E49746
BEDARD
JOSEPH RAOUL

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: BEDARD Joseph-Raoul-Roch (b) Reg'l. No. B-49746
2. (a) Arm of service: R.C.A.S.C. (b) Unit: R.C.A.S.C. REINF.C.A. (c) Rank: Driver
3. (a) Date of birth: 1-7-1922 (b) Have you any dependents? nil (c) Place of residence at time of enlistment: Arvida, P.Q.
4. (a) Place of enlistment: Quebec P.Q. (b) Date of enlistment: 27-1-43

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school: 14 ans. (b) Were you attending school or college up to the time of enlistment? nil
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.): 5 ieme Annee.
7. If you attended a university, give name of university and standing or degree secured: nil
8. (a) Did you ever enter upon a trade apprenticeship? nil (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? FRANCAIS. (b) What languages do you read well? FRANCAIS.

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): En Emploi. (b) At time of enlistment of what trade union or professional society were you a member? nil

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: Aluminium Co. Address: Arvida, P.Q.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.): Munitions.
20. (a) Your specific occupation: Carbon-Tester (b) Number of years' experience at this occupation with any employer: 1½ mois
21. (a) Did your employer promise definitely to give you employment on discharge? nil (b) Did your employer refuse to promise you employment on discharge? nil (c) Do you wish to return to your former employment? nil

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? nil (b) Do you feel competent to operate a farm? nil (c) If so, in what kind of farming? nil
25. (a) Were you born on a farm? nil (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? nil
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: Chauffeur de Camions.

29-1-43

DATE ..... 194..... SIGNATURE J. R. Roch Bedard

DOIT ÊTRE REMPLIE ET RENVOYÉE PAR

Formule P. 64

4-1-G

Monsieur Gaudias Bédard,
20 Val-Alain,
Cté de Lobtinière,
Québec.

Prière d'adresser toute communication subséquente à ce sujet au:

DIRECTEUR DES SUCCESSIONS,
MINISTÈRE DE LA DÉFENSE NATIONALE,
OTTAWA, ONTARIO

et de citer le numéro suivant:

Q.G. 405-B-29,962 FD.358

MINISTÈRE DE LA DÉFENSE NATIONALE
DIVISION DES SUCCESSIONS
OTTAWA, ONTARIO

26 octobre 1944

Afin de les consigner dans nos dossiers et au cas où il y aurait une succession militaire à distribuer (conformément à la loi) au nom de feu

BEDARD, Joseph Raoul Roch, Soldat,

E.49746, Armée Canadienne.

ESTATES BRANCH
NOV 3 1944
H.Q. OTTAWA
NATIONAL DEFENCE

il est nécessaire que les renseignements voulus concernant le défunt et les membres de sa famille soient fournis à la Division des successions. Vous êtes donc prié de lire le mémorandum ci-inclus avant de remplir les pages 2 et 3 de cette formule. Les détails exigés doivent être inscrits comme il faut et la déclaration à la page 4 doit être ensuite signée en présence d'un pasteur, prêtre, magistrat de la localité, commissaire instrumentaire, notaire public, ou officier de l'une quelconque des forces de Sa Majesté, que l'on priera de compléter et signer le certificat. Cette formule doit être ensuite renvoyée à l'adresse mentionnée ci-dessus.

Si l'espace destiné aux questions des pages 2 et 3 de cette formule n'est pas suffisant pour donner tous les détails, il faudra alors se servir de l'espace réservé aux "remarques supplémentaires", à la page 4.

OG/GC

pour Le directeur des successions,
Spalvert major

M.F.W. 77a (French)
3M—10-44 (5704)
H.Q. 1772-39-972

RÉPONDRE AU LONG À TOUTES LES QUESTIONS APPLICABLES

ÉTAT des noms, âges et adresses, ou dates de décès, de tous les parents du défunt, à chacun des degrés spécifiés ci-dessous.

Degrés de parenté	PARENTS à signaler		TÉMOIGNAGE DU DÉCLARANT		
			NOM ET PRÉNOMS de tout parent de chacun des degrés mentionnés	Age	ADRESSE AU LONG de chaque parent survivant, en regard de son nom, et date du décès de tout parent décédé
1	Veuve du défunt				
2	Enfants du défunt et dates de naissance				
3	Père du défunt		Gaudiose Bédard	52	Val-Alain Cté Lotbinière
4	Mère du défunt		Ida Lemay	45	"
5	Frères du défunt	Frères germains	Raymond Bédard Camille Bédard Paul Emile Gilles	23 21 15 8	Val-Alain Cté de Lotbinière " " " " " "
		Demi-frères			
6	Sœurs du défunt	Sœurs germaines	Jeanne d'Arc Bédard Madeleine Bédard Claire Bédard Hélène Bédard Bernadette Bédard	17 14 13 12 10	Val-Alain Cté Lotbinière " " " "
		Demi-sœurs			
7	Noms des frères ou sœurs (germains ou non) du défunt, *qui sont décédés*, et date de décès de chacun d'eux		Noms et âges de leurs enfants (le cas échéant)		Adresse de leurs enfants

RÉPONDRE AU LONG À TOUTES LES QUESTIONS SUR CETTE PAGE

DÉTAILS D'IDENTITÉ

8	Nom et prénoms du défunt.	Bédard Joseph Raoul Roch
9	Date de sa naissance.	1er juillet 1922
10	Lieu et date de son mariage.	
11	Lieu et date du mariage de ses parents.	à S. Pierre Claver de Montréal le 16 février 1920

DÉTAILS DE DOMICILE

12	Lieu où le défunt est né.	à Charny, Bté de Lévis
13	Indiquer, par ordre, la province, l'état et/ou le comté où le défunt a résidé avant son engagement, et la durée dans chaque cas.	(a) Charny, P.Q. 10 ans (b) Val-Alain, P.Q. 10 ans (c) Val-D'Or 1 an (d) Arvida 2 mois
14	Nature de son emploi avant son enrôlement.	Travaillait dans l'aluminium à Arvida
15	Indiquer s'il était propriétaire de la maison où il demeurait. Le cas échéant, à quel endroit?	Non
16	Indiquer le lieu où le défunt entendait vivre d'une façon permanente.	

DÉTAILS DE LA SUCCESSION

17	A-t-il laissé un testament? Si vous en avez la garde, veuillez nous le transmettre.	Il a dit à ses parents qu'il avait laissé son testament à Ottawa
18	Si le défunt était marié et domicilié dans la province de Québec ou dans un état des États-Unis d'Amérique ou dans un pays où il existe communauté de biens entre les époux, existait-il un contrat se rapportant à la propriété?	
19	Avait-il un compte d'épargne dans une banque, un bureau de poste ou autre institution? Le cas échéant, donner le nom et l'adresse de la banque, etc., et le montant déposé. Désirez-vous qu'il soit administré avec le compte de solde?	Non
20	Montant des certificats d'épargne de guerre que possédait le défunt. Indiquer l'endroit où ils se trouvent.	nous ne le savons pas
21	Montant des bons de la victoire que possédait le défunt. Indiquer s'ils sont enregistrés ou payables au porteur, ainsi que l'endroit où ils se trouvent.	$15. de bons de la Victoire
22	Si le défunt possédait des polices d'assurance-vie, donner les noms des compagnies et la somme payable en vertu de chacune des polices, ainsi que le nom de la personne qui y est nommée bénéficiaire.	—
23	Décrire les autres valeurs, le cas échéant, et en donner le montant approximatif. Se servir de l'espace à la page 4, au besoin.	

AUTRES DÉTAILS

24	Après son engagement, le défunt avait-il contracté des dettes: (a) pour ses propres logement et pension pendant qu'il était dans les forces armées. (b) pour habits et équipement militaires. Un état détaillé de chacun de ces comptes doit être annexé à cette formule et, s'ils sont exacts, veuillez y inscrire "approuvé" et signer votre nom. Si vous les croyez inexacts, donnez des détails.	Ne ne savons rien de cela; nous ne le croyons pas
25	Est-ce que les frais funéraires ont été payés, entièrement ou en partie, par vous-même ou un autre parent? Le cas échéant, annexez des états détaillés indiquant les montants payés, et par qui.	Frais funéraires: $125.00 payé par nous-mêmes

(REMARQUE:—Le gouvernement paye les frais funéraires, jusqu'à concurrence de montants déterminés par les règlements, lorsque le militaire est décédé et inhumé outre-mer, de même lorsqu'il est décédé et inhumé au Canada ou ailleurs en Amérique du Nord; si un parent a déjà payé les frais funéraires, ceux-ci lui seront remboursés par le gouvernement jusqu'à concurrence du montant fixé par les règlements. Cependant, si les frais excèdent ce montant, la différence ne sera pas payée par le gouvernement ni ne sera à la charge de la succession militaire du défunt.)

(VOIR AU VERSO)

*Insérez le degré de parenté, par exemple: "veuve", "père", "frère", etc.

DÉCLARATION

Je, soussigné, déclare que tous les renseignements contenus dans cette formule sont exacts et constituent une liste fidèle et complète de tous les parents que le défunt ait jamais eus aux degrés signalés; et que je suis le/la* père du défunt.

N.B.—A être signée au long en présence d'un pasteur, prêtre, magistrat de la localité, commissaire, notaire public ou officier de l'une quelconque des forces de Sa Majesté.

Gaudiose Bédard — Signature du déclarant

Val-Alain, Cté de Labrecque P.Q. — Adresse

CERTIFICAT

Je, soussigné, certifie que, autant que je sache Gaudiose Bédard

Gaudiose Bédard — Nom du déclarant

*Voir plus haut

est le/la* du défunt ci-dessus décrit. La déclaration ci-dessus a été faite par le déclarant et signée en ma présence.

Daté à Val-Alain ce premier jour de novembre 1944

Signature du pasteur, prêtre, magistrat, commissaire, notaire public ou officier de l'une quelconque des forces de Sa Majesté.

J. Esmond, ptre curé — Titre curé

Adresse Val-Alain, Cté Labrecque. P.Q.

REMARQUE.—Avant d'accorder le certificat qui précède, il faut veiller à ce que le déclarant donne des détails concernant le décès de tout parent qu'il déclare être décédé et que les nom et prénoms, ainsi que l'adresse et l'âge de chaque parent survivant visé soient inscrits à l'endroit voulu dans la déclaration qui est vis-à-vis.

(Si le défunt n'a aucun parent vivant des degrés signalés à la page 2, il faudrait donner ci-après les noms et adresses, et le degré de parenté, d'autres parents.)

SE SERVIR DE L'ESPACE CI-DESSOUS SI VOUS DÉSIREZ FAIRE DES REMARQUES SUPPLÉMENTAIRES.

Notre enfant nous manque; il nous a toujours aidés et depuis qu'il était dans l'armée il nous donnait $20. par mois; et depuis le dernier juillet 1944 nous n'avons rien reçu.
Nous aimerions avoir une pension, si possible, pour nous dédommager un peu de sa disparition.

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

ORIGINAL
DUPLICATA
TRIPLICATA

27 JANVIER 1943.
RB

DUPLICATE FINGERPRINTED AND PHOTOGRAPHED

M.F.M. 2 Pr.
A.F.B. 271
100M—7-42 (5491)
H.Q. 1772-39-1645

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

Unité R.C.A.S.C./REINF. C.A.(ACTIVE) N° matricule E-49746

B

01
PTE

FORMATIONS ET UNITÉS ACTIVES DE L'ARMÉE CANADIENNE

FORMULE D'ENGAGEMENT

1. Nom BEDARD
2. Prénoms Joseph-Raoul-Roch
3. Adresse actuelle ARVIDA CO. CHICOUTIMI P.Q.
4. Date de naissance 1er JUILLET 1922
5. Lieu de naissance CANADA (Pays) PROV. QUEBEC. (Comté ou province) CHARNY (Ville ou canton)
6. Citoyenneté CANADA (De quel pays êtes-vous maintenant citoyen)
7. Religion (indiquez la confession) CATHOLIQUE ROMAINE
8. Métier ou profession JOURNALIER
9. Marié, veuf ou célibataire CELIBATAIRE
10. Nom du plus proche parent GAUDIAS BEDARD
11. Degré de parenté PERE
12. Adresse du plus proche parent VAL ALTIN CO. LOTBINIRE P.Q.
13. Faites-vous partie d'une unité ou formation de réserve de l'armée canadienne ou y avez-vous déjà servi? NIL (Si oui, spécifiez l'unité et les dates de service)
14. Avez-vous servi dans (a) une formation ou unité active de l'armée canadienne? NIL (Oui ou non) (Si oui, spécifiez le numéro matricule et l'unité)
    (b) Quelque autre armée de mer, de terre ou de l'air? NIL (Oui ou non) (Si oui, spécifiez l'unité et la durée du service)
15. Avez-vous servi pendant la Grande Guerre de 1914–1918? NIL (Si ou, spécifiez le numéro matricule, l'unité et les dates de service)

DÉCLARATION FAITE PAR L'ENGAGÉ A SON ASSERMENTATION

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

Date 27 JANVIER 1943 — J. R. Roch Bédard (Signature de la recrue)

SERMENT PRÊTÉ PAR L'ENGAGÉ A SON ASSERMENTATION

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

Témoin Rene Bélanger Lte (Nom) (Grade) — J. R. Roch Bédard (Signature de la recrue)

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

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

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

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

à QUEBEC ce 27ième jour de janvier 19 43

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

for ARMAND SYLVESTRE - Major
District Recruiting Officer
(Titre ou grade et unité ou emploi)
M.D. 5 Quebec, P.Q.

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

CERTIFIED THAT THE OCCUPATIONAL HISTORY FORMS HAVE BEEN MADE FOR THIS MAN

MMF

CERTIFICAT DE VISITE MÉDICALE

Nom en entier BEDARD, Joseph-Raoul-Roch — Date de la visite 27-1-43.

Lieu Val Alain, Co. Lotbiniere, P.Q.

PARTIE 1. Renseignements obtenus de la recrue.

1. Age 20 ans

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

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

Je déclare, par les présentes, que je n'ai souffert d'aucune maladie autre que celles qui sont susmentionnées.

J. R. Roch Bedard
(Signature de la recrue)

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

Remarques du médecin examinateur touchant les renseignements donnés à la partie 1.

Hemnintomie 1939. Cicatrice sur la phalangine de l'index gauche.

1. Marques particulières ou cicatrices
2. Taille 5 pieds 2½ pouces
3. Poids 130 livres
4. Teint clair Yeux bleus Cheveux chatains
5. Développement Bon (Bon / Passable / Médiocre)
6. Tour de poitrine—Circonférence, pleine expansion 35¾ pouces. Degré d'expansion 2 pouces
7. Vue, droite 20/20 gauche 20/100 — Avec lunettes, droite 20/30 gauche
8. Ouïe, droite C.V. 20 gauche C.V. 20
9. État de la bouche et des dents Carie dentaire.
10. Pression artérielle:—S D (Nécessaire si la recrue a plus de 35 ans, ou si elle est autrement indiquée)
11. Analyse d'urine Normal. Reflexes: & oreilles: Normaux.
12. Les anomalies (congénitales et pathologiques) constatées lors de l'examen sont les suivantes:
13. Radiographie de la poitrine NEGATIVE N° H 40801 - 28-1-43 Prise au laboratoire de H.D. Rathbone

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

Observations spéciales lorsque la catégorie est inférieure à A

P. Paul Roger Major grade (Président) RCAMC — E.D. Rathbone Major grade (Membre) RCAMC — E.J.K Rudd Major grade (Membre) RCAMC

Date

CERTIFIED TRUE COPY

VACCINATIONS, INOCULATIONS, EXAMENS, RECLASSIFICATION DE LA CATÉGORIE MÉDICALE

Date	Détails succincts et signature	Date	Détails succincts et signature
2-2-43	VACC. S.V. Roy CAPT. RCAMC.		
2-2-43	T.A.B.T. CAPT. RCAMC.		
MAR 27 1943	J. Plamondon CAPT. RCAMC.		
	CAPT. RCAMC.		
APR 21 1943	RE-EXAMINED CAT. A1 CONFIRMED DeCoty		
9-5-43	T.A.B.T. III I. Mooney Capt.		
JUL 15 1943	Re-Examined by Medical Board Category Confirmed. G.L. Mackay Capt. RCAMC. Pass.		

REMARQUE:—Toute correction d'inscription doit être paraphée par l'officier qui la fait. Cet officier indiquera son grade et son corps. Les corrections ne doivent pas être superposées à l'inscription originale.

N° matricule E-49746 Grade DRIVER Nom BEDARD Prénoms Joseph-Raoul-Roch

Garnison	Date d'arrivée à la garnison	Date de Admission à l'hôpital			Date de Sortie de l'hôpital			Maladie	Nombre de jours à l'hôpital	Détails sur la nature et l'origine de la maladie; dire si elle était bénigne ou grave, si elle est entièrement guérie, et si un traitement spécial a été adopté. Dans le cas des maladies vénériennes, mentionner la nature de la maladie primaire et dire si on a prescrit le mercure. S'il s'agit d'accident, spécifiez s'il s'est produit au service et si une cour d'enquête a été tenue. Détails et dates au sujet des dentiers et des appareils chirurgicaux fournis.	Signature du médecin
		Jour	Mois	Année	Jour	Mois	Année				

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

"A"

CASUALTY WING EXTRACTS

DATE 14 AUG 44

AUTH AFW 3014

"A" "B" "C" "POW"

TIME

NAME BEDARD JOSEPH RAOUL ROCH

DATE

RANK PTE

REGT.NO. ~~XXXXXX~~ E49746

FOR AEF LIST.

UNIT 85 BR COY RCASC

85 Can. Bridge Co.

HOSPITAL PARTICULARS

ADMITTED DATE

TRANSFERRED DATE

DISCHARGED DATE

DIAGNOSIS CONFIRMED DATE KILLED 19 JUL 44

FOR THE DAILY UNIT & CONSOLIDATED LIST ADMISSION

FOR THE DAILY LIST ONLY DISCHARGE

CASUALTY CARD MADE (YES OR NO) YES PROGRESS REPORT

CLERK'S NUMBER OR INITIALS 9 DEATH

CATEGORY - CIRCLE WHICH APPLICABLE

OFF ALL LISTS OFF SERIOUS DANGEROUSLY ILL SERIOUSLY ILL

NEXT OF KIN PARTICULARS

ENTERED ON

RELATION SHIP

CAS.CARD

NAME AND ADDRESS

CAS.LIST.

HOME TOWN

CANADA

CABLE NO. TO OTTAWA 9232

SERIAL NO.

INLAND TELEGRAM NO.

30

Dune

405-B-29962

RECORDS OFFICE OVERSEAS.

CANADIAN MILITARY HEADQUARTERS.

GRAVES REGISTRATION CARD.

NAME BEDARD, Joseph Raoul Roch

PLACE & DATE OF BIRTH Quebec. CANADA. 1 Jul 1922.

RANK Pte.

REGIMENTAL NO E-49746

UNIT 85 BR. Coy R.C.A.S.C.

NEXT OF KIN & ADDRESS FATHER.

Mr. Gaudias BEDARD. Val Alain Co.

Lot Biniee, P.Q. CANADA.

PARTICULARS OF HOSPITALISATION

DATE OF ADMISSION

NAME & LOCATION OF HOSPITAL

DIAGNOSIS

P.A.

PARTICULARS OF DEATH

DATE OF DEATH ~~DNK~~ ~~19 July 44~~ 18 July 44

PLACE OF DEATH FRANCE

HRS

CAUSE OF DEATH KILLED.

PARTICULARS OF BURIAL

DATE OF BURIAL 19 Jul 44.

CEMETERY Beny-sur-Mer. 7E/5. MR 987813.

PLOT NO 25 ROW GRAVE 6

DEATH CERTIFICATE NO.

RELIGION Roman Catholic.

DATE 22 Sep 45

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

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

F.T.

Mr. Gaudias Bedard,
20 Val Alain,
Co. de Lotbiniere, P.Q.

Dear Mr. Bedard:

It is with deep regret that I learned of the death of your son, E.49746 Private Joseph Raoul Roch Bedard, who gave his life in the Service of his Country in France. However, the official date of death is not yet available.

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

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

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

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

AUG 7 1944

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

GR/BTC

8

QUOTE NO. H.Q. 405-B-29962 D.R.2(D)

CANADA

DEPARTMENT OF NATIONAL DEFENCE
ARMY

F.T.

OTTAWA, CANADA,

12th January, 1946.

Mr. Gaudias Bedard,
20 Val Alain Co. de Lotbiniere,
Quebec.

Dear Sir:

Information has just been received from overseas that the remains of your son, E49746 Private Joseph Raoul Roch Bedard, have been carefully exhumed from the original place of interment and reverently reburied in grave 14, row B, plot 14, of Beny-sur-Mer, Canadian Military Cemetery, Beny-Sur-Mer, France. 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.

K.J.D.

Yours faithfully,

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

96

Nat. Def. A-168-A
1,000M—3-43 (9028)
H.Q. 1772-39-376

MBR. COPY

To be made out in duplicate

M.F.M. 5
200M—2-41 (9495-6)
H.Q. 1772-39-1651

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

INSTRUCTIONS.

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

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

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

---

(1) Name of Officer or Other Rank BEDARD, Joseph Raoul Roch
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Official Number and Rank E-49746 Dvr.

(3) Unit R.C.A.S.C. REI FN C.A. (A)

(4) Are you married?

(5) If married, state,

(*a*) Full name of your wife

(*b*) Present postal address of wife

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

(7) Are you a widower?

(8) Have you any children? Number of boys Girls

Names and ages

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

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

Name

Postal Address

[SEE OTHER SIDE]

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

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

.....

.....

(11) Is your father alive?.....OUI.....

If so, state name and address, occupation.....Mr. Gaudias Bedard.....

...Val.....Alain te de Lotbiniere P.Q.....Ingenieur.....(C.N.R.).....

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

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

.....

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

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

If so, state name and address.....Mde Ida Bedard,.....

.....Val Alain te de Lotbiniere P.Q.....

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

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

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

(17) Are you contributing to the support of any dependents, other than those shown above?.....
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment.

If so, state the following particulars:—

Relationship .....

Full Name .....

Postal Address .....

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

.....

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

If so, in what Company?.....SAUVEGARDE INS CIE.....
(Give number of policy)

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

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

(Sgnd.) J.R. Roch Bedard,
(Signature of officer or man)

Date.....29-1-43.....

(Sgnd.) ? ?

for Officer Commanding.....(F.C. Magee) Lt. Col.
Commanding #5 D.D. Que. P.Q.

Date.....29-1-43.....

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

MFM 510
40/P & S 54 (3444)

CANADIAN ACTIVE SERVICE FORCE
OVERSEAS

District.....

Dispersal Area.....

LAST PAY CERTIFICATE
(All Ranks)

Regtl No. E49746 Rank and Name Bedard J.R.R. Dvr.

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

(Transfer or Discharge)..... to..... on 18th July 19 44

Reason Death Authority: C.C.L. "A" 483 d/ 27th Aug 44.

The following is a statement of the account of the above-named from 1st July to 31st July 19 44. the inclusive date of transfer or discharge.

Dr Particulars	Amount		Cr Particulars	Amount	
Balance Dr from last account			Balance Cr from last account		08
First Monthly Payment AR d/6.7.44	4	47	Regimental Pay 31 days @ $ 1.50	46	50
Casual Payments AR 25 d/15.7.44	4	47	Tradesmen's Pay ..... days at ..... $		
Payments on Transfer or Discharge			Additional Pay (Give particulars) ..... days at ..... $		
Assigned Pay $20.00 & $1.00	21	00	Allowances (Give particulars) ..... days at ..... $		
Regimental Charges					
Public Stoppages (Give particulars):			Cash Effects J.V. 1273		34
To Balance Cr Free	16	98			
To Balance Cr Deferred			By Balance Dr		
Total	46	92	Total	46	92

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

Remarks:

Assigned Pay $ 20.00 (F) stopped eff. Aug 44.

Assigned Pay $ 1.00 (WSC) stopped eff. Aug 44.

The above statement has been compiled from Treasury Records the latest Paybook not being available.

Compiled by F. Trenouth.

Checked by C. Bell

Date 13th February 1945.

Certified correct D. Fowley
for Chief Treasury Officer, Overseas

M.L.

ENDORSEMENTS

DEBITS AND/OR CREDITS SUBSEQUENT TO ISSUE OF L P C
Prior to compilation of statement below

Date	Unit	Payments	Amount Dr		Amount Cr		Paymaster's Signature
		Balance from L P C					

Explanation of Debit Balance :-

STATEMENT OF ACCOUNT

Date		Particulars	Dr		Cr	
		Balance as shown above				
		Pay and Allowances from ..... to				
		Assigned Pay months of				
		Civilian Clothing Allowance				
		Boat Expense Money				
		Train Expense Money				
		Miscellaneous Debits (give details)				
		Miscellaneous Credits (give details)				
		TOTAL				

DEBITS AND/OR CREDITS SUBSEQUENT TO COMPILATION OF ABOVE STATEMENT

Date	Unit	Particulars	Dr		Cr		Signature of Paying Officer

Place of Embarkation.....
Date of Embarkation.....
Place of Disembarkation..... HM Transport.....
Date of Disembarkation.....

CFA 187
4C/P & S/2180 (4066)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME ..... ~~B~~ E-49746 Pte. Bedard J.R.B. (Deceased) .....

RECEIVED FROM ..... Cdn Sec GHQ 2nd Echelon 21 Army Group .....

CHECKED BY ..... C-5591 Pte. Patterson L.K. B-126252 Cpl. Sislofsky A. ..... DATE ..... 25 Oct 44 .....

1	Prayer Book		
1	Rosary		
1	Red Identification Disc		
37	Snapshots		
1	Letter(Note) asking that these be sent to Mr. and Mrs. T.G. Bedard, Val-Alain, Conte de Lotbiniere, Quebec, Canada. (to Officer i/c Estates)		

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

TRIPLICATE — with effects.

A Sislofsky Capt
for OC 1 Cdn KSD

1882

FORM NO. 1

Register No. CD. 1418 Nominal Roll No. D 569

H.Q. File No. 405-B-29962

To: P.M.G.

CANADIAN ARMY (ACTIVE)

Computation of Service

WAR SERVICE GRANT

Regt. No.	Rank when S.O.S.	Surname	Christian Name in Full
E-49946	Pte	BEDARD	JOSEPH RAOUL ROCH

REASON FOR TERMINATION OF SERVICE:

1st Enlistment Deceased CARO ( )

2nd Enlistment CARO ( )

3rd Enlistment CARO ( )

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. 27 Jan 43	T.O.S.	T.O.S.
S.O.S. 18 Jul 44 MD O/S	S.O.S. MD	S.O.S. MD
Total Days 539	Total Days	Total Days

Total Service 539 DAYS

—	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere	178	2	176
Overseas Service	361	12	349
Totals	539	14	525
Add Non-qualifying Service			14
Total Service			539

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 18 Jul 44 2. Date S.O.S. Overseas

REMARKS:

KILLED IN ACTION 18 Jul 44

Computer's Signature D. Barrett

Checker's Signature

Date Computed 14 May 45

CERTIFIED that entitlement to benefits under the War Service Grants Act, 1944, has been established, based on service shown herein.

C. L. LAURIN,
Colonel,
DIRECTOR OF RECORDS.

500M—11-44 (6012)
H.Q. 1772-45-8

Details of Non-Qualifying Service

Western Hemisphere—

Forfeits for	From	To	Effective Date	Days	Total
AWL	8 Feb 43	9 Feb 43			2
				Total	2

Overseas: T.O.S. 24 Jul 43 T.O.S. T.O.S.

S.O.S. 18 Jul 44 S.O.S. S.O.S.

