

M. S. M. 1 (Fr.)

2506-10-52 (5043)

C.O. 5772-39-1072

ARMÉE CANADIENNE

---

LIVRET INDIVIDUEL

DE

SERVICE ET DE SOLDE

## N'OUBLIEZ PAS

D'avertir aussitôt votre commandant de tout changement dans le nom, l'adresse ou le degré de parenté de votre plus proche parent.

Ceci est très important pour vous-même et votre plus proche parent.

200 PADS OF 100-5-43 (21)  
H. Q. 1772-39-1672-K. P. 80493

M.B.M. 1 (Partie I) (Fr.)  
révisée 1-10-42  
25M-10-42 (5043)  
Q.G. 1772-39-1672

## LIVRET INDIVIDUEL DE SERVICE

(Le livret individuel de solde, modèle M.B.M. 1, Partie II (Fr.) sera délivré pour le service actif)

Toute inscription dans ce livret (autre que celles de la page 24 de cette partie du livre de milice M. I, ayant trait à la formule abrégée de testament pour l'usage du soldat), doit être faite sous la direction du commandant de la compagnie, de la batterie ou de l'escadron auquel l'homme appartient ou est détaché.

Tout changement d'inscription doit être initialé par un officier.

### INSTRUCTIONS AU SOLDAT

1. Vous serez tenu **personnellement responsable** du soin de ce livret.
2. Vous devez **toujours porter ce livret sur vous** lorsque vous êtes de service et en service actif.
3. Vous devez présenter ce livret lorsque enjoint de le faire par l'autorité militaire compétente, tel qu'un officier, sous-officier breveté, sous-officier ou membre de la police militaire.
4. Vous ne devez ni changer ni faire une inscription quelconque dans ce livret (sauf en ce qui concerne la formule abrégée de testament à la page 24; voir les instructions aux pages 20 à 23), et toute contravention à cet ordre sera considérée comme étant une infraction grave.
5. Si vous croyez qu'une inscription a été omise ou a été faite incorrectement, ou encore si vous perdez ce livret, vous devez en avvertir votre supérieur immédiat.
6. Il vous est permis de garder ce livret comme état de services, après votre libération; mais si vous le perdez après votre libération, il ne pourra pas être remplacé.

(1) NOM ET SIGNELEMENT DU SOLDAT LORS DE L'ASSERMENTATION

Matricule D. 650 525  
 Nom (en majuscules) DUFRESNE  
 Prénoms (en entier) GEORGES ANDRÉ  
 Date de naissance 2 AVRIL 1922  
 Lieu de naissance BONSECOURS. Inc. Can.  
 Nationalité CANADIEN  
 Métier ou profession lors de l'enrôlement MACHINISTE

Nationalité du père à sa naissance Canadien  
 Nationalité de la mère à sa naissance Canadien  
 Religion Catholique Romain  
 Enrôlé à Montreal South Inc. Can.  
 Date 15/11/43

Détails sur le service  
 antérieur (s'il y a  
 lieu), c-à-d. matri-  
 cule, corps ou régi-  
 ment, et durée du  
 service.

nil

Signature du soldat André Dupresne  
 Signature de l'officier [Signature]  
 Endroit 270 St. Inc. Can. Date 15/11/43

Tout changement connu, ainsi que la date de ce changement doivent être dûment notés et transmis par le commandant de l'unité au Chef des archives

NOTE.—Les inscriptions faites sur ces pages n'ont aucune valeur

Plus proche degré de parenté		Noms	Date
1er	Epouse		
	Enfants		
2e	Père	M. Adolphe Hufmann	15/11/43
	Mère		
3e	*Frères et sœurs		
4e	Autres parents (mentionner la parenté)		

\* Spécifier s'il s'agit de frères plus jeunes ou plus âgés.

être dûment notés et transmis par le commandant de l'unité au Chef des militaires en droit comme TESTAMENT (voir aux pages 20-23)

Dernière adresse connue au complet

15, Boulevard National, Paris

(V) GRADE et EMPLOI

Date	Grade et emploi	Grade effectif, temporaire, intérimaire ou local (avec ou sans solde)	Décision (Partie II)	Signature de l'officier
15/1/43	pte		400 270	<i>[Signature]</i>

(VI) Certificat, applicable à toutes les armes, qui doit être rempli et signé par le commandant du bataillon, etc., avant que le soldat se rende outre-mer

A FINE SON INSTRUCTION (élémentaire et spéciale à son arme) sauf qu'il a besoin de se perfectionner en:

*Adfini la 1<sup>re</sup> partie de son instruction sur l'Infanterie le 26 Fev. 44*

*Forces armées canadiennes  
C. I. B. T. C. # 45  
Completed Advance Training  
as per F.C. Standard syllabus.  
22 Apr. 1944.  
A-13 Valcartier Camp P. Q.*

Possède en plus les aptitudes et connaissances suivantes:  
*Boomerang au bras  
Achimiste  
Mécanicien en garage  
6 yrs exp.*

Date *15 Apr. 1944* *[Signature]*  
Commandant *[Signature]*  
Army Engineer

\* Si le soldat ne requiert pas une instruction plus étendue, biffez les mots en italiques et initiez.

## (VII) DÉTAILS DE L'INSTRUCTION MILITAIRE

Cours et écoles.  
Spécialités.  
Natation, etc., résultat,  
No de brevet ou d'autorisation.  
(On peut se servir de deux lignes pour  
chaque inscription)

Date

Signature de l'officier

T.T. 517 DUR MECH  
CARRIER GRADE 5  
DUR MECH. CARRIER COURSE  
DUR I.C. CLASS III (W) (S) (C)  
S.C. D 8 M.S.

11 May 44

25 Aug 44

~~John ...~~  
— Capt.  
Alhummis ...

## (VIII) COURS DE TIR D'ARMES PORTATIVES

Si le programme n'a  
pas été achevé,  
indiquer les séries  
tirées

Genre d'arme

Classification

Année

Signature  
de l'officier

1944  
1944  
1944  
1944

1st  
2nd Class  
2nd Class  
2nd Class

.27 rifle  
Rifle  
S.M.C.  
S.M.C.

Completed  
1-2-3-4  
1-4  
Completed

~~John ...~~  
Mandrian  
M. ...

(IX) INSTRUCTION GÉNÉRALE

Brevet, spécialités, etc.  
No de brevet ou d'autorisation  
(On peut se servir de deux  
lignes pour l'inscription)

Lieu

Date

Signature de l'officier

Public School  
6<sup>e</sup> année

Watrous  
Que.

1938

*[Signature]*

10

(X) APTITUDES PROFESSIONNELLES  
(Pour les hommes qui ont réussi les épreuves professionnelles)

Métier

Groupe

Classe

Décision  
Partie II

Date

Signature de l'officier

Driver

III

DD 190

24/9/44 J. G. Richard

11

(XI) EMPLOI AU COURS DU SERVICE

Période		Nature de l'emploi	Observations et signature du commandant de la compagnie, etc.
Du	Au		
11 Dec 43	26 Fev 44	Sous Instruction	[Signature]
26 Nov 44	3 Jan 45	[Signature]	[Signature]
4 Jan 45		IND DUTY	[Signature]

12

Doit inclure (1) l'emploi régimentaire, (2) comme artisan, (3) comme spécialiste;  
ex: signaleur ou mitrailleur

(XII) CLASSEMENT MÉDICAL

Date	Catégorie ou classe	Examineur médical des recrues, ou autre autorité médicale	Date de la dernière visite	Signature du médecin																				
15/11/43		M. F. M. 2		[Signature]																				
	<table border="1"> <tr> <td>Y</td><td>O</td><td>B</td><td>P</td><td>U</td><td>L</td><td>H</td><td>E</td><td>M</td><td>S</td> </tr> <tr> <td>2</td><td>2</td><td>1</td><td>1</td><td>1</td><td>1</td><td>1</td><td>1</td><td>1</td><td>1</td> </tr> </table>	Y	O	B	P	U	L	H	E	M	S	2	2	1	1	1	1	1	1	1	1			
Y	O	B	P	U	L	H	E	M	S															
2	2	1	1	1	1	1	1	1	1															
15/5/44	22	1 1 1 1 1 1 1 1		[Signature]																				

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## (XIII) PRESCRIPTION OPTIQUE

Vision sans lunettes	Sph.	Cyl.	Axe	Vision avec lunettes	Centre optique.	Date de l'examen
10/10					N° de la monture (ou mesures)	Date de la fourniture
10/10						

D

G

44

Signature du médecin.....

Vision sans lunettes	Sph.	Cyl.	Axe	Vision avec lunettes	Centre optique.	Date de l'examen
					N° de la monture (ou mesure)	Date de la fourniture

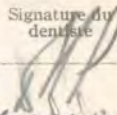
D

G

Signature du médecin.....

15

## (XIV) DÉTAILS DES SOINS DENTAIRES

Date	Requis	Achevé	Spécification Employez les abréviations et symboles autorisés	Signature du dentiste
15 Nov 43	✓		15 F. PE. PROPHY.	
24 Feb 44	✓		13 F. PE PR.	<i>M. Lefebvre</i>

M F R ASE SERIES 1 &amp; 2 CREATED

## (XV) APPAREILS CHIRURGICAUX FOURNIS

Détails	Date	Signature du médecin

## (XVI) INOCULATIONS PRÉVENTIVES

Nature du vaccin, "T.A.B.", contre le choléra, la peste, etc.	Date	Signature du médecin
T.A.B.T. / ice.	NOV 25 '43	Melney Capt
T.A.B.T.	JAN 7 1944	Melney Capt
T.A.B.T.	JAN 28 1944	Melney Capt

## (XVII) VACCINATION

Date de la vaccination	Signature du médecin
NOV 25 1943	Melney Capt

## (XVIII) INSCRIPTIONS DIVERSES

(Inscriptions pour lesquelles il n'a pas été prévu d'espace ailleurs)  
NOTE.—Les inscriptions sur cette page n'ont aucune valeur légale  
comme TESTAMENT

Détails	Date	Signature de l'officier
XRAY - R 360 N	15/11/43	Melney Capt
B. W. neg.	NOV 28 '43	Melney Capt
Gaslandford. C.A.P.	17 Jan 44	Melney Capt
" " D.M.	27 Jan 44	Melney Capt
Mr. Test case 704	15 NOV 43	Melney Capt
Ent. case	23 Sept 43	Melney Capt

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## (XIX) TESTAMENTS DES SOLDATS

1. Les détails concernant le plus proche parent doivent toujours être soigneusement insérés dans la formule contenue aux pages 4 et 5 de ce livret, mais le soldat doit comprendre, qu'advenant son décès, ces inscriptions n'ont aucun effet légal en ce qui concerne la disposition de sa succession, et par conséquent, ne l'exemptent pas de la nécessité de faire un testament. A moins qu'un soldat ne fasse un testament en bonne et due forme, sa succession est traitée de la même façon que celle d'une autre personne qui décède sans laisser de testament, et non seulement le parent ou la personne qu'il aurait voulu avantager reçoit peu ou rien du tout de la succession, mais la distribution en est suspendue jusqu'à ce que le plus proche parent y ayant droit soit localisé. Par conséquent, quoique sa succession ne puisse comprendre d'autres biens que la solde et les allocations qui pourront lui être dues ou les effets qu'il a sur sa personne ou au camp, il est important qu'il fasse un testament qui, une fois rédigé, est remis au Commandant pour y être transmis au Bureau des Archives où il sera gardé en sûreté; et advenant son décès, ce document est transmis à la Division des Successions, Département de la Défense Nationale, Ottawa, où il sera procédé à l'administration et à la distribution de sa succession militaire, et ensuite transmis à l'exécuteur nommé dans le testament, suivant qu'il existe d'autres biens (incluant les biens immobiliers).

2. Le testament du soldat doit être fait de préférence sur l'une des formules de testament prévues à cette fin,— M.F.M. 10 (anglaise) ou M.F.M. 10a (française)—et sur lesquelles sont imprimées certaines instructions des plus utiles. On obtient ces formules par l'entremise du commandant de chaque unité. On peut employer une feuille de papier détachée, mais dans un cas semblable la forme générale du testament tel qu'indiqué dans les formules M.F.M. 10 ou M.F.M. 10a devra être soigneuse-

ment observée. Le soldat doit dater le testament et y signer son nom au bas, en présence de deux témoins qui en même temps et en présence de chacun d'eux et du soldat, doivent également signer leurs noms respectifs. Si le soldat est incapable d'écrire il doit faire sa marque à l'endroit du testament où sa signature devrait normalement apparaître, et immédiatement au-dessus de leur signature apparaissant au testament, les témoins doivent insérer la note suivante:—

"Le testament ci-dessus a été d'abord fidèlement et distinctement lu au soldat qui l'ayant apparemment compris y a alors apposé sa marque en notre présence tel que mentionné." Dans les cas semblables, on recommande cependant que le soldat s'assure des directives de l'officier qui lui est immédiatement supérieur.

3. La formule abrégée de testament (voir aux pages 23 et 24 de ce livret) peut être employée par un soldat en service actif, mais doit être écrite entièrement de sa propre main. Il est à remarquer cependant, que en vertu des lois de certaines provinces du Canada, un tel testament est inopérant en ce qui concerne une succession immobilière. Par conséquent, un soldat ayant son domicile au Canada et qui possède des biens immobiliers, doit employer la formule de testament M.F.M. 10 ou 10a et y nommer un exécuteur testamentaire responsable. Un soldat, ayant son domicile en dehors du Canada, ne doit pas employer la formule abrégée de la page 24, parce qu'il peut arriver que cette formule ne soit pas conforme aux lois de son domicile.

4. Quiconque est avantagé de quelque façon par un testament, ne peut y être témoin. Si une personne à qui un soldat désire donner une partie quelconque de sa succession est un des témoins au testament, elle n'aura pas droit de recevoir les biens qui lui sont ainsi donnés. Cette personne peut cependant être nommée exécuteur testamentaire.

5. En rédigeant un testament il ne convient pas d'y faire des altérations. Si, cependant, des altérations sont faites par le soldat dans son testament, les deux témoins et lui même doivent alors apposer leurs initiales dans la marge, vis à vis les altérations. Tout changement aux dispositions d'un testament fait antérieurement peut toujours être fait au moyen d'un nouveau document appelé codicille; ce document doit référer au testament antérieur, et après avoir mentionné les changements désirés il doit être daté, signé et attesté de la même façon que le testament lui-même.

6. Un testament entièrement nouveau peut être fait en tout temps, et dans ce cas, ce dernier testament révoque ou annule tout testament fait précédemment. Les lois de toutes les provinces du Canada, sauf une seule, et de la plupart des pays de langue anglaise prescrivent que le mariage contracté postérieurement à la date d'un testament a pour effet de révoquer ce testament. Par conséquent, un soldat, immédiatement après son mariage, doit faire un nouveau testament, afin qu'advenant son décès, sa succession puisse être distribuée suivant ses volontés telles qu'exprimées dans son testament.

7. Le testament d'un soldat en service actif n'est pas nul du fait qu'à la date où il a été fait, il n'était pas âgé de 21 ans.

**CERTIFICAT**

J'ai reçu la formule M.F.M./... et l'ai remise au chef des archives militaires à

*21.12.1936*



Signature de l'officier  
Grade ou emploi

Date de l'extraction du certificat  
ou du testament

Unité ou département

Envoyé à  
Unité ou département

Date de l'extraction du testament  
Signature de l'officier

Ne doit servir que lorsque le soldat est au service actif. Le testament qui apparaît à la page 24 ne doit pas servir tant que le soldat n'a pas été appelé pour le service actif.

**FORMULE ABRÉGÉE DE TESTAMENT**

(Rédigez le testament sur la page suivante)

Si un soldat au service actif ou qui a été appelé pour le service actif désire faire un testament abrégé, il peut le faire sur la page suivante. Ce testament doit être écrit entièrement de sa main, et signé et daté par lui. Le nom et l'adresse en entier des personnes qu'il désigne comme bénéficiaires, ainsi que le montant d'argent ou les articles personnels qu'il désire leur léguer, doivent être clairement spécifiés. L'inscription seulement du nom d'un bénéficiaire sur la page suivante sans aucune mention du legs fait audit bénéficiaire n'a aucune valeur en droit.

Suit un spécimen de testament par lequel tous les biens sont laissés à une seule personne:—

En cas de décès, je lègue tous mes biens et effets à ma mère, Madame Marie Bernard, 099, rue Montcalm, Montréal.

(Signature) GEORGES BERNARD,  
Maticule N° 0000  
Royal 22e Rég.

Daté le 5 août 1936.

Suit un spécimen de testament par lequel les biens sont laissés à plus d'une personne.

En cas de décès, je lègue \$10.00 à mon amie, Mademoiselle Rose Chevalier, 01, rue Laval, Québec, \$5.00 à ma sœur, Mademoiselle Jeanne Bernard, 099, rue Montcalm, Montréal, et le résidu de mes biens à ma mère, Madame Marie Bernard, 099, rue Montcalm, Montréal.

(Signature) GEORGES BERNARD,  
Soldat, Mat. 00, Royal 22e Rég.

Daté le 5 août 1936.

Réservé au service actif. Cette page de testament ne doit **pas** servir tant que le soldat n'a pas été appelé pour le service actif.

**TESTAMENT**

(Pour être utilisé si le soldat n'a pas encore fait de testament ou s'il désire modifier celui qu'il a déjà fait. Voir les instructions à la page 23).

Signature.....

Grade, matricule.....

Date.....

RENÉE DAY

TEL: 4-1994

Livret de Milice M. 1

PARTIE I

25M—10-42 (5043)  
Q.G. 1772-39-1672

ARMÉE CANADIENNE  
Livret Individuel  
de Service

(Pour le service actif)

No matricule

D-650 525

Nom (en majuscules)

DUPRESNE

Prénoms en entier

GEORGES-ANDRÉ

NOV 1 8 1943

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ORIGINAL  
DUPLICATE  
TRIPlicate

Copy designation to be shown  
by striking out terms not applicable.

N. R. M. A. Clearing Depot 4

M.F.M. 2  
(Combining M.F.M. 103)  
750M-4-43 (9375) (786-828)  
H.O. 1772-39-1645  
D-650525

INF (AUTO)

Corps ..... Regimental Number .....

**CANADIAN ARMY**  
ENROLMENT AND ATTESTATION PAPER

FINGERPRINTED  
PHOTOGRAPHED

NOV 18 1943

1. (Surname) DUFRESNE (Christian Names) Georges Andre

2. Present Address 18 Ellice St., Waterloo, Quebec Canada

3. (a) Date of birth 2 April 1922

(b) Place of birth Canada Quebec Bonsecours  
(Country) (County or Province) (Town or Township)

4. (a) Place of birth of Father Canada Ontario Springfield  
(b) " " " " Mother Canada Quebec Waterloo  
(Country) (County or Province) (Town or Township)

5. Nationality Canadian  
(To what country do you now owe allegiance) if naturalized give certif. no. date and place of issue. If not naturalized so state.

6. Religion (state denomination) Roman Catholic

7. Trade or calling (a) Machini st (a) Name and address of last employer:  
La Grandeur Auto Service  
Waterloo Quebec

(b) How long employed

9. Married, Widower or Single Single If married, how many children

10. Name of Next-of-Kin Mr. Adolphe Dufresne 11. Relationship Father

12. Address of Next-of-Kin 18 Ellice St., Waterloo, Quebec Canada

13. Previous Service (Navy, Army or Air Force) Units and dates no

14. (a) Former war service nil

(b) In the armed forces of what country nil

(c) Dates of such Service nil

15. Decorations and medals, if any nil

16. I do solemnly declare that the above particulars are true

Signature of Recruit, or in the case of N.R.M.A. personnel who refuse to sign, signature of officer under Regn. 8 (d) (i)  
James Dufresne  
R.A.S.R. 1941

Director of Records  
G. Brancik  
25 Nov  
Nat. Defence Hqs.  
Ottawa, Canada.

OCCUPATIONAL HISTORY FORM COMPLETED

16a CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE ATTESTING OR ENROLLING OFFICER

The above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law.

The above questions and answers were then read to the above named in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to.

at Montreal 15th Quebec this 15th day of Nov 1943

James Dufresne  
Capt. R.A.S.R.  
NO. 4-DISTRICT DEPOT A.F.

Signature of Magistrate, Justice Attesting or Enrolling Officer.  
Office or Rank and Unit or appointment.

ITEMS 17, 18 AND 19 WILL NOT BE COMPLETED UNLESS A MAN ENLISTS FOR GENERAL SERVICE ANYWHERE.

17. DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, ....., hereby engage to serve in any Active Formation or Unit of the Canadian Army so long as an emergency, i.e., war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization after said emergency ceases to exist, and in any event for a period of not less than one year, provided His Majesty should so require my services.

Date ..... (Signature of Recruit)

18. OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Witness (Name) (Rank) (Signature of Recruit)

19. The above named recruit has made and signed the declaration and taken the oath before me.

at ..... this ..... day of ..... 19.....  
(Signature of Magistrate, Justice or Attesting Officer.)  
(Office or Rank and Unit or appointment)

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON WILFULLY MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.



Record of Service of \_\_\_\_\_  
(Surname)

DUFRESNE GEORGES ANDRE

(Christian Name)

Regimental Number \_\_\_\_\_

D-650525

## QUALIFICATIONS

Military ..... **nil**  
 Business or Professional ..... **machinist**  
 Trade or Civil ..... **nil**  
 Technical ..... **Fr**  
 Languages .....

