.

Date Oct 7/39

QUALIFICATIONS

DATE Mar/40

COMMON	(300)	175	
MG	(300)	101F	
PRCT'L	(100)	—	—

Medical Officer

Occupational History Forms completed

Received.....Checked.....E.....Card.....✓.....Observations.....

ORIGINAL—ORIGINAL
DUPLICATA—DUPLICATE
TRIPLICATA—TRIPLICATE

M.F.M. 1. (Fr.)
14M—8-39 (1695)
H.Q. 1772-45-18

Doit être remplie en triplicata, désignant chaque exemplaire en biffant les deux termes inutiles.
To be completed in triplicate. Copy designation to be shown by striking out terms not applicable.

C

Unité (Unit): No. 3-A District Depot

Grade (Rank): ~~2nd~~ Lieutenant

N° personnel (Personal No.):

Nom (Name): William Henry Trenholme

TROUPES CANADIENNES DE CAMPAGNE
CANADIAN FIELD FORCE

FORMULE DE DÉCLARATION DES OFFICIERS
OFFICERS DECLARATION PAPER

Applicable également aux sœurs hospitalières
Also applicable to Nursing Sisters

64/LBEVI

1. Nom (Surname): TRENHOLME
2. Prénoms (Christian Names): WILLIAM HENRY
3. Adresse actuelle (Present address): 204 Quebec Street, Sherbrooke, Que.,
4. Date de naissance (Date of birth): Feb. 3rd. 1916.
5. Lieu de naissance (Place of birth): Canada (Pays)—(Country) Montréal, Que., (Comté ou province)—(County or Province) (Ville on canton)—(Town or Twp.)
6. Religion (Religion (state denomination)): Presbyterian.
7. Profession ou emploi (Profession or occupation): Instructor in Machine-guns.
8. Marié, veuf ou célibataire (Married, widower or single): ~~Single.~~ Married — See Change
9. Nom du plus proche parent (Name of next of kin): ~~James Graham Trenholme,~~ " "
10. Parenté de celui-ci (Relationship): ~~Father.~~ " "
11. Adresse du plus proche parent (Address of next of kin): ~~204 Quebec Street, Sherbrooke, Que.,~~ " "
12. (a) Spécifiez l'unité de la milice active avec laquelle vous servez ou avez servi (State unit of Active Militia in which you are serving or have served): C.O.T.C. Bishop's College 1933 & 1934. Mc. Gill C.O.T.C. Oct. 1939 to May 1940. Sherbrooke Reg. (Reserve) ferom March 1941 to date.
    (b) Grade actuel (Present rank): Second Lieutenant.
13. Quel service de guerre antérieur avez-vous accompli? (State particulars of former war service): NO

G.A.A.

Je William Henry TRENHOLME déclare solennellement que les renseignements ci-dessus sont exacts, que je détiens une commission de Sa Majesté dans la milice canadienne, et que je suis consentant à servir dans les troupes canadiennes de campagne si je suis tenu de le faire et aussi longtemps que cela sera nécessaire.

I, ... 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 Field Force if, when and so long as required.

Date: ~~27-Sep-41~~ ~~15-Nov-41~~ 27-9-41 (May.)

W. H. Trenholme 2/Lt.
(Signature et grade)—(Signature and rank)

CERTIFICAT DU COMMANDANT
CERTIFICATE OF OFFICER COMMANDING

La demande du (The application of) 2nd Lieut. William Henry TRENHOLME (Grade et nom)—(Rank and Name) qui désire être nommé (for appointment to the)

au (Unité)—(Unit) No. 3-A District Depot, avec le grade de (with the rank of) 2nd Lieutenant

et affecté au poste de (and appointment) as reinforcement officer for CAC, a été — ~~was~~ est — is recommandée (recommended, appointment) Cette nomination, devant prendre date le (to date from) ~~27-Sep-41~~ ~~15-Nov-41.~~ 27-9-41 (May.) a été approuvée. ~~has been approved.~~ est recommandée pour être approuvée. (is recommended for approval.)

Autorisation (Authority) H.Q. 54-27-20-715 (Pers. 2b1), dated 13-11-41 ~~HQ-6974-03-P4-13-Pers.-a--d/10-Nov-41~~

(L.M.HUGHES) (Signature du Commandant)—(Signature of O.C.) Major (Grade)—(Rank) RCA

Date: 15-Nov-41

No. 3-A District Depot. (Unité)—(Unit)

O.S.B. COMR

FINGERPRINTED

Etat de service de / Record of Service of: William Henry TRENHOLME (Nom)—(Name)

Unité de la milice active / Active Militia Unit: Sherbrooke Regt (RF) COTC Bishop College.