A.W.L.	2 Apr 44	4 Apr 44		2	
Forf. AA Sec 4C				10	12
				Total	12

5M-1-45 (6393) (FR.)
H.Q. 1064-81-3

4
ARMY

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Joseph Raoul Roch (CHRISTIAN NAMES) BEDARD (SURNAME)

REGISTER NO. D-20461
FILE NO. 405-B-29962
DATE 8-3-46
SERVICE NO. E-49746
FINAL RANK OR RATING Pte.
DATE OF DISCHARGE 18-7-44

PAYEE Mr. Gaudias BEDARD,
ADDRESS Val Alain,
Cte. Lotbiniere, P.Q.

DATE OF TERMINATION OF OVERSEAS SERVICE 18-7-44

	$ ¢
A. TOTAL QUALIFYING SERVICE 510 — NO. OF DAYS 525/30 EQUAL TO 17 COMPLETE PERIODS AT $7.50	127.50
B. QUALIFYING OVERSEAS SERVICE — NO. OF DAYS 349 LESS 15 INELIGIBLE DAYS, EQUAL TO 334 DAYS @ 25c. PER DAY (SEE PAR. 2 OVERLEAF FOR EXPLANATION)	83.50
	211.00
C. SUPPLEMENT FOR OVERSEAS SERVICE	
DAILY RATES AT DISCHARGE: PAY $ 1.50; SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.25; ADDITIONAL PAY $; $; $; DEPENDENTS' ALLOWANCE 1/30 OF $; $	
TOTAL $ 2.75 X7 = $ 19.25	
NO. OF DAYS 349/183 X$ 19.25	36.71
D. WAR SERVICE GRATUITY	247.71
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES $; DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $; OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE	247.71

G. YOUR PORTION OF GRATUITY IS— 100%

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

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

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
H.H. Beck	13-3-46

SERVICE REPRESENTATIVE

File No 405-B-29,962

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. E 49746 Name BEDARD JOSEPH RAOUL ROCH

Rank on Discharge Pte Date of Discharge 19-7-44

Deceased

Authority for Discharge or Retirement

Served in:

				Non-qualifying service
Canada	from 27-1-43	to 23-7-43		
	from	to		
United Kingdom	from 24-7-43	to 6-7-44		
	from	to		
Italy	from :-	to		
Northwest Europe	from 7-7-44	to 19-7-44	Killed in action	
---------	from	to		
---------	from	to		

Eligible for award of:

1939 - 45 Star OK

~~Italy Star~~

France-Germany Star OK

Defence Medal OK

War Medal OK

Canadian Volunteer Service Medal OK

with Clasp OK

M

Verified by [illegible]

Date 6-6-46

Carded JUN 6 1946

NRD

HA 165

CASUALTIES ONLY
For purpose of W.S.G.
Casualities include death
subsequent to discharge.

Register No. C.D. 1418

File No. 405-B-29962

WAR SERVICE GRANTS ACT 1944

Ottawa 30 January, 1946

To: Chief Treasury Officer,
Dependents' Allowance and Assigned Pay Branch

Service No. E-49746

Name Joseph R.R. BEDARD,
Christian Name Surname

Please supply the following information in respect of the marginally named at the time of his discharge or death and return this form in duplicate along with the file to the undersigned.

K. W. Rice
(K. W. RICE) Captain,
for Paymaster-General.

	Name	Amount
Names, address and relationship of persons in receipt of D.A. and amount of monthly award.	Nil	$ Nil
If no D.A. in issue, list names, address and relationship of persons in receipt of A.P. who may be classed as Dependents under W.S.G. Act, 1944, and amount of monthly assignment.	Mrs Gaudias Bedard (F)	2000
Names, address and relationship of persons to whom assigned pay was continued by supplementary award after death.		
Amount of overpayment of dependents' allowance and/or assigned pay deductible from the War Service Gratuity and name of person to whom paid.	Nil	

7/2 1946

For Chief Treasury Officer,
D.A. & A.P. Branch

C.T.O., D.A.&.A.P.

Overpayments of D.A. and/or A.P. recovered from W.S.G. $

194

for C.T.O.

20 JUL 1945

PERIOD

From.....19..... To.....19.....

MILITIA BOOK M. 1

PART II

100M—3-43 (9189-90)
H.Q. 1772-39-1672

CANADIAN ARMY

Soldier's Pay Book

(For use on Active Service)

Reg. No. E. 49746

Surname (Capitals) BEDARD

Christian Names in full Joseph Raoul Roch

2nd Cdn Division R.C.A.S.C.

If this Book is found **NOT** in possession of the Soldier and it cannot be returned immediately to the Paymaster of his Unit, it is to be forwarded at once as indicated below:—

IN CANADA: To the
Paymaster-General,
Department of National Defence,
Ottawa.

ABROAD: To the
Chief Paymaster,
Canadian Army Overseas.

IN THE FIELD: To the
Paymaster,
Canadian Troops.

SOLDIER'S PAY BOOK—INSTRUCTIONS

1. This Book will be produced whenever an advance of pay is required.

2. The Soldier will give a receipt on an Acquittance Roll for all cash advances. The Officer making the payment will sign the corresponding entry in this book on the page for Cash Payments.

3. This Book is the property of the Canadian Government, and a Soldier who loses it by neglect, or alters any official entry in same, or makes unauthorized entries therein, **may be charged with a serious offence under the Army Act.**

4. If this Pay Book is lost, the Soldier will report the loss immediately to his Paymaster. A new book will be issued by the Paymaster, after inquiry has been made and a statement of the account has been received from the Chief Paymaster.

5. If a Soldier desires any information in connection with his pay or particulars of any entry shown in his Pay Book, he should make reference in all cases to his Paymaster.

6. If the address of next-of-kin, i.e., wife, father, mother, etc., has been changed, since he enlisted, the Soldier should immediately notify such change to his Paymaster, and have the new particulars noted by that Officer on page 2 of this Book. In the same way any change of assignment should be noted on page 3 of this Book.

7. This Pay Book must be in possession of the Soldier when reporting on sick parade, admitted to hospital, and on all other occasions when leaving unit.

PARTICULARS OF SOLDIER

Regimental Number E-49746

Name in full (surname first) BEDARD
Joseph Raoul Roch

Date of Attestation 27-1-43

State whether married, widower or single SINGLE

If married after enlistment, state date of marriage:

If married, give full postal address of wife, or if widower, name and address of guardian of children, if any, or if single, name and address of next-of-kin, stating relationship to the Soldier (see page 1, para. 6):

Gaudias Bedard, (father)
20 Val-Alain
Comté de Lotbinière, Quebec, Canada

PARTICULARS OF ASSIGNED PAY, ETC.

Assignment of pay: Effective date:

(a) $ 1.00 1-6-43

(b) $ 20.00 1/8/43

(c) $

(d) $

Name, address and relationship of assignee:

(a) HON. REG-GENERAL OF CANADA
WAR SAVINGS CERTIFICATES

(b) Sandras Bedard, (Sadie)

(c)

(d)

Dependents allowance, payable to: (state relationship)

N/A

CASUALTIES AFFECTING DAILY RATE OF PAY AND ALLOWANCES

Date effective	Particulars	Part II Order	Date	Signature of Paymaster
27-1-43	T.O.S	28	3-2-43	[illegible]
27-5-43	Pay Increase	151	23-6-43	[illegible]
23.8.43	Pay inc 1.50	38	8-10-43	[illegible]

DAILY RATE OF PAY

Rate of Pay in Issue		Date Effective	Signature of Paymaster
$	c.		
1.	40	27-5-43	B Bloomers
1	50	23.8.43	[illegible]

Soldier's Signature A R Bedard

Book opens on JUL 20 1943 Balance Cr. or Dr. $ 4 63

Date 1943	Particulars	Credits		Cash Payments and Other Charges: Local Currency	Cash Payments and Other Charges: Canad'n Currency		Assigned Pay	
19 July	Bals. Br't Forward	463						
July	Sgt Pay	16	80					
Aug	Pay.	45	40				21	00
4/8	AR 33			2.10.0	11	18		
13 Aug	AR 33			2-10.	11	18		
18 Aug	MFM 513 Aug 43				1	21		
31 Aug	AR 127			2.0.0	8	94		
	Sept Pay	42	00				21	00
	Totals	97	51		32	51	42	00

Balances only will be carried forward.

Paymaster's Signature: J. A. Bennett Lieut

Deferred Pay and/or Restricted Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	
	465		F. Okun Capt
		12 17	F. Okun
		24 57	F. Okun
		23 39	[illegible]
		12 21	J. R. Brent Lt
		11 00	J. R. Brent Lt
		06	[illegible]
		23 06	[illegible]

Date 1943.	Particulars	Credits		Cash Payments and Other Charges: Local Currency		Cash Payments and Other Charges: Canad'n Currency		Assigned Pay	
Sept.	Bals. Br't Forward	23	06						
17/9.	ARH1			2/0/0		89	4		
	Oct	43	40					21	—
	109			2/0		89	4		
	12			3 —		13	41		
	Payline 00 38/43	7	00						
	123			2 —		89	4		
	Nov	45	00					21	—
	133			3 —		13	41		
	Totals	118	46			53	64	42	

Balances only will be carried forward

Deferred Pay and/or Restricted Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	
		23 06	EAR
		14 12	[illegible]
		36 52	D Maxwell
		27 58	D Maxwell
		14 17	[illegible]
		21 17	[illegible]
		12 23	D Maxwell
		36 23	D Maxwell
		22 82	D Maxwell

Date	Particulars	Credits		Cash Payments and Other Charges			Assigned Pay	
				Local Currency	Canad'n Currency			
	Bals. Br't Forward	22	82					
	37			2-	8	94		
	Dec 514					78		
	513					13		
	Dec	46	50				21	-
	Dec 513					41		
	63			4.0.0	17	88		
	64			4.10.0	20	12		
	Totals	69	32		48	26	21	-

Balances only will be carried forward

Deferred Pay and/or Restricted Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	
		22 82	RCH
		13 88	RCHarvey
		13 10	RCHarvey
		12 97	RCHarvey
		38 47	RCHarvey
		38 06	RCHarvey
		20 18	RCHarvey
		06	RCHarvey

Date	Particulars	Credits	Cash Payments and Other Charges		Assigned Pay
			Local Currency	Canad'n Currency	
	Bals. Br't Forward				
	Totals				

Balances only will be carried forward

Deferred Pay and/or Restricted Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	

Date	Particulars	Credits		Cash Payments and Other Charges				Assigned Pay	
				Local Currency		Canad'n Currency			
	Bals. Br't Forward								
	Totals								

Balances only will be carried forward

Deferred Pay and/or Restricted Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	

If you do not wish to draw all pay due, **place the amount desired** opposite date of pay day.

FEB. 15.....	AUG. 15.....
FEB. 28.....	AUG. 31.....
MAR. 15.....	SEP. 15.....
MAR. 31.....	SEP. 30.....
APR. 15.....	OCT. 15.....
APR. 30.....	OCT. 31.....
MAY 15.....	NOV. 15.....
MAY 31.....	NOV. 30.....
JUNE 15.....	DEC. 15.....
JUNE 30.....	DEC. 31.....
JULY 15.....	JAN. 15.....
JULY 31.....	JAN. 31.....

2

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

WILL

M.F.M. 10
150M—6-42 (4820)
H.Q. 1772-39-1656

(1) I, Joseph Raoul Roch BEDARD (Name in Full), of the Town (City, Town, Village, Township)

Address in civil life.

of Chicoutimi, in the County ~~District~~ of Arvida

Province of Quebec, Labourer (Civil Occupation)

Regimental No. E49746, Unit D.D. 5, 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

To my Father; Gaudias Bedard,
now residing at Val Alain Tothiniere
Quebec Canada
all my real and personal estate

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 Mr. Gaudias BEDARD (Name) Val Alain Tothiniere Que. Canada (Address)

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

IN WITNESS WHEREOF I have hereunto set my hand this 16 day of April 1943

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.

J. R. R. Bédard (Signature of soldier)

First witness sign here.

(5) Signature V. L. Murphy

Civil Address 2115 Tupper St. Montreal Que. Canada

Civil Occupation Clerk

Second witness sign here.

Signature W. B. Phillips

Civil Address 482 Colbourne St. London Ont. Canada

Civil Occupation Clerk

(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.

File No 405-B-29962

REBURIAL

NO E.49746

RANK Pte

NAME BEDARD, J. R. R.

NAME OF CEMETERY Beny-Sur-Mer/ Canadian Military Cemetery.

LOCATION OF CEMETERY Beny-Sur-Mer. France.

GRAVE LOCATION Plot 14, Row B. Grave 14

AUTHORITY 54-27-88-2 Vol.19

Reburial list.

1
36

405 B-29962

FIELD SERVICE

9/31B Army Form B. 2090A. 40/P & S/2551 (5504)

MBR

REPORT of Death of an Officer or a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death. See Table II, Appendix III, Field Service Regulations, Vol. I.

A 483

REGIMENT OR CORPS: 85 Cdn Bridge Coy R.C.C.A.S.C.

Squadron, Troop Battery or Company:

Officer's Personal No. (if known) / Soldier's Army No.: E-49746 Rank: Pte

Surname: Bedard Christian Names: E.R.R.

Died — Date: 19 Jul 44 Place: France

Cause of Death*: K/A

Nature and Date of Report: A.F.W.3014/65 d.24 Jul 44

By whom made: Cdn Sec GHQ 2 Ech 21 A Gp

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

Burial — Place: Beny- ur-Mer987813(Creully) Sheet 7E/5 Date: 19 Jul 44

By whom reported: C.F. 1st Cdn Army Tps

State whether he leaves a Will or not — (a) in Army Book 64: No

(b) as a separate document: Not Received.

All private documents and effects received from the front or hospital, as well as A. B. 64, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any report received as to verbal expressions by a deceased officer or soldier of his wishes as to the disposal of his estate should be forwarded to the War Office at once, supported by a certified statement of the person who actually received the information.

In the case of a soldier a duplicate of this report is to be sent to the Paymaster at the Base, together with the deceased's A. B. 64 (after withdrawal of any will from the latter), for transmission to the Paymaster who compiles the soldier's account.

Station and Date: Belgium 13 Oct 44

Signature of Officer in charge of Section Adjutant-General's Office at the Base: Eric G. Robert Capt for Officer i/c Cdn Sec GHQ 2 Ech. 21 A Gp

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FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: IN THE FIELD (FRANCE)

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: BEDARD (Block letters)

Given names: Joseph Raoul Roch

4. RESIDENCE

Street: No.:

Official name of civil municipality or township: Arvida

Municipal county: Chicoutimi Province: Quebec

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

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

10. BIRTHPLACE (Province or Country): Quebec

11. DATE OF BIRTH: July (Month) 1st (Day) 1922 (Year)

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

OCCUPATION

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

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	BEDARD Gaudias	
MOTHER (Maiden Name)		

19. Place of burial, cremation or removal: France

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

Do not write in this space

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: (Month) July (Day) 15th (Year) 44

23. I HEREBY CERTIFY that I attended deceased from ....19.... to ....19....

and last saw h.... alive on ....19....

24. CAUSE OF DEATH

I

Immediate cause Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc.: (a) 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 (State which) Date ....19....

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)

OVERSEAS CASUALTY CANADIAN ARMY

APR 26 1945

Director of Records, Dept. of Nat... Defence

FORMULE 6

BUREAU FÉDÉRAL DE LA STATISTIQUE—COPIE DU BULLETIN DE DÉCÈS—QUÉBEC

N'écrivez pas dans cet espace

1. LIEU DU DÉCÈS

Comté municipal | Nom officiel de la municipalité civile ou du canton | *Apposer un X sur le mot qui s'applique à cette municipalité ou ce territoire* — *Cité* | *Ville* | *Village* | *Paroisse* | *Canton*

Rue | No. | Hôpital ou institution

2. SÉJOUR

(a) dans l'hôpital ou l'institution	*Années*	*Mois*	*Jours*	(b) dans la municipalité du décès	*Années*	*Mois*	*Jours*	(c) dans la province	*Années*	*Mois*	*Jours*	(d) au Canada (s'il s'agit d'un immigré)	*Années*	*Mois*	*Jours*

3. NOM DU DÉFUNT

Nom de famille..... (*Lettres moulées*)

Noms de baptême ou prénoms.....

4. RÉSIDENCE

Rue..... No.....

Nom officiel de la municipalité civile ou du canton.....

Comté municipal..... Province.....

5. SEXE	6. NATIONALITÉ (Citoyenneté)	7. ORIGINE RACIALE	8. Célibataire, marié, veuf ou divorcé (*Ecrire l'un de ces mots*)

9. Si le défunt était marié, nom de son conjoint

10. LIEU DE NAISSANCE (Province ou pays)

11. DATE DE NAISSANCE..... (jour) (mois) (année)

12. ÂGE DU DÉFUNT	Années	Mois	Jours	Si âgé de moins d'un jour
				.....hrs. ou.....min.

OCCUPATION

13. Métier, profession ou occupation, ex. **tisserand, voiturier, employé de bureau,** etc.....

14. Genre d'industrie ou d'entreprise, tel que **filature de coton, industrie du bois, banque,** etc.....

15. Dernière date à laquelle le défunt vaquait à ce travail

16. Nombre d'années occupées dans cette profession

	17. NOM	18. LIEU DE NAISSANCE (Province ou pays)
PÈRE		
MÈRE (Nom de fille)		

19. Lieu de l'inhumation, de l'incinération ou destination du transport

20. Date de l'inhumation.....19.....

21. LIEU DE L'ENREGISTREMENT DE CETTE SÉPULTURE

(a) Nom de la paroisse ou église.....

(b) Municipalité civile de.....

(c) Comté municipal.....

(d) Date..... (jour) (mois) (année) .....19.....

N'écrivez pas dans cet espace

CERTIFICAT MÉDICAL CONFIDENTIEL DE DÉCÈS

22. Date du décès..... (jour) (mois) .....19..... (année)

23. JE CERTIFIE PRÉSENTEMENT que j'ai donné mes soins au défunt depuis le

.....19.....jusqu'au.....19.....

que je l'ai vu vivant pour la dernière fois le.....19.....

24. CAUSE DU DÉCÈS

I

Cause immédiate

Mentionner la maladie, blessure ou complication, causant la mort, **non pas** son syndrome final, tel: syncope, asphyxie, asthénie, etc.

(a).....

dû à

États morbides, s'il y en a, ayant produit la cause immédiate (Les indiquer dans l'ordre chronologique inverse de leur apparition).

(b).....

dû à

(c).....

II

Autres conditions morbides (importantes seulement) ayant contribué au décès mais n'ayant aucune portée sur la cause immédiate.

.....

.....

III Si une maladie contagieuse est mentionnée à ce certificat, donner

(a) Date d'éclosion.....19.....

(b) Durée de la maladie.....jours

25. S'il s'agit d'une femme, y avait-il état puerpéral?.....

26. Y a-t-il eu intervention chirurgicale?.....Date de l'opération.....19.....

Constatations.....Y a-t-il eu autopsie?.....

27. Dans les cas où le décès est attribuable à des causes extérieures (violence):—

Accident, suicide ou homicide..... (Spécifier) Date.....19.....

Manière de la blessure..... (Dans quelle circonstance)

Nature de la blessure.....

Indiquer si la blessure a été infligée **au lieu du travail, dans l'habitation ou dans un endroit public**.....

Signature.....**M.D.**

Adresse.....**Date**.....**19**.....

28. Signature de la personne qui remplit la formule (vicaire, coroner, autorité d'un hôpital, etc.)

.....

Cette signature autorise le collecteur à accepter la formule comme authentique.

29. Nom du ministre du culte gardien du registre de l'État civil où est inscrit l'acte de cette sépulture.

.....

(For English see other side)

F. T. H.Q.405-B-29962(Records C)

8 September 1944.

Mr. Gaudias Bedard,
20 Val Alain,
County De Lotbiniere, Que.

Dear Mr. Bedard:

With reference to my letter of the 24th ultimo I am directed to inform you that official information now received from Overseas is to the effect that it has been definitely ascertained that your son, E.49746 Private Joseph Raoul Roch Bedard, was killed in action on the 18th of July 1944 and not the 19th as previously reported.

May I again express my deepest sympathy in your bereavement.

Yours truly,

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

ND/EKG

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SERVICE AND CASUALTY FORM

PART I (For all ranks)

M.F.M. 4 (Part I)
A.F.B. 103 (Part I)
150M—3-42 (3885)
H.Q. 1772-39-1649

Unit R.C.A.S.C./REINF C.A.(A) D.D.5 Regimental Number E-49746 E-49746

1. Surname BEDARD
2. Christian Names Joseph-Raoul-Roch
3. *Substantive Rank and Appointment Driver
   *Acting Temporary or Local Rank
   giving date 27-1-43
   *To be entered in pencil to facilitate alteration.
4. Place of birth Charny P.Q. Canada
5. Date of birth as declared on attestation 1 Juillet 1922
   (A)
6. Date of enlistment 27-1-43
7. Place of enlistment Quebec P.Q. Canada
8. Residence at time of enlistment Arvida Co. Chicoutimi P.Q. Canada
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion Catholique Romaine
12. If married, state date
13. Trade on enlistment Journalier
14. Corps, trade and grade
15. (D) Qualifications Dr. IC
16. (E) Miscellaneous entries

(17) Regiment or Corps RCASC — Unit (Battn., etc) 85 CDN BRIDGE COY

(18) Medical Board

Category	Date	Authority
A-1	27-1-43	D.M.O. M.D.5

(19) Next of kin (entries to be made in pencil) Père
Gaudias Bedard
Ste Thérèse P.Q.
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 [illegible]alties regarding promotions (acting, temporary, local or substantive), [illegible]ppointments, 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	[illegible] Army rank as at (e)	(g) Army Form or other authority for entry to be shown
Qualified driver (I/C) class 111 wheel. Eff. 21-6-43 Pt 11 Or# 153 d/25-6-43. A-19 RCASC (ADV) T.C.							
			SOS CASF (CANADA) ON EMBARKATION AT ..... ON 23 Jul 43				
			TOS CASF (OVERSEAS) ON TRANSFER ON 24 Jul 43 AND DISEMBARKED AT ..... ON 27 Jul 43				
			T.O.S. 1 CDN. A.S.C. REIN. UNIT FROM	UK	JUL 29 1943	Pte	183 - 30/[illegible]
		Border	Increase in pay 1.40	Can	27-5-43	Pte	151 - 23-6-43
~~SOS~~	~~[illegible]~~	~~[illegible]~~	~~[illegible] Bridge Coy~~	~~[illegible]~~	~~10 Aug 43~~	~~Pte~~	~~192 - 10 Aug 43~~
~~SOS~~	~~[illegible]~~	~~[illegible]~~	~~[illegible]~~	~~[illegible]~~	~~19 [illegible] 43~~	~~Pte~~	~~200 - 19 [illegible] 43~~
		7LAA	T.O.S. from 1 CASCRU	Field	20Aug43	Pte	43 d/10 Sep 43
		7LAA	S.O.S. to 1 CASCRU - Auth EA2/8130 d/25 Aug 43	Field	1Sep43	Pte	43 d/10 Sep 43
	TOS	1 CASCRU	TOS from 7 Coy 27 AA Regt RCA	UK	2 Sep 43	"	213 - 5 Sep 43
			Admit to 8 Gen Hosp		9 Sep 43		221 - 13 Sep 43
			Discharged " "		14 Sep 43		224 - 16 Sep 43
	SOS		SOS to 4 C.I.B. Coy		23 Sep 43		230 - 23 Sep 43
	TOS	4 CIB Coy	TOS from 1 CASCRU	"	24 Sep 43	"	37 - 30 Sep 43
	OC	"	Granted 1 R of P of $1.50	"	23 Aug 43	"	38 - 8 Oct 43
	"	"	Adm 11 Gd Amb / Discd 13 Oct 43	"	9 Oct 43	"	40 - 22 Oct 43
	"	"	Att fwd to HQ Land Adm to 16 Nov 43	"	9 Nov 43	"	44 - 19 Nov 43
SOS	4 C.I.B. Coy.		SOS to 1 C.A.S.C.R.U.	UK	1Jan44	Pte	1 - 7 Jan 44
			TOS from 4 C.I.B. Coy	U.K	1Jan44	Pte	3 - 5 Jan 44
			S.O.S to 14 Div Tpt Coy	U.K	13Jan44	Pte	10 - 13 Jan 44
9-1-JAN 44	DEM 4714		T.O.S from 1 CASCRU	✓	14 JAN 44	✓	3 - 22 JAN 44
10-FEB 44	EA 7/1780		S.O.S to 1 CASCRU	FIELD	11 Feb 44	"	9 - 19 Feb 44
	TOS	1 CASCRU	TOS from CAP Supply	UK	12 Feb 44	✓	37 - 14 Feb 44
			S.O.S to 85 Bridge Coy	✓	17 Feb 44	✓	40 - 17 Feb 44
13-2-44	DEM 2662	85 BRIDGE	TOS from 1 CASCRU	"	18 FEB 44	"	7 - 18 FEB 44
6-4-44	CR 52	"	10 days C.B. Forf 10 days pay 149(2) for AWL 1 day, 6 hrs, 31 mins. Total forf 12 days pay	"	6 Apr 44	"	15 - 14 Apr 44
			Embarked U.K. 6 JUL 44. Disembarked France 7 JUL 44			"	29 - 22 JUL 44
19-7-44	CR 79	85 BRIDGE	SOS DECEASED. KILLED IN ACTION RESULT OF BOMBING	"	19 JUL 44	"	30 / 28 JUL 44

SERVICE AND CASUALTY FORM

PART I (For all ranks)

M.F.M. 4 (Part I)
A.F.B. 103 (Part I)
40/P & S/318

Unit 85 Cdn Bridge Coy RCASC Regimental Number E-49146

1. Surname BEDARD
2. Christian Names JOSEPH-RAOUL-ROCH
3. *Substantive Rank and Appointment Pte
   *Acting Temporary or Local Rank
   giving date 27-1-43
   *To be entered in pencil to facilitate alteration.
4. Place of birth St Harmy, P.Q. Can
5. Date of birth as declared on attestation 1 July 1922
   (A)
6. Date of enlistment 27 Jan 1943
7. Place of enlistment Quebec P.Q. Can
8. Residence at time of enlistment Arvida, Cty Chicoutimi P.Q. Can
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion Rom Catholic
12. If married, state date
13. Trade on enlistment Journalier
14. Corps, trade and grade
15. (D) Qualifications Dvr IC
16. (E) Miscellaneous entries

(17) Regiment or Corps RCASC — Unit (Battn., etc) 85 Cdn Bridge Coy

(18) Medical Board

Category	Date	Authority
A-1	27 Jan 43	DMO MD 5

(19) Next of kin (entries to be made in pencil)
Mr GAUDIAS BEDARD (father)
VAL ALAIN
(20) E. Cty LOTBINIERE, P.Q. Can
(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		(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

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

Name.....

M.F.M. 1 & 2 (a)
250M—7-41 (1151)
H.Q. 1772-39-1646

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
SOS		SOS to 7 LE AA Regt pl	pte	19 Aug 43	ASCRU	UK	200	19 Aug 43
	TOS	TOS from 1 C A S C R U	pte	30 Aug 43	7 L AA	UK	43	10 Sept 43
SOS		SOS to 1 C A S C R U	pte	1 Sept 43	7 L A A	UK	43	10 Sept 43
	TOS	TOS from 7 LAA Regt RCA	pte	2 Sep 43	ASCRU	UK	213	3 Sep 43
SOS		SOS to 4 Cdn Inf Bde Log Regt	Pte	23 Sep 43	ASCRU	UK	230	23 Sep 43
	TOS	TOS from ASCRU	pte	24 Sep 43	4 C I B Coy	UK	37	30 Sep 43
		Adm to 8 Gen Hosp	pte	9 Sep 43	ASCRU	UK	221	13 Sep 43
		Discharged from 8 Gen. Hospital	pte	14 Sept 43	A.S.C.R.U.	U.K.	224	16 Sept 43
		Adm to 11 Fd Amb	Pte	26 Oct 43	4 C I B Log	UK	40	226 Oct 43
		Disch from 11 Fd Amb	Pte	13 Oct 43	4 C I B Log	UK	40	226 Oct 43
		Att'd to HQ Com'd 2 Cdn Div FAP RCASC to 16 Nov 43	Pte	9 Nov 43	4 C I B Coy	UK	44	19 Nov 43
SOS	obs CO	SOS to 1 CASC Rn	Rte	1 Jan 44	HCIBCoy	UK	1	7 Jan 44
	TOS	TOS from 4 C I B Coy	Rte	1 Jan 44	CASC Rn	U.K.	3	5 Jan 44
SOS	CO	SOS to 4 CADT Coy	Rte	12 Jan 44	CASC Rn	U.K.	10	13 Jan 44
	TOS CO	TOS from CASC Rn	Rte	4 Jan 44	4 CADT Coy	U.K.	3	22 Jan 44
SOS	CO	SOS to 4 CADT Coy	Rte	11 Feb 44	HCADTCo	U.K.	9	19 Feb 44
	TOS M41	TOS from 4 C A D Tpt Coy	Rte	12 Feb 44	CASCRn	UK	37	14 Feb 44
SOS	CO	SOS to 85 Bdg Coy	Rte	17 Feb 44	CASCR	U.K.	40	17 Feb 44
	TOS CO	TOS from C.D.S. C. R.U.	Rte	18 Feb 44	85 Bdg Coy	U.K.	7	18 Feb 44

Statement of the Service of No. E 49446 Rank ..... Sheet No. .....