## EDUCATIONAL QUALIFICATIONS

High School } **nil** } Graduation }  
 or } } or }  
 Collegiate } (years completed) **nil** } Matriculation } (specify)  
 \*College ..... **nil**  
 \*University ..... **4 yrs pub sch**

\* (Name of institution, courses or years completed, and degrees obtained to be shown)

All personnel whether G.S. (General Service) or N.R.M.A. will be taken on strength as private soldiers. Postings, appointments and promotions should be shown in the spaces below.

REPORT		Record of Postings, Promotions, Reductions, Transfers, Casualties, Reports, etc, from and including date taken on strength.	Rank Shown	Effective Date	Unit	Place	AUTHORITY	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
18-11-43	DRO	TOS NO 4 DISTRICT DEPOT CA <i>C.A.(B) I.C.B. SOREL, QUE.</i>	PTE	15-11-43	ADD	MTL STE	ADD PT II 278	18-11-43
		S.O.S. TO C.(B)TC /43 <del>SHERBROOKE</del>	Pte	9 Dec 43	"	"	" 296	9 Dec 43
		Pris sur l'effectif	"	10-12-43	CI45	Sorel, Q.	CI45 PtII 290B	11-12-43.
TC.45		Granted Xmas Leave from 22-12-43 to 27-12-43 & subs. allow. \$0.50 per day (5 days)	"	22-12-43	"	"	" " 296	18-12-43
"		SOS on posting to TC.A-13, Valcartier	"	26-2-44	"	"	" " 48	26-2-44
		ATTACHED TO A.I.T.C. A-13 ON TRANSFER FROM: <i>B.T.C. 45 Sorel</i>	"	27-2-44	A.I.T.C. A-13	VALCARTIER CAMP. P. Q.	" " 50	28-2-44
		Was admonished for AWL from 0100 hrs., 3 Apr 44 to 1900 hrs 4 Apr 44 Tot. Abs. 1 day 18 hours. Forfeits 2 days' pay under Art 149(I)(a) P.R.&I. 1939	"	5-4-44	"	"	" " 84	8 Apr 44
		Att'd f.a.p. to CD & MS	"	18 MAY 44	"	"	" " 119	19 May 44
		Att. fap from A-13 CICTC to att. dvr IC course	"	19 May 44	CD&MS	Woodstock	" 121	30 May 44
		Ceases att. fap from A-13 CICTC on proceeding to S-9 CAMS	"	30 Jun 44	"	"	" 147	30 Jun 44
		Attached f.a.p. from A-13 CICTC (Reporting from S-5 CD&MS)	Pte.	1 Jul 44	CAMMS	LONDON	D.O.# 150	3 July 44
		Ceases to be att. f.a.p. from A-13 CICTC (Proceeding to S-5 CD&MS)	"	12 Aug 44	"	"	D.O.# 183	12 Au

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

CERTIFICATE OF MEDICAL EXAMINATION

20. Surname DUFRESNE Christian Names GEORGES ANDRE.  
 Reception Centre D.D. 4 Military District M.D. 4 Date 15 Nov. 1943.  
 The medical examination is divided into three parts. The history in Part I, item 24, (a) to (z), is taken by a Medical Officer. Part II sections items 25, 26, 27 and 28 are filled in by the respective Specialist. Part III is completed by the President of the Board.

21. Age 21 Eyes (Colour) Brown Hair Brown Height 5' 6" Weight 145  
 Identification marks and scars Scar on left knee.

22. Urinalysis (a) Albumen Neg (b) Microscopic (if albumen positive) (c) Sugar Neg  
 " recheck (a) " (b) " (c) Blood sugar

23. X-Ray No. R-360. Laboratory ARMY RECEPTION CENTRE DISTRICT DEPOT NO. 4 Report Neg

Part I. History

24. Have you now or did you ever have any of the following diseases?

(a) Eye trouble NO

(b) Nose, throat, sinus or ear trouble  
NO

Part II. Physical Examination

25. The Medical Officers will complete this part and indicate "negative" or describe positive findings.

Vision (without glasses) Rt. 20 Lt. 20  
 (with glasses) Rt. 20 Lt. A.S.

Hearing (C.V.) Rt. 20 Lt. 20

Ears (Drums) Rt. O.K. Lt. O.K.

Nose Normal Throat Normal

Sinuses Neg

Remarks and Diagnosis

Pulhems grading H 1 E 1

L. MASSE. Lt. R.C.A.M.C.  
 (Signature E.E.N.T. Specialist)

24. (Cont'd)  
 (c) Any broken bones or other injuries  
NO

Head injuries NO

(d) Spinal trouble YES

(e) Foot trouble NO

(f) Operations NO

(g) Ruptures NO

(h) Kidney or bladder trouble NO

(i) Gonorrhoea NO

(j) Varicose veins NO

(k) Haemorrhoids NO

(l) Rheumatism or joint trouble NO

Low back pain.

26. Cranium N

Spine N

Extremities N

Hernia N

Genito-Urinary N

Rectum N

Varicose Veins N

Feet N

Abdominal N

Remarks and Diagnosis

R.B.

Pulhems grading P 1 U 1 L 1

A. CARREAU. M.D. R.C.A.M.C.  
 (Signature of Surgeon)

CERTIFICATE OF MEDICAL EXAMINATION (cont'd.)

24. (Cont'd)
- (m) Tuberculosis ..... NO
- (n) Bronchitis or other lung trouble ..... YES  
Pleurisy 1942.
- (o) Asthma or Hay Fever ..... NO
- (p) Heart Disease ..... YES
- (q) Rheumatic Fever ..... NO
- (r) Kidney Disease ..... NO
- (s) Stomach, Bowel or Rectal trouble ..... NO
- (t) Diabetes ..... NO
- (u) Goitre ..... NO
- (v) Syphilis ..... NO
- (w) Fits or fainting ..... NO
- (x) Nervous disorders ..... NO
- (y) Have you been in the Active Army in this war? ..... NO
- (z) Are you now or have you in the past received disability pension or compensation? ..... NO

27. Physique :  
 Good Yes Fair ..... Poor .....

Chest :  
 Full expansion 38 Range of Expansion 2  
 Lungs: Normal. Percussion.....  
Auscultation: neg.

Heart: B.P. Systolic 120 Diastolic 80  
Normal. Pulse. 80.

Abdomen ..... Neg

Skin ..... Neg

Glandular Systems ..... Neg

Remarks and Diagnosis :  
Pleurisy 1942. ~~Slight~~ right side,  
No X-Ray at the time.

André S. Dupont  
 (Signature of Recruit)

PULHEMS Grading P. 1

A. KIMPTON, M.D. R.C.A.M.C.  
 (Witnessed by)

Rene MAILLE, Capt. R.C.A.M.C.  
 (Signature of Physician)

28. Psychiatrist's Report **Remarks and Diagnosis :**

Thinks has a heart disease, but is willing to forget it.

Accept for recheck.

Pulhems grading M 1 S 1

J.P. ALBERT, Capt. R.C.A.M.C.  
 (Signature of Psychiatrist)

**Part III**

29. Category (or profile) to be assigned.

Year of Birth	P	U	L	H	E	M	S
22	1	1	1	1	1	1	1

This category (or profile) is not to be changed.

See note (c).  
A.L. DELAHAYE, Maj. R.C.A.M.C.  
 (President of the Board)

30. (a) Vaccination — Inoculations Serodiagnostic tests to be initialled by M.O.

30. (b) Changes or confirmation in present category (or profile) to be signed by M.O. or President of Medical Board.

Date	Use one line and write plainly.	Date	P	U	L	H	E	M	S	Signature of M.O.
NOV 24 1943	<u>B. W. neg</u>	<u>11/24/43</u>								<u>[Signature]</u>
	<u>TAB. T ICC</u>	<u>11/25/43</u>								<u>[Signature]</u>
	<u>VACCINATION</u>	<u>11/25/43</u>								<u>[Signature]</u>
NOV 28 1943	<u>7-1-14-2-1-20. 9A/B. 11/28/43</u>	<u>11/28/43</u>								<u>[Signature]</u>

NOTE: (a) Any corrections to entries made must be initialled by the officers making them.  
 (b) (i) Category (or profile) in Part III (29) is not to be changed after once assigned.  
 (ii) Subsequent changes in category (or profile) to be entered in Part III (30) (b).  
 (c) Officers making changes must enter their rank. Corrections ARE NOT to be written OVER original entry.

FURTHER INFORMATION AND FOLLOW-UP

D-650525 Pte. DUFRESNE, Andre

First Interview: # 4 D.D. 17 Nov 43.

P U L H E M S      DATE  
22 1 1 1 1 1 1 1      ( 26-1-44 )

" M " Score: 104 IV 18 13 10 18 14 3 9 19 - ( 41 32 31 ) ( F )

MILITARY BACKGROUND:

Reported as N. R. M. A. at D.D.# 4 - on 15 th. Nov. ' 43. Transferred to this Training Centre on : 9 th. Dec. ' 43, to undergo basic which is nearly completed. - Conduct has been good. -

PRESENT SITUATION:

Referred to A. E. as a routine check on original allocation ( Inf. Auto. Gr. N. T. ) and as being pointed out for a psychiatric recheck. -

This man has primary education but has some army learning ability. Seems quite well adapted to army life and appears willing to cooperate. Complains of heart troubles: strong palpitation when asleep and during exercises. Offered some signs of nervousness: little tremors on hands extended and sweating palms.

Referred to psychiatrist on : 26-1-44. Diagnosis: N. P. D. - Specialist recommended: " Refer to M. O. for investigation of effort syndrome ". No change on Pulhems profile yet.

- SUGGESTION:
- 1 - INFANTRY ( R )      AUTOMOTIVE GROUP      T. T.
  - 2 - Refer to M. O. re: effort syndrome. -
  - 3 - If physically fit should carry on and proceed to Advanced Training. -

11 th. Feb. ' 44 C. I. (B) T. C. # 45, Sorel, Que.

*J. P. Goulet*  
J. P. GOULET ( MAJOR )  
Army Examiner.

D-650525 Pte. DUFRESNE, ANDRE. (6th Inf) A.(I).T.C. A-13, Valcartier Camp.

Interview during 5th week of Advance Training.

He could have done much better on "M" test. Completed grade VI in school instead of grade IV as mentioned above. He did not do his best because he thought he would be discharged. Now he want to take a Mechanic course. Does not like Infantry. Driver I.G. upgrading to Motor Mechanic.

March 31-44.

*P. Trepantier*  
(P. TREPANTIER) Lieut,  
Army Examiner, A-13.

A.(I).T.C. A-13 Valcartier P.Q.

Having completed corps training with C.I.C., despatched to Woodstock Ont., for trade trainee as Driver i/c.

May 16th, 1944.

*O. Lamere*  
(O. LAMERE), Capt.  
Army Examiner, A-13.

D-650525 Pte. DUFRESNE, A.

In survey conducted at the end of 4th week of training, this man was found suitable for upgrading. He is being transferred to Tracked Wing and will be trained as Driver Mechanic (Carrier).

20 Jun 44 S-5 C.D.& M. School, Woodstock *G. A. Gray* Lieut.  
(G. A. Gray) Army Examiner

D-650525, Pte Dufresne A. (9th Inf) C.(I).T.C. A-13 Valcartier.

Examination of the foregoing and interview indicate suitability for operational duty as Driver i/c. Auth: OS-033 (DPQ) dated 18 sept 44.

5 Oct 1944.

*F. Lebel*  
(F. LEBEL), Lieut.  
Army Examiner, A-13.

This form will accompany the soldier's regimental documents at all times.

DEPARTMENT OF NATIONAL DEFENCE

INFANTRY

Arm or Corps

(Army)AUTOMOTIVE GROUP

TRADE TRAINEE Trade (if Tradesman or Trade Trainee)

# Personnel Selection Record

Work in Arm (if Non-Tradesman)

I. D-650525 Pte. DUFRESNE André R 21  
 Regt. No. Rank Name (surname first) A or R Age Med. Cat.  
French English Montreal South, Que. 17 Nov 43  
 Main Language Other Language(s) Place (Unit) Interviewed Date Interviewed

II. Revised Examination "M" Form A D.D.4 15 Nov 43 F.T. Brown Major  
 Place Tested Date Tested By Whom  

<u>104</u>	<u>IV</u>	<u>18</u>	<u>13</u>	<u>10</u>	<u>18</u>	<u>14</u>	<u>3</u>	<u>9</u>	<u>19</u>	<u>41</u>	<u>32</u>	<u>31</u>	<u>French</u>		
Total	Group	Subtests	1	2	3	4	5	6	7	8	Subtotals	1-3	4-5	6-8	English or French

Other Tests FULHEMS  
Call No. -E-127635 22 1111111 15-5-44

III. Educational Background Started school at age 8 and completed 4th grade in rural French school in Quebec. Repeated 1st and 2nd grades. Stopped school at 15 because he wanted to work.

### IV. Occupational Background

3 years - apprentice mechanic in uncle's garage.  
 3 years - mechanic in another garage - 60¢ per hour. Left on N.R.M.A. call.

### V. Military Background

Reported for N.R.M.A. at D.D.4 15 Nov 43  
 T.O.S. at D.D.4 - 15-Nov-43  
 Attitude to Army: passive.

### VI. Other Personal History and Appraisal

Dufresne seems to be a friendly, nervous young man with a good build - 5'6" and 145 lbs. Good appearance. Seemed quite tense during interview. Has low average ability according to army standards. Had no health complaints.

Single. Parents are living but mother is an invalid. Has 5 brothers and 2 sisters. Seems sociable and has friends of both sexes. Sports: tennis, baseball, hockey, skiing. Won a cup for skiing. Enjoys reading - principally adventure.

Dufresne has had considerable experience as a mechanic although his knowledge of tools is surprisingly low. He appears to be worth a trial as a driver i/c and may merit further mechanical training. He seemed satisfied with allocation.

### VII. Recommendations

INFANTRY

AUTOMOTIVE GROUP

TRADE TRAINEE

(Signed) N.C. Hayden  
 Army Examiner

(A.W.G.)

N.C. HAYDEN 2/Lieut.

Name DUPRESNE, G.A.

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc.—

	Rank Shown	Effective Date	Unit	Place	Authority	
					D.O. Number	Dated
Att. fap from A-13 CITC (reporting from S-9 CAMMS)	Pte.	13 Aug 44	CD&MS	Woodstock	185	17 Aug 44
Qual. Dvr. IC class 111(W) and class 111(UC)	"	24 Aug 44	"	"	190	24 Aug 44
Ceases att. fap from A-13 CITC	"	25 Aug 44	"	"	191	25 Aug 44
Ceases att. F.A.D. to S-5 C.D.&MS.	"	26 Aug 44	A-13	Valcartier	206	29 Aug 44
<i>Granted furlough till 19 Sep 44</i>	"	<i>19 Sep 44</i>	"	"	<i>209</i>	<i>19 Sep 44</i>
Granted emb leave till 0700hrs 27 sep 44	"	23 sep 44	"	"	227	22 sep 44
Issued warrant transport No. A775111	"	22 sep 44	"	"	230	26 sep 44
<i>To receive \$ 1.40 per diem</i>	"	<i>15 May 44</i>	"	"	<i>231</i>	<i>21 May 44</i>
<i>To receive \$ 1.50 per diem</i>	"	<i>15 May 44</i>	"	"	<i>231</i>	<i>21 May 44</i>
S.O.S. to No. 2 D.D.	"	6 Nov 44	A-13	Valcartier	266	7 Nov 44
T.O.S. No. 2 D.D. from A.13 A.I.T.C.	"	7 Nov. 44	#2 D.D.	Toronto	297-21	9 Nov. 44
Detailed for duty to the Hamilton International Harvester Co. Ltd.	"	14 Nov. 44	"	"	305-31	18 Nov. 44
<b>XMAS LEAVE AND RAT. ALL. 22- 27 DEC-44</b>						
A.W.L. from 0730 hrs.	"	<del>27 Dec. 44</del>	"	"	D.O. 343	28 DEC 44
Ceases to be detailed for duty to Hamilton International Harvester Co. Ltd.	"	<del>28 Dec. 44</del>	"	"	5-30	6 Jan 45
AWL from 0730 hrs. 27 Dec. 44. Ret. from AWL at 0730 hrs.	"	28 Dec. 44	"	"	3-25	4 Jan 45
<b>Admonished</b> Reprimanded for an offence under Sec. 15 (1) A.A.A.W.L. from 0730 hrs. 27 Dec. 44 to 0730 hrs. 4 Jan 45 ( 8 days) Forf. 8 days pay under F.R.&I. 149 (1) (a) Total forf. 8 days pay	"	4 Jan. 45	"	"	4-27	5 Jan 45
On Command to perform Industrial Duty to the International Harvester Co. Hamilton	"	4 Jan 45	"	"	6-16	8 Jan. 45
<b>S. O. S. No. 2 D, D-TO NO 2 GEN, EMPL, COY</b>	"				34-20	5 Feb. 45
T.O.S. from #2 D.	"	4 Jan 45	"	"	<del>7-30</del>	<del>9 Jan 45</del>
Recd. lv & Rat. Allice. 20-23 May 45 incl.	"	8 FEB 45	No. 2 D.D.	TOR.	D O 37	8 FEB 45
T.W. No. A-891012	"	9 Feb 45	#2 GECoy	Toronto	do 27	9 Feb 45
Priv. lv. & ration allice. 18 Jun 45 to 1 July 45	"	20 May 45	"	"	105	21 May 45
AWL from 0600 hrs.	"	"	"	"	109	25 May 45
Retd. AWL 1215 hrs.	"	18 Jun 45	"	"	117	4 Jun 45
Awarded 4 days C.B. for an offence under Sec. 15-1 AA AWL from 0600 hrs. 3 Jul 45 to v/s at 1215 hrs. 7 Jul. Tot. Abs. 4 days 6 hrs.	"	3 Jul 45	"	"	141	5 Jul 45
	"	7 Jul 45	"	"	146	12 Jul 45
15 min. Forf. 5 days pay PR&I 149-1-a	"	10 Jul 45	"	"		147 13 Jul 45

Regimental No. D-650525 Rank Private

Sheet No. two

M.F.M. 1 & 2 (a)  
300M-5-43 (154)  
H.Q. 1772-39-1646

Name DUPRESNE, Georges Andre

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc.—

Awarded 72 hours Detention for an offence under A.A.15-1 AWL from  
0600 hrs. 24Jul45 to v/s at 2300 hrs. 24Jul45 (Tot. Abs. 17 hrs.) Forf  
1 days' pay FR&I 149-1-a Forf. 3 days' pay FR&I 149-1-b. (~~Extra~~)  
Tot. Forf 4 days' pay  
AdysAccum. Lv. with Pat. Allee 7-10Aug45  
**SOS DECEASED; INJURED IN MOTOR CAR ACCIDENT; DIED 1230 hrs.**

Rank Shown	Effective Date	Unit	Place	Authority	
				D.O. Number	Dated
Pte	27Jul45	42 GECoy	Toronto	158	30Jul45
"	7Aug45	"	"	163	4Aug45
"	19Aug45	"	"	174	20Aug45

# 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

## Section A—GENERAL INFORMATION

1. (a) Print name in full..... (b) Reg'l. No. 450505  
2. (a) Arm of service..... (b) Unit..... (c) Rank.....  
3. (a) Date of birth 2 April 22 (b) Have you any dependents? no (c) Place of residence MATHELOE, QUE.  
4. (a) Place of enlistment..... (b) Date of enlistment Nov. 19, 43

PLEASE  
LEAVE  
BLANK

## Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 15 yrs. old (b) Were you attending school or college up to the time of enlistment? no  
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) 4 yrs. Pub. Sch.  
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? yes (b) If so, for what occupation? machinist (c) Did you finish it? yes (d) If you did not finish it, how long did you serve at it? 3 yrs.  
9. (a) What languages do you speak fluently? French, English (b) What languages do you read well? French

## Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) Working (b) At time of enlistment of what trade union or professional society were you a member? no

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

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

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

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

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

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

18. Name of employer LA BRASSERIE AUTO SERVICE Address MATHELOE, QUE.  
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) CARICER  
20. (a) Your specific occupation MACHINIST (b) Number of years' experience at this occupation with any employer 1 yrs.  
21. (a) Did your employer promise definitely to give you employment on discharge? yes (b) Did your employer refuse to promise you employment on discharge? no (c) Do you wish to return to your former employment? yes

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

22. (a) State nature of business, or professional practice nil (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? (b) Do you feel competent to operate a farm? (c) If so, in what kind of farming?  
25. (a) Were you born on a farm? (b) How many years' actual farming experience have you had? (c) In what provinces did you have experience?

## Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? yes  
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.) back to former trade.  
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form. nil



DO NOT FORWARD THIS FORM TO OTTAWA

This completed form MUST be returned immediately to the Registrar concerned.

(See man's "Order—Medical Re-examination" for Registrar's address)

MEDICAL REVISION BOARD CERTIFICATE

DEPARTMENT OF LABOUR—NATIONAL SELECTIVE SERVICE, MOBILIZATION SECTION

NATIONAL RESOURCES MOBILIZATION ACT, 1940

REGISTRATION DIVISION "E"  
OCT 18 1943  
DEPARTMENT OF LABOUR  
NATIONAL SELECTIVE SERVICE  
MOBILIZATION SECTION  
MONTREAL, QUE.

Order Serial No:  
E-127635

← IMPORTANT—MEDICAL REVISION BOARD  
Please see man's "Order—Medical Re-Examination" and insert serial number here.