Grade / Rank: 2nd Lieut. Date du grade / Date of Rank: ~~27-Sep-41~~ 15-Nov. 41. maf

Grade le plus élevé mérité par examen / Highest Rank for which qualified by examination: 2nd Lieut. Ecole de guerre / Staff College: Nil

Langues / Languages: English Cours d'état-major de la milice / Militia Staff Course: Nil

Diplômes d'université ou de collège / University or College Degrees: B.A. & B.Com Cours supérieur / Advanced Course: Nil

Instruction ou aptitude technique civile (indiquez en détail) / Civil Technical Training or qualifications (specify)

Autres aptitudes militaires ou cours spéciaux (indiquez en détail) / Other military qualifications or special courses (specify)

O.T.C. Brockville, Ont.

Rapport — Report: Date	Rapport — Report: Reçu de — From whom received	Etat des promotions, rétrogradations, mutations et permutations, maladies ou blessures, rapports, etc., à compter de la date de sa nomination aux troupes de campagne — Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date of appointment to Field Force	Grade indiqué — Rank shown	Prenant date le — Effective date	Unité — Unit	Endroit — Place	Autorisation — Authority: N°, Partie II, Ordres du jour. Liste des morts et blessés, etc. — Part II D.O. No. Cas. List, etc.	Autorisation — Authority: Daté le — Dated
		Affecté lors de sa nomination / Joined on appointment						
17 Jul 41	O.C.	Posted for training to the Officers Training Centre, Brockville, Ontario, attached for allpurposes "On Command" from the Sherbrooke Reg't (RF)	2/Lieut.	0915 hrs. 4 Jul 41	O.T.C.	Brockville	Pt II D.O. 84	17 Jul 41.
5 Nov.41	O.C.	"On Command" to Headquarters, C.A.C. Camp Borden, Ontario for rations & quarters (Authority:K.36-6-29-23 dated 29 Oct. 1941.	2/Lieut	5-Nov-41	O.T.C.	Brockville	Pt.II D.O. #176	5-Nov.41
10 Nov-41	O.C.	Ceases to be "On Command" to Headquarters C.A.C. Camp Borden, Ontario.	2/Lieut	8-Nov-41	O.T.C.	Brockville	Pt.II D.O. #179	10 Nov.41
14 Nov 41	O.C.	Having qualified in the rank of 2/Lieut. (Infantry Rifle) and further qualified in subjects special to C.A.C. is S.O.S. to No. 3-A District Depot (AF) Kingston Ontario.	2/Lieut	14 Nov 41	O.T.C.	Brockville	Pt.II D.O. #183	14 Nov. 41

Pour les entrées supplémentaires, se servir de **M.F.M. 1 et 2 (a) (Fr.)**
For additional entries use **M.F.M. 1 and 2 (a) (Fr.)**

CERTIFICAT DE L'EXAMEN MÉDICAL
CERTIFICATE OF MEDICAL EXAMINATION

Nom en entier (Name in full): TRENHOLME WILLIAM HENRY — Date: June 30th 1941

PARTIE 1. Renseignements obtenus du candidat.
Part 1. Information obtained from the applicant.

1. Age: 25

2. Avez-vous déjà souffert de l'une quelconque des maladies suivantes? (Have you ever suffered from any of the following diseases?) no

a. Rhumastisme (Rheumatism)	no	j. Affection nasale (Nasal trouble)	no
b. Tuberculose (Tuberculosis)	no	k. Maladie des oreilles (Ear disease)	no
c. Bronchite ou asthme (Bronchitis or asthma)	no	l. Maladie des yeux (Eye disease)	no
d. Affection cardiaque (Heart disease)	no	m. Epilepsie (Epilepsy)	no
e. Maladie du rein ou de la vessie (Kidney or bladder disease)	Appendec. 1933 yes	n. Maladie nerveuse ou mentale (Nervous or mental disease)	no
f. Gastrite intestinale (Gastro-intestinal)	no	o. Syphilis	no
g. Hernie (Rupture)	no	p. Gonorrhée (Gonorrhœa)	yes
h. Varices (Varicose veins)	no	q. Avez-vous déjà porté des verres? (Have you ever worn glasses?)	
i. Pieds plats ou déformés (Flat or deformed feet)			

W. Henry Trenholme
(Signature du candidat)—(Signature of applicant)

Observations des examinateurs (Examiners remarks re above):
Ears, nose & reflexes normal.
Color vision Ishihara CN.
A. L. Delahaye Major.