Name Bedard J R R

M.F.M. 1 & 2 (a)
250M—7-41 (1151)
H.Q. 1772-39-1646

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
	CB	10 days C.B. QR 15(1) forf total 12 days pay	Rte	6 April 44	85 Bde Coy	UK	15	14 April 44
		Killed	Rte	19 Jul 44 DNK		AEF	A-479 A-472	23 July 44.
		Embarked UK		6 July 44	RCASC			
620		Disembarked France	Pte	9 July 44	85 Bde Coy	21 Gp	29	22 July 44
PARA 8A	SOS	deceased — 18 July 44						
		Killed in action. Result of bombing	Pte	18 Jul 44	RCASC 85 Bde Coy	21 Gp	30	28 July 44.
		Conf date 18 July 44	Pte	18 Jul 44	RCASC 85 Bde Coy	AEF	CLA 483.	27 Aug 44

ETAT DE SERVICE DU No. E-49746 GRADE Private FEUILLE No. 1

NOM. BEDARD. Joseph Raoul Roch. AUTORITE.

Mention des promotions, rétrogradations, mutations maladies ou blessures, rapports. Etc.	GRADE INDIQUE	PRENANT DATE LE	UNITE	ENDROIT	No. ord. du jour.	DATE LE
Cesse d'être attaché au CABTC No 53 (C/A) sur mutation pour toutes fins au A-19 RCASC CAMP BORDEN ONT. Aut: QS/029A/ d/6-4-43.	Pte.	14-4-43	T.C.53	LAUZON	89	12-4-43
TOS A 19 R.C.A.S.C.(ADV)T.C. (REINF)	"	15-4-43	RCASC	C.Borden	Pt #95	19-4-43
Higher rates of pay. $1.40 per diem.	"	27-5-43	"	"	151	23-6-43.
Qualified driver (I/C) class 111 wheel.	"	21-6-43	"	"	153	25-6-43.
Transport warrant. NO. A-419434 Emb.	"	2-7-43	"	"	163	7-7-43.
SOS to No. 1 R.C.A.S.C.(Reinft) Unit Overseas	"	19-7-43	"	"	173A	19-7-43
SOS CASF (CANADA) ON EMBARKATION AT — ON 23 Jul 43						
TOS CASF(OVERSEAS) ON TRANSFER ON 24 Jul 43 AND DISEMBARKED AT — ON 27 Jul 43						
TOS 1 CDN. A.S.C. REIN. UNIT FROM Canada	pte	JUL 29 1943	ASC RU	UK	183	30 Jul 43

ETAT DE SERVICE DU No.....GRADE ..... FEUILLE No.....

NOM.....

AUTORITE.

Mention des promotions, rétrogradations, mutations maladies ou blessures, rapports. Etc.	GRADE INDIQUE	PRENANT DATE LE	UNITE	ENDROIT	No. ord. du jour	DATE LE

No E.49746 Rank Private Name BEDARD, Joseph Raoul Roch

Unit R.C.A.S.C. Date of death ~~xxxxxxxxxx~~ 18th July, 1944.

Died at France

Cause Killed in Action.

Death occurred on strength of Forces.H.Q. 405-B-29962

N/K Mr. Gaudias Bedard Relationship Father.

Address 20 Val Alain, Co. de Lotbiniere, P. Q.

Remains buried in Cemeter

MR 987813 Sheet 7E/5 Beny/Sur/Mer (Creully) France

Grave location

OK

OVER-

REBURIAL

Beny-sur-Mer Canadian Military Cemetery,
Beny-sur-Mer, France.

Grave 14, row B, plot 14.

HI & CR Form Despd. MAR 3 - 1947

Photographs
Despatched

JUN 30 1947

BURIAL REPORT TO N.K. JAN 12 1946

RETURN TO BUR. OF STAT. APR 26 1945

ROYAL MESSAGE DESP'D. AUG 4 1944

CAN. MESSAGE DESP'D. 11-8-44

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS
PERSON
ENTITLED TO Gaudias BEDARD (FATHER)

ADDRESS: 20 Val Alain,
Lotbiniere Co., Que.

MEMORIAL BAR
(1)
DATE DESP.
REGN. NO. 2311

(2) MEMORIAL CROSS
WIDOW

(2)

ADDRESS:

(3) MEMORIAL CROSS
MOTHER Mme. Ida Bedard, (FRENCH)

(3)

DESP. OCT 18 1944
REGN No. 3492

ADDRESS: 1669 20 Val Alain, Comte de Lotbiniere, P.Q.

18-7-44

AWARDS—CANADIAN ARMY (ACTIVE) -M 1669

MJA
500M—1-44 (3467)
H.Q. 1772-45-8

FILE NO. 405-B-29962

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
BEDARD,	Joseph Raoul Roch	E.49746	Pte.	R.C.A.S.C.

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
France-Germany Star	2140 13.10.49.
Defence Medal	
War Medal	
CVSM & Clasp	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

H.Q. D.V.A. E-49746

M.F.B. 357
750M-4-46 (9016)
H.Q. 1772-39-440

DEPARTMENT OF NATIONAL DEFENCE—(ARMY)

CROSS REFERENCE

DVA

BEDARD JOS. RAOUL ROCH

E-49746

H.Q. D.V.A. E-49746

Central Registry	P. A. or B. F.	Date	Initials	Referred to	For Remarks	Initials	Date
		(If purpose for which referred cannot be expressed on one line, add minute to file, and enter here "With Minute")					
MAR 30 1951	Pa	30 3 51	S.6				

DO NOT WRITE BELOW THIS LINE

NOTICE

1. File should be retained no longer than absolutely necessary. If a file is frequently needed at short intervals, it is better to B.F. it for two or three days than keep it out of Central Registry indefinitely. This ensures its being completed and kept in order, and also gives other offices an opportunity.

2. Central Registry should be notified whenever a file is passed direct to another branch.

3. All outgoing letters should bear the official file number.

Cas Report No 7517

NAME E 49746 Pte BEDARD, Joseph R.R. (Raoul Roch)

Casualty	Date	Authority	Date entered	Clerk
KILLED	~~DNK~~	~~"A" 472~~	AUG 4 1944	[illegible]
	~~19 Jul 44~~	Conf A-479	31 Aug 44	[illegible]
	18 Jul 44	conf A 483	15 Sep 44	[illegible]

CASUALTY REPORT checked by [illegible] O

EST 3( ) to O.

Sent on by C. Returned and checked by O.

EST 3( ) to O.

Sent on by C. Returned and checked by O.

WILL from received on and checked by O.

Date Beneficiary

Photo indent dated by C Negative No. filed by C.

Forward to A. of E. O, EST 10 No. by C.

EFFECTS at 1 CKSD YES/NO EST 2 No. 81 Inventory checked by O.

EST 4 to O.

Sent on by C.

EST 4(a) O. Sent on by C. Inventory checked by O.

Inventory UNIT effects checked by [illegible] O. / ~~NO UNIT effects~~ O.

Release from A. of E. to O.

RELEASE to Can O. EST 11 No. 215 ~~EST 5 on~~ 28/11/44 by [illegible] C.

Shipped in Box EST 98 on Dec 44 EST 5(a) rec'd and filed by C.

C. of A. REPORT rec'd and dup. ch. on 27/11/44 by [illegible] C. Checked by [illegible] O.

DEBTS

Particulars	Name	Amount	Paid	Receipt

	Checked		
MBM I Part II D	O	MBM I Part I O	O.
No. Oh bk ens	O	Off Record of Service Bk	O.
GPO bank book	O		O.
	O		O.
	O		O.
	O		O.

EST 6/~~Recun/Pens/Uplift~~ [illegible] O.

Cash to P.M. 85 Cdn Bdg Coy RCASC 15 pcs.

Prepared by C.B. C.

L.P.C. received and checked by [illegible] O.

EST 7 [illegible] O. Prepared by [illegible] C.

COMPLETE (Ded) [illegible] O. Entered on FEB 21 1945 by [illegible] C.

NOTES

MBM I pt I may be received

REMARKS to A. of E. See Ex "B2" indicating that a will was prepared in MBM I pt I but now unreadable. MBM I pt I not received.

Nte AP 10c per mo (W.S.C.)

EST 7

Quote No. 10/BEDARD, J.R.R/1(Est 2)

CANADIAN MILITARY HEADQUARTERS

2 Cockspur Street,

(Trafalgar Square)

London, S.W.1.

19 Feb 45

Director of Estates,
Department of National Defence,
Estates Branch,
OTTAWA, Canada.

E.49746 Pte BEDARD, Joseph Raoul Roch (Dec'd)

1. Herewith the following:-

Original C. of A. report
M.B.M. I Part II - 1
L.P.C.
C.F.A. 187 Cdn Sec GHQ 2 Ech 21 A Gp

Receipted accounts as follows:-

NIL

Form letters as follows:-

NIL

Bank Books as follows:-

NIL

2. Personal effects released to you in Box 98

3. Nil effects stored at #1 C.K.S.D.

4. Nil Will here

5. Remarks

1. See Ex "B2" indicating that a will was prepared in MBM I Pt I but now unreadable. MBM I Pt I not rec'd.

2. Note Assigned Pay $1.00 per month (W.S.C.).

(G.M. Lampard) Lt-Col.
Officer i/c Estates
Canadian Military Headquarters.

Copy to file

Officer i/c Estates,
C.M.H.Q.,
L O N D O N, S.W.1.

E.49746. Dvr. Bedard. J.R.R.(Deceased).
10/Bedard. J.R.R./ 1 (Est 2).

In accordance with your letter dated 27th November 44.

enclosed are Last Pay Certificate and Paybooks for the above-noted.

PR/495 13th February 45.

D. Fowler
for Chief Treasury Officer.

EST 6

Quote No...10/BEDARD.J.R.1.(Est.2)...

CANADIAN MILITARY HEADQUARTERS

2, Cockspur Street,

(Trafalgar Square)

London. S.W.1.

27 NOV 44.

C.P.M. (Pay 2)
Lancaster.

E-49746 Pte BEDARD Joseph R.R. (dec'd)

1. Herwith the following:-

(i) M.B.M. I Part II
(ii) Distribution of service estates form

2. Please uplift the following bank account in addition to the official bank account if any:-

NIL

3. Committee of Adjustment Report shows the following:-

Cash to Paymaster	85 Cdn Bdg Coy RCASC	15 Francs

C.D.V. Nil

4. Please forward:-

Cheques in payment of debts
L.P.C.

(G.M. Lampard) Lt-col.
Officer i/c Estates
Canadian Military Headquarters

Copy for file

10/Bedard JRR)1
(Est 2)

Director of Estates,
Department of National Defence,
Estates Branch,
OTTAWA, Canada.

25 Nov 44.

E-49746 Pte BEDARD, J.R.R. (dec'd)

1. Please be advised that a memorandum was discovered attached to 37 snapshots, the property of the m/n, directing that they be sent to M. and Mme. C. Bedard, Val-Alain, Conte de Lotbiniere, Quebec, Canada.

2. For your information, please.

(G.F.D. Goldring) Lieut.
for Officer i/c Estates.
Canadian Military Headquarters.

/PM.

Army Form W.3190
(Books of 50)

Personal Effects Certificate.

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. F 49746

Rank, Name & Initials Pte Bedard, J. R. R.

Regiment or Corps 85 Bridge Coy RCASC

Nature of Casualty Killed

Date of Casualty 18 Jul 44

I CERTIFY that I have examined all the personal belongings of the above-mentioned, and that, to the best of my belief, he had no other personal effects

WHILE SERVING UNDER MY COMMAND.
WHEN ADMITTED HERE.
WHEN FOUND.

The effects enumerated on the back hereof, which were packed under the personal supervision of an officer, are all that were recovered.

Signature W Raine Lieut

Rank Lieut

Unit Cdn Sec CIC, 2 Ech 21 Army Group

Date 9 Aug 44

Inventory No. :— 10 74

Registered Post Particulars :—

Personal effects of :—

(i) Deceased, Missing or Prisoner of War officers and other ranks will always be despatched by registered post to O. i/c G.H.Q., 2nd Echelon.

(ii) Sick or wounded officers and other ranks will always be despatched by registered post to the hospital to which admitted, if known, otherwise to the Reinforcement Holding Unit (or G.H.Q., 2nd Echelon, if specially instructed).

Three copies of this Form will be prepared. One will be retained by the Unit, one enclosed in the Parcel of Effects and one despatched separately by registered post to Addressee.

This Form will also be used when forwarding the personal effects of enemy dead or enemy prisoners of war.

Wt. 54606/1436 98,200 lifts. 1/44 CHG&CoLtd 51-8392

Army Form W.3190

Personal of
Army No. E 49746 Rank Pte Name & Initials Bedard J. R. R. Regt. 85 Br Coy

RCASC

INVENTORY OF EFFECTS.

List of Articles of Intrinsic or Sentimental Value.

1 prayer book Petit Pereissien

1 Rosary

37 Personal Snapshots with note asking that these be sent to;
~~Mr & Mrs T. C. Bedard,~~
Val-Alain
~~Conte de Lotbiniere,~~
Quebec Canada. To O/C Estates

Red identity disc

Amplete in detail
Effects by Col

	£	s.	d.	Frcs.	Ctms.
Notes					
Postal Orders					
Gold					
Silver					
Copper					
TOTAL					

Special Notes.

(1) The pay books (A.Bs.64) of Deceased or Missing other ranks will be despatched by Registered Post, under separate cover, and not together with cash or articles of intrinsic or sentimental value. They will be accompanied by a covering memorandum, and **no entry in respect thereof will be made upon this form.**

(2) Articles of Government property (including clothing and necessaries) should not be forwarded with the effects of Sick, Wounded, Missing or Deceased other ranks.

(3) Particulars of enemy prisoners of war, if a Serial No. has not been allotted on A.F.W.3000, and enemy dead will be obtained from identity disc or pay book.

This Army Form W.3190, which must be signed by an officer, should be enclosed in the parcel with effects, and not sent separately.

Army Form W.3190
(Books of 50)

Personal Effects Certificate.

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. E 49746

Rank, Name & Initials Pte Bedard , J. R. R.

Regiment or Corps 85 Bridge Coy RCASC

Nature of Casualty killed

Date of Casualty 18 Jul 44

I CERTIFY that I have examined all the personal belongings of the above-mentioned, and that, to the best of my belief, he had no other personal effects

WHILE SERVING UNDER MY COMMAND.
WHEN ADMITTED HERE.
WHEN FOUND.

The effects enumerated on the back hereof, which were packed under the personal supervision of an officer, are all that were recovered.

Signature W Rennie Lieut

Rank Lieut

Unit Cdn Sec CHQ, 2 Ech 21 Army Group

Date 9 ~~XXXXX~~ Aug 44

Wt. 54606/1436 98,200 lifts. 1/44 CHG&CoLtd 51-8392

Inventory No. :—

10 74

Registered Post Particulars :—

Personal effects of :—

(i) Deceased, Missing or Prisoner of War officers and other ranks will always be despatched by registered post to O. i/c G.H.Q., 2nd Echelon.

(ii) Sick or wounded officers and other ranks will always be despatched by registered post to the hospital to which admitted, if known, otherwise to the Reinforcement Holding Unit (or G.H.Q., 2nd Echelon, if specially instructed).

Three copies of this Form will be prepared. One will be retained by the Unit, one enclosed in the Parcel of Effects and one despatched separately by registered post to Addressee.

This Form will also be used when forwarding the personal effects of enemy dead or enemy prisoners of war.

Army Form W.3190

Personal or Army No. E 49746 Rank Pte Name & Initials Bedard J. R. R. Regt. 85 Br Coy RCASC

INVENTORY OF EFFECTS.

List of Articles of Intrinsic or Sentimental Value.

1 prayer book Petit Pereissien

1 Rosary

37 Personal Snapshots with note asking that these be sent to; Mr & Mrs T. G. Bedard, Val-Alain Conte de Lotbiniere, Quebec Canada. to o/c Estates

1 Red identity disc

Complete 25 Oct 44
A Sinclair Capt
R D Patterson

	£	s.	d.		Ctms.
Notes					
Postal Orders					
Gold					
Silver					
Copper					
TOTAL					

Special Notes.

(1) The pay books (A.Bs.64) of Deceased or Missing other ranks will be despatched by Registered Post, under separate cover, and not together with cash or articles of intrinsic or sentimental value. They will be accompanied by a covering memorandum, and **no entry in respect thereof will be made upon this form.**

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(3) Particulars of enemy prisoners of war, if a Serial No. has not been allotted on A.F.W.3000, and enemy dead will be obtained from identity disc or pay book.

This Army Form W.3190, which must be signed by an officer, should be enclosed in the parcel with effects, and not sent separately.

rhb

STANDING COMMITTEE OF ADJUSTMENT REPORT

Regt'l No.	Rank	Name in full	Unit
F 49746	Pte	BEDARD, J.R.R.	85 Cdn Bridge Coy RCASC

Casualty Deceased Date 18 Jul 44

1. The following articles of Government Equipment have been removed from the personal effects of the above mentioned and have been turned in to Q.M. Stores. They are included in our Q.M. Receipt No. _____

Nil

2. The following items have been removed for reasons indicated:-

Nil

3. The following documents have been forwarded to Officer i/c Estates by Registered Post:-

Nil

4. The following which are not mentioned in the Unit Committee of Adjustment Report are indicated hereafter for your information;-

Red Identity Disc Received among effects listed on Exh. A-5.

5. Ref. Para. "G" CFA-151:- Paybook not available at this H.Q., presumed previously forwarded. Should this not be at hand CMHQ, please advise.

Eric G Roberts Capt.
(ERIC G. ROBERTS), Capt.
Standing Committee of Adjustment
Cdn Sec G.H.Q. 2nd Ech 21 Army Gp

23 Nov 44
Date

Duplicate

UNIT COMMITTEE OF ADJUSTMENT REPORT

INSTRUCTIONS

1. To be completed in triplicate of which one copy will be retained by the unit.
2. Parts marked" whichare not applicable will be ruled out and initialled.
3. All blanks marked ① will be filled in with "NIL" where appropriate.
4. In the case of personnel reported MISSING, INTERNED, or PRISONERS OF WAR, NO PERSONAL EFFECTS WILL BE SOLD AND NO PREFERENTIAL CHARGES OR ORDINARY DEBTS WILL BE PAID by Unit Committee of Adjustment.
5. In the case of DECEASED personnel, no personal effects of sentimental nature will be sold. Other personal effects may be sold to pay preferential charges and also when, in the opinion of the C.O., the exigencies of the Service make it desirable to do so.
6. Unit Committee of Adjustment may pay, in the case of deceased personnel.

   (a) preferential charges owing within the unit and the unit area, and
   (b) ordinary debts similarly owing ONLY if after making provision for all preferential charges of which it has notice there is sufficient cash on hand to pay all ordinary debts.

7. The following will be forwarded in the manner shown,

   In U.K. - to Officer i/c Estates, C.M.H.Q.
   Ex U.K. - to Officer i/c Cdn Sec., G.H.Q., 2nd Echelon

   (a) Personal effects not disposed of, original and duplicate copy of report, and Officers' Record of Service Book or Soldiers' Service and Pay Book MBM 1, Pts. 1 and 11-by post, rail or road.

   (b) Any Will or testamentary document with a memorandum giving regimental particulars and, if undated, any available evidence indicating the probable date of its execution-by registered post at once.

   (c) Cheques, drafts, money orders, personal papers and documents, effects of sentimental value and an inventory of all personal effects forwarded-by registered post.

REPORT

No. E49746 ....Rank. Pte. .....Name in full. BEDARD, Joseph Raoul Roch .....

"Deceased, "Missing, "Prisoner of War, "Interned. Date of Casualty.....
...18 Jul 44.....

Unit. 85 Cdn Bridge Coy, RCASC .....

Medical installation in which death took place (if applicable).... N/A .....

Reinforcement Unit to which posted at time of death (if applicable)..... N/A .....

Name of Officer furnishing report... Morris E Charbonneau, Capt. .....
(BLOCK CAPITALS)

A. PERSONAL EFFECTS

1. "Separate inventories are attached, as applicable showing:-

   (a) "Articles privately owned, suitable for service requirements, turned into Q.M. Stores--Exhibit "A1".

   (b) "Articles sold to pay preferential charges, showing the purchaser of, and the price paid for each article--Exhibit "A2".

   (c) Articles additionally sold under C.Os. authority showing the purchaser of, and the price paid for each article, and the written authority of C.O. for sale,--Exhibit "A3".

(a) Bulky articles disposed of under authority of Officer i/c Estates C.M.H.Q., showing the disposition and, if sold the purchaser of, and the price paid for each article,--Exhibit "A4".

(e) Personal effects, forwarded to ("Officer i/c 2nd Echelon), ("Officer i/c Estates)--Exhibit "A5".

2. "No personal effects were found or recieved. A memorandum as to the circumstances and any action taken is attached as EXhibit "A6".

B. WILL

(a) "Original Will or testamentary document was forwarded on .....(DATE) by registered post to ("Officer i/c Estates), ("Officer i/c 2nd Echelon). A Copy thereof and the memorandum forwarded therewith is attached as Exhibit "B1".

(b) "No Will or testamentary document was found on the person or among the effects of the deceased. Attached exh "B2"

C. CLOTHING AND EQUIPMENT (PUBLIC)

(a) "Was turned into Q.M. Stores. Nil

(b) "There was no deficiencies. N/A

(c) "There was deficiencies amounting to £ and cash debit voucher duly certified by the D.A.D.O.S. or Senior Ordnance Representative of the formation is attached as Exhibit "C1".

NOTE: If space insufficient, attach, identify and sign additional sheets for Items D, E and F.

D. PREFERENTIAL CHARGES

(a) Name and Address of Creditor	Nature of claim	amount	paid or Unpaid
Nil	Nil	Nil	Nil

"Itemised accounts are attached as Exhibit "D1", those shown as paid being duly receipted, and those recommended for payments by the Officer i/c Estates being so certified.

(b) "Memorandum as to any disputed accounts, with full particulars of dispute attached as Exhibit "D2".

E. ORDINARY DEBTS

(a) Name and address of Creditor	Nature of claim	amount	Paid or Unpaid
Nil	Nil	Nil	Nil

"Itemised accounts are attached as Exhibit "E1", those shown as paid being duly receipted, and those recommended for payment by the Officer i/c Estates being so certified.

(b) "Memorandum as to any disputed accounts, with full particulars of dispute attached as Exhibit "E2".

F. CREDITS

(a) Public Claims owing to the Casualty Nature of Claim	Amount
Nil	Nil

(i) Copy of each claim submitted and of any correspondence connected therewith attached as Exhibit "F1".

F. (ii) "Statement of valuation of, and receipt for, articles suitable for service requirements turned into Q.M. Stores (para. A.1.(a) above) attached as Exhibit "F2". Nil

(b) Private claims Owing to the Casualty

	Name and Address of Debtor.	Particulars of claim	Amount	Paid or Unpaid
(1)	Nil	Nil	Nil	Nil

"Memorandum as to any unpaid claims, showing whether or not liability admitted and steps taken to effect collection, attached as Exhibit "F3"

G. CASH RECEIVED AND PAID

		Paid	Received
Cr.	(Cash found on person (or in effects		(1) 15 Fr.
	(Cash realized from sale of (effects as per para A.		(1) Nil
	(Cash collected re private (claims as per para F.		(1) Nil
Dr.	(Paid re preferential (charges as per para D.	(1) Nil	
	(Paid re ordinary debts (as per para E.	(1) Nil	
	(Paid ("balance) to unit (Paymaster	(1) 15 Fr.	
		(1) 15 Fr.	(1) 15 Fr.

H. SERVICE AND PAY BOOK

Officers' Record of Service Book ("Soldiers' Service and Pay Book M.B.M. 1 Parts 1 and 11) is ("Forwarded with this report)

~~("Not forwarded by reason that~~ .....

.....
Signature of Committee or President

.....19 Jul 44..... .....89 Cdn Bridge Coy, RCASC.....
Date Unit

Ex A5

Army Form W.3190.
(Books of 50)

Personal Effects Certificate.

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. E-49746

Rank, Name & Initials Pte BEDARD J R R

Regiment or Corps 85 Cdn Bridge Coy RCASC

Nature of Casualty Fatal

Date of Casualty 18 Jul 44

I CERTIFY that I have examined all the personal belongings of the above-mentioned, and that, to the best of my belief, he had no other personal effects

WHILE SERVING UNDER MY COMMAND.
WHEN ADMITTED HERE.
WHEN FOUND.

The effects enumerated on the back hereof, which were packed under the personal supervision of an officer, are all that were recovered.

Signature [illegible]

Rank Capt.

Unit 85 Cdn Bridge Coy RCASC

Date 19 Jul 44

Inventory No. :—

Registered Post Particulars :—

Special Instructions.

Personal effects of :—

(i) Deceased or Missing officers and other ranks will always be despatched by registered post to O. i/c G.H.Q., 2nd Echelon.

(ii) Sick or Wounded officers and other ranks will always be despatched by registered post to the hospital to which admitted, if known, otherwise to O. i/c G.H.Q., 2nd Echelon.

Two copies of this Army Form will be enclosed in the parcel.

This Army Form will also be used when forwarding the personal effects of enemy dead or enemy prisoners of war.

GV278) Wt. 49408/1009. 30,000 Bks. 2/43. B. & S. Ltd. 51-6431.

Army Form W.3190.

Personal or Army No. E-49746 Rank Pte. Name & Initials Bedard J R R Regt. 85 Cdn Br Coy RCASC

INVENTORY OF EFFECTS.

Duplicate

List of Articles of Intrinsic or Sentimental Value.

1 Prayer Book(Petit Paroissien)
1 Pr Prayer Beads
37 personal pictures (Snaps)
also a note asking that these
be forwarded to Mr & Mrs
F G. Bedard, Val-Alain
Conte de Lotbiniere
Quebec, Can

	£	s.	d.	Frcs.	Ctms.
Notes			x	15	
Postal Orders					
Gold					
Silver	x- see MFM 503				
Copper					
TOTAL				15	

Special Notes.

(1) The pay books (A.Bs. 64) of Deceased or Missing other ranks will be despatched by Registered Post, under separate cover, and not together with cash or articles of intrinsic or sentimental value. They will be accompanied by a covering memorandum, and **no entry in respect thereof will be made upon this form.**

(2) Articles of Government property (including clothing and necessaries) should not be forwarded with the effects of Sick, Wounded, Missing or Deceased other ranks.

(3) Particulars of enemy prisoners of war, if a Serial No. has not been allotted on A.F. W.3000, and enemy dead will be obtained from identity disc or pay book.

This Army Form W.3190, which must be signed by an officer, should be enclosed in the parcel with effects, and not sent separately.

Army Form W.3190
(Books of 50)

Personal Effects Certificate.