PART I

Name in full..... **DUFRESNE** ..... **André** .....  
(Print in block letters) (Surname) (Given names)  
Born: Place..... **Bonsecours** ..... **Que.** ..... Date **2-4-22** .....  
(City, town or village) (or other country) (Town or City) (Province)  
Permanent Postal Address..... **Waterloo,** ..... **Que.** .....  
(Street and Number) (Rural Route and Post Office) (Town or City) (Province)

The following questions must be answered "Yes" or "No".

Have you ever suffered from any of the following:—  
Rheumatism..... **yes** ..... Tuberculosis..... **no** ..... Bronchitis or Asthma..... **no** ..... Heart Disease..... **yes** .....  
Kidney or Bladder Disease..... **no** ..... Stomach or Intestinal Trouble..... **no** ..... Rupture..... **no** ..... Varicose Veins..... **no** .....  
Trouble with feet..... **no** ..... Nasal Trouble..... **no** ..... Ear Trouble..... **no** ..... Eye Disease..... **no** ..... Fits..... **no** .....  
Nervous or Mental Disease..... **no** ..... Syphilis..... **no** ..... Gonorrhoea..... **no** ..... Have you ever worn Glasses?..... **no** .....  
Have you ever been rejected for Military Service?..... **no** ..... Are you in receipt of disability pension or compensation?..... **no** ..... If so, from whom?.....  
Place..... **Montreal** ..... Province..... **Que.** ..... Date..... **Oct. 12, 1943.**  
(City, town or village)

(Sgd.) **André Dufresne.**

Man examined must sign here in presence of medical revision board → Signature of man.

PART II **E.N.Th. neg. J. Lapointe, Capt.**

Examiner's remarks. Give a clear and concise history of any of the above conditions where the answer is "Yes"  
**Heart and lungs neg. - Physical neg.**

Physical examination (the man must be stripped). **1 Vacc. left.**  
1. Height..... **5** feet..... **7** inches. 2. Weight..... **144** pounds  
3. Complexion..... **Med.** ..... Colour of eyes..... **Brown** ..... 4. Development..... **Good** ..... } good }  
Colour of hair..... **Brown** ..... } fair }  
} poor }  
5. Chest measurement—Girth on full expansion..... **34** ..... inches  
Range of expansion..... **2** ..... inches  
6. (a) Vision without glasses—right eye..... **20/20** ..... left eye..... **20/20** .....  
(b) If in possession of glasses: Vision with glasses—right eye..... ..... left eye.....  
7. Hearing: right ear..... **C.V. 20** ..... left ear..... **C.V. 20** .....  
8. Mouth and teeth..... **Good.** ..... **Ref. normal.** .....  
Describe dentures, if any.....  
9. If the above named man suffers from any disability, whether congenital or pathological, which places him in a category lower than "A", a clear and concise description of such disability is to be given here:—

PART III

We have examined the man in accordance with the "Physical Standards and Instructions for the Medical Examination of Recruits" and certify that he is fit for:—

Category "A"..... **"A"** ..... Signature..... **N.B. Freedman, Capt.** .....  
"B I"..... ..... Signature..... **J.E. Racicot, M.D.** .....  
"B II"..... ..... Signature..... **S. Venne, M.D.** .....  
"C I"..... ..... Date:..... **Oct. 12th, 1943.** .....  
"C II"..... .....  
"D"..... .....  
"E"..... .....

IMPORTANT:—No copy of this certificate is to be in the possession of any unauthorized person.

INSTRUCTIONS

1. Only duly appointed examining physicians of a medical revision board may examine the man and sign this certificate.
2. The members of the medical revision board must examine the man and complete the certificate herein contained in accordance with the "Physical Standards and Instructions for the Medical Examination of Recruits".
3. THE MEDICAL REVISION BOARD, IMMEDIATELY UPON COMPLETING THIS FORM AND CERTIFICATE, MUST MAIL OR DELIVER IT TO THE REGISTRAR OF THE DIVISION OF THE DEPARTMENT OF LABOUR—NATIONAL SELECTIVE SERVICE, MOBILIZATION SECTION, WHOSE NAME AND ADDRESS APPEAR IN THE UPPER LEFT HAND PORTION OF THE MAN'S "ORDER—MEDICAL RE-EXAMINATION".
4. The Registrar of the Division in which the man re-examined resides, **immediately** upon receipt of this form properly completed, will stamp hereon the date the form has been received by him, and will prepare or have prepared, four exact typewritten copies of this original, showing upon the four copies the date the original was received from the medical revision board. Each such copy will be certified as a true copy by the Registrar or by a person duly appointed by him for this purpose.
5. The Registrar will retain the first typewritten copy. He will attach a copy to the original medical revision board certificate and immediately forward both the original certificate and the copy to the Supervisor of Mobilization, Department of Labour—National Selective Service, Mobilization Section, Ottawa. The third copy is to be sent to the representative of the Department of National Defence. The fourth copy, if the man re-examined has been found fit for military training and is being notified to report to a district depot or a training centre, to the Officer Commanding the district depot or the military training centre to which the man has been instructed to report. If the last typewritten copy is not so disposed of, it shall be retained by the Registrar.

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Section 7 (6) of National Selective Service Mobilization Regulations reads as follows:—

"7 (6) When the accuracy of the 'Medical Examination and Certificate Form' completed by an examining physician is questioned, the Registrar may order the man concerned to submit himself for further medical examination or examinations by a medical revision board of three examining physicians appointed by the Minister at such time and place as the Registrar shall indicate."

Section 35 of National Selective Service Mobilization Regulations, 1940 reads as follows:—

"35. An examining or other physician, a member of a medical revision board or any other physician acting under these regulations who, in furnishing information under these regulations, knowingly makes any inaccurate statement or signs an inaccurate certificate is guilty of an offence and liable on summary conviction to imprisonment for a term not exceeding twelve months, with or without hard labour, or to a fine of not less than fifty dollars and not exceeding two hundred dollars or to both such imprisonment and such fine."

*(This space is reserved for Registrar and Medical Adviser)*

On the strength of the medical revision board certificate herein contained, we recommend that the man whose name appears on this certificate be issued a certificate of physical unfitness for military training.

.....  
(Signature of Medical Adviser)

.....  
(Signature of Registrar)

DATE: .....

APPROVED:

DIED IN CANADA.  
19-8-45

N.R.M.A.

AWARDS—CANADIAN ARMY (ACTIVE)

1984

M

E. G.

500M-1-44 (3407)  
H.Q. 1772-45-8

DUFRESNE, Georges Andre		D-650525	Sol.	FILE No. 869-D-6247 Toronto. #2 Gen. Emp. Coy.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS)                      NO.                      DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
War Medal	4431                      17.4.50

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON

ENTITLED TO Mr. Adolphe DUFRESNE (FATHER)

ADDRESS:

18 Ellice St.,  
WATERLOO, Que.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mme. Bernadette DUFRESNE, (M.F.M.5) (FRENCH)

1984

ADDRESS: 18 Ellice St., WATERLOO, Que.

MEMORIAL BAR

(1)

DATE DESP.....

REGN. NO.....

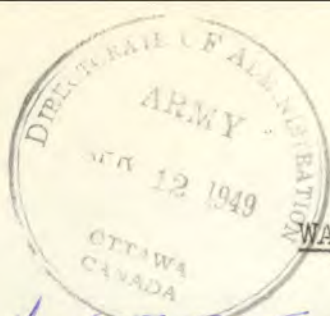
2360

(2)

(3)

DESP. SEP 25 1945

REGN No. 21286



File No 869-D-6247

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. 1-628525 Name Dufresne, George Andre  
Rank on Discharge Pte Date of Discharge 19 Aug 45  
Authority for Discharge or Retirement Deceased

Served in: Non-qualifying service

Canada from 15 Nov 43 to 19 Aug 45  
(seid - injured in motor car accident)

United Kingdom from \_\_\_\_\_ to \_\_\_\_\_  
from \_\_\_\_\_ to \_\_\_\_\_

Italy from :- \_\_\_\_\_ to \_\_\_\_\_

Northwest Europe from \_\_\_\_\_ to \_\_\_\_\_

----- from \_\_\_\_\_ to \_\_\_\_\_

----- from \_\_\_\_\_ to \_\_\_\_\_

Eligible for award of:

~~1939 - 45 Star~~ \_\_\_\_\_

~~-----~~ \_\_\_\_\_

~~Italy Star~~ \_\_\_\_\_

~~France-Germany Star~~ \_\_\_\_\_

~~Defence Medal~~ \_\_\_\_\_

War Medal OK \_\_\_\_\_

~~Canadian Volunteer Service Medal~~ \_\_\_\_\_

~~with Clasp~~ \_\_\_\_\_



Verified by Georgette Patrice

Date 6 July 46

Carded JUL 9 1946

NRD

175

WR

# TRADE TRAINING

Driver I.C.

Reg'tl No. D-650525 Rank pts Name DUPRESNE A. Trade upgrading to Motor Mechanic

1. ENTRIES BY PERSONNEL SELECTION OFFICER AND O.C. UNIT OR ADVANCED T.C.	2. TECHNICAL SCHOOL	3. ARMY TRADES SCHOOL
Unit or Adv. T.C. <u>A.(I).T.C. A-15, Valcartier Camp.</u> Date <u>Mo. 21-44</u> Recommended <u>P. TR PANTIER Lieut. Army Examiner</u> Concurred..... Commanding Officer	Course..... Date of Entry..... Date of Leaving..... Rating (Percentage)..... REMARKS:..... Principal	Course..... Date of Entry..... Date of Leaving..... Rating (Percentage)..... REMARKS:..... Commandant
4. MECHANICS TRAINING CENTRE Course <u>DVR MECH CARRIER</u> Date of Entry <u>1 Jul 44</u> Date of Leaving <u>11 Aug 44</u> Rating (Percentage) <u>8.</u> REMARKS:..... Commanding Officer <u>Major</u>	5. D. & M. SCHOOL Course <u>Dvr Mech (Carrier)</u> Date of Entry <u>14 Aug 44</u> Date of Leaving <u>25 Aug 44</u> Rating (Percentage) <u>recm'd as Dvr</u> REMARKS: <u>Completed 2 /Mech wks adv (UC) driving Dvr IC 111 (UC)</u> Commanding Officer	6. OTHER CENTRE Name <u>S-5 C.D. &amp; M. School</u> Location <u>Woodstock, Ont.</u> Course <u>Dvr I.C.</u> Date of Entry <u>22 May 44</u> Date of Leaving <u>30 Jun 44</u> Rating (Percentage) <u>Dvr IC 111 (W)</u> REMARKS:..... Commandant <u>Officer i/c Trades Trng.</u>
7. ADVANCED TRAINING CENTRE ARMY APPLICATION OF TRADE No. of T.C. .... Advanced Course..... or Trained Soldier Coy..... Date of Entry..... Date of Leaving..... Rating (Percentage)..... REMARKS:..... Commanding Officer	8. TRADE TEST Trade..... Class..... Date..... Where Tested..... TRADE TEST BOARD— 1. <u>President</u> 2. <u>Member</u> 3. <u>Member</u> Commanding Officer	9. DISPOSAL Where Despatched..... Date..... (Further remarks or records on reverse side)

F.T.  
FOR TRANSLATION PLEASE

21st August, 1945.

Dear Mr. Dufresne:

It was with deep regret that I learned of the death of your son, D.650525 Private Georges Andre Dufresne, who died while in the Service of his Country in Canada on the 19th day of August, 1945.

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.

Yours sincerely,

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

EMD

*Aut*

Mr. Adolphe Dufresne,  
18 Ellice Street,  
Waterloo, Que.

12

12

Ref B7-473

\*N.B.—As this form is applicable to any Board of Officers or Committee or Court of Inquiry, the blank is to be filled in accordingly.

The signature of each Officer composing the Board, etc., should appear on the last page of this form in the space provided therefor.

PROCEEDINGS of a\* COURT OF INQUIRY

assembled at TORONTO, ONTARIO.

on the 30th day of August 1945

by order of Major A.H. Woods, O.C. #2, General Employment Coy.

for the purpose of inquiring into and reporting upon the circumstances surrounding the death of D-650525 Pte. DUFRESNE, GEORGES ANDRE, on or about the 19th August 1945.

PRESIDENT

(Thos. Bouckley) Capt.  
Second in Command, #2, General Employment Coy.  
MEMBERS

(W.T. Smith) Lieut.  
Admin: Off:  
#2, General Employment Coy.  
(J.W. Gibson) Lieut.  
Platoon Comd.  
#2, General Employment Coy.

UNCHARGED

The Court having assembled pursuant to order, proceed to hear the evidence.

First Witness. D-650446, Pte. ROCHON, J.M. having been duly sworn states:-

At Burlington Beach, at approximately 0230 hours, 19 August 1945 I had been to a dance with Mrs. Reeves and Andre Dufresne. We were escorting Mrs. Reeves to her home, and I left them to go to a restaurant to buy some Cigarettes. I then went to Mrs. Reeves's house, and while there I heard a noise on the highway, and a girl came from across the road and told me there had been an accident. I went to the accident and saw Andre Dufresne lying on the side of the road. Mrs. Reeves was lying about thirty feet from him.

Question #1. How long have you known Andre Dufresne?  
 Answer #1. I met him a year ago in Valcartier, and we have been stationed together ever since.

Question #2. How long was it before a Doctor arrived?  
 Answer #2. About Five or Ten minutes.

Question #3. How long was it before an ambulance arrived?  
 Answer #3. A civilian ambulance came in about half an hour and took Dufresne away.



Second Witness.

Miss. FRANCIS RUTH ATKINS, Aldershot having been duly sworn states:-

Shortly after 2 A.M. on the 19th August 45, P.O. Charles Sovereign and I were proceeding South in a car loaned by Clayton Maracle on highway No.2. approximately  $\frac{1}{2}$  mile past the junction of Highway No.20 and the Queen Elizabeth Highway. We slowed down to nearly a stop as we intended to go into a small restaurant on the right hand side, but it was closed, and we started up again and a few hundred yards on two people dashed out directly in front of us. P.O. Sovereign applied the brakes and swerved to the left in an effort to avoid hitting them, but it was useless as we did not have enough warning. We came to a stop on the other side of the road and found the woman we had hit was still clinging to the front of the car. I was told later that the soldier was lying back a few yards at the left of the road, but I did not see him as I was rushed away from the scene by a girl who worked in a restaurant just ahead of the scene of the accident.

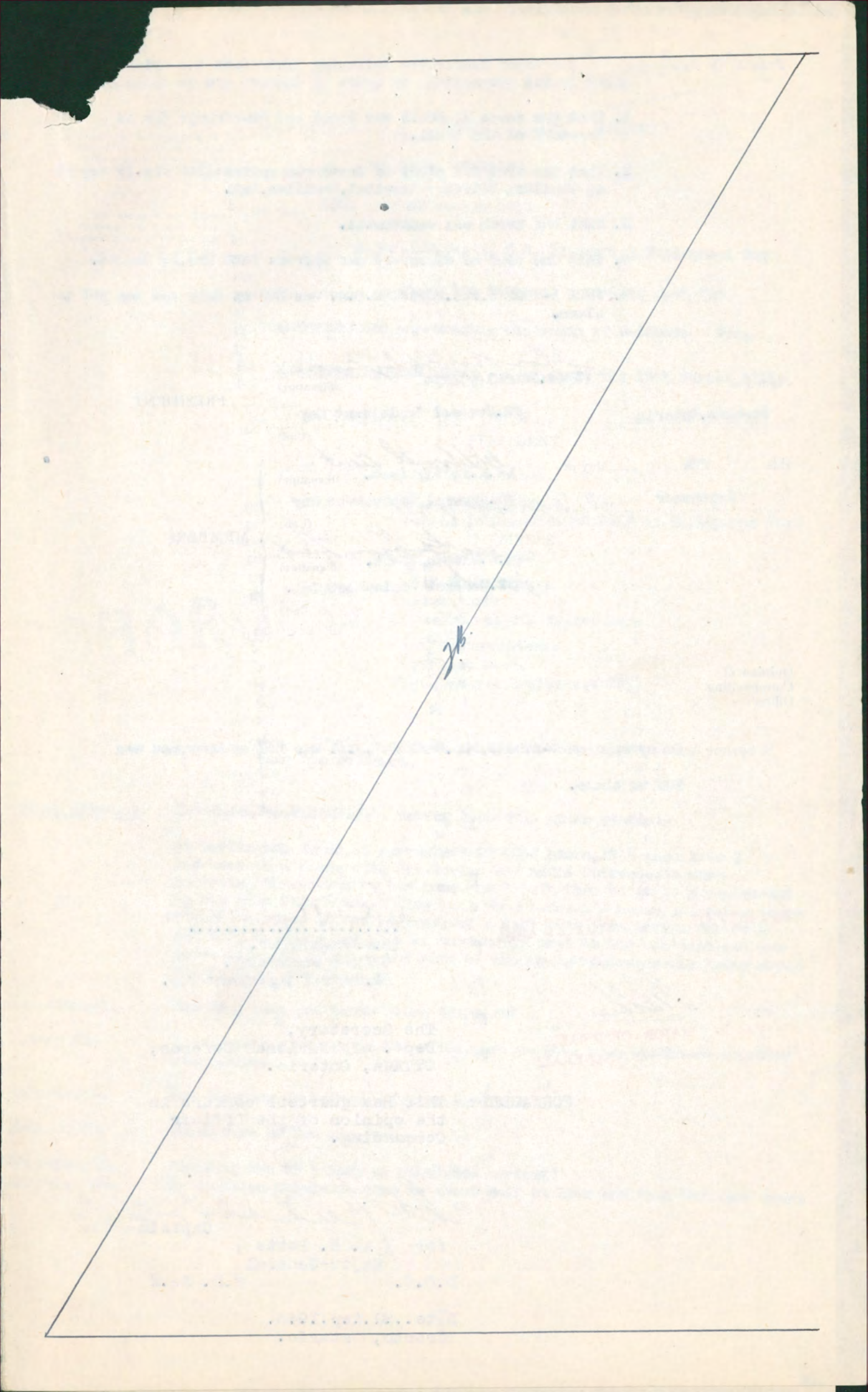
Third Witness.

Mr. R.D. BOOK, having been duly sworn states:-

At approximately 2.35 A.M. 19th August 1945 I was driving my car North bound on No.20 Highway, about 40 ft. in rear of an American car, when I noticed two people, a man and a woman walking arm and arm in the middle of the highway crossing from West to East diagonally and waiting for me to pass. At the moment the front end of my car had passed them a South-bound car struck the two pedestrians as they were opposite the door of my own car. I proceeded on, approximately 75 ft and swung completely around on the highway to make sure that it was not a Hit-and-Run driver. I stopped on opposite side of the highway where the injured pedestrian was lying, and noticed by the flow of blood from his mouth that he was very seriously hurt. I summoned a person who came from a nearby cottage to call a doctor immediately. I had previously noticed before the accident the Beach Police Cruiser car in the vicinity of Dyne's Hotel approx:  $1\frac{1}{2}$  miles South of the scene of the accident, and remembering this returned to notify them. They were not there but passed my car on the way back to the scene of the accident. When I arrived back at the scene of the accident again I found the Burlington and Beach Police officers officiating. I then gave them the a/m details relating to that which I had witnessed.

Following are listed Appendices attached:-

- App. "A" Death Certificate.
- App. "B" W.F.B.371.
- App. "C" Certif: of Coroner re "No Inquest"
- App. "D" Letter from Crown Attorney.
- App. "E" Police Report.
- App. "F" Medical Report.
- App. "G" Hospitalization Cost.
- App. "H" Pay and Allowances.
- App. "I" Diagram of scene of Accident.



FINDING IF REQUIRED:—

The Court deduce the following facts from the evidence shown in the proceedings of Court of Inquiry are as follows:

1. That the cause of death was Shock and Hemorrhage due to Fracture of the Skull.
2. That the time and place of death was approx: 1240 hrs, 19 Aug 45 at Hamilton Military Hospital, Hamilton, Ont.
3. That the death was accidental.
4. That the time of discovery was approx: 0240 hrs, 19 Aug 45.
5. That D-650525, Pte. DUPRESNE, G.A. was NOT on duty and was NOT to blame.

Signed at

Toronto, Ontario

this 7th day of September 1945

*Thos. Bouckley Capt.*  
(Thos. Bouckley) Capt (Signature)

#2. General Employment Coy (Unit)

PRESIDENT

*W. T. Smith Lieut.*  
(W. T. Smith) Lieut. (Signature)

#2. General Employment Coy (Unit)

*J. W. Gibson Lieut.*  
(J. W. Gibson) Lieut. (Signature)

#2. General Employment Coy. (Unit)

MEMBERS

Opinion of Commanding Officer:—

In my opinion D-650525, Pte. DUPRESNE, G.A. was NOT on duty, and was NOT to blame.

APPROVED

NOV 28 1945

*A. H. Woods*  
.....  
(A. H. Woods) Major.  
Officer Commanding.  
#2. General Employment Coy.

APPROVED:

*J. B. Hearse*  
MAJOR-GENERAL  
ADJUTANT-GENERAL

The Secretary,  
Dept. of National Defence,  
OTTAWA, Ontario.

FORWARDED: This Headquarters concurs in the opinion of the Officer Commanding.

*A. E. Potts*  
Captain  
for (A. E. Potts)  
Major-General

D.O.C. M.D. No. 2

Date..20.Sep.1945.  
Toronto, Ontario.