JUL 2 1941
URINE 43587 CV
X-RAY 83486 N C.V.

PARTIE 2. Renseignements obtenus par l'examen médical. Le candidat doit être déshabillé.
Part 2. Information obtained by medical examination. The applicant must be stripped

1. Marques ou cicatrices d'identification (si celles-ci sont opératoires, obtenir les détails) (Identification marks or scars (If operative obtain history).): Appendectomy scar.

2. Taille (Height): 5 pieds (feet) 9 ¼ pouces (inches).
3. Poids (Weight): 145 livres (pounds)
4. Teint (Complexion): Fair — Yeux (Eyes): Grey — Cheveux (Hair): Blond
5. Développement (Development): Good — Bon (Good) / Passable (Fair) / Médiocre (Poor)
6. Tour de poitrine—Circonférence, pleine expansion (Chest measurement—Girth on full expansion): 20/30 pouces (inches) — Degré d'expansion (Range of expansion): ev 20 cv 20 pouces (inches)
7. Vue, œil droit (Vision, right): 20/20 — œil gauche (left): 20/20
8. Ouïe, oreille droite (Hearing, right): Good, tonsils out. — gauche (left):
9. Conditions de la bouche et des dents (Condition of mouth and teeth):
10. Les anormalités (congénitales et pathologiques) constatées lors de l'examen sont les suivantes: (The abnormalities (congenital and pathological) found on examination are as follows:) Prominent veins internal surface mid left leg. Varicocele left. Herpes labialis (upper lip).

PARTIE 3. Nous, les examinateurs, ne trouvons aucune trace des maladies énumérées dans la question 2 de la partie 1, sauf tel que mentionné dans les observations. Nous avons examiné le candidat conformément aux instructions de la brochure "Physical Standards and Instructions for the medical examination of Recruits", et il peut être classé dans la catégorie "A"

Observations spéciales lorsque la catégorie est inférieure à A (Special remarks when category lower than A): J.G. BROWNLEE.COL. C.F.WYLDE.COL. I.E.BRUNEAU.CAPT.

J.G. Brownlee Lt Col — C.F. Wylde Col — I.E. Bruneau Capt.
(Président)—(President) (Membre)—(Member) (Membre)—(Member)

VACCINATIONS, INOCULATIONS, COMMISSIONS, RECLASSIFICATION DE LA CATÉGORIE MÉDICALE
VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Détails succints et signature / Brief details and signature	Date	Détails succints et signature / Brief details and signature
15-11-41	Cat A, confirmed W.S. Burton	13-6-42	T.A.B.T. 1.0 cc (3rd man)
	CHEST X RAY NEG.		
15.11.41	VACCINATION		
15.11.41	T. A. B. T. 1		
	T. A. B. T. 2		
	T. A. B. T. 3		

Grade / Rank ..... Nom / Surname Trenholme Prénoms / Christian Name William Henry

Garnison — Station	Date d'arrivée à la garnison — Date of Arrival at the Station	Date de — Dates of: L'admission à l'hôpital — Admission into Hospital: Jour — Day	Mois — Month	Année — Year	La sortie de l'hôpital — Discharge from Hospital: Jour — Day	Mois — Month	Année — Year	Maladie — Disease	Nombre de jours à l'hôpital — Number of days in hospital	Détails sur la nature et l'origine de la maladie; dire si elle était bénigne ou grave, si elle est entièrement guérie, et si un traitement spécial a été adopté. Dans le cas des maladies vénériennes, mentionner la nature de la maladie première et dire si on a prescrit le mercure. Si la maladie est accidentelle, spécifier si elle fut contractée en service et si un conseil d'enquête a été tenu. Détails et dates au sujet des fausses dents et des appareils chirurgicaux fournis. — 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 du médecin — Signature of Medical Officer

Pour les entrées supplémentaires, se servir de **M.F.M. 1 et 2 (b) (Fr.)**
For additional entries use **M.F.M. 1 and 2 (b) (Fr.)**