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. E 49746

Rank, Name & Initials Pte Bedard , J. R. R.

Regiment or Corps 85 Bridge Coy RCASC

Nature of Casualty killed

Date of Casualty 18 Jul 44

I CERTIFY that I have examined all the personal belongings of the above-mentioned, and that, to the best of my belief, he had no other personal effects

WHILE SERVING UNDER MY COMMAND.
WHEN ADMITTED HERE.
WHEN FOUND.

The effects enumerated on the back hereof, which were packed under the personal supervision of an officer, are all that were recovered.

Signature W Racine Lieut

Rank Lieut

Unit Cdn Sec GHQ, 2 Ech 21 Army Group

Date 9 ~~XXXXX~~ Aug 44

Inventory No. :— 10 74

Registered Post Particulars :—

Personal effects of :—

(i) Deceased, Missing or Prisoner of War officers and other ranks will always be despatched by registered post to O. i/c G.H.Q., 2nd Echelon.

(ii) Sick or wounded officers and other ranks will always be despatched by registered post to the hospital to which admitted, if known, otherwise to the Reinforcement Holding Unit (or G.H.Q., 2nd Echelon, if specially instructed).

Three copies of this Form will be prepared. One will be retained by the Unit, one enclosed in the Parcel of Effects and one despatched separately by registered post to Addressee.

This Form will also be used when forwarding the personal effects of enemy dead or enemy prisoners of war.

Wt. 54606/1436 98,200 lifts. 1/44 CHG&CoLtd 51-8392

Army Form W.3190

Personal or Army No. P 49746 Rank Pte Name & Initials Bedard J. R. R. Regt. 85 Tr Coy R.A.S.C.

INVENTORY OF EFFECTS.

List of Articles of Intrinsic or Sentimental Value.		£	s	d.	Frcs.	Ctms.
1 prayer book Petit Parcissien	Notes					
1 Rosary	Postal Orders					
37 Personal Snapshots with note asking that these be sent to; Mr & Mrs T. G. Bedard, Val-Alain Conte de Lotbiniere, Quebec Canada.	Gold					
	Silver					
Red identity disc	Copper					
	TOTAL					

Special Notes.

(1) The pay books (A.Bs.64) of Deceased or Missing other ranks will be despatched by Registered Post, under separate cover, and not together with cash or articles of intrinsic or sentimental value. They will be accompanied by a covering memorandum, and **no entry in respect thereof will be made upon this form.**

(2) Articles of Government property (including clothing and necessaries) should not be forwarded with the effects of Sick, Wounded, Missing or Deceased other ranks.

(3) Particulars of enemy prisoners of war, if a Serial No. has not been allotted on A.F.W.3000, and enemy dead will be obtained from identity disc or pay book.

This Army Form W.3190, which must be signed by an officer, should be enclosed in the parcel with effects, and not sent separately.

Exhibit " B2 "

There is a part of a will found in his M.B.M. 1. but it has bee been partially destroyed by fire.This makes it unreadable.

19 Jul 44

M.E. Charbonneau, Capt.
President of Committee
of adjustment

Duplicate

CANADIAN ARMY OVERSEAS

FINANCIAL RECEIPT

RECEIPT No. 1 20 July 1944

RECEIVED FROM Committee of Adj for Pte of E 49746 Pte Redend J.R.R.

THE SUM OF fifteen francs

being

found on the person of E 49746 Pte Redend J.R.R. "Killed by enemy action" 19 July 44

M Terling Capt

Command Paymaster or Field Cashier.

20 July 1944 85th Bridge by Reare 7 miles Place

M.F.M. 503
40/P & S/1340

Q.G.405-B-29962 R.4(b)

le 30 juin 1947.

Monsieur,

Je vous envoie sous ce pli une photographie de la tombe et du monument commémoratif qui marque la sépulture de votre regretté fils, le soldat Joseph Raoul Roch BEDARD, matricule E-497-46, inhumé dans la fosse 14, rang B, lot 14, du cimetière militaire canadien de Beny-sur-Mer, à Beny-sur-Mer, en France.

Toute erreur paraissant dans l'inscription sera corrigée au moment de l'érection de la pierre tombale permanente.

Veuillez agréer, Monsieur, mes respectueuses salutations.

Pour l'adjudant général,

Pièces jointes

(H.M.Jackson) lt-colonel,
directeur des archives.

M. Gaudias Bédard,
Val Alain,
Cté de Lotbinière,
P. Qué.

/BP

QUOTE No. H.Q. 405-B-29962
R. 4 (B).

CANADA

DEPARTMENT OF NATIONAL DEFENCE
ARMY

OTTAWA, CANADA,

F.T.

26th June, 1947.

Mr. Gaudias Bedard,
20 Val Alain,
Co. de Lotbiniere, Quebec.

Dear Mr. Bedard:

I am forwarding herewith a photograph of the grave and marker over the burial place of your late son, E49746 Private Joseph Raoul Roch Bedard, the location of which is grave 14, row B, plot 14, Beny-sur-Mer Canadian Military Cemetery, Beny-sur-Mer, France.

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

Yours faithfully,

Encl.

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

/EMA

NAT. DEF. A-168-A
500M—6-45 (7443)
H.Q. 1772—39—376

COMPUTATION OF WAR SERVICE GRATUITY

MEMBER'S NAME JOSEPH RAOUL ROCH BEDARD (Christian Names) (Surname) — Register No. D 20461

File No. 405-B-29-962

PAYEE'S NAME MR. GAUDIAS BEDARD (Christian Names) (Surname) — Date 6-3-46

ADDRESS VAL ALAIN, — Service No. E 49746

CTE. LOTBINIERE, PQ — Final Rank Pte

DATE OF TERMINATION OF OVERSEAS SERVICE 18-7-44 — Date of Discharge 18-7-44

	AMOUNT $	c
A. TOTAL QUALIFYING SERVICE No. of day 525 / 30 = 17 Periods @ $7.50	127	50
B. QUALIFYING OVERSEAS SERVICE No. of days 349 less 15 Ineligible days, equal 334 Days @ 25c. per day	83	50
C. SUPPLEMENT FOR OVERSEAS SERVICE	211	00
Daily Rate of Pay $ 1.50 Subsistence Allowance $ 1.25 Additional Pay $ Dependents' Allowance 1/30 $ $ TOTAL $ 2.75 × 7 = $ 19.25 No. of Days 349 / 183 × $ 19.25	36	71
D. WAR SERVICE GRATUITY Computed By Gates	247	71
E. DEDUCTIONS Overpayment of (1) Pay & Allowance $ (2) D.A. & A.P. $ Other Deductions $ Entered By JHW		
F. AMOUNT PAYABLE (This amount is payable in ..... monthly instalments of $ ..... each)	247	71

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

$ ..... × 30 = $ .....

REMARKS

100M—9-45 (8069)
H.Q. 1764-81-3

TO BE PREPARED IN TRIPLICATE

Issue Voucher No......

Period of Account:

.....

EXPENSE VOUCHER

FOR

STORES AND MATERIALS EXPENDED

Station .....

Date.....

Ledger Folio	Number of Repair Indent	ARTICLES EXPENDED	No. Etc.	Necessity for Expenditure
		Section No......		

By whom expended:

(Signature).....

Issued by:

(Signature) .....

Approved:

.....*Ordnance Officer in Charge*

Pay to

Mr Gaudias Bedard

C.D. 1418

APPLICATION FOR WAR SERVICE GRATUITY BY

DEPENDENTS OF DECEASED PERSONNEL - (Canadian Army)

1. I hereby make application for payment of War Service Gratuity to which I may be entitled in respect of the undermentioned deceased member of the Canadian Army.

(a) Surname BEDARD

(b) Christian Names Joseph Raoul Roch

(c) Regimental No. E-49746

(d) Rank at time of decease Pte.

2. Please indicate below whether application is made as a dependent or otherwise by striking out the sentence which does not apply.

(a) I am applying as a person who was dependent upon the above named soldier and to whom pay was assigned by him. _____

(b) There being no person dependent upon the above named I request that the War Service Gratuity form part of the soldier's estate and be distributed accordingly. _____

3. I hereby submit the following particulars in support of my application:-

(a) Surname BEDARD

(b) Christian Names GAUDIAS

(c) Relationship to deceased SON PERE

(d) Address in full VAL ALAIN, CTE LOTBINIERE

Yours truly,

Date FEVRIER 28

Gaudias Bédard

(Signature of Applicant)

IN REPLY PLEASE QUOTE

FRENCH TRANSLATION PLEASE

No. C.D. 1418
405-B-29962
WSG/G

CANADA

DEPARTMENT OF NATIONAL DEFENCE
ARMY

Ottawa, Ontario, 18th Feb 1946

Mr. Gaudias Bedard,
Val Alain,
Cte. Lotbiniere, P.Q.

E-49746 Pte. BEDARD, Joseph Raoul Roch

Dear Mr. Bedard:

As you were receiving Assigned Pay from your late son, the marginally named deceased soldier, immediately prior to his death, and as you were the sole beneficiary of his Service Estate, it would appear that you are eligible to receive the War Service Gratuity payable on his behalf.

Please complete the attached application form, returning it to this office as soon as possible.

Yours truly,

(K. W. Rice) Captain,
for Paymaster-General.

N.D. 23
1000M—9-45 (8017)
H.Q. 1772-101-23

HDC/MS

C.D. 1418
405-B-29962 W.S.G./G.

le 21 février 1946.

Monsieur,

Au sujet du soldat Joseph-Raoul-Roch Bédard,
matricule E.49746.

Comme vous receviez une délégation de solde de feu votre fils, le soldat susnommé, immédiatement avant sa mort et comme vous étiez l'unique bénéficiaire de sa succession militaire, il appert que vous avez droit à la gratification de service de guerre payable en sa faveur.

Vous voudrez bien remplir la formule de demande ci-jointe et nous la renvoyer le plus tôt possible.

Veuillez agréer, monsieur, mes sincères salutations.

Pour le trésorier-payeur général,

Pièce jointe

(K.W. Rice), capitaine.

M. Gaudias Bédard,
Val Alain,
Comté de Lotbinière, P.Q.

CASUALTIES ONLY
For purpose of W.S.G.
Casualities include death
subsequent to discharge.

Register No. C.D. 1418
File No. ~~405-B-29962~~

WAR SERVICE GRANTS ACT 1944

Ottawa 30 January, 1946

To: Chief Treasury Officer,
Dependents' Allowance and Assigned Pay Branch

Service No. E-49746

Name Joseph R.R. BEDARD,
Christian Name Surname

Please supply the following information in respect of the marginally named at the time of his discharge or death and return this form in duplicate along with the file to the undersigned.

K. W. Rice
(K. W. RICE) Captain,
for Paymaster-General.

	Name	Amount
Names, address and relationship of persons in receipt of D.A. and amount of monthly award.	Nil	$ Nil
If no D.A. in issue, list names, address and relationship of persons in receipt of A.P. who may be classed as Dependents under W.S.G. Act, 1944, and amount of monthly assignment.	Mrs Eudias Bedard	20.00
Names, address and relationship of persons to whom assigned pay was continued by supplementary award after death.		
Amount of overpayment of dependents' allowance and/or assigned pay deductible from the War Service Gratuity and name of person to whom paid.	Nil	

7/2 1946

L. Bureau
For Chief Treasury Officer,
D.A. & A.P. Branch

C.T.O., D.A.&.A.P.

Overpayments of D.A. and/or A.P. recovered from W.S.G. $

194

for C.T.O.

H.Q. 405-B-29-962

FALSE DOCKET ARMY No. 357 ESTATES

DEPARTMENT OF NATIONAL DEFENCE, CANADA

CROSS REFERENCE

BEDARD J.R.R.

E-49946

G

Central Registry	Date	P. A. or B. F.	Initials	Referred to	For Remarks	Initials	Date
		(If purpose for which referred cannot be expressed on one line, add minute to file and enter here "With Minute")					
✓	15-7	BF	G		New Cover		22-6
		PA	QC	QC	Closed	G	15-6
✓	22-8	B.F.	G	G	Per B. F. JUL 15 1945		
✓	30-9	B.F.	G	G	Per B. F. AUG 22 1945		
	13/9	J.a	G	G	WITH PAPERS SEP 10 1945		
				G	PER. B. F. OCT 1 1945		
C.R.	9/10/45	J.a	G				
	19/10/45	P.G.			2c PER REQUISITION OCT 18 1945		

CLOSED 15-6

H.Q. FILE No. 405-B-29-962 BEDARD JR

M.F.M. 50
8M—10-44 (5848)
H.Q. 1772-39—1710

DO NOT WRITE BELOW THIS LINE

DIED.....194..... CANADA.....FORM TO UNIT.....

PRESUMED DEAD.....194..... OVERSEAS.....

	Date Received	Date Despatched	
Casualty Report—			
Will { Service { Canada / O/Seas; Civil; None; Probate (or L of A)			Beneficiary..... Residing { Canada / Elsewhere
Particulars of Family Form dated..... None.....			Single.....Married..... Parents.....Children.....(Minors.....) Life Insurance.....
Form P. 64 Dated..... Domicile.....			By.....Single.....M..... Other N/K..... .....Debts..... Will.....Civil Estate.....

	Action Required	Action Taken	Date	App'd
Bank a/c.....				
W.S.C.....				
Bonds.....				
C. of A. Report.....	Approved	Service Debts ..... Service Will.....		
L.P.C..... $.....				
Amended.....				
Bank Credits.....				

DISTRIBUTION—		To.....
Effects { Canada		Bulk via.....
		Valuables via.....
Overseas		Letter as to, dated.....

Total Cash $.....

Date of Despatch

.....

To

$.....

$.....

$.....

$.....

$.....

$.....

$.....

$.....

$.....

H.Q. 405-B-29,962

FALSE DOCKET ARMY No. 358 ESTATES

DEPARTMENT OF NATIONAL DEFENCE, CANADA

CROSS REFERENCE

G

BEDARD, J.R.R.

E.49746

Central Registry	Date	P. A. or B. F.	Initials	Referred to	For Remarks	Initials	Date
		(If purpose for which referred cannot be expressed on one line, add minute to file and enter here "With Minute")					
				Q3	PER REQUISITION AUG 16 1944		
SEP 15 1944				Estates	Passed Pls.	A.H.	14-9-44
				Z	—	RCM	18 Sep 44
				Z.	P.64 FOR SIGNATURE	D.D.	21-9-44
	26-10	J.A.	G	Z	With Papers OCT 17 1944		
				Q	See Sections	MT	31/10/44
	7 11/44	J.A.	G	Eg	Give folio down	Q	3-11
	15 11/45	B.F.	G	G	With Papers NOV 11 1944		
	4/45	J.A.	G	G	With Papers DEC 18 1944		
	Cancelled				Per B. F. FEB 15 1945		
	30 4	B.F.	G				
				QP	With Papers MAR 1 1945		
✓	7 4/45	B.F.	G	G	R.P.C. int.	Q.P.	5-3-45
	22/5/45	B.F.	G	G	With Papers APR 6 1945		
				Q.V.	Verify & Q4	G	9/4
				Eff.	Request	Eff.	11-4.
				G	Effects entered	Eff	12-4-45
				Q.V.	Verify & Q4	G	16/4
✓	7-5	B.F.	Q-4	Q-4.	P-4	Q.V.	19-4-45
				G	With Papers APR 24 1945		
	27/4/45	R.A.	Eff	Effects	send effects & p-a	G	26/4
				Q4	Per B. F. MAY 7 1945		
✓	7-6	B.F.	SA	Q4	[illegible]	Q4	[illegible]
				SA	Per B. F. JUN 7 1945		
✓	15-7	B.F.	G	G	Dist & QC	A	13-6
				Q.C.	—	G	15/6

H.Q. FILE NO. 405-B-29,962

BEDARD, J.R.R.

M.F.M. 50
5M—2-43 (8649)
H.Q. 1772-39—1710

DO NOT WRITE BELOW THIS LINE

18/9/44

DIED NOT YET AVAILABLE 194 ..... CANADA ..... OVERSEAS ✓ FRANCE

	Date Received	Date Despatched	
Casualty Report—	15-9-44		
Will: Service Canada 16-4-43; O/Seas; Civil; None; Probate (or L of A)			Beneficiary MR. GAUDIAS BEDARD (FATHER)
			Residing: Canada ✓ W.S.C. Lost A. 13/4/43; Elsewhere Advised 15/10/45
Particulars of Family Form dated 29-1-43; None			Single ✓ Married ..... Parents BOTH Children ..... (Minors .....) Life Insurance SAUVEGARDE INS. CO.
A.P. to other than Dependents			
Form P.64 Dated	3-11	20-9(7) 26-10	By Father Single ✓ Other N/K mother — 4 Brothers 5 sisters Will NIL Other Estate W.A.C. Debts NIL ✓ Father assured to send W.S.C. to Regd. Advised 8/3/45
Form to Unit			
C. of A. Report	26-2	Approved 7-3	Service debts Nil Noted
L.P.C. $ 16 98	26.2.45	5.3.45	VERIFIED 12/3
Amended			
Bank Credits			
Other Credits 2.00	3/11/44		Accum Pay War Savgs Cert.
Domicile			
DISTRIBUTION— Canada		27-4-45	To P.O. Father; Bulk via 1 pel Reg. R83 ✓ 98
Effects C 12-4-45			Valuables via
C-1797 Overseas 1 Bag	28-3-45		Letter as to, dated 26/4/45

Total Cash $ 16 98

Date of Despatch 15/6/45

To

$ Father - Gaudiose Bedard (per Will)

$ advised as 2/3/45

$ P.D. 18/6/45

$ MR 515

$ ADVICE RECEIVED MAY 28 194: NO WILL ... OFF.

$ W.S.C.

$

$ (assignment for produce of W.S.C.) (with for V.W.B.)

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, CANADA

Date 30 août, 1945

RECEIVED this date Treasury cheque for the sum of

DIX HUIT PIASTRES ET ----------.98/100 Dollars ($ 18.98)

in connection with the estate of the below-named deceased, FILS

Q.G.405-B-29,962 FD358
BEDARD, Joseph R.R. Sdt. (Décédé)
No.E49746, A.C.

ESTATES BRANCH SEP 8 1945 H.Q. OTTAWA NATIONAL DEFENCE

Nº 15138

Théodias Bédard
Signature

30 Pads of 100—4-45 (7076) H.Q. 1772-45-6

Q.G.405-B-29,962 FD358

DIVISION DES SUCCESSIONS.

30 août, 1945.

Monsieur Gaudias Bédard,
Val Alain,
Cté. Lotbinière,
P.Q.

BEDARD, Joseph R.R. Sdt.(Décédé)
No. E49746, Armée Canadienne

Cher Monsieur Bédard,

Vous avez du recevoir dans le courant du mois de juin un chèque payable à votre ordre au montant de $18.98, en rapport avec la succession militaire de votre fils. Nous désirons cependant nous assurer que ce chèque vous est dûment parvenu et à cette fin, vous êtes prié de signer et retourner à notre Division la formule ci-incluse.

Votre tout dévoué

OG/YC

Le Directeur des Successions.
Major

H.Q. 405-B-29,962 FD 358

Registrar

OTTAWA, June 15th, 1945.

BEDARD, Joseph R.R., Pte., (dec'd.)
No. E-49746, Canadian Army

A60/383014

April 13, 1945.

13 April 1943

xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx

All

Father

Mr. Gaudias Bédard,
Val Alain,
Lotbinière Cty.
P. Q.

OG/TD

J.5

Q.G. 405-B-29,962 FD 358

DIVISION DES SUCCESSIONS

15 juin 1945.

Monsieur Gaudias Bédard,
Val Alain,
Cté Lotbinière,
P. Q.

BEDARD, Joseph R.R., Soldat, (décédé)
No.E-49746, Armée Canadienne

Cher Monsieur Bédard,

Nous sommes maintenant en mesure de disposer du montant apparaissant au crédit de la succession militaire de votre fils.

Le montant à distribuer est de $18.98 et est fait comme suit: -

Argent trouvé parmi les effets personnels.....	$ .34
Remboursement d'une délégation pour l'achat de certificats d'épargnes de guerre.....	2.00
Reliquat de solde.....	16.64
Total.....	$18.98

Le tout vous sera remis en votre qualité d'unique bénéficiaire au testament de votre fils.

Nous avons demandé au Bureau duTrésor de vous faire parvenir directement un chèque payable à votre ordre pour la somme de $18.98 et sur réception vous voudrez bien signer et retourner à notre Division la formule d'accusé de réception ci-incluse.

Votre dévoué,

(L.M.Firth) Colonel,
le Directeur des Successions.

OG/TD
Pc.adj.(1)

G/
7-5-4

P. a.
G

Department of National Defence

Estates Branch

Ottawa, Canada

Date 1er Mai 1945

Received this date from the Director of Estates

un colis par malle recommandée

containing personal effects of my deceased fils

H.Q. 405-B-29,962 FD 358

J.R.R.

BEDARD, Roch, Soldat, (décédé)
No. E-49746, Armée Canadienne

D-

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

Gaudias Bédard
Signature

DISTRIBUTION OF SERVICE ESTATES

1mw.

Estates Form "P. 4"

ARMY

Name: BEDARD, (Surname) Joseph G.R. (Christian Names) No.: E-49746

Pte. (Rank) C.A. o/s (Unit) 18-7-44 (Date of Death)

AMOUNT

L.P.C. $ 16.98

Date: 21 May 45.

Other Credits 2.00

Total 18.98

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Father	Gaudiose Bedard Val Alain Cte. Lobtiniere Quebec. (Sole beneficiary under Will).	$18.98 R

TO BE FORWARDED BY REG. MAIL DIRECT.

24 TO TREAS. 20-6-45 GW

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	$18.98

CLASSIFIED BY

Original Signed by
K. L. McCUAIG

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

75M—2-45 (6771)
H.Q. 1772-80-2

405-B-29,962 FD 358

DIVISION DES SUCCESSIONS

26 avril 1945.

Monsieur Gaudias Bédard,
Val Alain,
Cté Lobtinière,
P. Q.

BEDARD, Roch, Soldat, (décédé)
No. E-49746, Armée Canadienne

Cher Monsieur Bédard,

D'ici quelques jours, nous vous ferons expédier par malle recommandée un petit colis contenant les seuls articles des effets personnels de votre fils à être recueillis par les autorités de l'Unité après le décès. Sur réception, vous voudrez bien signer et retourner à notre Division la formule d'accusé de réception ci-incluse.

Nous vous écrirons d'ici les prochaines semaines concernant le petit montant au crédit de la succession militaire.

Dans une formule remplie par votre fils au moment de son enrôlement, il a déclaré qu'il était porteur d'une assurance avec la compagnie d'assurances la Sauvegarde. Nous ignorons si cette police était en vigueur au moment du décès, mais vous pourrez obtenir ce renseignement de la compagnie concernée.

Votre dévoué,

583

Major,
le Directeur des Successions.

OG/TD
Pc.adj.(1)

G/17-4-QV

WAR SAVINGS CERTIFICATES

CERTIFICATS D'ÉPARGNE DE GUERRE

BUREAU DU RÉGISTRAIRE
350, AVENUE KING-EDWARD
OTTAWA

OFFICE OF THE REGISTRAR
350 KING EDWARD AVENUE
OTTAWA

APR 18 1945 (COPY)

E-49746
Bédard J.R.R.

Madame Gaudias Bédard,
Val Alain,
Cté Lotbinière, P. Q.

HQ-405-B-29962 FD 358

ESTATES BRANCH
APR 16 1945
H. Q.
OTTAWA
NATIONAL DEFENCE

Refer to A60/383014.
April 13, 1945

Dear Sir or Madam:

Re: Estate Roch Bédard

We have received your letter concerning War Savings Certificates registered in the name of the deceased, indicating that you have been in communication with the Director of Estates.

As you are no doubt aware the Registrar requires the Director's authorization. We are forwarding a copy of this letter to him, and your application will be dealt with as soon as possible.

c.c. to the
Director of Estates,
Dept. of National Defence,
Ottawa, Ont.

Yours truly,

R. Tricker

Registrar.

KEEP YOUR CERTIFICATES IN A SAFE PLACE, AND A LIST OF THEIR NUMBERS SAFELY ELSEWHERE

GARDEZ VOS CERTIFICATS DANS UN ENDROIT SÛR ET CONSERVEZ AILLEURS UNE LISTE DE LEURS NUMÉROS

CFA 187
4C/P & S/2180 (4066)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME ..... E ~~K~~-49746 Pte. Bedard J.R.B. (Deceased) .....

RECEIVED FROM ..... Cdn Sec GHQ 2nd Echelon 21 Army Group .....

CHECKED BY ..... C-5591 Pte. Patterson L.K. B-126252 Cpl. Sislofsky A. ..... DATE ..... 25 Oct 44 .....

1	Prayer Book		c-1797
1	Rosary		28-3-45
1	Red Identification Disc		Parcel
37	Snapshots		v scatt
1	Letter(Note) asking that these be sent to Mr. and Mrs. T.G. Bedard, Val-Alain, Conte de Lotbiniere, Quebec, Canada. (to Officer i/c Estates)		12-4-45
			1 fel Reg

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

TRIPLICATE — with effects.

..... A Sislofsky Capt .....
for OC 1 Cdn KSD

WAR SAVINGS CERTIFICATES

CERTIFICATS D'ÉPARGNE DE GUERRE

BUREAU DU REGISTRAIRE
350, AVENUE KING-EDWARD
OTTAWA

OFFICE OF THE REGISTRAR
350 KING EDWARD AVENUE
OTTAWA

The Director of Estates,
Department of National Defence,
Army,
Ottawa, Ont.

ESTATES BRANCH
APR 6
H.Q.
OTTAWA.
NATIONAL DEFENCE

April 4, 1945
Refer to A4/383014

Dear Sir,

Re: Estate of Bedard, Joseph Raoul Roch, Pte.
No. E-49746 Canadian Army

Referring to your letter of March 8th, we wish to advise that the Dependents' Allowance and Assigned Pay Branch have informed us that Certificates having a total face value of $15 were registered in the name of Roch Bedard and mailed to Val Alain, Que.

Yours truly,

for Registrar

KEEP YOUR CERTIFICATES IN A SAFE PLACE, AND A LIST OF THEIR NUMBERS SAFELY ELSEWHERE

GARDEZ VOS CERTIFICATS DANS UN ENDROIT SÛR ET CONSERVEZ AILLEURS UNE LISTE DE LEURS NUMÉROS

405-B-29,962 FD 358

ESTATES BRANCH

OTTAWA, March 8th, 5

Registrar,
War Savings Certificates,
350, King Edward Avenue,
O T T A W A .

BEDARD, Joseph Raoul Roch, Pte., (Dec'd)
No. E-49746, Canadian Army

Dear Sir: -

It is noted in this man's documents that an assignement was made for the purchase of War Savings Certificates.

May this Branch be advised, please, what disposition has been made of these Certificates.

Yours faithfully,

(L.M. Firth) Colonel.
Director of Estates.

OG/TD

405-B-29,962 FD 358

DIVISION DES SUCCESSIONS

8 mars 1945.

Monsieur Gaudias Bédard,
Val-Alain,
Cté Lobtinière,
P. Q.

BEDARD, Joseph Raoul Roch, Soldat, (décédé)
No. E-49746, Armée Canadienne

Cher Monsieur Bédard,

Nous rapportant à notre formule P.64 que vous avez remplie à notre demande dans le courant du mois de novembre, votre fils serait le possesseur de certificats d'épargnes de guerre. Si ceux-ci sont enregistrés à son nom et que vous désirez en obtenir la valeur de rachat ou les faire enregistrer à notre propre nom, vous êtes prié de les faire parvenir au Régistraire des Certificats d'Epargnes de guerre, 350, avenue King Edward, Ottawa, Ontario, avec vos instructions.

Nous vous écrirons d'ici les prochaines semaines concernant le règlement de la succession militaire.

Votre dévoué,

Major,
le Directeur des Successions.