APP'E"

Burlington, 24 Aug 45.

At 2 A.M. Aug.19th an accident occurred at Station #26, Burlington Beach in which Alice Mary Reeves was killed outright and Pte. Dufresne.A. died 11 hours later.

F.O.Sovereign was operating the vehicle at the time it struck the A/M deceased. Ruth Atkins of Aldershot was driving with Sovereign at the time. The vehicle in question was owned by Clayton Maracle, (a flying officer).

The evidence would show that the two deceased were walking arm in arm angling across the highway and were struck at a point almost in the centre of the pavement and were dragged approx: 100 ft and 131 ft for the man and woman respectively. When the car came to rest off the pavement on the driver's wrong side of the road, the woman was found partly under the car, the man had fallen off.

There were no skid marks on the pavement that would indicate that the brakes of the car had been applied. The condition of the car was, as follows: (a) Brakes would not work unless the foot pedal was pumped. (b) There was no horn on the car. (c) No windshield wiper and the windshield itself was very dirty. (d) The left headlight was broken with the accident and the right one, remaining intact, was later tested as being "fair". There were no tail lights on the car.

The model of vehicle in question was a 1932 Plymouth coupe. It was bearing licence number "Y 2236".

An eye witness to the accident was R.D.Book (Beach address. cottage 162, Station #26 Burlington) (Permanent address: 28 London St.N., Hamilton)

Witnesses likely to be summoned are:

- (1) Dr. Russell Dingle - Burlington (Coroner)
- (2) Dr. James Goodbrand - Burlington
- (3) Ruth Atkins - Aldershot.
- (4) R.D.Book - Cottage #26. Burlington Beach.
- (5) Constables, K.Scott  
H.Hunt
- (6) Chief Constable Smith, L.J.
- (7) Rob't Rookes - Burlington.

The above observations were made by Chief Smith & Constable Scott.

Signed: Lee.J.Smith  
Chief Constable.

Certified True Copy *Thos Bouckley* .....Capt.  
(Thos Bouckley)  
President .  
Court of Inquiry.

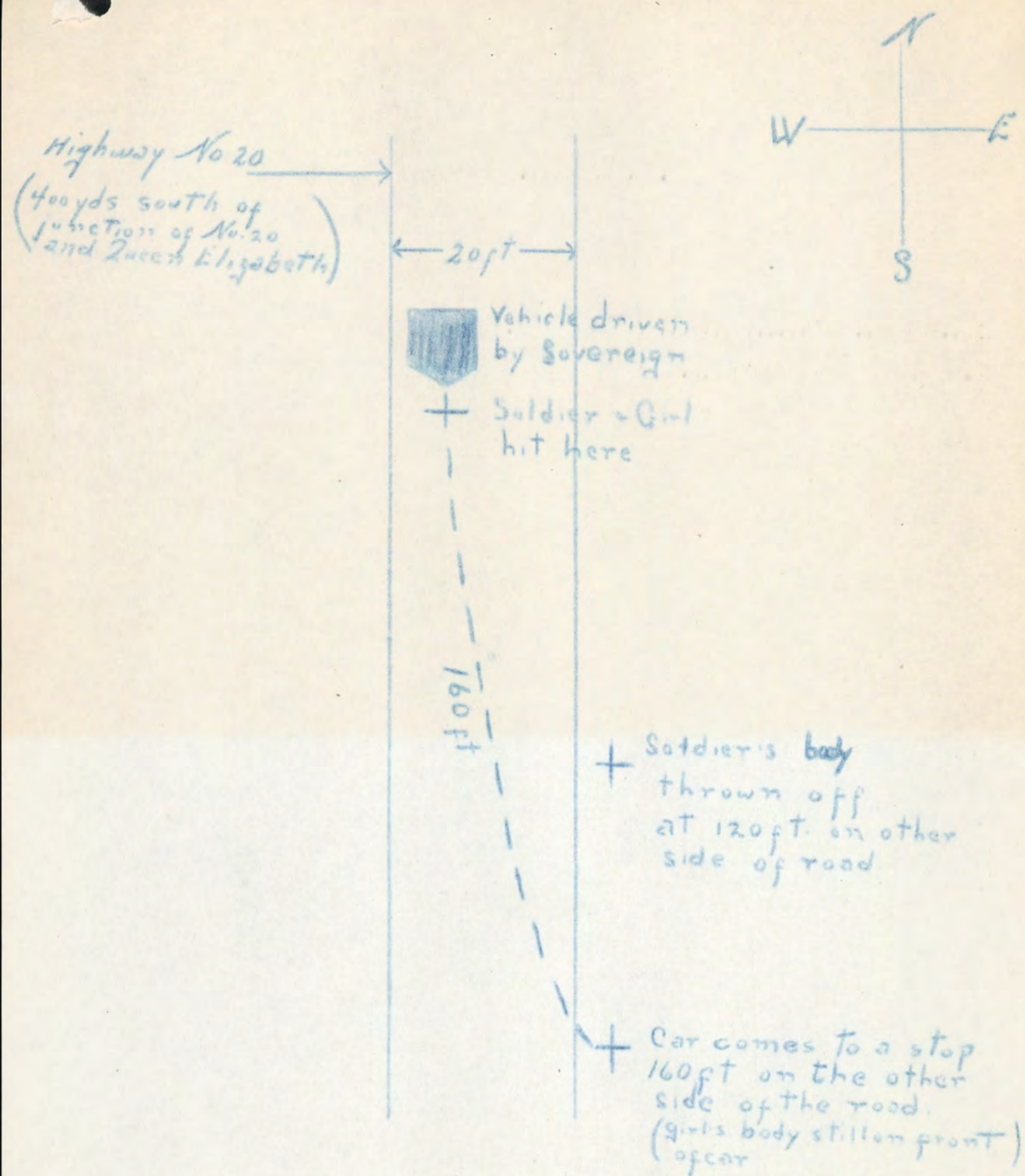


Diagram of accident, where D 650525  
Pte. Dupresne, G. A. was killed, sketched by  
Lieut J. W. Gibson with the aid of  
Constable K. Scott of the Burlington  
Police, at the scene of the accident

APP B

M.F.B. 371  
500M-6-42 (5118)  
H.Q. 1772-39-164

# REPORT ON INJURIES

Other than Wounds Received in Action

To BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS OVER PAGE WITHIN 48 HOURS  
OF OCCURRENCE

1. Statement to be signed by injured officer or soldier:

I, D-650525 Pte. Dufresne A. (Deceased)  
(a) (number) (b) (rank) (c) (surname) (Christian names in full)

#2 Gen. Epl. Coy. hereby declare that the injury sustained by me  
(d) (unit)  
on the 19-Aug-45 ~~did~~ did not\* occur while I was in the performance  
(e) (date of casualty)  
of military duty.

(Signature of officer or soldier)

Hamilton Military Hospital 19-Aug-45.  
(station) (date)

(\*Part not applicable to be struck out and initialed by Officer or Soldier signing.)

2. (a) Description of injuries Closed head injury--profoundly unconscious.  
Leaking C.S.F. through back of throat. Multiple abrasions  
and contusions.

(b) Are the injuries serious or of such a nature that they might be the exciting cause of disability later? } Yes.  
Critically ill.

(c) Whether admitted to hospital or sick in quarters? } To hospital.

(d) How long before initial treatment was given? } Unknown.

Date 19-Aug-45.

Signature of medical officer D.D. Campbell  
D.D. Campbell, Maj., RCAMC, C.A.

3. Short statement by injured person of the circumstances of the injury (see instruction 5). Signed statements of witnesses, or of persons to whom the injured person may have mentioned his injury, to be attached (see instructions 3 and 4):

DISCHARGED

(Signature of officer or soldier)

(Witness to signature of Officer or Soldier signs here)

## 4. Statement of Commanding Officer:

- (a) Was the individual in the performance of military duty? **No**
- (b) Nature of duty **N/A**
- (c) (i) Was it incurred in a game or other form of physical recreation definitely organized with the approval of the unit commander? **No**
- (ii) Was participation pursuant to orders, written or verbal? **ASRIL. N/a**
- (d) If it was incurred on leave, was such leave with or without pay? **A.W.L.**
- (e) Was the injured individual to blame? **No**
- (f) Was anyone else to blame? **This soldier was the victim of an automobile accident. It is understood that the driver of the car is being charged with manslaughter.**
- (i) Whom **is being charged with manslaughter.**
- (g) Did the injury occur on military premises and if so in what part of such premises? **No**
- (h) Court of Inquiry:
- (i) Has one been held? **No**
- (ii) Will one be held? **Yes**
- (iii) Date and place **To be determined by H.Q's, M.D.2.**

Date **27 Aug 45**

Commanding

**(A.H. Woods) Major.**5. Remarks of District Officer Commanding or Division Commander **O.C. No. 2. Gen. Emp. Coy.**

Date

## IMPORTANT INSTRUCTIONS TO BE FOLLOWED

1. This form is to be rendered within 48 hours after the event in all cases of accidental or self-inflicted injuries to an officer or soldier involving:

- (a) death,
- (b) absence from duty for 48 hours or more, or
- (c) absence from duty of less than 48 hours when the medical officer should invariably be consulted as to whether the injury may be the exciting cause of disability later.
- (d) in all accidents involving personnel whether there is evidence of injury or not.

2. A separate form is to be used in respect to each individual affected.

3. This form is to be rendered notwithstanding the holding of a court of inquiry or investigation. If a court of inquiry is held a copy of this form is to be included in the proceedings.

4. Full statements are to be taken by an officer from the witnesses of the accident or, where there was no witness, from any persons to whom the injured officer or soldier may have mentioned his injury immediately after the occurrence. These statements, when obtainable will be signed by the persons making them, and by the officer who takes them, and will be forwarded with this form. Where it is intended to take disciplinary action, duplicates of these statements should be retained by the unit for use in lieu of a summary of evidence.

5. Where it is possible to obtain it, a statement from the injured officer or soldier will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

6. This form will be prepared in triplicate, one copy to be retained by the unit and the two other copies to be forwarded to N.D.H.Q., through the usual channels. Where a Court of Inquiry is held the copies to be forwarded to N.D.H.Q. will be attached to the proceedings.

## SPECIAL INSTRUCTIONS AS TO EVIDENCE IN CASES OF SELF-INFLICTED WOUNDS

7. In these cases the statements mentioned in paragraphs 4 and 5 above should bring out all material points, e.g., statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).

8. An officer or a soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive this charge should not be used. The charge will therefore usually be laid under section 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under section 18 for wilful maiming.

M E M O R A N D U M

Office of the Judge Advocate-General.

To:

Department of National Defence

D. of P.

H.Q.869-D-6247 (JAG/C-1)

Ottawa, May 13th, 1946.

Re: Court of Inquiry - Death  
D.650525 Pte. Dufresne, G.A.

On the 19th August 1945, at approximately 0230 hours, P.O. Charles Sovereign was driving a P.M.C. in a southerly direction on No.20 Highway near Burlington Beach, Ont. As he had passed the junction of No.20 and Queen Elizabeth Highways, he failed to see D.650525 Pte. Dufresne, G.A. and one Mrs. Reeves who were walking across the road. Sovereign's car hit the two pedestrians and killed them both.

2. The father of the deceased Pte. Dufresne is claiming an amount of \$10,000.00 from the Department of National Defence, as compensation for the death of his son, and \$952.40 salary earned by his son while working pursuant to P.C.7429 dated 30 October 1944 and C.A.R.O. No.5185, which he claims should have been paid to his son.

3. The father of the deceased Pte. Dufresne alleges that the death of his son was "occasioned by the culpable negligence" of P.O. Sovereign and came as a "result of the apparent negligence of the military authorities who allowed the Airman Sovereign to leave the military hospital where he was convalescing."

4. In this connection could you cause a Royal Canadian Air Force file to be opened, as this claim is in effect a claim against the Department of National Defence (Air). Copies of relevant letters by Notary A. Grandpré of Waterloo, Que., claiming on behalf of Mr. Dufresne are attached and are to be attached to the Air Force File. This file should be cross-referenced to Army file H.Q.869-D-6247.

5. Furthermore, please obtain from P.O. Sovereign's Unit and from the hospital where he is alleged to have been confined during the period when the accident happened, the following information which will be required for the proper submission of this claim to the D.M. of Justice. (All statements and letters should be in triplicate in order that copies be included in the Army file).



- (a) Was Sovereign confined to Hospital on the 19th August 1945?
- (b) If so, to what hospital and where?
- (c) The reasons for such a confinement.
- (d) Was he in such a state of mind and health as to be able to drive a car, normally?
- (e) Was he on leave or out on duty on the 19th August 1945?
- (f) If on duty, was he at the time of the accident, acting within the scope of his duties or employment?

6. A statement must also be obtained from P.O. Sovereign containing information -

- (a) As to the facts generally
- (b) as to whose car he was driving at the time of the collision.
- (c) as to whether or not he was on duty.
- (d) as to the purpose of his trip.

PO:CD

*R. J. Orde*  
for (R. J. Orde), Brigadier,  
Judge Advocate-General.

DEPARTMENT OF NATIONAL DEFENCE  
(ARMY)

COURT OF INQUIRY - Death  
D.650525 Pte. DUFRESNE G.A.  
#2 Gen. Employ Coy.

Admin. No. 37473

HQ 869-D-6247 Adm.4(b)4

Date of Accident 19 Aug 45

OTTAWA, Ont. 27 Sep 45

Court Sat 30 Aug 45

Proc. forwarded 20 Sep 45

Proc. endorsed by DOC 20 Sep 45

PRECIS OF EVIDENCE: On 19 Aug 45 D.650525 Pte. Dufresne G.A. who had been attending a dance at Burlington Beach near Hamilton proceeded to cross the highway in company of a woman by the name of Mrs. Reeves. Approximately a quarter of a mile passed the junction of No.20 and Queen Elizabeth highways, both Pte. Dufresne and Mrs. Reeves were struck by a motorcar operated by P.O. Charles Sovereign, and owned by Clayton Maracle, proceeding in a southerly direction.

MEDICAL EVIDENCE: Death from injuries to head. A criminal charge has been laid against the driver of the automobile involved.

OPINION OF OC: In my opinion D.650525 Pte. Dufresne G.A. was not on duty and was not to blame.

OPINION OF DOC: Concurs.

REMARKS: No coroner's inquest was held. A criminal charge has been laid against the driver of the automobile. The provisions of RO 3022 have been complied with. Pass to D.G.M.S.

FINDINGS OF THE COURT: The cause of death was shock and hemorrhage due to fracture of the skull. Died at approximately 1240 hrs at Hamilton Military Hospital. Death was accidental. The time of discovery was approximately 0240 hrs 19 Aug 45. D.650525 Pte. Dufresne G.A. was not on duty and not to blame.

HOH/YDH

*H.O. Hessell*  
(H.O. Hessell) Lieut.  
Admin.4(b)4



# REPORT OF DEATH OF A SOLDIER

TO BE FORWARDED TO THE SECRETARY, DEPARTMENT OF NATIONAL DEFENCE, (MARKED "FOR OFFICER IN CHARGE OF RECORDS") IMMEDIATELY AFTER DATE OF DEATH

Unit #2. General Employment Coy. Toronto, Ont.

Reg't'l No. D-650525 Rank Private

Name in full DUFRESNE. Georges Andre

Date and place of birth 2nd April 1922. Bonsecours, Quebec, Canada.

Married or single Single

Enlisted, when and where 15 Nov 43. No. 4. District Depot, Montreal, Quebec.

Died	{	Date <u>19 Aug 45</u>	Buried	{	Date <u>23 August 45</u>
		Place <u>Hamilton, M.H. Hamilton, Ont.</u>			Name of cemetery <u>R.C. Cemetery.</u>
		Cause of death <u>Automobile Accident.</u>			Location of cemetery <u>Waterloo, Quebec.</u>

Whether he leaves a Will or not, } No Will  
and if so, where deposited }

Statement as to existence } Personal effects turned over to Committee of Adjustment.  
of any personal effects }

Latest particulars as to }  
Next of Kin { Mr. Adolphe Dufresne, 18 Ellice Street, Waterloo, Quebec.  
Mrs. Adolphe Dufresne, 18 Ellice Street, Waterloo, Quebec.  
Five Brothers and Two Sisters.

I hereby certify that Next of Kin and District Headquarters have been informed.  
(Strike out Next of Kin if not informed)

A.H. Woods  
(A.H. Woods) Major, Officer Commanding  
#2. General Employment Coy.

Date 14 Sep 45.

Secretary, Department of National Defence.

Forwarded, please.

A.E. Potts MAJOR  
for (A.E. Potts) Maj.-Gen. D.O.C., M.D. 2

Date 21 Sep 1945

*Noted  
OR (H)*

*36*

1. NO.	2. RANK OR RATING	3. SURNAME	4. CHRISTIAN NAMES
D-650525	Private	DUFRESNE	GEORGES ANDRE
5. UNIT OR ARM OF SERVICE	6. DATE OF DEATH	7. H. Q. FILE No.	8. RELIGION
Infantry	19 August 1945	T-20-D-9107 (A-4f)	Roman Catholic
9. CIRCUMSTANCES OF CASUALTY		10. NAMES AND ADDRESSES OF RELATIVES	
Place of Death: <b>Hamilton Military Hospital, Hamilton, Ont.</b>  Cause of Death: <b>Shock and Hemorrhage due to Fracture of the Skull. (Automobile Accident)</b>		Next of Kin: _____ Relationship _____  Father: <b>Mr. Adolphe, DUFRESNE, 18 Ellice Street, Waterloo, Quebec</b>  Mother: <b>Mrs. Adolphe, DUTRESNE, 18 Ellice Street, Waterloo, Quebec.</b>  Widow (if any): <b>N/A</b>	
11. LOCATION OF UNIT AT TIME OF CASUALTY		12. DATE OF BIRTH OF <del>SOLDIER</del> , SOLDIER <del>NICKNAME</del>	
<b>Government Bldg, Exhibition Barracks, Toronto, Ontario.</b>		<b>2nd April 1922</b>	
Note: Items 13, 14 and 15 are not to be completed until grave is permanently located. Interim burials covered by item 21.			
13. NAME OF CEMETERY	14. LOCATION OF CEMETERY	15. LOCATION OF GRAVE	16. IF REMAINS WERE CREMATED GIVE DISPOSITION OF ASHES
<b>Roman Catholic</b>	<b>Waterloo, Quebec.</b>	Grave..... <b>N/A</b>  Plot..... <b>Family Plot.</b>  Row..... <b>N/A</b>	<b>N/A</b>
17. PHOTOGRAPH OF GRAVE TAKEN	18. EXPOSURE No.	19. PHOTOGRAPH OF GRAVE AND CEMETERY SUPPLIED TO	
<b>N/A</b>	<b>N/A</b>	<b>N/A</b>	

M. F. W. 2643  
 25M-3-44 (3046)  
 H. Q. 1772-39-1458

21. REPORTED LOCATION OF GRAVE.

Information regarding Location of Grave, Plot No: and Row No: is not available.

22. REMARKS.

NIL.

27

Director of Estates

Regimental No. D650525 Rank Private

DUFRESNE  
Surname

Georges Andre  
Christian Names

Unit #2 Gen. Emp. Coy., Toronto.

Date of death 19 Aug 45 Place of Death CANADA

Casualty Details Died in Hamilton Military Hospital, Hamilton.

Next-of-kin Mr. Adolphe Dufresne Relationship FATHER

Address 18 Ellice St., Waterloo, Que.



Will Will d/18 Nov 43 herewith.

Date 28 Aug 45

EXCERPT OF M.F.M.5 dated Nov. 18. 43.

(1) Are you married? NO Children?

Wife's name) Names and  
and address) Ages

(2) Is your father alive? YES. If so, state name and address.

Mr. Adolphe DUFRESNE, 18 Ellice St., Waterloo, Que., Can.

(3) Is your mother alive? YES. If so, state name and address.

Mrs. Bernadette DUFRESNE (Boutillette), 18 Ellice St.,

Waterloo, Que., Can.

(4) Are you insured? YES. If so, in what company?

Metropolitan Life Ins. Co.

LDH

*[Handwritten signature]*  
ESTATES LIAISON

114

THE CANADIAN PENSION COMMISSION

MEMORANDUM

TO Director of War Service Records.  
FROM The Canadian Pension Commission.

OTTAWA, March 31, 1951.

ATTENTION - W.S.R.D.

869-D-6247

~~Canadian Agency~~  
~~Imperial War Graves Commission~~

D-650525 Pte. - Georges A. Dufresne.  
2 Gen. E. Coy.

~~CCPOC~~

The marginally named died  
at Hamilton, Ontario.  
on August 19, 1945.  
Cause of Death Vehicle accident.

In the opinion of the Commission,  
death was related to military service. (World War 2)

Next of Kin

Mrs. Adolphe Dufresne (mother),  
18 Ellis Avenue,  
Waterloo, P.Q.

*Noted*  
*man X disp. to*  
*mother*  
*Sept. 25 1945*  
*R 3d ("")*  
*4-4-51*

mb  
not on strength

*E. Lacey*

for  
Secretary.

*Noted*  
*R4*

**PROVINCE OF ONTARIO  
VITAL STATISTICS ACT  
REGISTRATION OF DEATH**

Registration Number  
For use of Registrar General only.

**COPY**

**1. PLACE OF DEATH**  
City, Town or Village of City of Hamilton Hamilton Military Hospital  
(If death occurred in a hospital or institution, give the name instead of street and number.)