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

Name: Trenholme William Henry

M.F.M. 1 & 2 (a)
20 M-11-36 (9359)
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
		Granted 1st PL with 1st FTW 15/22/5/42	Lieut		CAC	UK	✓✓✓#33	19-5-42
		Cases attd from 3 C A C R U FTR	Lieut	5 June 42	5 Armd Regt	UK	37	10 June 42
		P/leave to 12 Oct 42	Lieut	5 Oct 42	3 CACRU	UK	136	6 Oct 42
SUS		S.O.S. to 27 Armd Rgt	Lieut	7 Oct 42	3 CACRU	UK	143	14 Oct 42
	T.O.S.	T.O.S. from 3 C A C R U	Lieut	8 Oct 42	27/CAR	UK	1	16 Oct 42
		Compl D M Inst. "P2"	Lieut	15 June 42 / 22 Aug 42	3 CACRU	UK		
		Compl Short Wireless "Pass"	Lieut	24 Aug / 12 Sep 42			152	24 Oct 42
		Compl Short Gunn "Pass"	Lieut	14 Sep / 3 Oct 42				
Birth.		Son James Graham Sherbrooke Lucier		18 Dec 42	27 Arm R	UK	8	31 Dec 42
		Attd for to 1 Army T.K. Bde	Lieut	2 May 43	27 Arm R	UK	6	18 May 43
		Cease Attd to 1 Army T.K. Bde	Lieut	12 May 43	27 Armd / 27 CAT R.	UK	7	25 May 43
CHANGE OF ADDRESS	N of K.	(WIFE) MRS EDITH MOLLY TRENHOLME, 156 LONDON ST., SHERBROOKE, QUEBEC, CANADA					13 Ex 24	17 July 43 / 30 Apr 43
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
(295)		Embarked at UK on 3 June 44 / Disembarked at France on 6 June 44	Lieut		27 Armd R	21 A Gp	34	15 July 44
		Killed	Lt	7 Jun 44	27 AR		CLA 457	18 Jun 44
(56		SOS. Killed in action	Lieut	7 June 44	27 Armd R	21 A Gp	29	26 June 44

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

M.F.M. 1 & 2 (a)
20 M-11-36 (9359)
H.Q. 1772-45-18

Name TRENHOLME, W.H.

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
		T.O.S. No.3-A District Depot on appointment as Rein. Officer for C.A.C.	2/Lieut	15-Nov-41	3A DD	K'ton.	D.O. 261	18-Nov-41.
1127		Attached to Camp H.Q. Barrierfield, Ont., for quarters, & rations, from 15-Nov-41. to 18-Nov-41.	"	15-Nov-41	"	"	D.O. 261	18-Nov-41.
		Attached for all purposes to C.A.C.(TC), Camp Borden, Ont.	"	18-Nov-41	"	"	D.O. 261	18-Nov-41.
		Att'd to ASCA CATC for A/P and adv. training	"	19/11/41	"	Borden	ASCACATC DO 265	20/11/41.
		Record of Marriage - 1-1-42 Sherbrooke, Que Edith Marion Trenholme	"	1 -1-42.	"	"	" D.O. 4	7-1-42.
change of address not K		Change of address next of kin to Mrs. Edith Marion Trenholme 140 Dunlop St. Barrie, Ont.	do	10-1-42	do	do	do D.O. 8	10-1-42
		Qualified and promoted to Lieutenant	Lieut	18-2-42	do	do	CARO 1523 do D.O.44	24-12-41 24-2-42
		Ceases to be att'd to A8-CACATC and att'd to (S.F.R.)	do	23-2-42	do	do	do D.O.44	24-2-42
24Feb42		Attached 27CAR (Sher Fus R) for rations quarters and duty.....	Lieut	22Feb42	27CAR	Debert	Part II No. 4	24Feb42
3Mar42		Attached for pay purposes.....	"	24Feb42	"	"	" " 10	3Mar42
20 Apr. 42	27 CAR	Proceeding on embarkation leave plus travelling time from 21 Apr. 42 to 24 Apr. 42 was issued transportation warrant A-106021 on 18 Apr. 42	"	21 Apr 42	"	"	Part 2 No. 28	20 Apr. 42
30 APR. 42	27 CAR	ON COMMAND AND ATTACHED FOR ALL PURPOSES TO CANADIAN MILITARY HEADQUARTERS, LONDON ENGLAND	LIEUT.	30 APR 42	27 CAR	DEBERT	PART 2 SUPPL. 35	30 APR. 42
		Embarked c SOS CAC	✓	2-5-42	✓	O/B Ship	✓ 32	16-5-42
		T.O.S. CAC	✓	3-5-42	✓	✓	✓ ✓	✓
		Disembarked	✓	12-5-42	CAC	U/K	✓ ✓	✓
		T.O.S. #3 CAC RU	✓	13-5-42	✓	✓	✓ ✓	✓
		Attd to 5th Cdn. Arm'd Regt (8NB)		23-5-42	"	"	PT II DO # 36	27-5-42