OC/TD

EST 7

Quote No. 10/BEDARD, J.R.R/1(Est 2)

CANADIAN MILITARY HEADQUARTERS

2 Cockspur Street,

(Trafalgar Square)

London, S.W.1.

19 Feb 45

Director of Estates,
Department of National Defence,
Estates Branch,
OTTAWA, Canada.

E.49746 Pte BEDARD, Joseph Raoul Roch (Dec'd)

1. Herewith the following:-

Original C. of A. report
M.B.M. I Part II - 1
L.P.C.
C.F.A. 187 Cdn Sec GHQ 2 Ech 21 A Gp

Receipted accounts as follows:-

NIL

Form letters as follows:-

NIL

Bank Books as follows:-

NIL

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

2. Personal effects released to you in Box 98

3. Nil effects stored at #1 C.K.S.D.

4. Nil Will here

5. Remarks

1. See Ex "B2" indicating that a will was prepared in MBM I Pt I but now unreadable. MBM I Pt I not rec'd.

2. Note Assigned Pay $1.00 per month (W.S.C.).

J. Goldring for

(G.M. Lampard) Lt-Col.
Officer i/c Estates
Canadian Military Headquarters.

Copy to file

81

STANDING COMMITTEE OF ADJUSTMENT REPORT

Regt'l No.	Rank	Name in full	Unit
F 49746	Pte	BEDARD, J.R.R.	85 Cdn Bridge Coy RCASC

Casualty Deceased Date 18 Jul 44

1. The following articles of Government Equipment have been removed from the personal effects of the above mentioned and have been turned in to Q.M. Stores. They are included in our Q.M. Receipt No. _____

Nil

2. The following items have been removed for reasons indicated:-

Nil

3. The following documents have been forwarded to Officer i/c Estates by Registered Post:-

Nil

4. The following which are not mentioned in the Unit Committee of Adjustment Report are indicated hereafter for your information;-

Red Identity Disc Received among effects listed on Exh. A-5.

5. Ref. Para. "G" CFA-151:- Paybook not available at this H.Q., presumed previously forwarded. Should this not be at hand CMHQ, please advise.

Eric G. Roberts Capt.
(ERIC G. ROBERTS), Capt.
Standing Committee of Adjustment
Cdn Sec G.H.Q. 2nd Ech 21 Army Gp

23 Nov 44
Date

UNIT COMMITTEE OF ADJUSTMENT REPORT

INSTRUCTIONS

1. To be completed in triplicate of which one copy will be retained by the unit.
2. Parts marked" whichare not applicable will be ruled out and initialled.
3. All blanks marked ⊕ will be filled in with "NIL" where appropriate.
4. In the case of personnel reported MISSING, INTERNED, or PRISONERS OF WAR, NO PERSONAL EFFECTS WILL BE SOLD AND NO PREFERENTIAL CHARGES OR ORDINARY DEBTS WILL BE PAID by Unit Committee of Adjustment.
5. In the case of DECEASED personnel, no personal effects of sentimental nature will be sold. Other personal effects may be sold to pay preferential charges and also when, in the opinion of the C.O., the exigencies of the Service make it desirable to do so.
6. Unit Committee of Adjustment may pay, in the case of deceased personnel.

   (a) preferential charges owing within the unit and the unit area, and
   (b) ordinary debts similarly owing ONLY if after making provision for all preferential charges of which it has notice there is sufficient cash on hand to pay all ordinary debts.

7. The following will be forwarded in the manner shown,

   In U.K. - to Officer i/c Estates, C.M.H.Q.
   Ex U.K. - to Officer i/c Cdn Sec., G.H.Q., 2nd Echelon

   (a) Personal effects not disposed of, original and duplicate copy of report, and Officers' Record of Service Book or Soldiers' Service and Pay Book MBM 1, Pts. 1 and 11-by post, rail or road.

   (b) Any Will or testamentary document with a memorandum giving regimental particulars and, if undated, any available evidence indicating the probable date of its execution-by registered post at once.

   (c) Cheques, drafts, money orders, personal papers and documents, effects of sentimental value and an inventory of all personal effects forwarded-by registered post.

REPORT

No. E-49746 Rank. Pte. Name in full. BEDARD, Joseph Raoul Roch

"Deceased, "~~MISSING~~, "~~PRISONER OF WAR~~, "~~INTERNED~~. Date of Casualty 18 Jul 44

Unit. 85 Cdn Bridge Coy, RCASC

Medical installation in which death took place (if applicable) N/A

Reinforcement Unit to which posted at time of death (if applicable) N/A

Name of Officer furnishing report Morris E Charbonneau, Capt.
(BLOCK CAPITALS)

A. PERSONAL EFFECTS

1. "Separate inventories are attached, as applicable showing:-

   (a) "~~Articles privately owned, suitable for service requirements, turned into Q.M. Stores~~-Exhibit "A1".

   (b) "~~Articles sold to pay preferential charges, showing the purchaser of, and the price paid for each article~~--Exhibit "A2".

   (c) ~~Articles additionally sold under C.Os. authority showing the purchaser of, and the price paid for each article, and the written authority of C.O. for Sale~~,--Exhibit "A3".

(a) Bulky articles disposed of under authority of Officer i/c Estates C.M.H.Q., showing the disposition and, if sold the purchaser of, and the price paid for each article,--Exhibit "A4".

(e) Personal effects, forwarded to ("Officer i/c 2nd Echelon), ("Officer i/c Estates)--Exhibit "A5".

2. "No personal effects were found or recieved. A memorandum as to the circumstances and any action taken is attached as EXhibit "A6".

B. WILL

(a) "Original Will or testamentary document was forwarded on .....(DATE) by registered post to ("Officer i/c Estates), ("Officer i/c 2nd Echelon). Copy thereof and the memorandum forwarded therewith is attached as Exhibit "B1".

(b) "No Will or testamentary document was found on the person or among the effects of the deceased. **Attached exh "B2"**

C. CLOTHING AND EQUIPMENT (PUBLIC)

(a) "Was turned into Q.M. Stores. **Nil**

(b) "There was no deficiencies. **N/A**

(c) "There was deficiencies amounting to £ and cash debit voucher duly certified by the D.A.D.O.S. or Senior Ordnance Representative of the formation is attached as Exhibit "C1".

NOTE: If space insufficient, attach, identify and sign additional sheets for Items D, E and F.

D. PREFERENTIAL CHARGES

(a) Name and Address of Creditor	Nature of claim	amount	paid or Unpaid
Nil	**Nil**	**Nil**	**Nil**

"Itemised accounts are attached as Exhibit "D1", those shown as paid being duly receipted, and those recommended for payments by the Officer i/c Estates being so certified.

(b) "Memorandum as to any disputed accounts, with full particulars of dispute attached as Exhibit "D2".

E. ORDINARY DEBTS

(a) Name and address of Creditor	Nature of claim	amount	Paid or Unpaid
Nil	**Nil**	**Nil**	**Nil**

"Itemised accounts are attached as Exhibit "E1", those shown as paid being duly receipted, and those recommended for payment by the Officer i/c Estates being so certified.

(b) "Memorandum as to any disputed accounts, with full particulars of dispute attached as Exhibit "E2".

F. CREDITS

(a) Public Claims owing to the Casualty Nature of Claim	Amount
Nil	**Nil**

(i) Copy of each claim submitted and of any correspondence connected therewith attached as Exhibit "F1".

F. (ii) "Statement of valuation of, and receipt for, articles suitable for service requirements turned into Q.M. Stores (para. A.1.(a) above) attached as Exhibit "F2". Nil

(b) Private claims Owing to the Casualty

	Name and Address of Debtor.	Particulars of claim	Amount	Paid or Unpaid
(1)	Nil	Nil	Nil	Nil

"Memorandum as to any unpaid claims, showing whether or not liability admitted and steps taken to effect collection, attached as Exhibit "F3"

G. CASH RECEIVED AND PAID

		Paid	Received
	(Cash found on person (or in effects		(1) 15 Fr.
Cr.	(Cash realized from sale of (effects as per para A.		(1) Nil
	(Cash collected re private (claims as per para F.		(1) Nil
	(Paid re preferential (charges as per para D.	(1) Nil	
Dr.	(Paid re ordinary debts (as per para E.	(1) Nil	
	(Paid ("balance) to unit (Paymaster	(1) 15 Fr.	
		(1) 15 Fr.	(1) 15 Fr.

H. SERVICE AND PAY BOOK

Officers' Record of Service Book ("Soldiers' Service and Pay Book M.B.M. 1 Parts 1 and 11) is ("Forwarded with this report)

~~("Not forwarded by reason that~~ .....

.....
Signature of Committee ~~or~~ President

19 Jul 44
Date

85 Cdn Bridge Coy, RCASC
Unit

Exh A5

Army Form W.3190.
(Books of 50)

Personal Effects Certificate.

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. E-49746

Rank, Name & Initials Pte BEDARD J R R

Regiment or Corps 85 Cdn Bridge Coy RCASC

Nature of Casualty Fatal

Date of Casualty 18 Jul 44

I CERTIFY that I have examined all the personal belongings of the above-mentioned, and that, to the best of my belief, he had no other personal effects

WHILE SERVING UNDER MY COMMAND.

WHEN ADMITTED HERE.

WHEN FOUND.

The effects enumerated on the back hereof, which were packed under the personal supervision of an officer, are all that were recovered.

Signature [illegible]

Rank Capt.

Unit 85 Cdn Bridge Coy RCASC

Date 19 Jul 44

Inventory No. :—

Registered Post Particulars :—

CAS & EFFECTS 7 AUG 1944

Special Instructions.

Personal effects of :—

(i) Deceased or Missing officers and other ranks will always be despatched by registered post to O. i/c G.H.Q., 2nd Echelon.

(ii) Sick or Wounded officers and other ranks will always be despatched by registered post to the hospital to which admitted, if known, otherwise to O. i/c G.H.Q., 2nd Echelon.

Two copies of this Army Form will be enclosed in the parcel.

This Army Form will also be used when forwarding the personal effects of enemy dead or enemy prisoners of war.

GV278) Wt. 49408/1009. 30,000 Bks. 2/43. B. & S. Ltd. 51-6431.

Army Form W.3190.

Regimental or Army No. E-49746 Rank Pte. Name & Initials Bedard J R R Reg. 85 Cdn. Br Coy RCASC

INVENTORY OF EFFECTS.

Enclosed

List of Articles of Intrinsic or Sentimental Value.		£	s.	d.	Frcs.	Ctms.
1 Prayer Book(Petit Paroissien)	Notes			x	15	
1 Pr Prayer Beads	Postal Orders					
37 personal pictures (Snaps)	Gold					
also a note asking that these	Silver	x- see MFM 503				
be forwarded to Mr & Mrs	Copper					
F G. Bedard, Val-Alain	TOTAL				15	
Conte de Lotbiniere						
Quebec, Can						

Packed to Ottawa

Special Notes.

(1) The pay books (A.Bs. 64) of Deceased or Missing other ranks will be despatched by Registered Post, under separate cover, and not together with cash or articles of intrinsic or sentimental value. They will be accompanied by a covering memorandum, and **no entry in respect thereof will be made upon this form.**

(2) Articles of Government property (including clothing and necessaries) should not be forwarded with the effects of Sick, Wounded, Missing or Deceased other ranks.

(3) Particulars of enemy prisoners of war, if a Serial No. has not been allotted on A.F. W.3000, and enemy dead will be obtained from identity disc or pay book.

This Army Form W.3190, which must be signed by an officer, should be enclosed in the parcel with effects, and not sent separately.

Army Form W.3190

Personal or Army No. E 49746 Rank Pte Name & Initials Bedard J. R. R. Regt. 85 Bn Coy

INVENTORY OF EFFECTS.

List of Articles of Intrinsic or Sentimental Value.		£	s.	d.	Frcs.	Ctms.
1 prayer book Petit Pereissien	Notes					
1 Rosary	Postal Orders					
37 Personal Snapshots with note asking that these be sent to; Mr & Mrs T. G. Bedard, Val-Klein Conte de Lotbiniere, Quebec Canada.	Gold					
	Silver					
	Copper					
Red identity disc	TOTAL					

Special Notes.

(1) The pay books (A.Bs.64) of Deceased or Missing other ranks will be despatched by Registered Post, under separate cover, and not together with cash or articles of intrinsic or sentimental value. They will be accompanied by a covering memorandum, and **no entry in respect thereof will be made upon this form.**

(2) Articles of Government property (including clothing and necessaries) should not be forwarded with the effects of Sick, Wounded, Missing or Deceased other ranks.

(3) Particulars of enemy prisoners of war, if a Serial No. has not been allotted on A.F.W.3000, and enemy dead will be obtained from identity disc or pay book.

This Army Form W.3190, which must be signed by an officer, should be enclosed in the parcel with effects, and not sent separately.

Personal Effects Certificate.

Army Form W.3190
(Books of 50)

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. E 49746

Rank, Name & Initials Pte Bedard , J. R. R.

Regiment or Corps 85 Bridge Coy RCASC

Nature of Casualty killed

Date of Casualty 18 Jul 44

I CERTIFY that I have examined all the personal belongings of the above-mentioned, and that, to the best of my belief, he had no other personal effects

WHILE SERVING UNDER MY COMMAND.
WHEN ADMITTED HERE.
WHEN FOUND.

The effects enumerated on the back hereof, which were packed under the personal supervision of an officer, are all that were recovered.

Signature W Racine Lieut

Rank Lieut

Unit Cdn Sec GHQ, 2 Ech 21 Army Group

Date 9 ~~XXXXX~~ Aug 44

Inventory No. :—

10 74

Registered Post Particulars :—

Personal effects of :—

(i) Deceased, Missing or Prisoner of War officers and other ranks will always be despatched by registered post to O. i/c G.H.Q., 2nd Echelon.

(ii) Sick or wounded officers and other ranks will always be despatched by registered post to the hospital to which admitted, if known, otherwise to the Reinforcement Holding Unit (or G.H.Q., 2nd Echelon, if specially instructed).

Three copies of this Form will be prepared. One will be retained by the Unit, one enclosed in the Parcel of Effects and one despatched separately by registered post to Addressee.

This Form will also be used when forwarding the personal effects of enemy dead or enemy prisoners of war.

Wt. 54606/1436 98,200 lifts. 1/44 CHG&CoLtd 51-8392

Exhibit " B2 "

There is a part of a will found in his M.B.M. 1. but it has bee been partially destroyed by fire.This makes it unreadable.

M.E. Charbonneau Capt

19 Jul 44

M.E. Charbonneau, Capt.
President of Committee
of adjustment

Original

CANADIAN ARMY OVERSEAS

FINANCIAL RECEIPT

RECEIPT No. 1 20 July 1944

RECEIVED FROM Committee of Adj for Pte of E 49746 Pte Bedard J R R

THE SUM OF fifteen francs

being

found on the person of E 49746 Pte Bedard J. R. R. "Killed by enemy action" 19 July 44

M Farley Capt

Command Paymaster or Field Cashier.

85 Ldn Bridge Coy RCASC

20 July 1944 Field Place

M.F.M. 503
40/P & S/1340

Envoyer a -
M. + Mme G. Bedard,
Val-Alain
Co Labrière
Que - Canada.

accompanied photos - the property) ded
E-49746 Pte Bedard JRR

CFA 187
4C/P & S/2150 (4066)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME ....E-49746 Pte. Bedard J.R.B. (Deceased)....

RECEIVED FROM ....Cdn Sec GHQ 2nd Ecelon 21 Army Group....

CHECKED BY ....C-5591 Pte. Patterson L.K. B-126252 Cpl. Sislofsky A.... DATE ....25 Oct 44....

1	Prayer Book		
1	Rosary		
1	Red Identification Disc		
37	Snapshots		
1	Letter(Note) asking that these be sent to Mr. and Mrs. T.G. Bedard, Val-Alain, Conte de Lotbiniere, Quebec, Canada. (to Officer i/c Estates)		

See 81

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

TRIPLICATE — with effects.

A Sislofsky Capt
for OC 1 Cdn KSD

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

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

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

No., RANK and NAME .....E-49746 Pte. Bedard J.R.B. (Deceased).....

RECEIVED FROM .....Cdn Sec GHQ 2nd Echelon 21 Army Group.....
C-5591 Pte. Patterson L.K.

CHECKED BY .....B-126252 Cpl. Sislofsky A..... DATE .....25 Oct 44.....

1	Prayer Book		
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1	Red Identification Disc		
37	Snapshots		
1	Letter(Note) asking that these be sent to Mr. and Mrs. T.G. Bedard, Val-Alain, Conte de Lotbiniere, Quebec, Canada. (to Officer i/c Estates)		

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

A Sislofsky Cpl
for OC 1 Cdn KSD

Quote No. 10/Bedard JRR)1
(Est 2)

CANADIAN MILITARY HEADQUARTERS

CANADA

TELEPHONE: ABBEY 9090 [redacted]
TELEGRAPHIC ADDRESS: "CANMILITRY," LESQUARE
CABLE ADDRESS: "CANMILITRY" LONDON

2, COCKSPUR STREET
(TRAFALGAR SQUARE)
LONDON, S.W.1

Director of Estates,
Department of National Defence,
Estates Branch,
OTTAWA, Canada.

25 Nov 44.

E-49746 Pte BEDARD, J.R.R. (dec'd)

1. Please be advised that a memorandum was discovered attached to 37 snapshots, the property of the m/n, directing that they be sent to M. and Mme. G. Bedard, Val-Alain, Conte de Lotbiniere, Quebec, Canada.

2. For your information, please.

for G.F.D. Goldring Lt

(G.F.D. Goldring) Lieut.
for Officer i/c Estates.
Canadian Military Headquarters.

/PM.

405-B-29,962 FD.358

DIVISION DES SUCCESSIONS

14 novembre 1944.

Monsieur Gaudias Bédard,
Val-Alain,
Cté de Lobtinière,
P.Q.

BEDARD, Joseph Raoul Roch, Soldat (décédé)
No. E.49746, Armée Canadienne.

Cher Monsieur Bédard,

Nous accusons réception de notre formule P.64 et vous remercions sincèrement des renseignements fournis.

Nous détenons dans notre dossier un testament en date du 16 avril 1943, par lequel votre fils vous a légué tous ses biens.

Vu les conditions actuelles en Europe ce n'est pas avant quelques mois que nous pourrons obtenir d'outremer tous les détails concernant la succession militaire tel que certificat de dernière solde, effets personnels, etc. Soyez assuré cependant que sur réception nous communiquerons immédiatement avec vous.

Notre Division n'a pas juridiction en matière des pensions. Si vous voulez bien cependant vous adresser au Secrétaire, Commission Canadienne des Pensions, Edifice Daly, Ottawa, vous obtiendrez tous les renseignements concernant cette demande.

Votre dévoué,

(09)

OG/GC

Major,
le Directeur des Successions.

405-B-29,962 FD 358

DIVISION DES SUCCESSIONS

7 novembre 1944.

Madame Gaudias Bédard,
Val-Alain,
Cté Lobtinière,
Québec.

BEDARD, Joseph Raoul Roch, Soldat (décédé)
No. E.49746, Armée Canadienne

Chère Madame Bédard,

Nous accusons réception de votre lettre du 13 octobre concernant les effets personnels de votre fils.

Soyez assurée que dès que nous aurons reçu d'outremer les effets personnels, ce qui cependant ne sera pas avant quelques mois, nous ne manquerons pas de vous le faire savoir.

Le Ministère des Pensions nous communique votre lettre également datée du 13 octobre dans laquelle vous réclamez une pension et le payement d'une allocation pour une période de six mois à compter de la mort de votre fils. Nous comprenons que le Ministère des Pensions communiquera directement avec vous concernant une pension.

Votre demande concernant l'allocation de six mois a été soumis au Service concerné qui vous écrira d'ici quelques jours.

Nous vous avons adressé ces jours derniers une formule que nous vous prions de bien vouloir remplir et retourner à notre Division aussitôt que possible.

Votre dévoué,

Major,
le Directeur des Successions.

OG/TD

Dependents' Alowance Board,
Records Building,
Experimental Fram,
O T T A W A .

H.Q. 405-B-29,962 FD 358

November 7

4

BEDARD Joseph Raoul Roch, Pte. (deceased)
No. E.49746, Canadian Army

1. In a letter dated Oct. 13 and received by this Branch the parents of the above mentioned deceased, Mr. and Mrs. Gaudias Bédard, Val-Alain, Lobtinière Cty., Québec, state: -

"We are also told that we are entitled to six months of pension since the date of his death(the monthly amount that he gave us when he was in the army). We received our cheque for $20.00 in July. Since then, we have received no money."

2. Will you please reply to Mr. and Mrs. Gaudias Bédard in French.

(L.M. Firth) Colonel,
Director of Estates.

OG/TD

30-co-9

CANADA

DEPARTMENT OF
~~PENSIONS AND NATIONAL HEALTH~~
VETERANS AFFAIRS

IN YOUR REPLY REFER TO FILE NO.

Bedard J.R.R.
E 49246

Ottawa, Ontario,
Oct. 24th, 1944.

Administrator of Estates,
Estates Branch,
308 Sparks St.,
Ottawa, Ontario.

Dear Sirs:

We are forwarding the attached correspondence to you, as it was apparently mailed to this Department in error.

Yours truly,

C. Y. Steele,
Chief, Central Registry
Division.

/AN

Encl.

P. & N.H. 15 150M-4-44 REQ. 351

c
o
py

Val-Alain, Oct. 13, 1944.

Dear Sir:

Re: E-49746 Pte.Bedard,Joseph Raoul Roch.

On July 18, 1944, our son, above-mentioned died in France. We received our cheque for $20.00 in July. Since then, we have received no money or personal effects.

We wonder what is coming to us. Are we entitled to a pension as compensation for the disappearance of our son who helped us when he was here? He worked with us on the farm. When he worked elsewhere he gave us money. Even in the army, he gave us money, which was some compensation for his absence. Now we do not receive anything.

Can we rely on getting anything? We are told that we can claim the personal effects that he had when he died; in addition that we can claim his pension since July 1944.

We are also told that we are entitled to at least six months of pension since the date of his death (the monthly amount that he gave us when he was in the army).

We hope to receive an answer from you. In our opinion, we are entitled to compensation for the loss of our son.

Sgd: "Mr. & Mrs. Gaudias Bedard,"
Val-Alain,
Lotbiniere Co., P. Q.

Original letter on D.P.&.N.H.file.

REGISTERED MAIL

October 26, 1944.

Director of Estates,
Estates Branch,
Dept. of National Defence,
Ottawa, Ontario.

Re: File No. 1-75-1

Enclosed please find Receiver of General of Canada Cheques A-81644-5 in the amount of $28.00 and $7.00 each which cover the accumulated balances in the War Savings Accounts of the under-mentioned Deceased soldiers and airmen.

Kindly acknowledge receipt of these cheques.

Cheque No.	Regimental No.	Name	Amount
A-81644	A-381	William H. Beavis	2.00
"	B-19022	Raymond Closs	2.00
"	B-40607	Herbert M. Hillier	2.00
"	B-41415	Frederick S. Living	2.00
"	B-77133	John R. Whitney	2.00
"	C-102524	Clarence C. Nadon	2.00
"	D-46394	Walter R. Jones	1.00
"	D-46468	Paul Elliott	2.00
"	D-46602	Lloyd M. Jenne	2.00
"	D-62711	Martin Lefebvre	1.00
"	D-82877	Gordon H. Burrows	1.00
"	E-49746	Roch Bedard	2.00 ✓ 17/102
"	FP-4647	James Redmond	1.00
"	F-13325	Thomas Grant	2.00
"	L-64217	Alexander Scherr	2.00
"	M-36794	Walter I. Feir	2.00
A-81645	XJ-86661	Edwin C. Ecclestone	2.00
"	XR-93201	Chester B. Gowrie	2.00
"	XR-130601	William Woodman	2.00
"	XR-133519	John H. T. Monteith	1.00

original on Beavis W. H.
A. 381

W. A. Souchen,
for Chief Treasury Officer,
Dependents' Allowance and Assigned Pay.

Encl.

Val-Alain,13 octobre 1944

Re:E-49746-Pte.Bédard Joseph Raoul Roch
Effets personnels

Cher Monsieur,

Je vous écris un mot à propos de notre cher fils cité plus haut décédé le 18 juillet dernier en France.

Nous tiendrions à avoir absolument ses effets personnels comme souvenirs et tout ce qu'il avait en sa possession lors de sa mort.

Nous savons qu'il faut attendre quelque peu avant de recouvrer ce que nous demandons ;mais nous vous écrivons pour vous dire que nous y tenons beaucoup et pour que vous fassiez les démarches pour que tout nous soit rendu.
Espérant une réponse de vous ,nous nous sousscrivons vos tout dévoués et respectueux,

Mr + Mad. Gaudias Bédard

Mons et Mme Gaudias Bédard,
Val-Alain,
Cté de Lotbinière,P.Q.

Director of Estates

Regimental No. E.49746 Rank Private

BEDARD Joseph Raoul Roch

Surname Christian Names

Unit 85th Bridge Company R.C.A.S.C. (CA)

Date of Death Not yet Available Place of Death Overseas (France)

Next-of-kin Mr. Gaudias Bedard Relationship Father

Address 20 Val Alain, Co. de Lotbiniere, Quebec.

M.F.M. 5 Copy Herewith.

Will Will d/16-4-43 Herewith.

Date 28-8-44

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

JEC/GSM

Q.G. 405-B-29,962
D.R. 2 (d)

le 12 janvier 1946.

Monsieur,

Des renseignements ont été reçus d'outre-mer à l'effet que les restes de votre fils, le soldat Joseph Raoul Roch BEDARD, matricule E-49746, ont maintenant été soigneusement exhumés de l'endroit original d'inhumation et respectueusement inhumés de nouveau dans la tombe 14, rang B, lot 14, du cimetière militaire canadien de Beny-sur-mer, à Beny-sur-mer, en France. (Carte marquée ci-jointe). Ce cimetière est un lieu de sépulture militaire reconnu et l'entretien en sera perpétuel.

La sépulture a dû être marquée temporairement d'une croix qui sera remplacée en temps opportun par une pierre tombale permanente portant une inscription appropriée. Pour des raisons évidentes nous ne pouvons dire à quelle date commencera ce travail de commémoration permanente mais vous pouvez être assuré qu'à ce moment nous communiquerons avec vous et nous vous donnerons l'occasion de choisir une courte inscription personnelle destinée à être gravée sur le mémorial. Par conséquent, nous vous saurions gré de nous informer de tout changement dans votre adresse.

Veuillez agréer, monsieur, mes sincères salutations.

Pour l'adjudant général,

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

M. Gaudias Bédard,
20 Val Alain,
Cté de Lotbinière, Qué.

/PEI

37

Last Pay. Cert. Removed.
Filed 17/10/45 L.K.

S.O.A. Deceased

34

405 - B - 29,962

DISCHARGE DOCUMENTS HAVE BEEN DETACHED

AND PLACED IN DOCUMENT ENVELOPE IN

RECORD OFFICE N.D.H.Q.

DATE _____

C.A.S.F. A.28

33

DISCHARGE DOCUMENTATION

CHECKERS' OBSERVATIONS

No. E-49746 Rank Pte Name Bedard, Joseph Raoul Roch

DECEASED.

	Observations
M.F.M. 81 or 23	
M.F.M. 1 or 2 or 103 or 153	
M.F.M. 4	
M.F.M. 5	
M.F.M. 6	
M.F.M. 7 or 24 or M.F.B. 241	
M.F.M. 94 (for Officers)	
M.F.M. 105	
M.F.M. 182	
M.F.M. 196	
M.F.B. 227 (in triplicate)	
M.F.M. 30 (in triplicate)	
Special Medical Reports (if any) 3	
M.F.B. 465 No. 2 Sheet	
M.F.D. 930A	
P. & N.H. Form (W.D.) 12	
R.C.A.F. Form M1 or M2 (Transferred to R.C.A.F.)	
M.F.B. 375 (for Deserter)	
M.B.M. 1 (Pay Book for Deserter)	
Copy of Birth Certificate (if under age)	

BE SURE YOU ARE RIGHT THEN CHECK AGAIN

Note:—Has record of Blood Test been noted on Page 3 of M.F.M. 1 or 2?
Does Date of Discharge as shown on all relevant documents agree, i.e., M.F.M. 1 or 2 (Page 2), M.F.M. 23 or 81, M.F.D. 930A or Discharge Certificate?