Township of Barton County or District of Wentworth

**2. LENGTH OF STAY**  
In Municipality where death occurred In Province In Canada (if immigrant)  
(in years, months and days) About 8 hours Since Nov. 14/44 Since May 19/44

**3. PRINT FULL NAME OF DECEASED**  
DUPRESNE; Georges Andre  
(Surname or last name) (Given or Christian names)

**4. PERMANENT RESIDENCE OF DECEASED:**  
City, Town or Village of WATERLOO, QUEBEC Street 18 Ellice St.  
Township of \_\_\_\_\_ County or District of Shefford Province of QUEBEC

**5. SEX** MALE **6. CITIZENSHIP** FR. CANADIAN **7. RACIAL ORIGIN** FR. CANADIAN **8. Single, Married, Widowed or Divorced** SINGLE **9. BIRTHPLACE** QUEBEC, CANADA  
(See marginal note) (See marginal note) (Write the word) (Province or Country)

**10. Date of Birth** APRIL 2nd 1922 **11. AGE** 23 4 18  
(Month by name) (Day) (Year) (Years) (Months) (Days) If less than one day hrs. or min.

**12. (a) Trade, profession or kind of work as spinner, grader, clerk, etc. (b) Kind of industry or business, as paper mill, lumber, bank, etc.** Machinist (IN ARMY SINCE 15 Nov 43)  
La Grandeur Auto Service, Waterloo, Que.  
(If "Labourer" specify kind of work above)

**13. Date deceased last worked at this occupation** 1943 **14. Total years spent in this occupation** 3 years

**15. If married, widowed or divorced give name of husband or maiden name of wife of deceased.** n/a

Name of father ADOLPHE DUPRESNE Adolphe  
(Surname or last name) (Given or Christian names)

Name of mother Bouhiette Bernadette.  
(Surname or last name) (Given or Christian names)

Place of birth: Ontario, Canada Quebec, Canada  
(Province or Country) (Province or Country)

I certify the foregoing to be true and correct to the best of my knowledge and belief.

Given under my hand at TORONTO, ONT. this 21st day of AUGUST 19 45

Signature of informant [Signature] Relationship to deceased nil  
Address O.G. No. 2 General Employment Coy. Toronto, Ont.

Method of Disposal: Removal Date August 20th 19 45  
(Month by name) (Day) (Year)

Place of Burial: Waterloo, P.C. Cemetery Roman Catholic  
(Municipality)

Funeral Permit was issued by James F. Berry Address Hamilton, Ontario

Funeral Director: Truscott Bros. Address Hamilton, Ontario

Original notations (Office use only)

**MEDICAL CERTIFICATE OF DEATH**

TIME OF DEATH August 19th 19 45  
(Month by name) (Day) (Year)

HEREBY CERTIFY that I attended deceased from CORONER'S INVESTIGATION (only) 19 45  
19 45, and last saw him alive on 19 45

I Immediate cause <small>Give disease, injury or complication which caused death, NOT the mode of dying, such as heart failure, asphyxia, asthenia, etc.</small>	CAUSE OF DEATH	DURATION		
		Yrs.	Mos.	Dys.
(a) due to	<u>Shock and Hemorrhage</u>			
	<u>Fracture of the Skull</u>			
	(b) due to			
(c) due to	<u>Violence</u>			
II Other morbid conditions (if important) contributing to death but not causally related to immediate cause.				

**25. If a woman, was the death associated with pregnancy?** \_\_\_\_\_ Duration \_\_\_\_\_ weeks. Was there a delivery? \_\_\_\_\_

**26. Was there a surgical operation?** No Date of operation \_\_\_\_\_ 19 \_\_\_\_\_  
State findings \_\_\_\_\_ Was there an autopsy? No

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

Accident, suicide or homicide? Accident Date of injury August 19th 19 45  
(State which)

Manner of injury Knocked down by automobile  
(How sustained)

Nature of injury See above

Specify whether injury occurred in INDUSTRY, in HOME, or in PUBLIC PLACE Public Place

Signed by [Signature] Designation Chief Coroner & M.D., Ontario

Address Hamilton, Ontario Date August 29th 19 45

Division Registrar's Record No. \_\_\_\_\_  
(Signature of Division Registrar)

PERMANENT RECORD.

"Canadian" should be used as descriptive of a person who was born in Canada or who became the citizen of another country.

Other English, Irish, Scottish, French, German, etc. express CITIZENSHIP (NATIONALITY).

ON HIS MAJESTY'S SERVICE.

FASTEN Envelope by gumming this Label across Flap.  
OPEN by cutting Label instead of tearing Envelope.

**EMBALMING DONE BY**

**TUSKITT BROS. UNDERTAKERS.**

**GRANGE ST. HAMILTON, ONT.**

MARGIN RESERVED

CITIZENSHIP (NATIONALITY) is defined as person who was born in Canada or who became the citizen of another country.

RACIAL ORIGIN is defined in terms of the Russian, Ukrainian, etc. The terms "Irish", "Scottish", "French", "German", etc. express CITIZENSHIP (NATIONALITY).

If of Stillbirth consult reverse side before making out certificate.



PROVINCE OF ONTARIO  
VITAL STATISTICS ACT

Registration Number  
For use of Registrar General only.

COPY

REGISTRATION OF DEATH

Re: D-850525 Pte. DUPRESNE G.A.

1. PLACE OF DEATH  
City, Town or Village of... City of Hamilton Hamilton Military Hospital  
(If death occurred in a hospital or institution, give the name instead of street and number)  
Township of... Barton County or District of... Wentworth

2. LENGTH OF STAY In Municipality where death occurred In Province In Canada (if immigrant)  
(in years, months and days) About 8 hours Since Nov. 14/44 Since May 19/44

3. PRINT FULL NAME OF DECEASED DUPRESNE; Georges Andre  
(Surname or last name) (Given or Christian names)

4. PERMANENT RESIDENCE OF DECEASED:  
City, Town or Village of... WATERLOO, QUEBEC Street... 18 Ellice St.  
Township of... County or District of... Shefford Province of... QUEBEC

5. SEX <u>MALE</u>	6. CITIZENSHIP (See marginal note) <u>FR. CANADIAN</u>	7. RACIAL ORIGIN (See marginal note) <u>FR. CANADIAN</u>	8. Single, Married, Widowed or Divorced (Write the word) <u>SINGLE</u>	9. BIRTHPLACE (Province or Country) <u>QUEBEC, CANADA</u>
-----------------------	--	--	--	--

10. Date of Birth APRIL 2nd 1922  
(Month by name) (Day) (Year)

11. AGE } Years Months Days If less than one day  
          } 23 4 18 hrs. or min.

12. (a) Trade, profession or kind of work as spinner, grader, clerk, etc. Machinist (IN ARMY SINCE 15 Nov 43)  
(b) Kind of industry or business, as paper mill, lumber, bank, etc. La Grandeur Auto Service, Waterloo, Que.  
(If "Labourer" specify kind of work above)

13. Date deceased last worked at this occupation... 1943

14. Total years spent in this occupation... 3 years

15. If married, widowed or divorced give name of husband or maiden name of wife of deceased... n/a

16. Name of father... ADOLPHE DUPRESNE Adolphe  
(Surname or last name) (Given or Christian names)

17. Maiden name of mother... Bouthiette Bernadette  
(Surname or last name) (Given or Christian names)

18. Birthplace: Father... Ontario, Canada Mother... Quebec, Canada  
(Province or Country) (Province or Country)

19. I certify the foregoing to be true and correct to the best of my knowledge and belief.  
Given under my hand at... TORONTO, ONT., this 21st day of AUGUST 19 45  
Signature of informant... [Signature] Relationship to deceased... nil  
Address... O.C. No. 2 General Employment Coy. Toronto, Ont.

20. Burial, Cremation or Removal... Removal Date... August 20th 19 45  
(Month by name) (Day) (Year)

Place of Burial... Waterloo, P.Q. Cemetery... Roman Catholic  
(Municipality)

Burial Permit was issued by... James F. Berry Address... Hamilton, Ontario

21. Funeral Director: Name... Truscott Bros. Address... Hamilton, Ontario

22. Marginal notations (Office use only)

MEDICAL CERTIFICATE OF DEATH

23. DATE OF DEATH... August 19th 19 45  
(Month by name) (Day) (Year)

24. I HEREBY CERTIFY that I attended deceased from... CORONER'S INVESTIGATION (only) 19...  
to... 19... and last saw h... alive on... 19...

I Immediate cause Give disease, injury or complication which caused death, nor the mode of dying, such as heart failure, asphyxia, ashenia, etc.	CAUSE OF DEATH	DURATION		
		Yrs.	Mos.	Dys.
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	(a) <u>Shock and Hemorrhage</u> due to			
	(b) <u>Fracture of the Skull</u> due to			
	(c) <u>Violence</u> due to			
II Other morbid conditions (if important) contributing to death but not causally related to immediate cause.				

25. If a woman, was the death associated with pregnancy? Duration... weeks. Was there a delivery?...

26. Was there a surgical operation? No Date of operation... 19...  
State findings... Was there an autopsy? No

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

Accident, suicide or homicide? Accident Date of injury... August 19th 19 45  
(State which)

Manner of injury... Knocked down by automobile  
(How sustained)

Nature of injury... See above

Specify whether injury occurred in INDUSTRY, in HOME, or in PUBLIC PLACE... Public Place

Signed by... [Signature] Designation Chief Coroner & M.D., Ontario

Address... Hamilton, Ontario Date August 29th 19 45

"Canadian" should be used as descriptive of a person who was born in Canada or who became the citizen of another country.  
 "American" should be used as descriptive of a person who was born in the United States of America or who became the citizen of another country.  
 "British" should be used as descriptive of a person who was born in Great Britain or who became the citizen of another country.  
 "Irish" should be used as descriptive of a person who was born in Ireland or who became the citizen of another country.  
 "French" should be used as descriptive of a person who was born in France or who became the citizen of another country.  
 "German" should be used as descriptive of a person who was born in Germany or who became the citizen of another country.  
 "Russian" should be used as descriptive of a person who was born in Russia or who became the citizen of another country.  
 "Ukrainian" should be used as descriptive of a person who was born in Ukraine or who became the citizen of another country.  
 "Other" should be used as descriptive of a person who was born in any other country or who became the citizen of another country.

MARGIN RESERVED  
 CITIZENSHIP (NATIONALITY) is defined as the status of a person who was born in Canada or who became the citizen of another country.

If stillbirth consult reverse side before making out certificate.

## INSTRUCTIONS

**Physician's Statement of Cause of Death.**—The morbid conditions relating to death are divided on the certificate into two groups. In Group I are those related to the "Immediate Cause" of death, and in Group II, those not causally related thereto. In most cases a statement of cause under Group I will suffice. Detailed certification is not desired, the entry of a single cause being preferable in all cases where this can be regarded as adequate (see Example I), but where the physician finds it necessary to record more than one cause it is important that these be stated in the position provided on the form as indicative of their mutual relationship. This information is sought so that the selection of the cause for tabulation may be made in the light of the certifier's viewpoint:—

- (a) Name first the "Immediate Cause" of death, i.e. the disease, injury or complication which caused death (not mode of dying or terminal condition).
- (b) Then give other morbid conditions (if any) of which it was the consequence, in order of causal relationship (due to) stating the most recent one first and then others in order.
- (c) Entries under Group II should be reserved for "other important contributory morbid conditions" in those instances particularly in which death was due to a combination of maladies, none of which would have been fatal alone. In such cases the physician's judgment alone can afford guidance to the tabulator.
- (d) Use always accepted terms for morbid conditions and never record mere symptoms.
- (e) **Maternal Deaths.**—Qualify all diseases resulting from childbirth, miscarriage or abortion by the word "Puerperal", e.g., puerperal septicaemia. Distinguish between septicaemia originating in abortion and in childbirth.
- (f) **Cancer.**—In all cases the organ or part first affected should be specified.
- (g) **Violent Deaths.**—Coroners, medical examiners and physicians who certify to deaths from violent causes should always clearly indicate the fundamental distinction of whether the death was due to **accident, suicide, or homicide**, and then state the manner and nature of injury. The circumstances of each accident should be stated as fully as possible, e.g., an **automobile accident** should always be designated as such.

The following examples illustrate the essential principles in the use of the form.

	Example 1	Example 2	Example 3	Example 4	Example 5
I.	Example I	Example 2	Example 3	Example 4	Example 5
Immediate Cause.....	(a) Lobar pneumonia	(a) Pulmonary tuberculosis	(a) Acute peritonitis	(a) Bronchopneumonia	(a) Uraemia
Morbid Conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	due to	due to	due to	due to	due to
	(b) _____	(b) _____	(b) Acute appendicitis	(b) Operation	(b) Chronic nephritis
	due to	due to	due to	due to	due to
	(c) _____	(c) _____	(c) _____	(c) Strangulated inguinal hernia	(c) _____
II.	II.	II.	II.	II.	II.
Other morbid conditions (if important) contributing to death but not causally related to immediate cause.	_____	_____	_____	Chronic interstitial nephritis	Chronic bronchitis

### STILLBIRTH

"A dead-birth (stillbirth) is the birth of a (viable) foetus, after at least twenty-eight weeks pregnancy, in which pulmonary respiration does not occur; such a foetus may die either: (a) before, (b) during or (c) after birth, but before it has breathed."

**The special stillbirth registration form (buff coloured) must be used in registering a stillbirth.**

Monsieur Adolphe Dufresne,  
18 rue Ellice,  
Watterloo,  
P.Q.

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:

868-D-6247 FD10

MINISTÈRE DE LA DÉFENSE NATIONALE  
DIVISION DES SUCCESSIONS  
OTTAWA, ONTARIO

1 septembre, 1945.  
.....194.....

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

DUFRESNE, Georges André. Sdt.

No. D650525, Armée Canadienne

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 memorandum 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, com-  
missaire 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.

*Chas Smith*  
Col.

Le directeur des successions,

## 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.....Il...était	<b>célibataire.</b>		
2	Enfants du défunt et dates de naissance.....	<b>pas applicable.</b>		
3	Père du défunt.....	Dufresne, Adolphe, <del>54</del>	54	No.18, Ave. Ellis, Waterloo, Co. Shefford, Qué.
4	Mère du défunt.....	Bouthiette, Bernadette	51	No.18, Ave. Ellis, Waterloo, Qué.
5	Frères du défunt	Dufresne, Jean-Paul	25	70 Taylor, Waterloo, Qué.
		" Laurent	21	449 rue St. Jean, Granby, Qué.
		" Jacques-Emile	18	18 Ave. Ellis, Waterloo, Qué.
		" Paul-Roch	9	" " "
6	Sœurs du défunt	Dufresne, Irène ( Dame Alcidas Rivard	31	North Stukely, Co. Shefford, Qué.
		Sœurs germaines Dufresne, Monique	14	18 Ave. Ellis, Waterloo, Qué.
		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) Dufresne, Gaston, décédé en 1919 à l'âge de 2 ans.		Adresse de leurs enfants aucun.

RÉPONDRE AU LONG À TOUTES LES QUESTIONS SUR CETTE PAGE  
DÉTAILS D'IDENTITÉ

8	Nom et prénoms du défunt.	Dufresne, Georges André
9	Date de sa naissance.	2 avril 1922
10	Lieu et date de son mariage.	il était célibataire
11	Lieu et date du mariage de ses parents.	North Stukely (Paroisse Notre-Dame de Bon-secours) 5 août 1912

## DÉTAILS DE DOMICILE

12	Lieu où le défunt est né.	North Stukely, P. Qué.
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) Depuis 9 ans à Waterloo, Co. Shefford, Qué. (b) " (c) avant cela à North Stukely " (d) "
14	Nature de son emploi avant son enrôlement.	Mécanicien au Garage Lagrandeur, Waterloo, Qué.
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.	Waterloo, Co. Shefford, Qué.

## DÉTAILS DE LA SUCCESSION

17	A-t-il laissé un testament? Si vous en avez la garde, veuillez nous le transmettre.	Il serait supposé avoir laissé un testament dans son livre militaire.
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?	il n'était pas marié.
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.	aucun (à ma connaissance du moins.)
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.	\$100.00 payé de novembre 1944 à avril 1945 mais ce Certificat n'a pas encore été envoyé par le Ministère des Finances.
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.	Metropolitan Life Ass. Co. \$600.00 payable au père, Adolphe Dufresne.
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.	Divers objets valant environ \$100.00

## 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.	Non.
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.	Cette affaire est en suspens, parce qu'on dit qu'ils seraient supposés être payés par l'armée. Ça monterait à \$67.00 à Waterloo, à part les frais à Hamilton, où il est mort.

(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.)

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

DECLARATION

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.

Adolphe Dufresne

Signature du déclarant

18 Ave. Ellis, Waterloo, Co. Shefford, Qué. Adresse

CERTIFICAT

Je, soussigné, certifie que, autant que je sache

M. Adolphe Dufresne

Nom du déclarant

\*Voir plus haut

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

Daté à Waterloo, Qué. ce 6me. jour de Septembre 19 45

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

[Signature]

Titre Notaire public

Adresse Waterloo, Co. Shefford, Qué.

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 DESIREZ FAIRE DES REMARQUES SUPPLÉMENTAIRES.

Table with 3 columns: Item description, value, and price in dollars. Items include: Plume réservoir (\$15.00), Nécessaire à barbe (\$16.00), Camera (Kodac) (\$4.00), Bague-pierre noire avec initiales (\$15.00), Porte-feuille en cuir de luxe (\$7.00), Briquet "Ronson" (\$3.00), Compagnon de route (\$1.00), Chapelet (\$1.00), Montre-bracelet (\$45.00), Et autres petits effets.

OTHER DETAILS

# WILL

(1) I, Georges Andre DUFRESNE....., of the TOWN.....  
(Name in Full) (City, Town, Village, Township)

Address in  
civil life.

of WATERLOO....., in the County of SHERBROOKE.....  
District

Province of QUEBEC....., MACHINIST.....  
(Civil Occupation)

Regimental No. D-650525....., Unit N.R.M.A. 4 DD....., do hereby revoke  
all former Wills by me made and declare this to be my LAST WILL.

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

(2) I GIVE, DEVISE AND BEQUEATH unto  
"MY FATHER" Mr. Adolphe DUFRESNE  
RESIDING AT: 18 Ellice St., Waterloo, Que. Canada.

*AS*

All my estate both Real and Personal.

Relationship,  
names and  
address of  
residuary  
beneficiaries.

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

*AS*

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

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

IN WITNESS WHEREOF I have hereunto set my hand this 18 day of Nov.  
19 43

Signed and acknowledged by the Tes-  
tator, 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.

Georges Andre Dufresne  
(Signature of soldier)

First witness  
sign here.

(5) Signature Thelma Harton  
Civil Address 189B Main St. Lennoxville Que.  
Civil Occupation office clerk

Second witness  
sign here.

Signature Versa Giff  
Civil Address 4837 Cayless St. mtl.  
Civil Occupation waitress

(Witnesses are not to be beneficiaries.)

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.





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) Upon completion, the form will, in the case of Army personnel, be forwarded to the District Records Officer for transmission to Officer i/c Records (Army) N.D.H.Q., Ottawa. In the case of R.C.A.F. personnel the form will be forwarded to R.C.A.F. Records Officer, Dept. of National Defence for Air, Ottawa.

(1) Name of Officer or Other Rank DUPRESNE  
(Surname first—Christian names in full—Block capitals)  
Georges Andre.

(2) Regimental or Official Number and Rank D-650525 pte

(3) Unit N.R.M.S 4 DD

(4) Are you married? NO

(5) If married, state,  
(a) Full name of your wife NIL  
(b) Present postal address of wife NIL

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

(7) Are you a widower? NIL

(8) Have you any children? NIL 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 NIL

Give particulars of Guardians to whom Dependents' Allowance should be paid—if authorized.  
Name NIL  
Postal Address \_\_\_\_\_

[SEE OTHER SIDE]

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife for at least 2 years immediately prior to appointment or enlistment? NO

If so, state her full name and Postal Address NIL

(11) Is your father alive? YES

If so, state name and address, occupation Mr. Adolphe DUFRESNE (LABORER)  
18 Ellice St., Waterloo, Que. Canada.

(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? yes

If so, state name and address Mrs. Bernadette DUFRESNE (BOUTILLETTE)  
18 Ellice St., Waterloo, Que. Canada.

(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? nil  
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment.

If so, state the following particulars:—

Relationship nil

Full Name

Postal Address

Amount contributed monthly during the past six months

nil

(18) Are you insured? yes

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

Have you made arrangements for payment of your Insurance Premium? yes

If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

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

Date Nov. 18, 43

André Lefrançois  
(Signature of officer or man)

Date Nov. 18, 43

Office Commanding Lefrançois

**NO. 4-DISTRICT DEPOT A.F.**

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

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

ARMY

GL

Name..... DUFRESNE ..... Georges A. ..... No. D. 650525  
 Surname ..... Christian Names .....  
 Rank DET ..... # 2 Gen. Hosp. Coy. Toronto, Canada. ..... 10-8-45  
 Unit ..... Date of Death .....