27 ARMOURED REGT
THE SHER FUS R

SERVICE AND CASUALTY FORM

27 Army Tank Regt

PART I (For all ranks)

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

Unit: No. 3 "A" DISTRICT DEPOT KINGSTON, ONT. Regimental Number:

1. Surname: Trenholme
2. Christian Names: William Henry
3. *Substantive Rank and Appointment:
   *Acting Temporary or Local Rank: Lt
   giving date:
   *To be entered in pencil to facilitate alteration.
4. Place of birth: Montreal, Que.
5. Date of birth as declared on attestation: 3-Feb-16.
   (A)
6. Date of enlistment: 27-Sep-41
7. Place of enlistment: Kingston, Ont.
8. Residence at time of enlistment: 204 Quebec St., Sherbrooke, Que.
9. (B) Special conditions (if any) of enlistment or rate of pay:
10. (C) Any subsequent variations of conditions of service:
11. Religion: Pres.
12. If married, state date: Single
13. Trade on enlistment: Instructor in Machine-guns
14. Corps, trade and grade:
15. (D) Qualifications:
16. (E) Miscellaneous entries:

(17) Regiment or Corps: No. 3-A D.D.

Unit (Battn., etc):

(18) Medical

Category	Date	Authority
"A"	15-11-41	M.B.

(19) Next of kin (entries to be made in pencil): (Wife) Mrs Edith Molly Trenholme
156 London St., Sherbrooke, Quebec Canada

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

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

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry to be shown
			Embarked b. S.O.S. C.A.	O.B. Ship	2-5-42	Lieut	DO #32 16-5-42
			T.O.S. C.A.R.	✓	3-5-42	✓	✓
			Disembarked	U.K.	12-5-42	✓	✓
			T.O.S. #3 C.A.C.R.U.	✓	13-5-42	✓	✓
			Attd. to 5th C.A.R. (S.N.B.H.)	"	23-5-42	"	PTD DO #36 d/27-5-42.
		#3 C.A.C.A.U.	Drafted, A.P.L. with, 1st F.T.W. 15/22/5/42			✓	✓ ✓ #33 DO/19/3-42.
			C.I.B.A. 5th C.A.R.	U.K.	6-6-42	do	DO # 111 d/7-9-42
		"	P/2 F.R. Mutations 5/12-10-42	do	5-10-42	"	MO 136 6-10-42
			S.O.S. To 27th C.A.R. (SH. FUS.)	do	7 Oct 42	do	DO 143 d/14 Oct 42
			TOS 27 C.A.R. (WHILE ON LEAVE)	"	8 OCT 42	"	D.O. 1 - d/16 OCT 42.
			RETURNED FROM LEAVE	"	12 OCT 42	"	D.O. 1 d/16 OCT 42.
~~26-12-42~~	~~C.R.~~	~~27 C.A.R.~~	~~Sen. from Jamie Graham.~~				
26-12-42	C.R.	27 C.A.R.	Sen. Sent Jamie Graham at Sherbrooke Que.	~~Field~~	18-12-42	~~Lieut~~	2 MO 8 d/31/12/42
UNIT REDESIGNATED 27 CDN ARMY TANK REGT							
3-3-43	C.R.	27 C.A.R.	Att. 1st A.P.R. / 1 Can Army Tank Bde	Field	2-3-43	Lieut	6 d/18-3-43
20-3-43	C.R.	27 C.A.R.	Cat. at 1st A.P.R. / 1 Can Army Tank Bde	Field	12-3-43	Lieut	7 d/25-3-43
24/4/43	C.R.	27 Bat. A.R.	Change address N.-of-A.R.	Field	24/4/43	Lieut	13 d/30/4/43
3/7/43	C.R.	27 Bat. A.R.	Change address N.-of-A.R.	Field	3/7/43	Lieut	24 d/12/7/43
27 ARMOURED REGT							
15 Jan 44	C.R.	27 A.R.	Awarded Canadian Volunteer Service Medal and Clasp	Field	15 JAN. 44	Lieut	44/22 Jan 44
~~16Jun44~~	~~CR~~	~~27AR~~	~~SOS killed in action~~	~~Field~~	~~7Jun44~~	~~Lieut~~	~~29/26 Jun 44~~
16Jun44	CR	27AR	SOS killed in action	Field	7Jun44	Lieut	29/26 Jun 44

OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full WILLIAM HENRY Trenholme (b) Reg'l. No.
2. (a) Arm of service Army (b) Unit 3-A DD CAC (c) Rank 2/Lieut.
3. (a) Date of birth 3-Feb-16 (b) Have you any dependents? NO (c) Place of residence at time of enlistment Sherbrooke, Que.
4. (a) Place of enlistment Kingston, Ont. (b) Date of enlistment 27-Sept-41

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school ~~19~~ 24 yrs. (b) Were you attending school or college up to the time of enlistment? No
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) B.A. B.Com
7. If you attended a university, give name of university and standing or degree secured University of Bishop College. McGill Univ.
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? English (b) What languages do you read well? English

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

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

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

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

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

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

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

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

18. Name of employer Windsor Mills Flying Training School Ltd. Address Windsor Mills, Que.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) as in question 18.
20. (a) Your specific occupation Instructor in Machine-guns (b) Number of years' experience at this occupation with any employer 1 yr.
21. (a) Did your employer promise definitely to give you employment on discharge? No (b) Did your employer refuse to promise you employment on discharge? No (c) Do you wish to return to your former employment? Indefinite.

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? None (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? NO
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.) NIL
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form To remain in the Permanent Force of the Army

DATE 15-Nov-41 194 SIGNATURE W. H. Trenholme.

M | 1 | 2 | 3 | X | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 | 39 | 40

KILLED IN ACTION 7 JUN 44

1. H.Q. File No. INDEX CARDS MADE ~~INDEX~~ REMOVED

OFFICERS INFORMATION CARD

2. Date Completed 12 APRIL 43

3. Name (use block letters.) TRENHOLME (surname) WILLIAM HENRY (given names)

4. Rank LIEUT.

5. Unit CAC (27th C.T.R)

6. Present Employment & Location TROOP LEADER

7. Permanent Home Address 204 Quebec St., Sherbrooke, Quebec.

8. Med. Cat. A

9. Decorations

10. Date of Birth 3 Feb 16

11. Place of Birth Montreal Quebec.

12. Nationality Canadian

13. Adapt'y Test

14. Total Commiss'd Service 2yrs 1 Mon.

15. Date of Appmt. to A.F. 15 Nov 41

16. Rank (Militia)

17. Unit or Corps (Militia)

18. T.O.S. 7s 3 May 42 X

W H Trenholme.
(signature of officer)

APR 24 1943

Civilian Education

19. School	20. No. of Years	21. Name of Institution	22. Courses or Subjects	23. Graduated Yes	23. Graduated No	24. Degree or Diploma	25. Year Finished	26. Professional Memberships	27. Hobbies (see note)
High School	4	LENNOXVILLE HIGH SCHOOL	Jr. Matric. ☑ Sr. Matric. ☐	YES		X X X X X	1933		SKIING
Coll. or Univ.	7	UNIV. OF BISHOP'S COLLEGE McGILL UNIVERSITY	B.A B.Com.	YES		B.A B.Com.	1937 1940		
Post Grad.									

Civilian Occupation

28. Name of Firm (Last three)	29. Location	30. Nature of Business or Profession	31. Employed From	31. Employed To	32. Positions Held (Mention major responsibilities)
1. WINDSOR MILLS LTD FLYING TRAINING SCHOOL	WINDSOR MILLS, QUE	Training pilots for RCAF	JUNE 40	JUNE 41	Assistant Armament Instructor.
2.					
3.					