Has correct Routine Order Authority for Discharge been shown?

Remarks:—

32

R. S.
Checker.

Date JUN 21 1945

50M—12-44 (6213)
H.Q. 1772-45-8

5

CASUALTY WING EXTRACTS

DATE 24 AUG 44

"A"A.483"B" "C" "POW"

AUTH SER 69/4

NAME BEDARD JOSEPH RAOUL ROCH

TIME

DATE

RANK PTE

REGT.NO. E-49746

FOR AEF LIST

UNIT 85 BR COY R.C.A.S.C.

HOSPITAL PARTICULARS

ADMITTED DATE

TRANSFERRED DATE

DISCHARGED DATE

DIAGNOSIS ~~NOWXXXXXXXXX~~ NOW CONF KILLED 18 JUL

(PREV. REPORTED CONF KILLED 19 JUL A.472)

FOR THE DAILY UNIT & CONSOLIDATED LIST ADMISSION

FOR THE DAILY LIST ONLY DISCHARGE

CASUALTY CARD MADE (YES OR NO) YES PROGRESS REPORT

CLERK'S NUMBER OR INITIALS 68 DEATH

CATEGORY - CIRCLE WHICH APPLICABLE

OFF ALL LISTS OFF SERIOUS DANGEROUSLY ILL SERIOUSLY ILL

NEXT OF KIN PARTICULARS

ENTERED ON
CAS.CARD.
CAS.LIST

RELATIONSHIP

NAME & ADDRESS

CANADA

HOME TOWN

CABLE NO. TO OTTAWA 9731

SERIAL NO.

INLAND TELEGRAM NO.

1031

- CASUALTY SECTION EXTRACT FORM -

A 472

Message Received from 21/CAS/1199

Date Message Received 21 JUL 44

AEF

REGIMENTAL NO.	RANK	NAME	FULL CHRISTIAN NAMES	
E49746	PTE	BEDARD	JOSEPH	RAOUL ROCH

UNIT 85 BR COY RCASC

UNIT SERIAL # 230

CATEGORY AND DIAGNOSIS

KILLED DNK

Hospital Admitted to ..... Date .....

Hospital Transferred to ..... Date .....

Hospital Discharged from ..... Date .....

NEXT OF KIN GAUDIAS BEDARD RELATIONSHIP FATHER

NOTE: If the Next-of-Kin resides in the Br. Isles or U.S.A. MARK RED X in upper left-hand square.

Address VAL ALAIN CO
LOT BINIEE, P.Q. CAN

HOME TOWN ARVIDA CO. CHICOUTIMI P.Q. CAN

Cable # 8176 Inland Tel.# 69

REMARKS:-

M39 M68
Verification Clerk's Signature

405-B-29,962

5

ORIGINAL ON

H. Q. 405-B 25,098

If, to your knowledge, ther
deceased at the time of his death
for a letter of application to be
whom pay was assigned, or, altern
your application was submitted on

The letter should be addres
National Defence for Air, Ottawa,
should quote the above file numbe

PA

405-B-29962

KILLED IN ACTION (Continued)
****

CENTRAL ONTARIO REGIMENT

33. SAGLE, ERNEST CLAYTON, PTE., B144892, MRS. LUCY SAGLE (MOTHER), SLASH, MANITOULIN ISLAND, ONT.

34. VEALL, MELVIN WILLIAM, PTE., B70548, MRS. ADA VEALL (MOTHER), 50 LAUREL ST., PARIS, ONT.

35. WINTLE, WILLIS RAYMOND, PTE., B46680, MRS. MARY E. WINTLE (WIFE), 99 MAIN ST., BATAVIA N.Y., U.S.A.

REGIMENT DE QUEBEC

36. HARVIE, FERNAND, CPL., E9370, NARCISSE HARVIE (FATHER), CAP AUX MEULES, ILES DE LA MADELEINE, QUE.

37. PESANT, GUY, PTE., D143554, MAXIME PESANT (FATHER), STE DOROTHEE, QUE.

QUEBEC REGIMENT

38. ZIMEK, VICTOR, PTE., D138249, JOSEPH ZIMECK (FATHER), 2621 BERCY ST., MONTREAL, QUE.

NOVA SCOTIA AND P.E.I. REGIMENT

39. MACGOWAN, HAROLD ALEXANDER, PTE., F78052, ROBERT MACGOWAN (FATHER), WEYMOUTH NORTH, N.S.

MANITOBA REGIMENT

40. MORRICE, WALTER, PTE., H85444, MRS. ANNE MORRICE (WIFE), 218½ STELLA AVE., WINNIPEG, MAN.

BRITISH COLUMBIA REGIMENT

41. MILLAR, ROBERT MALCOLM, L/SGT., K57785, ARTHUR MILLAR (FATHER), OLIVER, B.C.

42. SMART, JAMES MACDONALD, PTE., K51506, GEORGE MACDONALD SMART (FATHER), 4538 BELMONT AVE., VANCOUVER, B.C.

ALBERTA REGIMENT

43. LOGAN, FRANCIS JAMES, PTE., M102498, MRS. JULIA E. LOGAN (WIFE), GRANDE PRAIRIE, ALTA.

ROYAL CANADIAN ARMY SERVICE CORPS

44. BEDARD, JOSEPH RAOUL ROCH, PTE., E49746, GAUDIAS BEDARD (FATHER), 20 VAL ALAIN, QUE.

KILLED
******

CANADIAN ARMOURED CORPS

26

45. DODD, JAMES HOLCORD GALLOWAY, C.S.M., B137310, MRS. EVA DODD (MOTHER), 389 QUEBEC AVE., TORONTO 9, ONT.

MANITOBA REGIMENT

46. MAGAS, HARRY, RFN., H103502, MRS. NETTIE MAGAS (MOTHER), 274 MELROSE AVE., TRANSCONA, MAN.

To be made out in duplicate

M.F.M. 5

H.Q. 1772-39-1651

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

INSTRUCTIONS.

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

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

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

---

(1) Name of Officer of Other Rank BEDARD Joseph Raoul Roch
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank E-49746 Dvr

(3) Unit R.C.A.S.C. REI FN C.A. (A)

(4) Are you married? NIL

(5) If married, state,

(*a*) Full name of your wife NIL

(*b*) Present postal address of wife NIL

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

(7) Are you a widower? NIL NIL

(8) Have you any children? Number of boys Girls

Names and ages NIL

NIL

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

NIL

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

Name

Postal Address NIL

NIL

[SEE OTHER SIDE]

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

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

.....

.....

(11) Is your father alive?.....OUI.....

If so, state name and address, occupation....Mr Gaudias Bedard

Val ~~Alin~~ Clair te de Lotbiniere P.Q. Ingenieur (C.N.R.)

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

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

.....NIL.....

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

(14) Is your mother alive?.....O UI.....

If so, state name and address.....Mde Ida Bedard

Val ~~Alin~~ Clair te de Lotbiniere P.Q.

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

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

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

(17) Are you contributing to the support of any dependents, other than those shown above?.....
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment.

If so, state the following particulars:—

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

Full Name .....

Postal Address .....NIL.....

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

.....

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

If so, in what Company?.....SAUVEGARDE INS CIE.....

(Give number of policy)

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

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

J. R. Rock Bédard
(Signature of officer or man)

Date....29-1-43.....

E. C. Magee Maj. a R.A.C.A.
Officer Commanding (F.C. Magee) Lt Col
Commanding #5 D.D. Que P.Q.

Date....29-1-43.....

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

F

CANADIAN MILITARY HEADQUARTERS

No. 7517

RECORDS OFFICE

CASUALTY REPORT

NAME (in full) BEDARD, Joseph Raoul Roch

NO. E-49746 RANK PTE UNIT 85 BRIDGE COY RCASC

HOSPITAL (U.K. only) In which death took place, if applicable

R.U. (U.K. only) to which posted on admission to Hospital

CASUALTY KILLED DATE ~~DNK~~ ~~19 Jul 44~~ ~~Conf A479 AFS~~ LIST # A.472 PLACE AEF

If P.O.W. or INTERNED, Number & Address Conf 18 Jul 44 "A" 483

PREVIOUSLY REPORTED DATE

(L.S. APPLEFORD) Major
Officer i/c R.5 Wing CAS. SECT.

NEXT OF KIN

1. CANADA or U.S.A. - YES/~~NO~~ (if NO, Complete No. 2)
2. NAME, (In Full)

   RELATIONSHIP ADDRESS

3. ANY RELATIVES IN U.K. from M.F.M.5 or any other source, including children born overseas. If NONE so state

   Date of Marriage, if known

WILL, EFFECTS, ETC.

1. NO WILL HERE (or) ~~WILL HEREWITH DATED~~ BENEFICIARY (Relationship)

   (Name) (Address) EXECUTOR
2. BANK ACCOUNT - NAME OF BANK, etc. A/c No.

   ADDRESS
3. KIT PRIVATELY STORED - NAME of Custodian

   Address
4. Particulars of DEBTS, Remarks, etc.

Date SEP - 1 1944

(B.E. WILLAN) Capt.
Officer i/c R.3 Wing Non-Effectives
for Officer i/c Records
CANADIAN MILITARY HEADQUARTERS

ORIGINAL - With WILL, if any to O. i/c ESTATES, C.M.H.Q.

DUPLICATE - To File.

Director of Estates

Regimental No. E.49746 Rank Private

BEDARD — Surname
Joseph Raoul Roch — Christian Names

Unit 85th Bridge Company R.C.A.S.C. (CA)

Date of Death Not yet Available 18-7-44 Place of Death Overseas (France)

Next-of-kin Mr. Gaudias Bedard Relationship Father

Address 20 Val Alain, Co. de Lotbiniere, Quebec.

M.F.M. 5 Copy Herewith.

Will Will d/16-4-43 Herewith.

Date 28-8-44

Mem. x Mother, 20-9-44

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

JEC/GSM

25

QG 405-B-29962 (Records C)

le 9 septembre 1944.

Monsieur,

Relativement à notre lettre du 24 août 1944, je suis chargé de vous informer que des renseignements officiels maintenant reçus d'outre-mer indiquent qu'il est établi définitivement que votre fils, le soldat Joseph Raoul Roch BEDARD, matricule E-49746, a été tué au combat le 18 juillet 1944 et non le 19 tel qu'antérieurement signalé.

Puis-je de nouveau vous offrir mes profondes sympathies dans votre deuil.

Votre tout dévoué,

Pour l'adjudant-général,

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

M. Gaudias Bédard,
20 Val Alain,
Comté de Lotbinière, Québec.

/PL

24

GRAVES REGISTRATION
B.3 OVERSEAS HOSPITALIZATION

H. Q. 405-B-29962(Records C)

CABLE NO...9731.....PAGE...2.....DATE...24.8.44.....

Regimental No.....R.49746.....Rank....Private.....

Name.....BEDARD.....Joseph Raoul Roch.....
(Surname) (Christian Names)

Unit.....85 Bridge Co., R.C.A.S.C.....

Nature of Casualty.....Killed in Action.....

.....

Date of Casualty.....18.7.44.....

Checked by.....N.P..... Next-of-Kin:-

(Cas. 11)

22

H.Q.405-B-29962(Records C)

8 September 1944.

The Secretary,
Canadian Pension Commission,
Ottawa, Ontario.

E.49746 Private BEDARD, Joseph Raoul Roch

Reference to our communication of the 25th ultimo, please be advised that official information has now been received from Overseas to the effect that it has been ascertained that the marginally named was killed in action on the 18th of July 1944 and not the 19th as previously reported.

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

ND/EKG

21

H.Q.405-B-29962
(Records C)

Ottawa, 8 September 4.

Chief Treasury Officer,
D. A. & A. P. Branch,
Records Building,
Ottawa, Ontario.

E.49746 Private BEDARD, Joseph Raoul Roch

Reference to our communication of the 25th ultimo, please be advised that official information has now been received from Overseas to the effect that it has been ascertained that the marginally named was killed in action on the 18th of July 1944 and not the 19th as previously reported.

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

ND/EKG

20

FORM NO.-CAS 3
100M-4-44 (4183)
H.Q.-1772-39-1989-1990

OVERSEAS CASUALTY REPORT

CABLE NUMBER 9731 PAGE 2 DATE 24-8-44

REG'T'L. NUMBER E 49746 RANK

NAME BEDARD
(SURNAME) (CHRISTIAN NAMES)

SERVICE UNIT

Cable Abstract Our 8176 - Confirmed date of casualty now 18 July

INTERPRETATION OF ABOVE FOR NOTIFICATION OF NEXT-OF-KIN

CABLE CHECK N. OF K. CHECK TELEGRAM CHECK 19

1

COPY FOR RESEARCH SECTION

FT

COPY OF CABLES FROM CANRECORDS

9731 LONDON 241545/AUG 44

OUR 9498 CAPT MANDEL JB	CONFIRMED WOUNDED AND DIED OF WOUNDS 14 AUGUST
OUR 9731 LIEUT MCLAUGHLIN LH	SW HE MULT LEFT FACE LEFT ARM BOTH LEGS RIGHT HAND SEV
OUR 9478 CAPT GORDON RA	WOUND LEFT ELBOW SHELL HE SLIGHT
OUR 8447 B 139096 HAMKIN	MSW 2 SMALL SUPER FLESH WOUNDS RIGHT POST CHEST
OUR 8443 B 135732 CRUICKSHANK	ADD INFORMATION SHOWS BM MORTAR POSS FRACT RIGHT FOOT
OUR 8531 B 130257 HUTCHISON	CAUSE OF DEATH SW HE RIGHT THIGH RIGHT ARM AND ABDOMEN
OUR 8170 B 8278 HARRISON	CONFIRMED WOUNDED AND DIED OF WOUNDS 17 JULY
OUR 8433 K 74007 HARRINGTON	SW HE SCALP SEV
OUR 8447 B 32415 HANCE	SW MORTAR LEFT FLANK
OUR 8449 D 82456 HAMFELT	SHRAP BY MORTAR 2 AND 3 DEGREE BRUNS RIGHT HAND
OUR 8427 D 81783 HANNAH	GSW MULT
OUR 8446 B 116019 BRASSARD	CAUSE OF DEATH PERF WOUND HEAD
OUR 7892 A 102864 BONDY	ADD INFORMATION SHOWS PENT WOUNDS MORTAR FRAG BASE OF RIGHT BACK AND LATERAL MEDIAL SIDE THIGH
OUR 8248 G 57542 BOURQUE	CONFIRMED DATE 18 JULY
OUR 7860 M 101238 BILL	CONFIRMED DATE 10 JULY
OUR 8176 E 49746 BEDARD	CONFIRMED DATE NOW 18 JULY
OUR 8271 E 4123 ANGERS	CONFIRMED DATE 18 JULY
OUR 7860 M 105199 JOHNSON	CONFIRMED DATE 9 JULY
OUR 8240 E 10476 JONCAS	CONFIRMED DATE 18 JULY
OUR 7811 D 58075 HUOT	CONFIRMED DATE 4 JULY
OUR 7856 L 66655 BROWN	CONFIRMED DATE 8 JULY

21 NAMES

34133/DF/2500350/AUG/44

BATTLE CASUALTIES AEF

RECEIVED: 2:07/25/8/44

CANMILITRY

78

H.Q.405-B-29962
(Records C)

Ottawa, 25 August 4

The Secretary,
Canadian Pension Commission,
Ottawa, Ont.

E.49746 Private Bedard, Joseph Raoul Roch

Reference official overseas casualty notification (death) of the 29th ultimo in which the marginally named was reported as killed in action, date not available, please be advised that official information now received from Overseas is to the effect that the date of his death has now been confirmed as 19 July 1944.

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

ND/EKG

17

H.Q.405-B-29962
(Records C)

Ottawa, 25 August 4.

Chief Treasury Officer,
D. A. & A. P. Branch,
Records Building,
Ottawa, Ont.

E.49746 Private Bedard, Joseph Raoul Roch

Reference official overseas casualty notification (death) of the 29th ultimo in which the marginally named was reported as killed in action, date not available, please be advised that official information now received from Overseas is to the effect that the date of his death has now been confirmed as 19 July 1944.

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

ND/MKG

16

GRAVES REGISTRATION
B.3 OVERSEAS HOSPITALIZATION

H. Q. 405-B-29962(Records C)

CABLE NO....9232.....PAGE.1.....DATE.....14-8-44.....

Regimental No....E.49746.....Rank.....Pte.....

Name.....BEDARD.....Joseph Raoul Roch.....
(Surname) (Christian Names)

Unit.....85 Bridge Co., A.S.C.....

Nature of Casualty.....Killed in action.....

.....

Date of Casualty.....19-7-44.....

Checked by.....N.D.....Next-of-Kin:-

(Cas. 11)

15

QG 405-B-29962 (Records-C)

le 24 août 1944.

Monsieur,

Relativement à la mort regrettable de votre fils, le soldat Joseph Raoul Roch BEDARD, matricule E-49746, je regrette profondément de vous informer que d'après les renseignements officiels maintenant reçus du Quartier général militaire canadien, outre-mer, il a été tué au combat le 19 juillet 1944.

Je vous prie d'accepter mes sincères condoléances dans votre deuil.

Votre bien-dévoué,

pour l'adjudant-général,

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

M. Gaudias Bédard,
20 Val Alain,
Cté Lotbinière,
Qué.

/AG

14

F. T. H.Q.405-B-29962(Records C)

23 August 1944.

Mr. Gaudias Bedard,
20 Val Alain,
Co. de Lotbiniere, Que.

Dear Mr. Bedard:

With further reference to the regretted death of your son, E.49746 Private Joseph Raoul Roch Bedard, I deeply regret to inform you that official information has now been received from Canadian Military Headquarters Overseas advising that he was killed in action on the 19th of July 1944.

Please accept my deepest sympathy in your bereavement.

Yours sincerely,

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

ND/EKG

10

13

FORM NO.-CAS 3
100M-4-44 (4183)
H.Q.-1772-39-1989-1990

OVERSEAS CASUALT

CABLE NUMBER 9232. PAGE 1 DATE

REG'T'L. NUMBER E49746 RANK

NAME BEDARD
(SURNAME) (CHRISTIAN NAMES)

SERVICE UNIT

Cable Abstract Cam 8176.

confirmed date Killed 19 July

INTERPRETATION OF ABOVE FOR NOTIFICATION OF NEXT-OF-KIN

CABLE CHECK N. OF K. CHECK TELEGRAM CHECK

Gun. 12

1

COPY FOR RESEARCH SECTION

LS

COPY OF CABLES FROM CANRECORDS

ORDINARY CASUALTIES AEF

#9271 LONDON 151740/AUG 44

RECEIVED: 22:38/15/8/44

B 21420 SPR BURNS FM 915

AMP LEFT ARM INVESTIGATING ADVISE CIRCUMSTANCES INJURED AND WILL/

K 10173 PTE HODKINSON FE 37

INJURED AND DIED OF INJURIES 9 AUGUST SCALP WOUND WITH CONCUSSION LACERATIONS RIGHT LEG WITH COMP FRAC TIBIA AND FIBULA SEVERE

L 35261 GNR SIEGEL O X4 RCA 6 BN 242 CBRD

DIED OF INJURIES 13 AUGUST CUT THROAT AND WRIST BLED TO DEATH SUBPECTED SUICIDE O2E INVESTIGATING AND WILL ADVISE

YOUR 1322 AND 1882 M 25633 KELLY

COURT OF ENQUIRY NOT RECEIVED HASTENERS HAVE BEEN SENT WILL ADVISE

YOUR 1390 (1880) AND FURTHER OUR 8960 F 44008 MANNING

O2E ADVISE INVESTIGATION WITH UNIT REVEALS MANNING ON STRENGTH FLD UNIT AND IN GOOD HEALTH

5 NAMES

CANMILITRY

32514/RR/1521100/AUG 44

BATTLE CASUALTIES AEF

#9232 LONDON 141715/AUG 44

RECEIVED: 22:39/15/8/44

OUR 8219 D 142321 TOUGH

CAUSE OF DEATH GSW (RIFLE) MULT

ADDITIONAL DIAGNOSIS OF THE FOLLOWING SHOWS

OUR 8323 K 76591 IRWIN

BW SHOULDER

OUR 8362 B 70412 HARPER

SW LEFT ARM

OUR 8687 D 157806 BELANGER

GSW RIFLE ABDOMEN

OUR 8231 A 37977 HUNT

CONFIRMED WOUNDED 17 JULY

OUR 8176 E 49746 BEDARD

CONFIRMED DATE KILLED 19 JULY

OUR 8210 L 26389 STAPLETON

BW BACK

OUR 8264 B 55641 BRUNET

SW HE RIGHT AND LEFT THIGH

OUR 8253 E 41989 BELANGER

SW MORT SCALP

9 NAMES

CANMILITRY

32319/RR/1521000/AUG 44

11

Q3-15-8-44

H. Q. 405-B-29,962
(Records-C)

le 12 aout, 1944.

RE:E.49746 le soldat Joseph Raoul Roch BEDARD

Cher monsieur:

Relativement au décès de votre fils, le militaire susnommé, je suis chargé de vous envoyer sous ce pli, pour que vous les conserviez, un "Avis confidentiel" et des "Renseignements pour l'information et la gouverne des familles des militaires portés disparus, morts, internés ou prisonniers de guerre". Ces renseignements vous intéresseront sans doute et vous seront utiles.

Veuillez agréer, monsieur, l'expression de mes sentiments distingués.

Pour l'adjudant-général,

le directeur des archives,

(C.L. Laurin) colonel.

M. Gaudias Bedard,
20 Val Alain,
Comte Lotbiniere, Que.

10

le 11 Aout, 1944.

Cher monsieur,

C'est avec un profond regret que j'apprends le décès de votre fils, le soldat Joseph Raoul Roch BEDARD, matricule E-49746, qui a donné sa vie au service de sa patrie en France. Toutefois, la date officielle de sa mort ne nous a pas encore été signalée.

D'après les renseignements officiels que nous avons reçus, votre fils a été tué au combat contre l'ennemi. Vous pouvez compter que sur réception de détails supplémentaires, nous vous les communiquerons sans délai.

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

Nous rendons hommage au soldat Bédard pour son vaillant sacrifice.

Votre bien dévoué,

l'adjudant-général,

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

AUG 7 1944

(H.F.G. Letson),
major-général.

9

M. Gaudias Bédard,
20 Val Alain,
Comté Lotbinière, Qué.

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER E.49746 RANK Private SERVICE UNIT 85th Bridge Company R.C.A.S.C. (C.A.).

NAME BEDARD, Joseph Raoul Roch

DATE OF BIRTH 1-7-22 DATE OF ENLISTMENT 27-1-43

MARITAL STATUS Single RELIGION Roman Cathol

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

ADDRESS 20 Val Alain, Co. de Lotbiniere, P.Q. ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. Canrecords 8176 H.Q. 405-B-29,962

CASUALTY DETAILS Killed in action DATE not yet available.

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO DATE 29-7-44

DIRECTOR OF RECORDS

FORM NO. CAS. 6
25M-4-44 (4184)
H.Q. 1772-39-1989-1990

BTC

5 COPY FOR C. R. FILE

DISTRIBUTION— 1-CDN. PENSION COMM. 2-CHAIRMAN D.A.B. 3-D.A.B. 4-CHAPLAIN SER. 6-DOC. FILE 7-GRAVES REG. 8-A.B. & C. LISTS.

File Copy

Quote No. HQ 405-B-29,962 Records-C

DEPARTMENT OF NATIONAL DEFENCE

ARMY

Ottawa, Canada,

Commissioner of Income Tax,
Department of National Revenue,
Ottawa, Ontario.

National Registration Division,
Department of Labour,
Ottawa, Ontario.

The undermentioned Canadian Army Casualty is forwarded for your information, please:

Regimental No. B 49746 Rank Private

Surname BEDARD

Christian Names Joseph Raoul Roch

Nature of Casualty Killed in action

Date of Casualty DNK

Address at time of enlistment Arvida Que.

Date on enlistment 27-1-43

Date of Birth 1-7-22

Marital Status (On enlistment) Single

Marital Status (Present) Single

Occupation Labourer

Name and address of Next-of-Kin Mr. Gaudias Bedard (Father)
20 Val Alain Co de Lotbiniere P.Q.

LL

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

6

FORM 6122

CLASS OF SERVICE	SYMBOL
Full-Rate Message	
Day Letter	D L
Night Message	N M
Night Letter	N L

If none of these three symbols appears after the check (number of words) this is a full-rate message. Otherwise its character is indicated by the symbol appearing after the check.

CANADIAN NATIONAL TELEGRAM

TELEGRAPH CANADIAN NATIONAL AND CABLE

W. M. ARMSTRONG, GENERAL MANAGER, TORONTO, ONT.

(00)

Exclusive Connection with WESTERN UNION CABLES
Cable Service to all the World
Money Transferred by Telegraph

O.K

STANDARD TIME

1944 JUL 22 PM 10 07

MOA519 14/11 COLLECT=LAURIER QUE 22 830P

DIRECTEUR DES ARCHIVES MILITAIRES=

OTTAWA ONT=

0879

VOTRE MESSAGE ADDRESSE GAUD BEDARD JUILLET 22 DELIVERED

730 PM=

AGENT C N TELS.

BRANCH

This is a [illegible] message, and will be charged to your account unless we are notified [illegible] to the contrary.

8 : 30

5

22 730 PM.

CANADIAN PACIFIC TELEGRAPHS

DAY LETTER [X]

NIGHT LETTER [ ]

CASUALTY (REPORT DELIVERY) OTTAWA 22 JUILLET 1944

TO:- M GAUDIAS BEDARD
20 VAL ALAIN
CTE DE LOTBINIERE QUE

17623 MINISTRE DE LA DEFENSE NATIONALE REGRETTE PROFONDEMENT VOUS INFORMER SOLDAT JOSEPH RAOUL ROCH BEDARD E49746 OFFICIELLEMENT PORTE TUE AU COMBAT DATE NON ENCORE SIGNALEE STOP SUR RECEPTION DE DETAILS SUPPLEMENTAIRES NOUS VOUS LES TRANSMETTRONS AUSSITOT

le directeur des archives militaires

4

PREPAID

~~OFFICER i/c RECORDS~~

M.F.M. 268
50M-11-42 (7150)
H.Q. 1772-39-1990

C.D. 2X

CLASS OF SERVICE	
Full Rate	
Day Letter	
Night Message	
Night Letter	
Evening and Sunday Messages	

Please mark an X opposite the class of service desired.

CANADIAN PACIFIC TELEGRAPHS

CANADIAN PACIFIC COMMUNICATIONS

World Wide Communications

W.D. NEIL, GENERAL MANAGER OF COMMUNICATIONS, MONTREAL

CHECK

TIME FILED

Send the following message, subject to the conditions on the back thereof, which are hereby agreed to.

CASUALTY

F.T. PLEASE 21ST JULY 1944

MR GAUDIAS BEDARD
20 VAL ALAIN
C O DE LOTBINIERE QUE

17623 MINISTER OF NATIONAL DEFENCE DEEPLY REGRETS TO INFORM YOU THAT E49746 PRIVATE JOSEPH RAOUL ROCH BEDARD HAS BEEN OFFICIALLY REPORTED KILLED IN ACTION DATE NOT YET AVAILABLE STOP IF ANY FURTHER INFORMATION BECOMES AVAILABLE IT WILL BE FORWARDED AS SOON AS RECEIVED

DIRECTOR OF RECORDS

3

W. M. THOMPSON, Assistant General Manager, Montreal

E. E. GOODFELLOW, Assistant Manager, Montreal, Que.
E. R. BACON, Supt., Sudbury, Ont.
H. S. INGRAM, Supt., Toronto, Ont.
W. S. EMERY, Supt., Montreal, Que.
C. W. MACDONALD, Supt., Saint John, N.B.
D. L. HOWARD, Assistant Manager, Winnipeg, Man.
P. G. McLEAN, Supt., Vancouver, B.C.
L. A. RAYMOND, Supt., Calgary, Alta.
T. H. HOLMES, Supt., Moose Jaw, Sask.
A. J. CLARK, Supt., Winnipeg, Man.