AMOUNT

Date..... 22-3-46 ..... L.P.C.....\$ 24.57  
 Other Credits.....  
 Total..... 24.57

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Father	Adolphe Dufresne 18 Ellis Ave., Waterloo, Que.  (Sole beneficiary under will)	24.57 <span style="color:red">R</span>


**DO NOT REMOVE FROM FILE**

*N.R#268*  
*042*

P. TO TREAS. 13-5-46

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	24.57
CLASSIFIED BY <i>[Signature]</i>			EXAMINED BY		
For Chief Treasury Officer					

DISTRIBUTION APPROVED AND AUTHORIZED

  
 (L. M. FIRTH) Colonel  
 Director of Estates

AUDITED FOR PAYMENT

Register No.

CD-5054

Nominal Roll No.

D-815

To: P.M.G.

H.Q. File No.

869-D-6247

**N. R. M. A.**

CANADIAN ARMY (ACTIVE)

Computation of Service

WAR SERVICE GRANT

Regt. No.	Rank when S.O.S.	Surname	Christian Name in Full
D-650525	PTE	DUFRESNE	GEORGES ANDRE

REASON FOR TERMINATION OF SERVICE:

1st Enlistment..... *Died accidentally* ..... CARO ..... ( )  
 2nd Enlistment..... CARO ..... ( )  
 3rd Enlistment..... CARO ..... ( )

Total Service

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. <i>15 Nov 43</i>	T.O.S. <i>[Signature]</i>	T.O.S. <i>[Signature]</i>
S.O.S. <i>19 Aug 45 MD 7</i>	S.O.S. .... MD .....	S.O.S. .... MD .....
Total Days <i>644</i>	Total Days.....	Total Days.....

**Total Service** ..... *644* ..... DAYS

	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere.....	<i>644</i>	<i>19</i>	<i>625</i>
Overseas Service.....	<i>0</i>	<i>0</i>	<i>0</i>
Totals.....	<i>644</i>	<i>19</i>	<i>625</i>
Add Non-qualifying Service.....			<i>19</i>
<b>Total Service</b> .....			<i>644</i>

EMBARKATION DETAILS: *Died accidentally* *19 Aug 45*  
 1. Date S.O.S. Overseas.....  
 2. Date S.O.S. Overseas.....

**DIED WHILST IN SERVICE**

REMARKS:

Computer's Signature..... *[Signature]*  
 Checker's Signature..... *[Signature]*  
 Date Computed..... *21 Sep 45*

**NO SERVICE IN THE ALUTIAN ISLANDS**

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

*[Signature]*  
 C. L. LAURIN,  
 Colonel,  
 DIRECTOR OF RECORDS.

**Details of Non-Qualifying Service**

**Western Hemisphere—**

Forfeits for	From	To	Effective Date	Days	Total
A.W.F.	3 Apr 44	4 Apr 44			2
A.W.F.	27 Dec 44	4 Jan 45			8
A.W.F.	3 July 45	7 July 45			5
A.W.F.	2 July 45	2 July 45		1	1
Awarded			27 July 45	3	4

Total

19

**Overseas:** T.O.S. . . . . . T.O.S. . . . . . T.O.S.  
 S.O.S. . . . . . S.O.S. . . . . . S.O.S.


Total

H.Q. 869-D-6247

**FALSE DOCKET  
ARMY** No. *10*

**ESTATES**

DEPARTMENT OF NATIONAL DEFENCE, CANADA

CROSS REFERENCE

DUFRESNE,  
G.A.  
D 6505-25

G  
*[Handwritten signature]*

CENTRAL REGISTRY	DATE	P. A. OR B. F.	INITIALS	REFERRED TO	FOR REMARKS	INITIALS	DATE
		<small>(If purpose for which referred cannot be expressed on one line, add minute to file and enter here "With Minute")</small>					
	<i>7-7</i>	<i>BF</i>	<i>G</i>		<i>New Cover</i> <i>WITH PAPERS JUN 20 1946</i>		<i>19-6-46</i>
	<i>24/6</i>	<i>pa</i>	<i>G</i>	<i>G</i>	<i>JUL 7 1946</i>		
	<i>CR 19/7/46</i>	<i>pa</i>	<i>G</i>				

DUFRESNE, G.A.

869-D-6247

FILE  
H.Q. NO.

3-5-46

*159*

SERVICE No. .... NAME ..... EST. No. ....

DIED ..... 194... CANADA .....

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

Casualty Report—		Received	Despatched
Will {	Service { Canada .....		
	{ O/Seas .....		
	Civil .....		
	None .....		
Probate (or L of A) .....			
Particulars of Family			
Form dated .....			
None .....			
Form P. 64—			
Sent to .....			
Domicile .....			

Beneficiary .....

Residing { Canada .....

Single .....

Parents .....

Life Insurance .....

By .....

Other N/K .....

Will .....

Life Insurance .....

Bank Account .....

W.S.C. .... Advise Registrar—N/K—Redeem—Re-register .....

Bonds .....

Redeem .....

Transfer to .....

C. of A. Report .....	Approved	Service Debts .....
		Service Will .....
L.P.C. .... \$ .....		
Amended .....		
War Service Gratuity .....		
Bank Credits .....		
W.S.C.'s Redeemed .....		
Sale of V.L.B.'s .....		
Other credits .....		
Effects—		To .....
O/S Box No.		Bulk Via .....
		Valuables Via .....
		Letter as to, dated .....

Date of Despatch \$ .....

Beneficiary's address changed to \$ .....

\$ .....

\$ .....

\$ .....

\$ .....

\$ .....

112



6247

DEPARTMENT OF NATIONAL DEFENCE - (ARMY)

CROSS REFERENCE

DUFRESNE GEORGES ANDRE

D V A I

D-650525

H.Q. 869-D-62

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")					
APR 18 1950	<i>Pa</i>	<i>15<sup>4</sup><sub>50</sub></i>	<i>L. b.</i>				
APR 5 1951	<i>PA</i>	<i>4-4-51</i>	<i>of</i>	<i>3d</i>	PER REQUISITION		APR 4 1951
MAY 4 1951	<i>pa</i>	<i>28<sup>2</sup><sub>51</sub></i>	<i>VH.</i>	<i>WSR-3.</i>	PER REQUISITION		APR 26 1951

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.

*no file*  
*(2)*

DEPARTMENT OF NATIONAL DEFENCE  
A R M Y

TO: CENTRAL REGISTRY

Ottawa, Ont. 11 Jan 45

NO. D-650525 NAME Pte DUFRESNE G A  
Surname. Chr. Names

A Legal Observation has been made concerning the above named and must be despatched to Directorate of Administration for necessary action. May this form be placed on file and file sent to Records L.A.

If no file is in existence may one be created.

CENTRAL REGISTRY Army  
PERS. SEC.  
JAN 13 1945  
*564* *N 647*  
Ref. to: .....  
referred to: *HR*

*Philip MacCabe*  
Legal Adviser (Records)

*11*

DEPARTMENT OF NATIONAL DEFENCE—(ARMY)

D. 650525

CROSS REFERENCE

Air Force file C-96066

SECTION  
"C"

GEORGES ANDRE DUFRESNE,

R.S. & P.

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")		
	29 5/16	BF	JH	JAG			
	12 6/16	BF	BD	JAG	MAY 20 1946		
MAY 25 1946				P.T.	Per translation pls.	JD	23-5-46
				JAG	with translation	MA	28 1946
MAY 29 1946	4 6/16	PA	BD	JAG		LM	29 5-46
JUN 3 1946	27 6/16	BF	BD	JAG	PER B.F. JUN 12 1946		
JUN 25 1946	27 7/16	BF	BD	JAG	PER B.F. JUN 27 1946		
JUL 2 1946				W.S.G.	Per Requisition C.R. JUL 1 1946		
				A.R.	With papers	JD	19-7-46
					D.A. & A.P. WITH PAPERS	JUL	22 1946
JUL 27 1946				JAG			
				GE (AG)	with Plac return to W.S.G.		26 7/46
				F. Trans	For D.M. - ret to W.S.G.	R.M.	27-7-46
				D.M.	With transl.	JD	30 1946
JUL 30 1946	28 7/16	BF	JW	JAG		JD	30 7/46
AUG 3 1946				D.M.	Memo pls	JW	2-8-46
				CR.	memo pls	JD	6/8/46
AUG 9 1946	13 8/16	PA	JW	JAG	Memo Pls	LD	8 8/46
AUG 13 1946	20 8/16	PA	JW	JAG			
AUG 21 1946	13 9/16	BF	JW	JAG	Per Requisition C.R. AUG 15 1946		
	8 10/16	BF	JW	JAG	PER B.F. AUG 28 1946		
AUG 30 1946					Per Requisition C.R. SEP 4 - 1946		
				J. Trans	Memo pls	JW	8 Oct 46
				J.L.G.	with trans.	HDC	
				H.M.H.	draft letter pls	JW	11 10/46
OCT 15 1946				JAG		JW	15 10/46
				J. Trans	Minute pls	JW	22-10-46
OCT 25 1946	28 10/16	PA	JW	JAG	With trans.	JD	5 10/46
						JW	25-10-46

Q. 869-D-6247

M.F.B. 387  
750-A-4-46 (9016)  
H.Q. 1772-39-440

DEPARTMENT OF NATIONAL DEFENCE—(ARMY)

CROSS REFERENCE

D.650525

GEORGES ANDRE DUFRESNE,

R.S. & P.

SECTION  
"C"  
DVA

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")		
	PA	8-11-46	FH	NSG	Passed Ob.	FH	30-10-46
	PA	2/1/46			Per Requisition C.R. NOV 7 - 1946		
NOV - 8-1946	PA	7/1/46		J.A.			
JUN 7 - 1947	PA	6/1/47		D.M.	PER REQUISITION JUN 5 - 1947		
				D Admin.	PER REQUISITION		APR 11 1949
				CTO	Memoranda		2/1/49
MAY 25 1949				D/Com.	Min. 2.		MAY 16 1949
MAY 31 1949				D Admin	PER B.F. MAY 27 1949		
				D Admin	PER B.F. JUN 9 1949		
				Adm Act.	Memoranda		11 June 49
				CTO	Based - pl		14 June 49
307949				A.S. Auto	Transo pas.		20/6/49
				CTO	min <sup>11</sup> pl		4 July 49
				DM	memo please		6-7-49
				CTO			7-6-49
				D/ADM	with cheque		14/7/49
				Trans	Per FT and pass 5:4 pl		20/7/49
				D.M.			JUL 21 1949
1949	PA	10/7/49		Admin A2(L)			22/7/49
	PA	14/50		3d	PER REQUISITION		APR 13 1950

A-459

# ACTION REQUIRED ON DAILY ORDERS PART II

UNIT: No 2 District Depot CA

ADDRESS: Toronto, Ont

NDHQ  
OTTAWA

Date: 11 Jan 45

Sheet No. 1 Clerk No. Records L.A.

REGIMENTAL No.	NAME	YOUR D.O. PART II No.	DATED	OBSERVATIONS	ACTION TAKEN (SEE FOOTNOTE)		
					No.	DATE	EXPLANATION
D-650525	<p><u>PUNISHMENT</u>                      Reprimanded for an offence para 30(f) under Sec 15(1) AA AWL from 0730 hrs 27 Dec 44 to 0730 hrs 4 Jan 45 (8 days) Forf 8 day's pay under FR&amp;I 149(1)(a) Total forf 8 day's pay 4 Jan 45                      Pte DUFRESNE G A</p>	7	9 Jan 45	<p>A Pte cannot be reprimanded                      KR (Can) 470</p> <p style="color: red; text-align: center;">TO: Admin                      For whatever action you may deem necessary</p>			
<p><i>[Signature]</i> (Legal Adviser)                      Director of Records (Army)</p> <p style="text-align: center;">(Originator)</p>					<p>.....                      (Signature of O.C. Unit)</p>		

NOTE—It is requested that the O.C. Unit insert the number and the date of the amending DAILY ORDER PART II, and/or any explanatory remarks in the "Action Taken" column. This form MUST then be returned—without delay—to the originator.

24 Jan 45

District Officer Commanding  
Military District No. 2  
TORONTO, Ontario

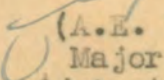
D-650525, Pte. DUFRESNE, G.A.

It is noted that para 30(f) of No. 2  
District Depot Daily Part II Order No. 7 dated 9 Jan  
45 contains the following entry:-

PUNISHMENT Reprimanded for an offence  
under Sed 15(1) AA AWL from 0730 hrs 27  
Dec 44 to 0730 hrs 4 Jan 45 (8 days) Forf  
8 days pay under FR&I 149(1)(a) Total  
forf 8 days pay...4 Jan 45.

2. A reprimand is not one of the punish-  
ments which may be awarded by a Commanding Officer to  
a private soldier. It is therefore considered that the  
award of a reprimand in this case is illegal and should  
be expunged from the records.
3. Please inform this Headquarters as to the  
action taken in this case.

AHD/NB

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

33



IN REPLY PLEASE QUOTE  
No. T-20-D-9107 (AJAG)

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

14th February, 1945,  
Headquarters, Military District No. 2,  
159 Bay Street, Toronto, Ontario.

The Secretary,  
Department of National Defence,  
OTTAWA, Ontario.

GENERAL REGISTRY Army  
PERS SEC.  
FEB 15 1945  
File  
C. Regd. to *Alman*

D-650525 - Pte. DUFRESNE, G.A.

Reference H.Q. 869-D-6247 Adm 3(a)1  
dated 24th January, 1945.

2. Advice has been received from the Officer Commanding, No. 2 District Depot, that, in accordance with the direction of the District Officer Commanding, Military District No. 2, the award of a reprimand has been expunged from the records of the marginally-named soldier. Necessary amendments have been made in Part II Daily Order No 34, Para 20(d) dated 5 Feb. 1945.

*Noted  
I.M.R. Sinclair  
OK 6 (b)  
19 Feb 45*

*I.M.R. Sinclair*  
4  
Lt.-Colonel  
Officer Administering, M.D. No. 2.



# REPORT ON INJURIES

Other than Wounds Received in Action

TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS OVER PAGE WITHIN 48 HOURS OF OCCURRENCE

1. Statement to be signed by injured officer or soldier:

I, D-650525 Pte. DUPRESNE, Georges  
(a) (number) (b) (rank) (c) (surname) (Christian names in full)

#2 D.D. I.D.A.P. Toronto, Ont. hereby declare that the injury sustained by me  
(d) (unit)  
on the 2nd March 1945 did  
(e) (date of casualty) ~~did not~~\* occur while I was in the performance of military duty.

*[Signature]*  
(Signature of officer or soldier)

H.M.H. 2/Mar/45  
(station) (date)

(\*Part not applicable to be struck out and initialled by Officer or Soldier signing.)

2. (a) Description of injuries Small cut on palm of left hand--skin thickness only.

(b) Are the injuries serious or of such a nature that they *might* be the exciting cause of disability later? No.

(c) Whether admitted to hospital or sick in quarters? No.

(d) How long before initial treatment was given? 2 hours.

Date 2/Mar/45 Signature of medical officer (C. TAYLOR), Captain, R.C.A.M.C.

3. Short statement by injured person of the circumstances of the injury (see instruction 5). Signed statements of witnesses, or of persons to whom the injured person may have mentioned his injury, to be attached (see instructions 3 and 4):

While moulding at the International Harvester Malleable Foundries on March 2, 1945 at 1300 hrs., I cut my left hand on a piece of metal unseen in the sand, as I was levelling the mould off. Immediately I reported the accident to Robt. Robinson, superintendent, and was sent to the first-aid room. A bandage was put on at the first-aid room and I was sent to the Hamilton Military Hospital where I arrived at 1430 hrs.

*[Signature]*  
(Signature of officer or soldier)

*[Signature]*  
(Witness to signature of Officer or Soldier signs here)

## 4. Statement of Commanding Officer:

- (a) Was the individual in the performance of military duty? Yes
- (b) Nature of duty Industrial Duty at International Harvester, Hamilton
- (c) (i) Was it incurred in a game or other form of physical recreation definitely organized with the approval of the unit commander? n/a
- (ii) Was participation pursuant to orders, written or verbal?.....
- (d) If it was incurred on leave, was such leave with or without pay? n/a
- (e) Was the injured individual to blame? no
- (f) Was anyone else to blame? no
- (i) Whom?.....
- (g) Did the injury occur on military premises and if so in what part of such premises?.....  
at International Harvester Co. Hamilton, where detailed for duty.
- (h) Court of Inquiry:
- (i) Has one been held?.....
- (ii) Will one be held? no
- (iii) Date and place.....

Date 8 Mar 45.Commanding Thos. Buckley Sgt.  
(A.O. Thompson) Major,  
O.C. No. 2 General Employment Coy

## 5. Remarks of District Officer Commanding or Division Commander:

Forwarded:

Date 15 Mar 45(A.E. Potts) Maj-Gen., D.O.C., M.D. Co. 2.

## IMPORTANT INSTRUCTIONS TO BE FOLLOWED

1. This form is to be rendered within 48 hours after the event in all cases of accidental or self-inflicted injuries to an officer or soldier involving:

- (a) death,
- (b) absence from duty for 48 hours or more, or
- (c) absence from duty of less than 48 hours when the medical officer should invariably be consulted as to whether the injury may be the exciting cause of disability later.
- (d) in all accidents involving personnel whether there is evidence of injury or not.

2. A separate form is to be used in respect to each individual affected.

3. This form is to be rendered notwithstanding the holding of a court of inquiry or investigation. If a court of inquiry is held a copy of this form is to be included in the proceedings.

4. Full statements are to be taken by an officer from the witnesses of the accident or, where there was no witness, from any persons to whom the injured officer or soldier may have mentioned his injury immediately after the occurrence. These statements, when obtainable will be signed by the persons making them, and by the officer who takes them, and will be forwarded with this form. Where it is intended to take disciplinary action, duplicates of these statements should be retained by the unit for use in lieu of a summary of evidence.

5. Where it is possible to obtain it, a statement from the injured officer or soldier will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

6. This form will be prepared in triplicate, one copy to be retained by the unit and the two other copies to be forwarded to N.D.H.Q., through the usual channels. Where a Court of Inquiry is held the copies to be forwarded to N.D.H.Q. will be attached to the proceedings.

## SPECIAL INSTRUCTIONS AS TO EVIDENCE IN CASES OF SELF-INFLICTED WOUNDS

7. In these cases the statements mentioned in paragraphs 4 and 5 above should bring out all material points, e.g., statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).

8. An officer or a soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive this charge should not be used. The charge will therefore usually be laid under section 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under section 18 for wilful maiming.

TA 6651

29-8-45

CABLE NUMBER

PAGE

DATE

D.650525

PTE

REG'TL NUMBER

RANK

DUFRESNE

Georges Andre

NAME

(SURNAME)

(CHRISTIAN NAMES)

NO 2 GENERAL EMPLOYMENT COMPANY TORONTO.

SERVICE UNIT

NATURE OF CASUALTY

DATE

DIED IN HAMILTON MILITARY HOSPITAL HAMILTON ONT

ON AUGUST 19, 1945.

869-D-6247

DATE OF BIRTH

2 DAY

April

MONTH

1922

YEAR

P.Q.

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

MR. ADOLPHE DUFRESNE

(FATHER)

ADDRESS

18 ELlice ST., WATERLOO, QUE.

(M.F.M. 2 d-15-11-43)

ADDITIONAL PERSON TO BE NOTIFIED

ADDRESS

PARENT'S NAMES

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

no overseas service:

RELIGION

TRADE OR CALLING

LANGUAGES

Roman Catholic

machinist

French

MARITAL STATUS ON ENLISTMENT

PRESENT MARITAL STATUS

Single

Single

SOLDIERS ADDRESS ON ENLISTMENT

Waterloo, P.Q.

Montreal P.Q.  
15-FormentorTWACT  
CABLE CHECK

N. OF K. CHECK

TELEGRAM CHECK

1

mem

4

*Records*

VER V CIE NR 11

FROM COMMANDING TWO TORONTO 19 / / 1550Q

TO SECRETARY OTTAWA

GR 82 ET

TA 6651 UNCLASSIFIED THE FOLLOWING NZZZZ MESSAGE  
 RECEIVED BY DUTY OFFICER HQ MD 2 THIS DATE QUOTE  
 D 650525 PTE DUFRESNE G A NO TWO GENERAL EMPLOYMENT  
 COMPANY TORONTO DIED IN HAMILTON MILITARY HOSPITAL  
 HAMILTON ONT ON AUGUST NINETEENTH 45 STOP  
 HEADQUARTERS MD 2 HAVE BEEN NOTIFIED ALSO NEXT OF KIN  
 MR A DUFRESNE 18 ELLICE STREET WATERLOO QUEBEC STOP  
 SIGNED OC NO 2 GEN EMPLOYMENT COMPANY UNQUOTE  
 ADDSD SECRETARY RPTD MD 4



ET 19 / / 1610Q

L B

*191640*

*148*

**THIS IS AN ACTION COPY**  
**IF INCORRECTLY DELIVERED, COMPLETE**  
**BELOW AND RETURN TO A.S.Q. WOODS**

BRANCH	TIME	SIGNATURE

6335

*8*

MEMORANDUM

TO: Officer i/c Records

Department of National Defence (Army)

H.Q. \_\_\_\_\_

OTTAWA, ONT. MAR 17 1945

Will you please place one copy of M.F.B. 371 (Report on Injuries) now on this file, with the documents of the soldier(s) concerned.

*Filed 21.3.45 L.R. #*

*James Bennett*  
 J. E. MacDermid,  
 Colonel,  
 D. of Admin.

*Filed 21.3.45*

*7*

Ⓟ

869-D-620/7

In reply please quote

T-20-D-9107(A4)

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

Headquarters, M.D. No. 2,  
159 Bay Street, Toronto, Ont.  
15th March 1945.