Languages

33.	English	French	German	Russian	Spanish	Other
Spoken	Mother tongue	Speaking	No	No	No	
Written	Mother tongue	Speaking	No	No	No	
Translated	Mother tongue	Speaking	No	No	No	

34. Marital Status: Single ☐ Married ☑ Separated ☐ Divorced ☐ Widower ☐ No. of Dependents 1

35. Religion: Prot. ☑ R.C. ☐ Other (specify) PRES.

36. Racial Origin: Anglo-Saxon ☑ Fr. Can. ☐ Other

37. Special Service or Appointments

38. Service Schools and Courses

Year	Months	School	Course	Grade
1941	4	OTC (EC)	INF v CAC	PASS
1942	2½	3 CAC RU	DOM INSTRUCTOR	P2
1942	¾	3 CAC RU	WIRELESS	PASS
1942	¾	3 CAC RU	GUNNERY	PASS

39. War and Military Service

Year	Months	Service	
1942/43	11	Present War (Overseas only)	YES
		Great War (Any Service)	No
		P.F. Officer	No
		P.F. Other Rank	No
1941	9	N.P.A.M. or R.F. Officer	YES
1931/32	9	C.O.T.C.	YES
1939/40	5	C.O.T.C.	YES
		Other (Specify)	No

40. Staff Employment or Command (last six)

Year	Months	Location	Appointment

NOTE:—HOBBIES SHOULD INCLUDE ACTIVITIES WHICH MIGHT HAVE AN APPLICATION IN WARTIME, E.G., TRAINING DOGS, PIGEONS, ETC. OR ADVANCED PHOTOGRAPHY.

THIS SIDE ONLY FOR N.D.H.Q. OR C.M.H.Q.

NAME TRENHOLME, W.H.
SURNAME FIRST. USE BLOCK LETTERS.

SUMMARY OF CONFIDENTIAL REPORTS

Entry Made at N.D.H.Q. C.M.H.Q.	27 D.T.R. Ster. Tus.									
Date of Report	30/3.43									
1. Reliability	C									
2. Leadership	C									
3. Sense of Responsibility	D									
4. Stability	C									
5. Alertness	C									
6. Administrative Ability	C									
7. Energy and Persistence	C									
8. Group Value	B									
9. Appearance	B									
10. Speech	C									
11. Writing Facility	C									
12. Basic Knowledge of Arms	B									
13. Tactical Aptitude	C									
14. Teaching Ability	B									
RATING										

RECOMMENDATIONS

Staff Appointment										
Accelerated Promotion										
Normal Promotion	✓									
Retarded Promotion										
Transfer to Other Arm										
Retirement or Reclassicat'n										
Civil Occupation										
Other										

POSTINGS, ETC.

A.P. AND R. OR OTHER ENTRIES	EFFECTIVE DATE	UNIT	AUTHORITY: MIN. APPROVAL	AUTHORITY: R.O.
AEF: KILLED IN ACTION	7 JUN	44		CAS/6976
2/Lieut	15 Nov 41			
Lieut	18 Feb 42			

MFM—241(b)—40/P & S/1626 (2644)

file No. 332-53-174

TO BE COMPLETED IN DUPLICATE

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

MF M10 40/P & S/423 (3767) 3/18B

WILL

(1) I, William Henry TRENHOLME, of the City
(Names in Full) (City, Town, Village, Township)

Address in civil life.

of Sherbrooke, in the County ~~District~~ of Sherbrooke

Province of Quebec, Student
(Civil Occupation)

Regimental No. Lieutenant, Unit 27 Cdn Armd Regt(SFR), 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 wife, Mrs Edith Marion TREHOLME, now residing at 156 London Street, Sherbrooke, in the Province of Quebec, CANADA, the whole of my Estate, both real and personal.

6

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 Edith Marion TRENHOLME, 156 London Street, Sherbrooke,
(Name) (Address) Quebec, CANADA.

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

IN WITNESS WHEREOF I have hereunto set my hand this 22nd day of March 19 44

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

W. H. Trenholme
(Signature of soldier)

First witness sign here.

(5) Signature Gerard W. Bois
Civil Address 107 Wellington S. Sherbrooke Que.
Civil Occupation clerk

Second witness sign here.

Signature [illegible]
Civil Address 3571 Shefford St, Montreal. Que.
Civil Occupation Accountant.

(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 (both copies) with Commanding Officer for transmission to the Records Office for safe custody.

MAY 3 1944

WILL RECEIVED IN
DOCUMENT SECTION
MAY 4 1944
RECORD OFFICE
NAT. DEF. H. Q.

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER

RANK Lieutenant

SERVICE UNIT 27th Army Tan Regiment R.C.A. (C.A)

NAME TRENHOLME, William Henry

DATE OF BIRTH

DAY 3rd MONTH February YEAR 1916 Date Enlisted: 15-11-41

MARITAL STATUS Married Religion: Presbyterian

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

NAME Mrs. Edith M. Trehholme,

ADDRESS 156 London Street, Sherbrooke, P.Q.