TERMS AND CONDITIONS UPON WHICH TELEGRAPH AND CABLE MESSAGES SHALL BE TRANSMITTED ARE PRESCRIBED BY ORDER No. 49274 DATED DECEMBER 5th, 1932, OF THE BOARD OF TRANSPORT COMMISSIONERS FOR CANADA, AND PUBLISHED IN THE CANADA GAZETTE.

It is agreed between the sender of the message, on the face of this form and this Company, that said Company shall not be liable for damages arising from failure to transmit or deliver, or for any error in the transmission or delivery of any unrepeated telegram, whether happening from negligence of its servants or otherwise, or for delays from interruptions in the working of its lines, for errors in cypher or obscure messages, or for errors from illegible writing, beyond the amount received for sending the same.

To guard against errors, the Company will repeat back any telegram for an extra payment of one-half the regular rate, and in that case the Company shall be liable for damages, suffered by the sender to an extent not exceeding $200, due to the negligence of the Company in the transmission or delivery of the telegram.

Correctness in the transmission and delivery of messages can be insured by contract in writing, stating agreed amount of risk, and payment of premium thereon at the following rates, in addition to the usual charge for repeated messages, viz.: one per cent. for any distance not exceeding 1,000 miles, and two per cent. for any greater distance.

This Company shall not be liable for the act or omission of any other Company, but will endeavor to forward the telegram by any other Telegraph Company necessary to reaching its destination, but only as the agent of the sender and without liability therefor. The Company shall not be responsible for messages until the same are presented and accepted at one of its transmitting offices; if a message is sent to such office by one of the Company's messengers he acts for that purpose as the sender's agent; if by telephone the person receiving the message acts therein as agent of the sender, being authorized to assent to these conditions for the sender. This Company shall not be liable in any case for damages, unless the same be claimed, in writing, within sixty days after receipt of the telegram for transmission.

No employee of the Company shall vary the foregoing.

CLASSES OF SERVICE

FULL RATE TELEGRAM

A full-rate expedited service.

NIGHT TELEGRAM

Accepted up to 2 a.m. at reduced rates, to be sent during the night and delivered on the morning of the next day after their date at places where the Company's offices are open on Sundays, and on the morning of the next ensuing business day at places where the Company's offices are not open on Sundays.

DAY LETTERS

A deferred day service at rates lower than the standard telegram rates as follows: One and one-half times the ten-word day telegram rate for the transmission of 50 words or less, and one-fifth of the initial rate for such 50 words for each additional 10 words or less.

Day letters may be forwarded by the Company as a deferred service, and the transmission and delivery of such Day Letters are, in all respects, subordinate to the priority of transmission and delivery of full-rate telegrams.

Day Letters may be delivered by the Company by telephoning the same to the addressees and such deliveries shall be a complete discharge of the obligation of the Company to deliver.

Day Letters are received subject to the express understanding and agreement that the Company does not undertake that a Day Letter shall be delivered on the day of its date absolutely and at all events; but that the Company's obligation in this respect is subject to the condition that there shall remain sufficient time for the transmission and delivery of such Day Letter on the day of its date during regular office hours, subject to the priority of the transmission of full-rate telegrams under the conditions named above.

NIGHT LETTERS

Accepted up to 2 a.m. for delivery on the morning of the next day after their date at places where the Company's offices are open on Sundays, and on the morning of the next ensuing business day at places where the Company's offices are not open on Sundays, at rates still lower than its standard night telegram rates as follows: The standard day rate for 10 words for the transmission of 50 words or less and one-fifth of the initial rate for such 50 words for each additional 10 words or less.

Night Letters may, at the option of the Company, be mailed at destination to the addressees, and the Company shall be deemed to have discharged its obligation in such cases with respect to delivery by mailing such Night-Letters at destination, postage prepaid.

EVENING AND SUNDAY MESSAGE

An expedited service admitting up to 40 words at the same rate as a 10 word full rate telegram, each additional 10 or a lesser number of words is charged at the rate of 1/5 of the cost for the initial 40 word telegram. Evening and Sunday messages may be filed at any hour where circumstances permit and will be delivered on week days after 7 p.m. point of origin or destination time whichever provides for earlier delivery. The service is also available all day Sunday. If the message should require a reply and the sender prepays same at the time of filing the reply will be charged at 50% of the normal rate for an Evening and Sunday telegram. If the reply exceeds 40 words, each additional ten or a lesser number of words will be charged at 1/5 of the reply paid telegram rate.

FORM NO.-CAS. 2

OVERSEAS CASUALTY RESEARCH

CABLE NUMBER 8176 PAGE 1 DATE 21-7-44

REG'T'L NUMBER E49746 RANK PTE

NAME BEDARD (SURNAME) Joseph Raoul Roch (CHRISTIAN NAMES)

SERVICE UNIT 230 85 BRIDGE CO ASC

NATURE OF CASUALTY AEF Killed DATE DNK

DATE OF BIRTH 1 DAY July MONTH 1922 YEAR Que.

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 & RELATIONSHIP Mr. Gaudias Bedard (Father) SP LIST 627.

ADDRESS 20, Val Alain, Co. De Lotbiniere, P.Q.

DAB 12-8-43.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENT'S NAMES ADDRESS (IF SOLDIER MARRIED OVERSEAS)

RELIGION Roman Cattolic TRADE OR CALLING Labourer LANGUAGES French.

MARITAL STATUS ON ENLISTMENT Single PRESENT MARITAL STATUS Single

SOLDIERS ADDRESS ON ENLISTMENT Arvida, Que. Quebec Que. 27-1-43

KRW CABLE CHECK Lp(1) N. OF K. CHECK TELEGRAM CHECK

VH 1

COPY FOR RESEARCH SECTION

S/L 2975 ASC. No 1. ASC. R.U.

CRAIN PRINTERS LIMITED

JC

COPY OF CABLES FROM CANRECORDS — BATTLE CASUALTIES AEF

8176 LONDON 0405/21/7/44 — RECEIVED: 14:50/21/7/44

H 77853	L/CPL MCQUIGGE JR	977	WOUNDED 17 JULY
M 163	L/BDR AHERN JL	170	WOUNDED 18 JULY
K 76591	GNR IRWIN GG	160	WOUNDED 17 JULY
P 4549	L/BDR LAWRENCE AJ	160	WOUNDED 18 JULY
D 14015	L/SGT LESTAGE JJ	814	WOUNDED SLIGHT 16 JULY
D 170001	GNR LEWIS FW	814	WOUNDED 16 JULY
M 102498	PTE LOGAN FJ	734	KILLED 16 JULY
C 3559	SGMN MCGOVERN TJ	176	WOUNDED 18 JULY
B 32284	CPL SHIRLOW AE	994	KILLED 13 JULY
B 134658	TPR NEALE AE	3	KILLED 18 JULY
B 16646	GNR LEEK WC	238	KILLED 17 JULY
C 50534	SGT MILLS D	707	KILLED 13 JULY
D 12555	SGT COX CB	707	KILLED 13 JULY
E 49746	PTE BEDARD JRR	230	KILLED DNK
A 108912	PTE MOROZ E	181	WOUNDED DNK SERIOUS GSW FOREHEAD
B 137287	PTE ROWBOTTOM AG	183	WOUNDED DNK SERIOUS PEN HEAD WOUNDS
B 68553	PTE NEWMAN G	183	WOUNDED DNK SERIOUS GSW PEN HEAD LEFT PARIETAL TEMPORAL LOBE
B 113911	PTE GAULEY AH	183	WOUNDED DNK SERIOUS GSW HEAD AND RT SHOULDER

11 WOUNDED

7 KILLED

18 NAMES

33229/RST/1340/21/7/44 — CANMILITRY

H.Q. 495-B-29,962 D 2046 CD 1418 E-49746

M.F.B. 387
1,500M—4-43 (9433)
H.Q. 1772-39-440

DEPARTMENT OF NATIONAL DEFENCE—(ARMY)

CROSS REFERENCE

ESTATE COMBINED

DVA

BEDARD, JOSEPH RAOUL ROCH

E. 49746

A.F.

Central Registry	Date	P. A. or B. F.	Initials	Referred to	For Remarks	Initials	Date
		(If purpose for which referred cannot be expressed on one line, add minute to file, and enter here "With Minute")					
				C	WITH PAPERS JUL 22 1944		
				A-G.	For signature & return to Cas. Sec. please.	P.L.	7-8-44
				Cas Sec	Returned	W	7/8/44
				Q 8	Passed, please.	PL	14-8-44
				Cas	Per request please return	J.E.C	18/8/44
				Q3	Ret'd with thanks	Lmc	18/8/44
				Cas	Per request please return	J.E.C	18/8/44
				Q3	Returned	MD	26/8/44
				Cas	Please return	J.E.C	30/8/44
				Q3	Returned	MD	10/9/44
				Graves	Passed Pls.	MN	14-9-44.
SEP 21 1944	20-9-44	P.A.	[illegible]	HA	" "	JMC	16-9-44
JUN 22 1945	21/6/45	P.A.	[illegible]	7a	WITH PAPERS MAY 18 1945		
OCT 18 1945	17/10/45	P.A.	L.R.	7a	WITH PAPERS OCT 15 1945		
				8d.	PER REQUISITION - JAN 7 1946		
				LCR(A)	For trans pls.	JMR	11-1-46
JAN 14 1946	12/1/46	pa	MBR	AR 2D	with Translation	[illegible]	12/1/46
				W.S.S.	PER REQUISITION JAN 29 1946		
				DR	With Papers	[illegible]	JAN 30 1946
				D.A. & A.P.	WITH PAPERS	WG	31/Jan 46
				W.S.S.	FEB 7 1946		
FEB 19 1946				Trans	For French trans pls.	[illegible]	19/2/46
	13/3/46	pa	[illegible]	W.S.S.	With Translation	W.S.	21 1946
				4B	PER REQUISITION JUN 21 1947		
				1A	For trans. pls.	MBR	25/6/47
JUL 2 - 1947	2/7/47	pa	MBR	4B	with trans	BP	30/6/47
	29/3/51	pa	[illegible]	3d.	PER REQUISITION MAR 28 1951		

CASUALTY SECTION — FILE ACTION

ITEM	CHECKED BY	DATE	CHECKED BY	DATE	CHECKED BY
1. Cable Abstract Attached	MG	21-7-44	EE	18 Aug 44	E
2. Telegram Despatched to N/K	HS	21-7-44			
3. Delivery of N/K Telegram Confirmed	PTo	23/7/44			
4. Confidential Notice (Miss.POW.Fatals)					
5. Dependents Allowance Board Notified					
6. P. & N.H. Notified (Blindness Amps. Fatals)					
7. Nat. War Services Notified (POW's only)					
8. Red Cross Notified (POW's Only)					
9. SAAG Notified (POW's Only)					
10. Income Tax & Dept. of Labour Notified					
11. Chaplain Services Notified					
12. Released to Press					
13. G's Letter to Next of Kin (Fatals)					
14. File Passed to Q3 (Fatals)					
15. Q3 Action Taken					
16. File Passed to "G"					
17. Minister's Condolence Card Desp't.	M.G.	11-8-44			
18. File Passed to Honours & Awards					
19. Memorial Cross Action Taken	MJA	20-9-44			
20.					
22.					
23.					
24.					
25.					
26.					
27.					
28.					
29.					
30.					
31.					
32.					
33					
34.					
35.					
FILE EXAMINED AND ACTION COMPLETED					

BEDARD JOSEPH RAOUL ROCH

NAME

E 49746

REGIMENTAL No.

WILL REQUIRED Q3

DVR. NO. 5 D.D.

RANK

UNIT OF ENLISTMENT

PROCESSED

COMPLETED

405-B-29,962

UNIT AT DATE OF S.O.S.

H.Q. FILE No.

	REGIMENTAL DOCUMENTS	NON-EFFECTIVE BY	NON-EFFECTIVE BY
	COMBINED DECLARATION FORM OR ATTESTATION AND MEDICAL HISTORY (M.F.M. 1 & 1A) OR (M.F.M.2 & 2A)	DISCHARGE	DISCHARGE
	SERVICE AND CASUALTY FORM (M.F.M.4 & 4A) (A.F.B 103)	DATE	DATE
	PARTICULARS OF FAMILY (M.F.M.5)	REASON	REASON
	FIELD CONDUCT SHEET (M.F.M.6) (A.F.B.122)	AUTHORITY	AUTHORITY
	CERTIFICATE OF SERVICE (M.F.M. 8) COPY OF, OR DISCHARGE CERTIFICATE (M.F.M.7) COPY OF.		
	FORM OF WILL (M.F.M.10 OR M.F.M.10A)		
	DENTAL RECORD (M.F.B. 465)	DISCHARGE	DISCHARGE
	MEDICAL REPORT OR CASE HISTORY SHEET (M.F.B. 313) or (P.&N.H.100)	DATE	DATE
	MEDICAL BOARD PROCEEDINGS (M.F.B. 227)	REASON	REASON
	TRANSFER CLOTHING STATEMENT (M.F.C. 644)	AUTHORITY	AUTHORITY
	LAST PAY CERTIFICATE (M.F.D.930A)		
	PROCEEDINGS ON DISCHARGE (M.F.M. 23)		
	PROCEEDINGS OF COURT MARTIAL (M.F.B. 271)	DESERTION	DEATH
	DECLARATION OF COURT OF ENQUIRY (Copy of Record from M.B. 68)	DATE	DATE 18 Jul 44
	PAY SHEETS	AUTHORITY	CAUSE
	CARDS	DESERTION	AUTHORITY
	SUNDRY	DATE	
		AUTHORITY	

C.A.M.

MICROFILMED
FILM REF. 21S-R9599-4

DECEASED.

RETURN THESE DOCUMENTS TO WAR SERVICE RECORDS DEPT. OF VETERANS AFFAIRS

X

M. F. W. 2589
300M-6-42 (5095)
H.Q. 1772-39-1377

ETAT DE SERVICE DU No. E-49746 GRADE Private FEUILLE No. 1

NOM. BEDARD. Joseph Raoul Roch. AUTORITE.

Mention des promotions, rétrogradations, mutations maladies ou blessures, rapports. Etc.	GRADE INDIQUE	PRENANT DATE LE	UNITE	ENDROIT	No. ord. du jour.	DATE LE
Cesse d'être attaché au CABTC No 53 (C/A) sur mutation pour toutes fins au A-19 RCASC CAMP BORDEN ONT. Aut: QS/029A/ d/6-4-43 .	Pte.	14-4-43	T.C.53	LAUZON	89	12-4-43
TOS A 19 R.C.A.S.C.(ADV)T.C. (REINF)	"	15-4-43	RCASC	C.Borden	Pt #95	19-4-43
Higher rates of pay. $1.40 per diem.	"	27-5-43	"	"	151	23-6-43.
Qualified driver (I/C) class 111 wheel.	"	21-6-43	"	"	153	25-6-43.
Transport warrant. NO. A-419434 Emb.	"	2-7-43	"	"	163	7-7-43.
SOS to No. 1 R.C.A.S.C.(Reinft) Unit Overseas	"	19-7-43	"	"	173A	19-7-43
SOS CASF (CANADA) ON EMBARKATION AT ..... ON 23 Jul 43						
TOS CASF(OVERSEAS) ON TRANSFER ON 24 Jul 43 AND DISEMBARKED AT ..... ON 27 Jul 43						
T.O.S. 1 CDN. A.S.C. REIN. UNIT FROM	Pte	JUL 29 1943	ASCRU	UK	183	30 Jul. 43

Entered BRR.

SOS ~~Accepted 18 July 44.~~

10 ~~Kilts~~

ETAT DE SERVICE DU No.....GRADE ..... FEUILLE No.....

NOM.....

AUTORITE.

Mention des promotions, rétrogradations, mutations maladies ou blessures, rapports. Etc.	GRADE INDIQUE	PRENANT DATE LE	UNITE	ENDROIT	No. ord. du jour	DATE LE

Sheet No.

POSTINGS FROM O/S CASUALTY LISTS

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

Regt'l No. E-49746 Rank Pte Surname Bedard Christian Name Joseph R. R.

Unit	Hospt.	Admitted			Discharged			Hospt. Days	Disease or Injury	Remarks	Cas. List No.
		Day	Mo.	Year	Day	Mo.	Year				
					14	9	43	5			C-1145.
7 L.A.A. Regt.	8 gen.	9	9	43					Lacerated on neck.		C-1141
									18-7-44	Ann'd by	a-483
									19-X-44	Ann'd by	a-479
85 Bridge Coy.									Killed D.N.K.		a-472

Records B3-49
H.Q. 1772-45-8
100M—5-43 (9099)

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.....Surname.....Christian Name.....

Unit	Hospt.	Admitted			Discharged			Hospt. Days	Disease or Injury	Remarks	Cas. List No.
		Day	Mo.	Year	Day	Mo.	Year				

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

CONTINUATION CARD M.F.M. 14

Regimental No. ..... Name .....

Part II D.O. No.	Date	PARTICULARS OF CASUALTY
10	13 Jan 44	Sd 1 CASCRU to 4 ~~Cdn Inf Bde coy~~ Div Sig Coy wef 13 Jan 44
3	22-1-44	T.O.S. from 1 CASCRU w.e.f. 14-1-44
		SOS 1 ASCRU w.e.f. 11 Feb 44
37	14.2.44	TOS 1 Cascru fr 4 CAD Tpdy please wef 12.2-44
40.	17.2.44	SOS 1 Cascru to 85 Cdn Bridge Coy wef 17.2.44.
4R25	17 Feb 44	Jd 83 Cdn. Br Coy wef 18 Feb 44
DO 15	14 Apr 44	accounts 10 days ch + 10 days for Pay for and 1 dy 6 hrs 31 min Total Pay 12 days
4R99	19 July 44	SD (deceased) wef 19 July 44 Killed in action at Caen as result of bombing.

M.F.M.—14A
40/P&S/67 (3400)

Part II D.O.		PARTICULARS OF CASUALTIES
No.	Date	

[illegible].43 T.O.S from 1 CASCAD wef 20 Aug 43

43 10.9.43 SOS to 1 CASCAD wef 1 Sep 43

~~218 9.9.43 SoS Leave Sell to 4 CGSC (1 Corps)~~

~~39 15 Sep 43 TOS 47 Cdn Gen Spt Coy w.e.f. 10 Sep 43~~

230 23/9/43 SOS 1 CASC Rule 4 C 1 B Coy R CASC. 23/9/43

37 30.9.43 T.O.S. from 1 CASC-R.V. wef: 24.9.43

38 8.10.43 Pay rise to 1.50 wef. 23.8.43

SoS to 1 CASC RV wef 1 Jan 44

3 5 Jan 44 TOS 1 Casc Rep 4 RC 1 B Coy Reale wef 1 Jan 44.

CASUALTIES, ETC.

Part II. D.O. No.	Date	Nature and particulars	If in Hospital note name
28-3-2-43		TOS RCASC REINF C/A A/F eff Jan 27th 1943.Att. for all pur	
34-10-2-43		AWL fr. 0800 hrs 8-2-43	
34-10-2-43		On Feb 10th 1943 admonished and to forf. 2 days pay for AWL fr 0800 hrs 8-2-43 until 1555 hrs 9-2-43 Total absence 1 days 7 hrs 55 min.	
36-12-2-43		SOS DD 5 on proceeding to CABTC 53 Lauzon eff 12-2-43	
37	12-2-43	TOS C.A.B.T.C. No 53 Lauzon, Que w.e.f. 13-2-43.	
71	24-3-43	Leave from 1700 hrs 19 to 24-3-43 0700 hrs Auth R/A 4 days.	
89	12-4-43	SOS CABTC/53 Lauzon on transfer for all purp. to A-19 RCASC CAMP BORDEN ONT. MD/3 w.e.f. 14-4-43	
95	19-4-43	T.O.S. RCASC. (TC) AF, CAMP BORDEN [illegible] 13 1943	
164	8/7/43	Emb. Leave + Rat. All. 1/7 to 10/7 (7 days)	
		S.O.S. ON ATTACHMENT TO No. 1, R.C.A.S.C.	
173A	19/7	Reinft. UNIT. (overseas) eff. 19/7/43	
183	30-7-43	"TOS" 1 Can. Asc. Rd. Fa. Canada W.E.F. 24-7-43.	
~~192~~	~~10/8/43~~	~~SOS RCASC to 88 Can Bridge Coy 10/8/43~~	
200	19/8/43	SOS 7 Can Lt A.A. Regt wef 19/8/43	

No. E-49746 RANK DVR NAME BEDARD JOSEPH RAOUL ROCH *Married *Widower *Single

Place of {*Appointment *Enlistment} Quebec Date of {*Appointment *Enlistment} 27-1-43

RATE OF PAY Cat A-1

D.O. No.	Date of D.O.	Rank	Group	P.F. or A.S.	Daily Rate	Effective Date	If liable Pen. Ded.	REMARKS
28-3-2-43		pte			1.30			
151	23-6-43	Pte			1.40	27-5-43		
38	8-10-43				1.50	23-8-43		

ASSIGNMENTS

Name and Address of Assignees	Effective Date	Amount
Hon. Rec. General of Can.,	1-6-43	1.00
War Savings Certs.		
Gaudias Bedard	1-8-43	20.00
20 Val-Alain, (Father)		
Conte de Lotbiniere, Que		
Total		

DEPENDENTS' ALLCES. No. Deps.

Date Application Forwarded	Relationship	Amount Awarded	Effective Date

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

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

*Delete words which are inapplicable.

M. F. M. 14
200M-10-42 (6723)
H.Q. 1772-39-1662

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

Occupational Form Completed.....

DENTAL RECORD—M.F.B. 465

CANADIAN DENTAL CORPS

E-53

Chart existing dental conditions. **1**

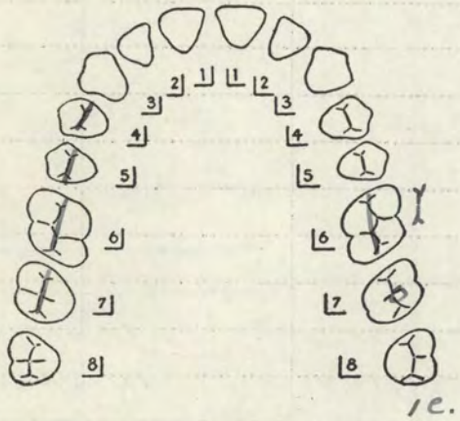
Detail only necessary treatment. **2**

NAME BEDARD Joseph-Raoul-Roch RANK Driver AGE 21 REG. No. E-49746

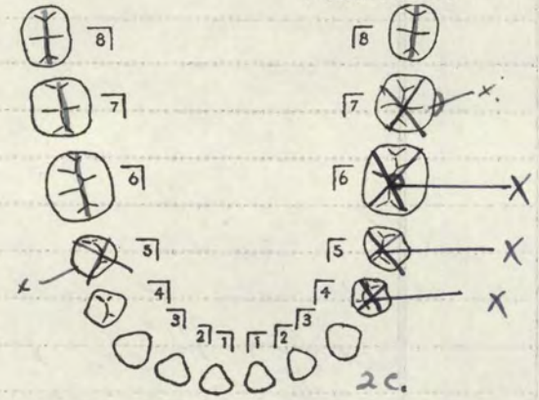
UNIT R.C.A.S.C./REINF C.A. (A) A: 19 # 3 COY DATE 2/2 19 43

Use black, blue or blue black ink. Write plainly and abbreviate as indicated below.

Patient's right



Patient's left



ORAL HYGIENE { ~~Good~~ / Fair / ~~Neglected~~ } Strike out inapplicable words.

PROPHYLAXIS required { Yes / ~~No~~ }

MUCOSA

(Describe any pathological condition briefly)

Abbreviations:—

- X Irreparable teeth—extraction
- A Amalgam
- Ce Cement
- S Synthetic Porcelain
- F Foil

Inlay: GI Gold; PI Porcelain

Crown: GC Gold; PC Porcelain; RC Richmond; JC Jacket

Treatment

- RC Root Canal
- V's Vincent's
- Pe Periodontia
- Misc. Miscellaneous
- Ra X-Ray
- Br Bridge

Denture: PD Partial; CU Complete Upper; CL Complete lower; A Adjustment

Irreparable tooth—Mark with an X drawn through diagram of tooth.
Caries—Outline defective tissue. Do not fill in space.
Edentulous Space—Indicate by a line drawn mesio-distally through diagram of missing teeth.
Restoration—Sketch outline of all serviceable restorations and write description in space adjoining diagram of teeth.

M.F.B. 465
8M pads of 100-5-42 (4681)
H.Q. 1772-39-950

Eugene A Blouin Capt
Signature and unit of examining officer
25 Coy. C.D.C.

Indicate surfaces of teeth as follows:

Mesial — M
Distal — D
Incisal — I
Occlusal — O
Labial — La
Buccal — Bu
Lingual — Li

Indicate tooth by the notation below.

8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8
8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8
Patient's right	Patient's left

Date	Notation Symbol	Description of Treatment	Signature of Operator	Date	Notation Symbol	Description of Treatment	Signature of Operator
17-3-43.	5|7	— X —	[illegible] Capt.				
10 MAY 43	|4.5.6	X	L. Parker Lieut				
17 MAY 43	V.A + P.O	A.G No 3 x I 2	A.A. Fryfe Capt.				
20 MAY 43	VA	A.G No 3 x I 2.	A.A. Fryfe Capt.				
24 MAY 43	P.O.	METACHEN.	A.A. Fryfe Capt.				

DENTAL RECORD—M.F.B. 465

CANADIAN DENTAL CORPS

Chart existing dental conditions. **1**

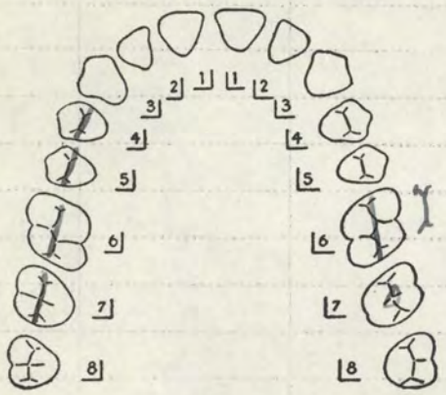
Detail only necessary treatment. ~~**2**~~

NAME BEDARD Joseph-Raoul-Roch **RANK** Driver **AGE** 21 **REG. No.** E-49746

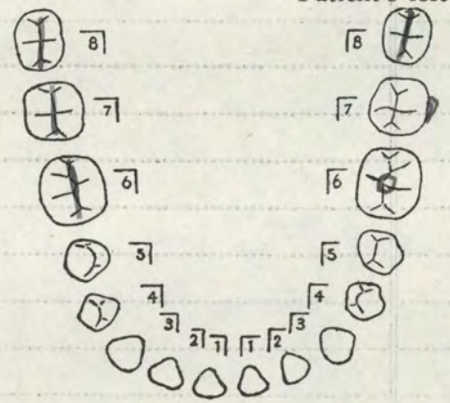
UNIT R.C.A.S.C./REINF C.A. (A) **DATE** 3/2 1943

Use black, blue or blue black ink. Write plainly and abbreviate as indicated below.

Patient's right



Patient's left



ORAL HYGIENE { ~~Good~~ / Fair / ~~Neglected~~ }

PROPHYLAXIS required { Yes / ~~No~~ }

Strike out inapplicable words.