The Secretary,  
Dept. of National Defence,  
OTTAWA, Ontario.

ADDITION  
ENTERED

CENTRAL REGISTRY ARMY  
PERS. SEC.  
MAR 16 1945  
File \_\_\_\_\_  
Chgd. to \_\_\_\_\_  
Referred to *Edm*

Injury - 2 Mar 45  
D-650525 Pte. Dufresne G.  
No. 2 D.D. I.D.A.P.

Attached hereto in duplicate, Reports on Injuries  
(M.F.B. 371) relative to an injury sustained by the margin-  
ally named.

*A. E. Potts*  
for (A. E. Potts) *copy*  
Major-General  
D.O.C. M.D. No.2

6

CLEAR

# ARMY MESSAGE

(OUTGOING)

FILE: H.Q. 869-D-6247  
DR 2(B)

PLACE

OTTAWA

DATE

21 AUGUST 1945

• COMMANDING TWO  
TORONTO

RECCAS 354 UNCLASSIFIED RETEL TA 6651 DATED 19 AUG 45 ADVISE CAUSE  
OF DEATH D650525 PRIVATE GEORGES ANDRE DUFRESNE

D RECORDS

ORIGINATOR'S INSTRUCTIONS

10

THIS MESSAGE MAY BE SENT AS WRITTEN BY ANY MEANS

DEGREE OF PRIORITY

TIME OF ORIGIN

EXCEPT INCLUDING } WIRELESS

211500 G

SIGNED \_\_\_\_\_

**COPY 5 FOR ORIGINATOR'S FILE**

10

CANADA  
OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER

D.650525

RANK

Pte.

SERVICE UNIT

#2 Gen Bap  
Coy., Toronto

NAME

DUPRESNE, Georges Andre

DATE OF BIRTH

2-4-22

DATE OF ENLISTMENT

15-11-43

MARITAL STATUS

single

RELIGION

R.C.

NEXT OF KIN AS SHOWN ON  
M.F.M. 1, 2 & 3 RELATIONSHIP

Father

NAME  
ADDRESS  
D.A.B.

Mr. Adolphe Dufresne E.C.  
Army

ADDRESS

18 Killico St.,  
Waterloo, Ont.

ADDITIONAL PERSON  
TO BE NOTIFIED

SEP 13 1945  
ADDRESS

PARENTS NAME

ADDRESS  
(IF SOLDIER  
MARRIED OVERSEAS)

File

Chapt. No.

Referral No.

AUTHORITY CAS. SIG. NO.

TA 6651 , T3 55 d/34 Aug 45 H.Q. 869-D-6247

CASUALTY DETAILS

DATE

DIED in Hamilton Military Hospital from  
injuries. Struck by private automobile

19-8-45

Records indicate that this soldier served  
in Canada only.

AMENDED AS TO CAUSE OF DEATH.

21

LAST WILL ATTACHED TO  
NOTIFICATION TO A. OF E.7

YES/NO

M.F.M.5. ATTACHED TO  
NOTIFICATION TO A. OF E.7

YES/NO

DATE

24 Aug 45.

FORM NO. CAS. 6  
25M-4-44 (4184)  
H.Q. 1772-39-1983-1990

*G. Robertson Capt*  
DIRECTOR OF RECORDS

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.

1741



CANADA  
OVERSEAS

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER **D650525** RANK **Pte.** SERVICE UNIT **#2 Gen Exp Coy., Toronto**  
 NAME **DUFRESNE, Georges Andre**

DATE OF BIRTH **2-4-1922** DATE OF ENLISTMENT **15-11-43**  
 MARITAL STATUS **Single** RELIGION **R.C.**

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP **Father** NAME **Mr. Adolphe Dufresne**  
 ADDRESS **18 Ellice St., Waterloo, Que.** ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME  
 ADDRESS  
 ( IF SOLDIER MARRIED OVERSEAS )

AUTHORITY CAS. SIG. NO.  
 CASUALTY DETAILS

**Signal TA 6651 d/19-8-45 H.Q. 869-D-6247**

DATE

**Died in Hamilton Military Hospital, Hamilton 19-8-45**

**Records indicate that this soldier served in Canada only.**

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.T.

YES/NO

M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.T.

YES/NO

DATE

**21 Aug 45.**

FORM NO. CAS. 6  
 25M-4-44 (4184)  
 H.Q. 1772-39-1989-1990

*J. R. B. [Signature]*  
 DIRECTOR OF RECORDS

**5**

**COPY FOR C. R. FILE**

DISTRIBUTION— 1-CDN. PENSION COMM. 2-CHAIRMAN D.A.B. 3-D.A.B. 4-CHAPLAIN SER. 6-D.O.C. FILE 7-GRAVES REG. 8-A.B. & C. LISTS.

le 22 août 1945.

Cher monsieur,

C'est avec un profond regret que j'ai appris la mort de votre fils, le soldat Georges André DUFRESNE, matricule D-650525, qui est mort alors qu'il était au service de sa patrie au Canada, le 19 août 1945.

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.

Votre bien dévoué,  
l'adjudant général,

(A.E. Walford)  
major général.

*amc*

M. Adolphe Dufresne,  
118, rue Ellice,  
Waterloo, Qué.

13

F.T.  
FOR TRANSLATION PLEASE

Ottawa 21 August, 1945.

Mr. Adolphe Dufresne,  
18 Ellice Street,  
Waterloo, Que.

D.650525 Private Georges Andre DUFRESNE

Dear Mr. Dufresne:

In connection with the regretted death of your son, the soldier marginally named, I am directed to forward herewith for your retention a copy of "Notes for the general information and guidance of the next of kin or other relatives of soldiers reported deceased" which no doubt will be of interest and assistance to you.

Yours truly,

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

*[Handwritten signature]*

le 22 août 1945.

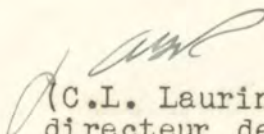
Soldat Georges André DUFRESNE, matricule D-650525.

Monsieur,

Relativement à la mort regrettable du militaire précité, je suis chargé de vous envoyer, pour que vous la conserviez, une copie des "Renseignements pour l'information et la gouverne des familles des militaires de l'Armée canadienne officiellement portés morts". Ces détails vous intéresseront sans doute et vous seront utiles.

J'ai l'honneur d'être votre bien dévoué,

Pour l'adjutant-général,

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

Pièce jointe

M. Adolphe Dufresne,  
118, rue Ellice,  
Waterloo, Qué.

/MA

10

*Records*

*2B*

THIS MESSAGE IS UNCLASSIFIED  
DATE 11/19/01 BY 60322 UCBAW/STW

IF INCORRECTLY DELIVERED, COMPLETE  
BELOW AND RETURN TO A.S. WOODS

BRANCH	TIME	SIGNATURE



VER V CIB NR 37  
 FROM CMDG 2 TORONTO 241150Q  
 TO SECTY OTTAWA  
 GR 69 BT

TZ 85 UNCLASSIFIED D 650525 PTE GEORGES ANDRE DUFRESNE NO 2 GEN EMPLOY-  
 MENT COMPANY DIED 1230 HRS 19TH AUG 45 HAMILTON MIL  
 HOSPITAL FROM INJURIES STRUCK BY PRIVATE AUTOMOBILE STOP  
 NO CIVIL INQUEST STOP COURT OF INQUIRY CONVENED STOP  
 CROWN ATTORNEY INFORMED AND WILL BE REPRESENTED STOP  
 ASCERTAINING WITNESSES FROM POLICE TO DECIDE DATE  
 70 COURT TO ASSEMBLE

BT 241344Q

EA B

*24/14/40*

67271

*16*

Director of Estates

Regimental No. D650525 Rank Private

DUFRESNE  
Surname

Georges Andre  
Christian Names

Unit #2 Gen. Emp. Coy. Toronto

Date of death 19 Aug 45 Place of Death CANADA

Casualty Details Died in Hamilton Military Hospital, Hamilton

Next-of-kin Mr. Adolphe Dufresne Relationship FATHER

Address 18 Ellice St., Waterloo, Que.

Will Will d/18 Nov. 43 herewith

Date 28 Aug. 45

EXCERPT OF M.F.M.5 dated Nov. 18.43

(1) Are you married? NO Children?

Wife's name) Names and  
and address) Ages

(2) Is your father alive? YES.. If so, state name and address.

Mr. Adolphe DUFRESNE, 18 Ellice St., Waterloo, Que., Can.

(3) Is your mother alive? YES.. If so, state name and address.

Mrs. Bernadette DUFRESNE (Boutillette), 18 Ellice St.,

Waterloo, Que., Can.

(4) Are you insured? YES..... If so, in what company?

Metropolitan Life Ins. Co.

LDH

Noted  
A. M. D. 2

*[Handwritten Signature]*  
ESTATES LIAISON

PA

869-D-6247

DIED (DROWNED)  
\*\*\*\*\*

CORPS OF ROYAL CANADIAN ENGINEERS

15. JURY, DOUGLAS, SPR., F77424, MRS. MARY LILLIAN JURY (WIFE),  
2 JOHNS CROSS COTTAGES, MOUNTFIELD,  
(NR. ROBERTS BRIDGE), SUSSEX, ENGLAND.  
  
DAVID JURY (FATHER),  
JOGGINS MINES, N.S.

CENTRAL ONTARIO REGIMENT

16. ARCHER, BURGESS DOUGLAS EAYERS, PTE., B138327, MRS. REBECCA L.  
ARCHER (MOTHER), 116 YARMOUTH RD.,  
TORONTO 4, ONT.

ALBERTA REGIMENT

17. RASMUSSEN, CHRISTIAN, PTE., M58623, MRS. MARIE RASMUSSEN (MOTHER),  
SAUNDERS, ALTA.

ROYAL CANADIAN ARMY SERVICE CORPS

18. KNUTSON, PALMER CLIFFORD, PTE., M36689, MRS. EDNA KNUTSON (MOTHER),  
Box 13, NAICAM, SASK.

=====

C.N.D.A.

WARRANT OFFICERS, N.C.O.s AND MEN

DIED  
\*\*\*

WESTERN ONTARIO REGIMENT

19. WELLMAN, WALLACE, PTE., A50533, MRS. MARY K. WELLMAN (WIFE),  
CHATHAM, ONT.

CENTRAL ONTARIO REGIMENT

20. CAMPBELL, BRUCE EARL, PTE., B155723, MRS. PEARL CAMPBELL (MOTHER),  
229 HATT ST., DUNDAS, ONT.

EASTERN ONTARIO REGIMENT

21. HANDY, ROBERT, PTE., C20909, MRS. MAUD HANDY (MOTHER),  
128 NELSON ST., OTTAWA, ONT.

22. SPRY, CECIL ANGUS, PTE., C35834, MRS. MARY SPRY (MOTHER),  
MADOC, ONT.

REGIMENT DE QUEBEC

23. Cancelled

24. DUFRESNE, GEORGES ANDRE, PTE., D650525, LDOLPHE DUFRESNE (FATHER),  
18 ELLICE ST., WATERLOO, QUE.

25. MIGNEAULT, GEORGES EMILE, PTE., C44367, MRS. OLIVINE MIGNEAULT  
(MOTHER), MONT-BRUN, QUE.

18

THE CANADIAN PENSION COMMISSION

MEMORANDUM

TO... Director of Administration, Dept. of  
National Defence, Ottawa, Ontario.

Ottawa, Sept. 5th, 1945.

FROM... Head Office, C.P.C.

D-650525 Pte. DUFRESNE, Georges Andre.

~~P. & N. H.~~

D.V.A. 506-G

With reference to the death of the marginally noted, will you please furnish the Commission with a copy of the Court of Inquiry proceedings at your earliest convenience.

*E. Clewes*  
E. Clewes,  
for

Canadian Pension Commission.

869-N-6247

14



OTTAWA 21 SEP 5

District Officer Commanding,  
Military District No. 2,  
Toronto, Ontario.

D.650526 - G.A. Dufresne

1. Information this soldier's file indicates that he died in Hamilton Military Hospital on the 19 Aug 45, from injuries received when he was struck by a private automobile.
2. Canadian Pension Commission has requested to be furnished with the proceedings of the Court of Inquiry.
3. May the proceedings of the Court of Inquiry be forwarded, please.

*HOB*  
HOB/TC

*[Signature]*  
(A. E. WALFORD),  
Major-General,  
Adjutant-General.

20



CANADA

IN REPLY PLEASE QUOTE No.

T-20-D-9107 (A-2b)

# DEPARTMENT OF NATIONAL DEFENCE

## ARMY

Headquarters, Military District No.2,  
159 Bay Street, Toronto, Ontario  
20 Sep 1945.

The Secretary,  
Dept. of National Defence,  
OTTAWA, Ontario.

ADDITION  
ENTERED

8

CENTRAL REGISTRY Army	
PERS. SEC.	
SEP 21 1945	
File	650525-6247
Chgd. to	
Referred to	<i>Adams</i>

Court of Inquiry - (Fatality)

D 650525 Pte. DUFRESNE, G.A.  
#2 Gen. Employ Coy.

Reference this Headquarters letter numbered as above, dated 5 Sep under cover of which M.Fs.B. 371 were forwarded and further to telegram TZ-85, dated 24 Aug 45.

2. Attached herewith in duplicate are the proceedings of the marginally noted Court of Inquiry inquiring into and reporting upon the circumstances surrounding the death of D-650525 Pte. DUFRESNE, G.A.

3. These documents are forwarded for approval pursuant to R.C. 5166 para 15(c).

Captain

for ( A. E. Potts )  
Major-General

D.O.C.

M.D. No.2

35

CR.

Please place on 22  
6247  
869-D-~~5247~~ + p.a.

28<sup>9</sup>/<sub>45</sub> *San Cuelletto* *1886*

37-473

\*N.B.—As this form is applicable to any Board of Officers or Committee or Court of Inquiry, the blank is to be filled in accordingly.

PROCEEDINGS of a\* COURT OF INQUIRY

assembled at TORONTO. ONTARIO.

on the 30th day of August 1945

by order of Major A.H.Woods. O.C. #2. General Employment Coy.

for the purpose of inquiring into and reporting upon the

circumstances surrounding the death of D-650525 Pte.

DUFRESNE. GEORGES ANDRE. on or about the 19th August 1945.

The signature of each Officer composing the Board, etc., should appear on the last page of this form in the space provided therefor.

PRESIDENT

(Thos. Bouckley) Capt. Second in Command. #2. General Employment Coy.

MEMBERS

(W.T. Smith) Lieut. Admin: Off: #2. General Employment Coy.

(J.W. Gibson) Lieut. Platoon Comd. #2. General Employment Coy.

The Court having assembled pursuant to order, proceed to hear the evidence.

First Witness.

D-650446. Pte. ROCHON. J.M. having been duly sworn states:-

At Burlington Beach, at approximately 0230 hours, 19 August 1945 I had been to a dance with Mrs. Reeves and Andre Dufresne. We were escorting Mrs. Reeves to her home, and I left them to go to a restaurant to buy some Cigarettes. I then went to Mrs. Reeve's house, and while there I heard a noise on the highway, and a girl came from across the road and told me there had been an accident. I went to the accident and saw Andre Dufresne lying on the side of the road. Mrs. Reeves was lying about thirty feet from him.

Question #1. How long have you known Andre Dufresne?

Answer #1. I met him a year ago in Valcartier, and we have been stationed together ever since.

Question #2. How long was it before a Doctor arrived?

Answer #2. About Five or Ten minutes.

Question #3. How long was it before an ambulance arrived?

Answer #3. A civilian ambulance came in about half an hour and took Dufresne away.

Second Witness. Miss.FRANCIS RUTH ATKINS? Aldershot having been duly sworn states:-

Shortly after 2 A.M. on the 19th August 45, P.O.Charles Sovereign and I were proceeding South in a car loaned by Clayton Maracle on highway No.2. approximately  $\frac{1}{2}$  mile past the junction of Highway No.20 and the Queen Elizabeth Highway. We slowed down to nearly a stop as we intended to go into a small restaurant on the right hand side, but it was closed, and we started up again and a few hundred yards on two people dashed out directly in front of us. P.O.Sovereign applied the brakes and swerved to the left in an effort to avoid hitting them, but it was useless as we did not have enough warning. We came to a stop on the other side of the road and found the woman we had hit was still clinging to the front of the car. I was told later that the soldier was lying back a few yards at the left of the road, but I did not see him as I was rushed away from the scene by a girl who worked in a restaurant just ahead of the scene of the accident.

Third Witness. Mr.R.D.BOOK. having been duly sworn states:-

At approximately 2.35 A.M. 19th August 1945 I was driving my car North bound on No.20 Highway, about 40 ft.in rear of an American car, when I noticed two people, a man and a woman walking arm and arm in the middle of the highway crossing from West to East diagonally and waiting for me to pass. At the moment the front end of my car had passed them a South-bound car struck the two pedestrians as they were opposite the door of my own car. I proceeded on, approximately 75 ft and swung completely around on the highway to make sure that it was not a Hit-and-Run driver. I stopped on opposite side of the highway where the injured pedestrian was lying, and noticed by the flow of blood from his mouth that he was very seriously hurt. I summoned a person who came from a nearby cottage to call a doctor immediately. I had previously noticed before the accident the Beach Police Cruiser car in the vicinity of Dyne's Hotel approx:  $1\frac{1}{2}$  miles South of the scene of the accident, and remembering this returned to notify them. They were not there but passed my car on the way back to the scene of the accident. When I arrived Back at the scene of the accident again I found the Burlington and Beach Police officers officiating. I then gave them the a/m details relating to that which I had witnessed.

Following are listed Appendices attached:-

- App<sup>o</sup> "A" Death Certificate.
- App. "B" M.F.B.371.
- App. "C" Certif: of Coroner re "No Inquest"
- App. "D" Letter from Crown Attorney.
- App. "E" Police Report.
- App. "F" Medical Report.
- App. "G" Hospitalization Cost.
- App. "H" Pay and Allowances.
- App. "I" Diagram of scene of Accident.

- The court below the following facts, from the witness as shown in the proceedings of Court of Inquiry and as follows:
1. That the cause of death was shock and hemorrhage due to fracture of the skull.
  2. That the time and place of death was approximately 12:15 AM at Hamilton Military Hospital, Hamilton, Ont.
  3. That the death was accidental.
  4. That the time of discovery was approximately 02:00 AM, 19 AM 44.
  5. That 1-350000, 1st, 1st, 1st, was 1st in rank and was 1st in class.

24

FINDING IF REQUIRED:— The Court deduce the following facts from the evidence as shown in the proceedings of Court of Inquiry are as follows:

1. That the cause of death was Shock and Hemorrhage due to Fracture of the Skull.
2. That the time and place of death was approx: 1240 hrs, 19 Aug 45 at Hamilton Military Hospital, Hamilton, Ont.
3. That the death was accidental.
4. That the time of discovery was approx: 0240 hrs, 19 Aug 45.
5. That D-650525, Pte. DUFRESNE, G.A. was NOT on duty and was NOT to blame.

Signed at Toronto, Ontario *Thos. Bouckley Capt* (Thos. Bouckley) Capt (Signature)

PRESIDENT

Toronto, Ontario #2. General Employment Coy (Unit)

this 7th day of September 1945 *W.T. Smith Lieut* (W.T. Smith) Lieut. (Signature)

September 1945 #2. General Employment Coy (Unit)

MEMBERS

*J.W. Gibson Lieut* (J.W. Gibson) Lieut. (Signature)

#2. General Employment Coy. (Unit)

Opinion of Commanding Officer:—

In my opinion D-650525, Pte. DUFRESNE, G.A. was NOT on duty, and was NOT to blame.

APPROVED NOV 28 1945

*[Signature]*  
OTTAWA, ONT MAJOR-GENERAL,  
Date..... ADJUTANT-GENERAL

*A.H. Woods*  
.....  
(A.H. Woods) Major,  
Officer Commanding,  
#2. General Employment Coy.

The Secretary  
Dept. of National Defence,  
OTTAWA, Ontario.

FORWARDED: This Headquarters concurs in the opinion of the Officer Commanding.

*A.E. Potts* Captain  
for (A.E. Potts)  
Major-General  
D.O.C. M.D.No.2

Date..20.Sep.1945.  
Toronto, Ontario.

APP "G"

28th August 1945

Hamilton Military Hospital,  
R.C.A.M.C? C.A.  
Gage Avenue N, Hamilton, Ont.

Capt. T. Bouckley,  
No. 2. General Employment Coy,  
Exhibition Barracks,  
Toronto, Ontario.

B-625525. Pte. DUBRESNE. A. (deceased)

As the marginally named deceased was hospital-  
ized here for a period less than 24 hours (8 hours),  
prior to his decease, there will be no charges re his  
hospitalization.

Signed:- Jas. McKeown Lieut.  
for B.L. Guyatt, Lieut. Col., O.C.  
Hamilton Military Hospital  
R.C.A.M.C. C.A.

Certified True Copy *Jos. Bouckley* ..... Capt.  
(Thos. Bouckley)  
President.  
Committee of Adjustment.