ADDITIONAL PERSON TO BE NOTIFIED

ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. Canrecords 6976

CASUALTY DETAILS Killed in action

H.Q.332-53-174

DATE 7-6-44

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

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

DATE 20-6-44

OFFICER I/C RECORDS

6

COPY FOR DOCUMENT FILE

Sheet No.....

POSTINGS FROM O/S CASUALTY LISTS

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

Regt'l No..... Rank Lieut. Surname Trenholme Christian Name William Henry

Unit	Hospt.	Admitted			Discharged			Hospt. Days	Disease or Injury	Remarks	Cas. List No.
		Day	Mo.	Year	Day	Mo.	Year				
CAC. 27 Armd Regt.									Killed 7-6-44		A 457

Records B3-49
H.Q. 1772-45-8
100M—7-44 (5202)

No. Rank Lieutenant Name TRENHOLME, William Henry

Unit ~~R.C.A.~~ R.C.A.C. Date of death 7th June, 1944.

Died at France

Cause Killed in action.

Death occurred on strength of Forces. HQ 332-53-174 d 20-6-44

N/K Mrs. Edith M. Trenholme Relationship Widow

Address 156 London Street, Sherbrooke, P.Q.

Remains buried in Normandy 7F/1 Mr 904727. Cemetery

Grave location

CHK ✓

OVER-

DEATH CERT. TO N.K.

BURIAL REPORT TO N.K. APR 30 1946

RETURN TO BUR. OF STAT. MAY 8 1946

ROYAL MESSAGE DESP'D. JUL 15 1944

CAN. MESSAGE DESP'D. 28/6/44

Temp BR sent to NK & Map

REBURIAL

Bretteville-sur-Laize Cdn. Mil. Cem.,
Bretteville-sur-Laize, France.

Grave 4, row A, plot 24.

HI & CR Form Despd. FEB 3 1947

7-6-44
(O.C.L.-516)

AWARDS—CANADIAN ARMY (ACTIVE) (1631) M

M.J.A.
500M—1-44 (3467)
H.Q. 1772-45-8

FILE NO. 332-53-174

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
TRENHOLME,	William Henry		Lieut.	R.C.A.

WAR SERVICE
BADGE
(CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	5876
France-Germany Star	
Defence Medal	
War Medal, 1939-45	
CVSM & Clasp	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

MEMORIAL BAR

DATE DESP.

REGN. NO. 174

(1) MEDALS

PERSON ENTITLED TO: Mrs. Edith M. Trenholme Widow

ADDRESS: 156 London St., Sherbrooke, Que.

(2) MEMORIAL CROSS

WIDOW: Mrs. Edith M. Trenholme, (ENGLISH)

(1631)

ADDRESS: 156 London St., SHERBROOKE, P.Q.

(2) DESP. SEP 11 1944 REGN No. 1761

(3) MEMORIAL CROSS

MOTHER: Mrs. Lilian Trenholme, (MFM-5) (ENGLISH)

(1631)

ADDRESS: 204 Quebec St., SHERBROOKE, P.Q.

(3) DESP. SEP 11 1944 REGN No. 1762

S.O.S.

NAME TRENHOLME, WILLIAM HENRY H.Q. File 332-53-174

RANK ~~2/Lt.~~ LT.

ACTIVE UNIT C.A.C. (P.R.) #4 D.D.

RESERVE UNIT SHER. R.

Appt. R.O. No. 1738 Date 7-8-42. Effective date of appt. ~~[illegible]~~ 27-9-41 (R.O. 1876, MEMO)

CANADA GAZETTE

TRANSFERS, PROMOTIONS and REVERSIONS

To BE LT. C.A.C. REINF. No 4 D.D. 18-2-42. R.O. #1876, 18-4-42

EMBARKED CANADA - SAILING LIST No. 1456. MAY 2 1942

TO BE LT., 27TH ARMD. REGT. (SHER. FUS. R.) FROM No. 4 D.D. (REINF.) C.A.C. 24-2-42.
R.O. # 1932, 5-5-42.

5M—10-41 (2020)
H Q 1772-45-8

K.I.A. 7-6-44 27TH ARMY TANK RGT. "U.K." CABLE # 6976 d/30-6-44
C.A.C.