MUCOSA

(Describe any pathological condition briefly)

Abbreviations:—

- X Irreparable teeth—extraction
- A Amalgam
- Ce Cement
- S Synthetic Porcelain
- F Foil

Inlay: GI Gold; PI Porcelain

Crown: GC Gold; PC Porcelain; RC Richmond; JC Jacket

Treatment

- RC Root Canal
- V's Vincent's
- Pe Periodontia
- Misc. Miscellaneous
- Ra X-Ray
- Br Bridge

Denture: PD Partial; CU Complete Upper; CL Complete lower; A Adjustment

Irreparable tooth—Mark with an X drawn through diagram of tooth.
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Edentulous Space—Indicate by a line drawn mesio-distally through diagram of missing teeth.
Restoration—Sketch outline of all serviceable restorations and write description in space adjoining diagram of teeth.

M.F.B. 465
8M pads of 100-5-42 (4681)
H.Q. 1772-39-950

Eugène Blouin Capt
Signature and unit of examining officer
25 Coy. C. D/C.

Indicate surfaces of teeth as follows:

Mesial — **M**
Distal — **D**
Incisal — **I**
Occlusal — **O**
Labial — **La**
Buccal — **Bu**
Lingual — **Li**

Indicate tooth by the notation below.

8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8
8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8
Patient's right	Patient's left

Date	Notation Symbol	Description of Treatment	Signature of Operator	Date	Notation Symbol	Description of Treatment	Signature of Operator

Mesial	— M	Labial	— La
Distal	— D	Buccal	— B
Incisal	— I	Linual	— Li

Occusal — O

ABBREVIATIONS:—

X	Extraction		
A	Amalgam		
Ce	Cement		
S	Synthetic Porcelain		
F	Foil		
GI	Gold	Inlay	
PI	Porcelain	Inlay	
GC	Gold	Crown	
PC	Porcelain	Crown	
RC	Richmond	Crown	
JC	Jacket	Crown	

TREATMENT

R	Root Caval		
VA	Vincent's Angina		
Pu	Pulpitis		
PO	Post Operative		
Pe	Periodontia		
Br	Bridge	Describe with sketch	
PD	Partial Denture	Describe with sketch	
CU	Complete upper	Denture	
CL	Complete lower	Denture	
Ra	X-ray		

Write plainly, indicate treatment using abbreviations as above, and sketch the outline of all restorations.

MEMORANDUM

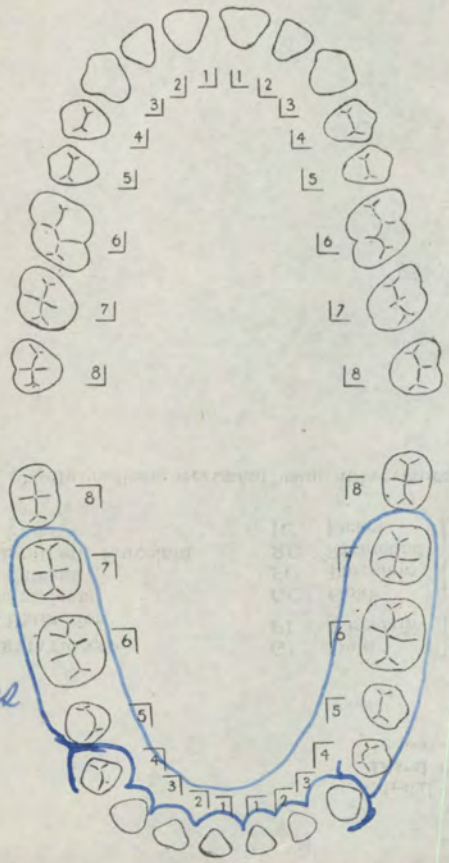
3/65B MFB 465B 40/P & S/234

CANADIAN DENTAL CORPS No 4 Coy. Detach. # 408 Date 9-JUNE-44

Reg. No. E-49746 Rank PTE. Name BEDARD J.R.R. Unit 85 BRIDGE COY R.C.A.S.C.

Detail work completed during this appointment. Refer to abbreviations on reverse side. Specify laboratory instructions and enter remarks in the space provided below.

9-JUNE-44- P.D. 4 INSERTED.



Duplicate

H53004
J. Connors
Sgt.

Signature of Operator

Hosp. A. & D. No. 5021-43.

C.F.A. 6 (Revised)
40/P & S/1438 (3050)
In lieu of A.F.I.1220
(Not to be used for British Wounded.)

HOSPITAL OR SICK LIST RECORD

E-49746 — Regtl. No.
Bedard — Surname
Joseph Raoul — Christian Names

Rank: Pte. Unit: #1 Bas CRW Age: 21

Hospital: #8 BGH

DATES OF:—

Admission: 9 Sept from: Unit. Discharge to Duty: 14-Sep 43 Unit:

Transfer: from: " for Conv.: to:

Transfer: to:

No. of days under treatment: 6 Death:

Theatre of Operations: U.K. Medical Category: on admission: on discharge:

ENTERED ON CAS. CARD: 28
CAS. LIST: 1141 1145

CLINICAL NOTES:

Disease or Injury (final diagnosis): Carbuncle - neck. Code No.: 1201.

" "

" "

Operation, nature and date: none.

MEDICALS

Anaesthetic: C/S Boil on right side of neck.

MEDICAL NOTES: Patient states that about 6 days ago he began to have a boil on right side of the neck posteriorly. This has been getting worse past 3 days.

Examination: Carbuncle on right side of the neck with a sloughing base about 3/4" in diameter.

Recommendations: Eusol dressings to carbuncle to be decided at a later date if necessary.

13 Sept 43. Carbuncle practically healed. Has been on sulphathiazole gr 60 per day.

P.T.O.

PRECIS OF CASE HISTORY & RECOMMENDATIONS

Patient 6 days prior to admission began to have infection on back of neck which has gradually become worse. Has been discharging past 2 days.

On admission there was a necrotic looking carbuncle on posterior aspect of the neck. He was given a course of sulphathiazole 60 grs. for 4 days and Eusol dressings to neck. Carbuncle has practically healed.

(1) Discharged to Unit (2) To be dressed by Unit MO. as necessary

(3) Light duty until healed

Signature of M.O. i/c Case [illegible]

Date 14 Sept 43

To. #8 C.G.H. ~~[illegible]~~ Surgery - For Admission 9 Sept. 43.

Pte. E.J. Bedard E. 49746 - Age. 21. R.C.

m/n. has been treated for past week for furuncle neck, which has extended to carbuncle - with several tender. enlarged postr. triangular glands on Rt. side - Temp. 101. For admission to Surgery

Schneiderman Capt.
M.O. 1 CASC Rd.

#2 Coy. 99

Admit
chronic surgery
[illegible] Capt

C.F.A.7
40/P & S/1439 (2959)
In lieu of M.F.B.313a and A.F.I.1237

MEDICAL CASE SHEET*

No. in Admission and Discharge Book	Regimental No.	Rank	Surname	Christian Name.
5021	E-49746	Pte	Bedard	Joseph Raoul
Year 1943	Unit. H.1 6 A S C Rec		Age. 21	Service. 8/12

Station and Date.	Disease
Sept 9.	Urinalysis - Hb - 0. Sugar - 0.
Sept. 11	Urinalysis - Hb - 0. Sugar - 0. Micro - Sulpho crystals
12 Sept 43	Urinalysis: Alb - neg Sug - neg Micro - neg

*The first and last entries will be signed, and transfers from one Medical Officer to another attested by their signatures.

[P.T.O.

Station and Date.	

Bed 19

(18)

REQUISITION SLIP

Special Examination, Treatment, or Diet; Pathological Examination; Meal for Transient; etc.

TO: Lab.
Dept.

Reg. No. E-49746 Unit #1 C.A.S.C.R.U.

Rank and Name Pte. Bedard J. R. Ward 7 R

Required and Clinical Notes	Report
Blood Sugar. Tuesday ~~Monday~~ a.m.	86 mgms %
Catherine Officer i/c	14-9-43 Unit Officer i/c
Date 7 Sept 43	Date

CANADIAN GENERAL HOSPITAL No. 1 PATHOLOGY LAB. 14 SEP 1943 MAJOR Captain Officer i/c

C.F.A. 77
40/P & S/1620 (2603)

12

MED—3
40/P & S/8

Pathological Slip

Regtl. No. E 49146 Unit #1 C.A.S.C. R.U.

Rank & Name Pte. Bedard. J. R. Ward 7.

Test Required	Report
Urinalysis.	alb. 0
	Sug. 0
Clinical Notes: On Sulfathiazole	Micro. Gonococci

13 SEP 1943
MAJOR
R.C.A.M.C. O.A.(Q'B)

Date 11/9/43 Date

MED—3
40/P & S/8

Pathological Slip

12.

Regtl. No. E49746 Unit 1 C A S C. Rn.

Rank & Name Pte. Bedard J R. Ward 7.

Test Required	Report
Micro	alb Req
Urinalysis.	Dug Req
Clinical Notes:	Micro. Req
Suspect pyelo	
Routine	

CANADIAN GENERAL HOSPITAL
No. 3 PATHOLOGY
12 SEP 1943
MAJOR
R.C.A.M.C. C.A.(O'S)

Date Sept 12/43 Date

Bed 19

REQUISITION SLIP

Special Examination, Treatment, or Diet; Pathological Examination; Meal for Transient; etc.

TO: Lab
Dept.

Reg. No. E-49746 Unit #16 Sc RW

Rank and Name Pte Bedard J. R. Ward 2

Required and Clinical Notes	Report
bacuriuria	alb. 0
carbuncle on neck	Sug 0

Officer i/c

Date 9 Sept

Officer i/c

Date

C.F.A. 77
40/P & S/1620 (2603)

MED—3
40/P & S/8

Pathological Slip

Regtl. No. E-49746 Unit #1 CASC Rec.

Rank & Name Pte Bédard J.R. Ward 7

Test Required	Report
Micros. urinalysis	alb. 0
Clinical Notes:	sug. 0
	Micro. 0

CANADIAN GENERAL HOSPITAL
PATHOLOGY
13 SEP 1943
MAJOR
C.A.M.C. C.A.(O'S)

Date 13 Sept 43. Date

Carbuncle

Bed 12

CLINICAL CHART

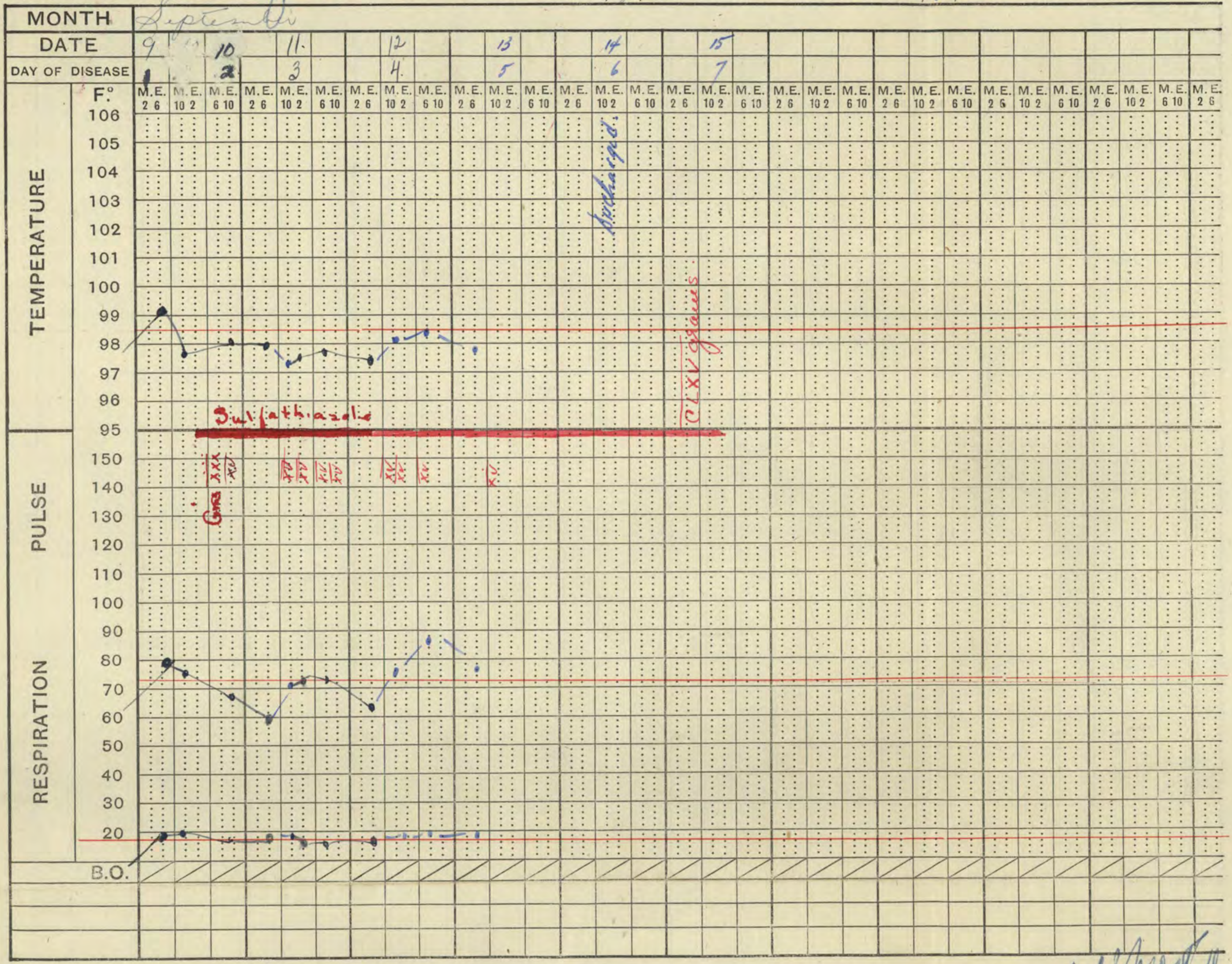
(TO BE ATTACHED TO CASE SHEET)

ARMY FORM. B. 181
NAVAL FORM. M. 41
R. A. F. FORM. 549

UNIT OR SHIP #1 Casc Ru

NO. E-49746 RANK AND NAME Pte Bedard J R AGE 21 HOSPITAL #8 CGH

DIAGNOSIS Carbuncle of neck 1201 DATE OF ADMISSION 9 Sept 1943 DATE OF DISCHARGE 14/Sept/1943 STATION



FORMS/131/17.

SIGNATURE OF M.O./c

ARMY FORM. B. 181
NAVAL FORM. M. 41
R. A. F. FORM. 549

CLINICAL CHART

(TO BE ATTACHED TO CASE SHEET)

UNIT OR SHIP ____________

NO. ________ RANK AND NAME ________________ AGE ________ HOSPITAL ____________

DIAGNOSIS ____________ DATE OF ADMISSION __/__/19__ DATE OF DISCHARGE __/__/19__ STATION ____________

MONTH																																
DATE																																
DAY OF DISEASE																																
	F°	M.E. 2 6	M.E. 10 2	M.E. 6 10	M.E. 2 6	M.E. 10 2	M.E. 6 10	M.E. 2 6	M.E. 10 2	M.E. 6 10	M.E. 2 6	M.E. 10 2	M.E. 6 10	M.E. 2 6	M.E. 10 2	M.E. 6 10	M.E. 2 6	M.E. 10 2	M.E. 6 10	M.E. 2 6	M.E. 10 2	M.E. 6 10	M.E. 2 6	M.E. 10 2	M.E. 6 10	M.E. 2 6	M.E. 10 2	M.E. 6 10	M.E. 2 6	M.E. 10 2	M.E. 6 10	M.E. 2 6
TEMPERATURE	106																															
	105																															
	104																															
	103																															
	102																															
	101																															
	100																															
	99																															
	98																															
	97																															
	96																															
	95																															
PULSE	150																															
	140																															
	130																															
	120																															
	110																															
	100																															
	90																															
RESPIRATION	80																															
	70																															
	60																															
	50																															
	40																															
	30																															
	20																															
	B.O.																															

FORMS/181/17.

SIGNATURE OF M.O. i/c ____________

1085/43

Army Form W3118.
R.A.F. Form 3118.
Naval Form M 204.

FIELD MEDICAL CARD.

No. E49746 Rank PTE.

Name BEDARD J. R.

Unit ROYAL CANADIAN ARMY SERVICE CORPS.

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

Diagnosis of Unit M.O.—
Furuncle on Face

Date seen by him— JRM

No. of Field Ambulance— 11th. Can Fd Amb.

Date of admission— 9 Oct 43

Field Ambulance diagnosis—
Furuncle of Chin. Uncomplicated

C.C.S. or M.C.S. diagnosis (it altered from above)—

General or other Hospital diagnosis (alterations or additions)—

(3117) 3/41 (7) Wt.1 835 400m (7) 6/41 Gp.697 C&SLtd

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

Morphia—
Dose. Time and date given—

A.T. Serum—
Dose and date given—

Date of Wound or onset of illness } 9 Oct 43

Religion— R.C.

21

10/12

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

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

NOTES.

9 Oct/43
Furuncle on chin
To ADS
JRM

9 Oct 43. Furuncle on Rt. aspect of chin & much below lip. Uncomplicated

* Strike out where inapplicable.

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

10 Oct 43. Dressing well. Little discomfort. Neurologist

13 Oct 43. No further pain. Swelling or drainage. Return to unit. Neurologist

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

CANADIAN MEDICAL SERVICE

Date 9-4-43. No.

No., Rank and Name

℞ Replace Broken lens —

+ 3.00 sphere.

A Rudd Major RCAMC

Signature of M.O.

To be filled at Medical Inspection Room or Military Hospital.

M. F. C. 680

13M pads—100—9-40 (7225-31)
H.Q. 1772-39-690

NAME PTE J R BEDARD DATE 19 April 43 4.

REGT'L NO. E 49746

UNIT # 3 Coy.,A 19 RCASC?(A). TC.,Camp Borden,Ontario.

	SPH.	CYL.	AXIS
RIGHT	Plus 3.00		
LEFT			
ADD. FOR READING		SEGS.	

60

FRAME MEASUREMENTS Replace right lens IN RESPIRATOR FRAMES only as above.

2893 MAY - 7 1943 M687

Optometrist

OFFICER I/C EYE CLINIC

DISTRICT MEDICAL OFFICER No. 1915 MAY 4 1943 MILITARY

To be made out in duplicate

M.F.M. 5
60M—7-40 (6140)
H.Q. 1772-39-1651

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

INSTRUCTIONS.

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

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

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

---

(1) Name of Officer of Other Rank BEDARD GERALD ERNEST
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank C.37474 Drv.

(3) Unit 2 Troop Carrying Company RCASC

(4) Are you married? NO

(5) If married, state,

(*a*) Full name of your wife X

(*b*) Present postal address of wife X

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

(7) Are you a widower? X

(8) Have you any children? X Number of boys X Girls X

Names and ages X

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

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

Name X

Postal Address X

[SEE OTHER SIDE]

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

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

.....

.....

(11) Is your father alive?.....Yes.....

If so, state name and address, occupation.....Bedard...Alfred.....

.....Alexandria.....Ontario.....Carpenter.....

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

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

.....

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

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

If so, state name and address.....Emma.....Beddrd.....

.....Alexandria.....Ontario.....

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

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

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

(17) Are you contributing to the support of any dependents, other than those shown above?.....X.....
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment.

If so, state the following particulars:—

Relationship .....X.....

Full Name .....X.....

Postal Address .....X.....

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

.....

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

If so, in what Company?.....X.....
(Give number of policy)

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

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

Gerald Ernest Bedard
(Signature of officer or man)

Date.....26/3/41.....

.....

A/Officer Commanding.....J.A. Clothier..... Lt.Col.
No. 2 Troop Carrying Company RCASC.

Date.....26/3/41.....

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

CASE HISTORY SHEET

Bedard Joseph Raoul Rob

Hospital M.I.R. Ward

Regt'l No. E 49786 Rank Pte Name Bedard. J.

Unit A-19 Completed years of service (Where and how long)

Date of admission 8 July 43 Date of discharge 11-7-43

Diagnosis Furuncle R.C. (S) Age 21

Complaint Pain and swelling on forehead

History, Examination and Progress Notes

T. 98 at 2200 8-7-43.
T 98° " 0600 9-7-43.
T 98° 1330
T. 98° at 2200
T. 98 " 0600 10-7-43.
T 98 " 1330 " " "
10 July 43 - Unimproved

T. 98 at 2200
T. 98° " 0700. 11-7-43
11 July 43 - Unimproved

SOS to nes R C A S C. Rich S.
19-7-43 at 11.00 1330.

TREATMENT Compresses
(Especially any specific or special form)

CONDITION ON DISCHARGE Unimproved - att C
(and disposal made of case)

Date

W S Harper Capt
Medical Officer i/c case

M.F.B. 313a
1000M—1-42 (2574)
H.Q. 1772-39-439

405-B-29,962

610
P & S/254 (3444)

CANADIAN ACTIVE SERVICE FORCE
OVERSEAS
LAST PAY CERTIFICATE
(All Ranks)

District
Dispersal Area

Regtl No. E49746 Rank and Name Bedard J.R.R. Dvr.

of (Unit) on

~~(Transfer~~ or Discharge) to on 18th July 19 44

Reason Death Authority: C.C.L. "A" 483 d/ 27th Aug 44.

The following is a statement of the account of the above-named from 1st July to 31st July 19 44. the inclusive date of transfer or discharge.

Dr Particulars	Amount		Cr Particulars	Amount	
Balance Dr from last account			Balance Cr from last account		08
First Monthly Payment AR d/6.7.44	4	47	Regimental Pay 31 days @ $1.50	46	50
Casual Payments AR 25 d/15.7.44	4	47	Tradesmen's Pay days at $		
Payments on Transfer or Discharge			Additional Pay (Give particulars) days at $		
Assigned Pay $20.00 & $1.00	21	00	Allowances (Give particulars) days at $		
Regimental Charges					
Public Stoppages (Give particulars):			Cash Effects J.V. 1273		34
To Balance Cr Free	16	98			
To Balance Cr Deferred			By Balance Dr		
Total	46	92	Total	46	92

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

Remarks:

Assigned Pay $ 20.00 (F) stopped eff. Aug 44.

Assigned Pay $ 1.00 (WSC) stopped eff. Aug 44.

The above statement has been compiled from Treasury Records the latest Paybook not being available.

Compiled by F. Trenouth.

Checked by A. Bell.

Date 13th February 1945.

Certified correct D. Lowley
for Chief Treasury Officer, Overseas

M.L.

ENDORSEMENTS

DEBITS AND/OR CREDITS SUBSEQUENT TO ISSUE OF L P C
Prior to compilation of statement below

Date	Unit	Payments	Amount Dr		Amount Cr		Paymaster's Signature
		Balance from L P C					

Explanation of Debit Balance :-

STATEMENT OF ACCOUNT

Date		Particulars	Dr		Cr	
		Balance as shown above				
		Pay and Allowances from ..... to				
		Assigned Pay months of				
		Civilian Clothing Allowance				
		Boat Expense Money				
		Train Expense Money				
		Miscellaneous Debits (give details)				
		Miscellaneous Credits (give details)				
		TOTAL				

DEBITS AND/OR CREDITS SUBSEQUENT TO COMPILATION OF ABOVE STATEMENT

Date	Unit	Particulars	Dr		Cr		Signature of Paying Officer

Place of Embarkation.....
Date of Embarkation.....
Place of Disembarkation.....
Date of Disembarkation.....

HM Transport.....

MEDICAL CASE SHEET (OPHTHALMOLOGY)

MILITARY HOSPITAL CAMP BORDEN MILITARY HOSPITAL

DATE 19 April 43

NAME BEDARD J R RANK PTE NUMBER E 49746 UNIT A19RCASC.TC AGE 21

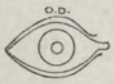
HISTORY

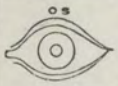
SYMPTOMS

GLASSES WORN

OBJECTIVE EXAMINATION

EXTERNAL APPEARANCE

OD 

OS 

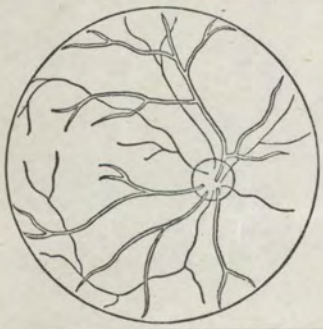
RETINOSCOPY AND OPHTHALMOMETER

OD

OS

OPHTHALMOMOSCOPE

FUNDUS	LENS	CORNEA



FIELDS

MUSCLE BALANCE

TENSION

SUBJECTIVE EXAMINATION

TRIAL CASE

	BEFORE	SPH	CYL.	AX.	V	AFTER
OD	V	Plus 3.00				
OS	V				V	

P.P. P.R. A. ACC. PRESBYOPIA

GLASSES PRESCRIBED

2893

OD Replace right lens only

OS

TREATMENT:–

M.F.W. 144
100M—3-42 (3710)
H.Q. 1772-39-1173

MEDICAL OFFICER C Glahn RANK Optometrist Sgt. RCAMC.

In lieu of A.F. W.3017 (Hospital stamp)

No. 8 CANADIAN GENERAL HOSPITAL RECORDS OFFICE 10 SEP 1943 A.C.A.M.C. C.A.(O.R.)

NOTIFICATION OF ADMISSION

No. 8 Canadian General Hospital

Theatre of Operations U.K. A. & D. No. AD-5021-4

Regt. No. E-49746 Rank Pte Age 21

Surname BEDARD

Christian Names Joseph, Raoul, Roch.

Unit & R.U. # 1 CASCRU 7LAA Regt

Religion RC M. or S. S

Admission date 9-Sept-43 hour 1600

from Unit

Diagnosis Carbuncle on neck

M.O. Admitting A.G. Duncan, Capt. Ward 2

Previous Admissions Nil 8/12

Pay Book Part I	yes	no	Yes	Walking
" " " II	yes	no	Yes	Sitting
" " " III	yes	no	Yes	Stretcher
Accidental	yes	no		
Enemy Action	yes	no		
Sick	yes	no		

ENTERED ON CAS. CARD. 28 CAS. LIST. 1141

RGK

C.F.A. 76
40/P & S/1619 (2602)

Signature of Admitting Clerk.

O. H. M. S.

To:

.....

.....

.....

.....

Hospital A & D No. AD/5021-43

Dead

A.M.D.2—1
In lieu of A.F. W.3017
40/P & S/2 (3166)

HOSPITAL DISCHARGE NOTIFICATION

To: Officer Commanding No 1 R.C.A.S.C. RU. (Unit)

It is notified for your information that the undermentioned was discharged from .....

No. 8 Cdn. General. Hospital, R.C.A.M.C., admitted on 9-Sept-43. 194.....

Disch/Trans to Unit. on 14-Sept-43. 194.....

He shall attend the first Unit Sick Parade after reporting to his Unit. This document must be passed to the Medical Officer of the Unit immediately.

Name BEDARD. Joseph. R.R. No. E-49746 Rank Pte.

Diagnosis Carbuncle - neck. (1201) (code) M.O. i/c Case A.C.G. Frost, Captain.

..... (code)

..... (code)

Precis Case History:

About 6 days prior to admission , began to have infection on back of neck which has became worse. Has been discharging for past 2 days.
On admission there was a necrotic looking carbuncle on posterior aspect of the neck. He was given a course of sulfathiazole 60 grs for 4 days and Eusol dressings to neck.
Carbuncle has practically healed.

Recommendation:

Discharge to Unit.
(i) To be dressed by Unit M.O., as necessary.
(ii) Light duty until healed.

/CEJ.

J. G. K. Lindsay Major,
J. G. K. LINDSAY, Registrar,
No. 8 Cdn. General Hospital,
R.C.A.M.C. C.A.(O*S)
For Officer Commanding

.....

TITLE/TITRE Military Record for Joseph Raoul Roch Bedard
RG 24 MG _____ R- _____ SERIES/SÉRIE_____
ACCESSION _____VOL 25415 PAGE(S) 220
BOX/BOÎTE _____ REEL/BOBINE _____
FILE/DOSSIER BEDARD, JOSEPH RAOUL ROCH, E49746
DATE March 2015