APP: "H"

No.2, General Employment Coy.,  
Toronto, Ontario  
~~15th~~ 6th September 1945

D-650525 - Pte DUFRESNE, Georges Andre.  
Deceased 1230 Hrs 19th Aug 45

Rate of pay per diem.....\$1.50

(No other allowances)

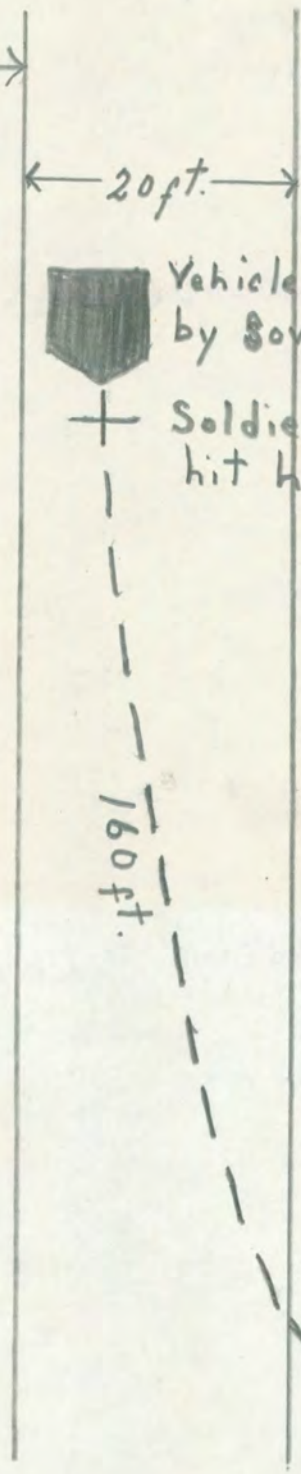
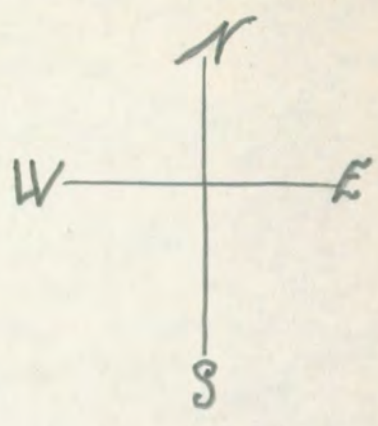
Certified correct.



.....Capt., RCAPC.,  
(H.D. BURK) Paymaster  
No.2, General Employment Coy.

25'

Highway No. 20  
(400yds south of  
junction of No. 20  
and Queen Elizabeth)



Vehicle driven  
by Sovereign



Soldier + Girl  
hit here



Soldier's body  
thrown off  
at 120ft. on other  
side of road.



Car comes to a stop  
160ft. on the other  
side of the road.  
(girl's body still on front  
of car.)

Diagram of accident, where D. 650525 <sup>24</sup>  
Pte. Dufresne, G. A. was killed, sketched by  
Lieut. J. W. Gibson with the aid of  
Constable K. Scott of the Burlington  
Police, at the scene of the accident.

WITNESS:

Major D.D. Campbell, Officer i/c Surgery,  
Hamilton Military Hospital, R.C.A.M.C., C.A.,  
Hamilton, Ontario, having been called and  
duly sworn, states:

"D-650525, Pte. DUFRESNE, A., was admitted  
to Hamilton Military Hospital on 19th August  
1945, at 0400 hours, having been knocked  
down by a car. He was deeply unconscious.  
He was bleeding and leaking spinal fluid from  
the back of his throat. There were multiple  
contusions and abrasions of his body and  
extremities. His condition was considered  
hopeless. He was treated for shock but did  
not respond, nor did he regain consciousness.  
He died about 1240 hours on the 19th August  
1945."

D.D. Campbell, Major, RCAMC  
Surgical Consultant.  
Hamilton Military Hospital.

APP 'C'

J. HEURNER MULLIN  
JAMES STREET SOUTH

THE OFFICE OF THE CHIEF CORONER  
FOR THE  
CITY OF HAMILTON  
CANADA

IN OFFICE  
BY APPOINTMENT

August 29th, 1945

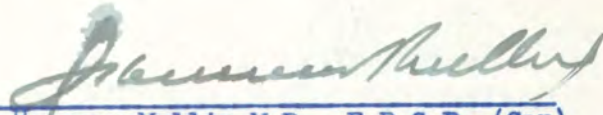
TO WHOM IT MAY CONCERN:

THIS IS TO CERTIFY THAT on August 19th, 1945, a Death was reported to me at the Military Hospital in Hamilton.

I proceeded as quickly as possible to the scene and viewed the Body, then in a bed on a Ward in that Hospital, which was later identified as Georges Andre Dufresne of No. 2 General Employment Coy., Toronto.

AND FURTHER THAT a Coroner's and Police Investigation is still in progress, which concerns an automobile accident in which the Deceased sustained injuries through which he later expired.

As a criminal charge has been laid against the driver of the automobile involved, no Coroner's Inquest will be held.



J. Heurner Mullin M.D., F.R.C.P. (Can)  
Chief Coroner for the City of Hamilton

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W. J. Dick, K.C.  
Barrister, Solicitor  
Notary Public



COUNTY OF HALTON

APP'D  
CROWN ATTORNEY  
AND  
CLERK OF THE PEACE

Milton, Ontario,  
September 5, 1945.

Lieutenant J. W. Gibson,  
No. 2DD General Employment Coy.  
Government Buildings, Exhibition Park,  
Toronto, Ontario.

Dear Lt. Gibson: Re : D650525, D. A. G. A.  
Aubrey Dufresne.

I beg to inform you that the Crown  
will not be represented at your Military Invest-  
igation into the death of the above named.

Yours very truly,

WID/B

30

APP. "E"  
Burlington, 24 Aug. 45.

At 2.00 P.M. Aug. 19<sup>th</sup> an accident occurred at Station "26 Burlington Beach in which Alice Mary Reeves was killed outright and Pte. Dufrone A. died 11 hours later.

F.O. Sovereign was operating the vehicle at the time it struck the aforesaid

Ruth G. Thins of Aldershot was driving with Sovereign at the time. The vehicle in question was owned by Clayton Marack, (a flying officer.)

The evidence would show that the two deceased were walking arm in arm, angling across the highway and were struck at a point almost in the center of the pavement and were dragged approx. 100 ft. and 131 ft. for the man and woman respectively. When the car came to rest off the pavement on the driver's wrong side of the road, the woman was found partly under the car, the man had fallen off. ~~There~~

There were no skid marks on the pavement that would indicate that the brakes of the car had been applied. The condition of the car was, as follows; (a) Brakes would not work unless the foot pedal was pumped. (b) There was no horn on the car. (c) No windshield wiper, and the windshield itself was very dirty. (d) The

left headlight was broken with the accident and the right one, remaining intact, was later tested as being "fair". There were no tail lights on the car.

The model of vehicle in question was a 1982 Plymouth coupe. It was bearing licence number "Y 2236".

An eye-witness to the accident was R. D. Book. (Beach address: "cottage 162, Station 36, Burlington.) (Permanent address: 28 London St. N., Hamilton.)

Witnesses likely to be summoned are:

- ✓ (1) Sr. Russell Dingle - Burlington (coroner)
- (2) Mr. James Goodbrand - Burlington
- ✓ (3) Ruth Atkins - Aldershot
- ✓ (4) R. D. Book - Cottage 162 - Burlington Beach
- (5) Constables, G. Scott  
H. Hunt
- (6) Chief constable Smith, L. J.
- (7) Robt. Rooker - Burlington.

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The above observations were made by Chief Smith & Constable Scott.

Lee P. Scott  
Chief Constable

PROVINCE OF ONTARIO  
VITAL STATISTICS ACT  
REGISTRATION OF DEATH

APP "A"  
Registration Number  
For use of Registrar General only.

COPY

1. PLACE OF DEATH **Re: D-550525 Pte. DUFRESNE G.A.**  
 City, Town or Village of **City of Hamilton** Street **Hamilton Military Hospital**  
 (If death occurred in a hospital or institution, give the name instead of street and number)  
 Township of **Barton** County or District of **Wentworth**

2. LENGTH OF STAY In Municipality where death occurred **About 8 hours** In Province **Since Nov. 14/44** In Canada (if immigrant) **Since May 19/44**  
 (in years, months and days)

3. PRINT FULL NAME OF DECEASED **DUFRESNE; Georges Andre**  
 (Surname or last name) (Given or Christian names)

4. PERMANENT RESIDENCE OF DECEASED:  
 City, Town or Village of **WATERLOO, QUEBEC** Street **18 Ellice St.**  
 Township of \_\_\_\_\_ County or District of **Shefford** Province of **QUEBEC**

5. SEX **MALE** 6. CITIZENSHIP **FR. CANADIAN** 7. RACIAL ORIGIN **FR. CANADIAN** 8. Single, Married, Widowed or Divorced **SINGLE** 9. BIRTHPLACE (Province or Country) **QUEBEC, CANADA**

10. Date of Birth **APRIL 2nd 1922** 11. AGE **23** Years **4** Months **18** Days If less than one day \_\_\_\_\_ hrs. or \_\_\_\_\_ min.

12. (a) Trade, profession or kind of work as spinner, grader, clerk, etc. **Mechinist (IN ARMY SINCE 15 Nov 43)**  
 (b) Kind of industry or business, as paper mill, lumber, bank, etc. **La Grandeur Auto Service, Waterloo, Que.**  
 (If "Labourer" specify kind of work above)

13. Date deceased last worked in this occupation **1943** 14. Total years spent in this occupation **3 years**

15. Name of deceased: **ADOLPHE DUFRESNE** (Surname or last name) **Adolphe** (Given or Christian names)  
 Name of mother: **Bouthiette** (Surname or last name) **Bernadette.** (Given or Christian names)  
 Place of birth: **Ontario, Canada** (Province or Country) Mother: **Quebec, Canada** (Province or Country)  
 I certify the foregoing to be true and correct to the best of my knowledge and belief.  
 Signed under my hand at **TORONTO, ONT.** this **21st** day of **AUGUST** 19 **45**  
 Nature of informant: **(A.H. Woods) Major** Relationship to deceased **nil**  
 Address **O.C. No. 2 General Employment Coy. Toronto, Ont.**  
 Method of Burial: **Removal** Date **August 20th** 19 **45**  
 (Month by name) (Day) (Year)  
 Place of Burial: **Waterloo, P.Q.** (Municipality) Cemetery **Roman Catholic**  
 Permit was issued by **James F. Barry** Address **Hamilton, Ontario**  
 Name of Registrar: **Truscott Bros.** Address **Hamilton, Ontario**  
 Additional notations (Office use only)

MEDICAL CERTIFICATE OF DEATH

23. DATE OF DEATH **August 19th** 19 **45**  
 (Month by name) (Day) (Year)

24. I HEREBY CERTIFY that I attended deceased from **CORONER'S INVESTIGATION (only)** 19 \_\_\_\_\_  
 to 19 \_\_\_\_\_, and last saw him/her alive on 19 \_\_\_\_\_

I Immediate cause Give disease, injury or complication which caused death, nor the mode of dying, such as heart failure, asphyxia, asthenia, etc.	CAUSE OF DEATH	DURATION		
		Yrs.	Mos.	Dys.
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	(a) <b>Shock and Hemorrhage</b> due to			
	(b) <b>Fracture of the Skull</b> due to			
	(c) <b>Violence</b> due to			
II Other morbid conditions (if important) contributing to death but not causally related to immediate cause.				

25. If a woman, was the death associated with pregnancy? \_\_\_\_\_ Duration \_\_\_\_\_ weeks. Was there a delivery? \_\_\_\_\_

26. Was there a surgical operation? **No** Date of operation \_\_\_\_\_ 19 \_\_\_\_\_  
 State findings \_\_\_\_\_ Was there an autopsy? **No**

27. If death was due to external causes (violence) fill in also the following:—  
 Accident, suicide or homicide? **Accident** Date of injury **August 19th** 19 **45**  
 (State which) (How sustained)  
 Manner of injury **Knocked down by automobile**  
 Nature of injury **See above**  
 Specify whether injury occurred in INDUSTRY, in HOME or in PUBLIC PLACE **Public Place**

Signed by **[Signature]** Designation **Chief Coroner & M.D.**  
 Address **Hamilton, Ontario** Date **August 29th** 19 **45**

Division Registrar's Record No. \_\_\_\_\_  
 Date of Record \_\_\_\_\_ (For use of Division Registrar only)  
 Signature of Division Registrar \_\_\_\_\_

ON HIS MAJESTY'S SERVICE.  
FASTEN Envelope by gumming this Label across Flap.  
OPEN by cutting Label instead of tearing Envelope.

EMBALMING DONE BY

TUSKITT BROS. UNDERTAKERS  
GRANGE ST. HAMILTON, ONT

MARGIN RESERVED FOR BINDING  
CITIZENSHIP (NATIONALITY) is defined in terms of person who was born in Canada or who has right of citizenship in Canada.  
RACIAL ORIGIN is defined in terms of the people or race to which the deceased belonged. The terms "Canadian", "Russian", "Ukrainian", etc.

MENT RECORD.  
should be used as descriptive of a citizen of another country.  
Irish, Scottish, French, German, CITIZENSHIP (NATIONALITY).

of Stillbirth consult reverse side before making out certificate.



PROVINCE OF ONTARIO  
VITAL STATISTICS ACT  
REGISTRATION OF DEATH

APP 'A'  
Registration Number  
For use of Registrar General only.

COPY

1. PLACE OF DEATH **Re: D-650525 Pte. DUFRESNE G.A.**  
City, Town or Village of **City of Hamilton** Street **Hamilton Military Hospital**  
(If death occurred in a hospital or institution, give the name instead of street and number)  
Township of **Barton** County or District of **Wentworth**

2. LENGTH OF STAY In Municipality where death occurred **About 8 hours** In Province **Since Nov. 14/44** In Canada (if immigrant) **Since May 19/44**  
(in years, months and days)

3. PRINT FULL NAME OF DECEASED **DUFRESNE; Georges Andre**  
(Surname or last name) (Given or Christian names)

4. PERMANENT RESIDENCE OF DECEASED:  
City, Town or Village of **WATERLOO, QUEBEC** Street **18 Ellice St.**  
Township of \_\_\_\_\_ County or District of **Shefford** Province of **QUEBEC**

5. SEX **MALE** 6. CITIZENSHIP **FR. CANADIAN** 7. RACIAL ORIGIN **FR. CANADIAN** 8. Single, Married, Widowed or Divorced **SINGLE** 9. BIRTHPLACE (Province or Country) **QUEBEC, CANADA**

10. Date of Birth **APRIL 2nd 1922** 11. AGE **23** Years **4** Months **18** Days  
(Month by name) (Day) (Year) (If less than one day hrs. or min.)

12. (a) Trade, profession or kind of work as spinner, grader, clerk, etc. **Mechinist (IN ARMY SINCE 15 Nov 43)**  
(b) Kind of industry or business, as paper mill, lumber, bank, etc. **La Grandeur Auto Service, Waterloo, Que.**  
(If "Labourer" specify kind of work above)

13. Date deceased last worked at this occupation **1943** 14. Total years spent in this occupation **3 years**

15. If married, widowed or divorced give name of husband or maiden name of wife of deceased **n/a**

16. Name of father **ADOLPHE DUFRESNE** (Surname or last name) **Adolphe** (Given or Christian names)

17. Maiden name of mother **Bouthiette** (Surname or last name) **Bernadette.** (Given or Christian names)

18. Birthplace: Father **Ontario, Canada** (Province or Country) Mother **Quebec, Canada** (Province or Country)

19. I certify the foregoing to be true and correct to the best of my knowledge and belief.  
Given under my hand at **TORONTO, ONT.** this **21st** day of **AUGUST** 19 **45**  
Signature of informant **A.H. Woods** Relationship to deceased **nil**  
**(A.H. Woods) Major**  
Address **O.C. No. 2 General Employment Coy. Toronto, Ont.**

20. Burial, Cremation or Removal **Removal** Date **August 20th** 19 **45**  
(Month by name) (Day) (Year)  
Place of Burial **Waterloo, P.Q.** (Municipality) Cemetery **Roman Catholic**

Burial Permit was issued by **James F. Berry** Address **Hamilton, Ontario**

21. Funeral Director: Name **Truscott Bros.** Address **Hamilton, Ontario**

22. Marginal notations (Office use only)

MEDICAL CERTIFICATE OF DEATH

23. DATE OF DEATH **August 19th** 19 **45**  
(Month by name) (Day) (Year)

24. I HEREBY CERTIFY that I attended deceased from **CORONER'S INVESTIGATION (only)** 19 \_\_\_\_\_  
to 19 \_\_\_\_\_, and last saw h. \_\_\_\_\_ alive on 19 \_\_\_\_\_

I Immediate cause Give disease, injury or complication which caused death, nor the mode of dying, such as heart failure, asphyxia, asthenia, etc.	CAUSE OF DEATH	DURATION		
		Yrs.	Mos.	Dys.
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	(a) due to <b>Shock and Hemorrhage</b>			
	(b) due to <b>Fracture of the Skull</b>			
	(c) <b>Violence</b>			
II Other morbid conditions (if important) contributing to death but not causally related to immediate cause.				

25. If a woman, was the death associated with pregnancy? \_\_\_\_\_ Duration \_\_\_\_\_ weeks. Was there a delivery? \_\_\_\_\_

26. Was there a surgical operation? **No** Date of operation \_\_\_\_\_ 19 \_\_\_\_\_  
State findings \_\_\_\_\_ Was there an autopsy? **No**

27. If death was due to external causes (violence) fill in also the following:—  
Accident, suicide or homicide? **Accident** Date of injury **August 19th** 19 **45**  
(State which)

Manner of injury **Knocked down by automobile**  
(How sustained)

Nature of injury **See above**  
Specify whether injury occurred in INDUSTRY, in HOME, or in PUBLIC PLACE **Public Place**

Signed by **[Signature]** Designation **Chief Coroner & M.D.**  
Address **Hamilton, Ontario** Date **August 29th** 19 **45**

Division Registrar's Record No. \_\_\_\_\_  
Date of Reg. \_\_\_\_\_ (For use of Division Registrar only) \_\_\_\_\_  
Signature of Division Registrar \_\_\_\_\_

MARGIN RESERVED FOR BIND  
CITIZENSHIP (NATIONALITY) is defined in terms of the country to which the person owes allegiance. The term "Canadian" should be used as descriptive of a person who was born in Canada or who has rights of Citizenship in Canada, unless he or she has subsequently become the citizen of another country.  
RACIAL ORIGIN is defined in terms of the people or race to which the person—traced through the father—belongs, whether English, Irish, Scottish, French, German, Russian, Ukrainian, etc. The terms "Canadian" or "American" should not be used for RACIAL ORIGIN, as they express CITIZENSHIP (NATIONALITY).

If birth consult reverse side before making out certificate.

## INSTRUCTIONS

**Physician's Statement of Cause of Death.**—The morbid conditions relating to the death should be stated in the certificate into two groups. In Group I are those related to the "Immediate Cause" of death, and in Group II, those related thereto. In most cases a statement of cause under Group I will suffice. Detailed certification is not desired, the entry of a single cause being preferable in all cases where this can be regarded as adequate (see Example I), but where the physician finds it necessary to record more than one cause it is important that these be stated in the position provided on the form as indicative of their mutual relationship. This information is sought so that the selection of the cause for tabulation may be made in the light of the certifier's viewpoint:—

- (a) Name first the "Immediate Cause" of death, i.e. the disease, injury or complication which caused death (not mode of dying or terminal condition).
- (b) Then give other morbid conditions (if any) of which it was the consequence, in order of causal relationship (due to) stating the most recent one first and then others in order.
- (c) Entries under Group II should be reserved for "other important contributory morbid conditions" in those instances particularly in which death was due to a combination of maladies, none of which would have been fatal alone. In such cases the physician's judgment alone can afford guidance to the tabulator.
- (d) Use always accepted terms for morbid conditions and never record mere symptoms.
- (e) **Maternal Deaths.**—Qualify all diseases resulting from childbirth, miscarriage or abortion by the word "Puerperal", e.g., puerperal septicaemia. Distinguish between septicaemia originating in abortion and in childbirth.
- (f) **Cancer.**—In all cases the organ or part first affected should be specified.
- (g) **Violent Deaths.**—Coroners, medical examiners and physicians who certify to deaths from violent causes should always clearly indicate the fundamental distinction of whether the death was due to **accident, suicide, or homicide**, and then state the manner and nature of injury. The circumstances of each accident should be stated as fully as possible, e.g., an **automobile accident** should always be designated as such.

The following examples illustrate the essential principles in the use of the form.

	Example I	Example 2	Example 3	Example 4	Example 5
I.					
Immediate Cause.....	(a) Lobar pneumonia	(a) Pulmonary tuberculosis	(a) Acute peritonitis	(a) Bronchopneumonia	(a) Uraemia
Morbid Conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	due to (b) _____	due to (b) _____	due to (b) Acute appendicitis	due to (b) Operation	due to (b) Chronic nephritis
	due to (c) _____	due to (c) _____	due to (c) _____	due to (c) Strangulated inguinal hernia	due to (c) _____
	II.	II.	II.	II.	II.
Other morbid conditions (if important) contributing to death but not causally related to immediate cause.	_____	_____	_____	Chronic interstitial nephritis	Chronic bronchitis

### STILLBIRTH

"A dead-birth (stillbirth) is the birth of a (viable) foetus, after at least twenty-eight weeks pregnancy, in which pulmonary respiration does not occur; such a foetus may die either: (a) before, (b) during or (c) after birth, but before it has breathed."

The special stillbirth registration form (buff coloured) must be used in registering a stillbirth.

APP 'B'

M.F.B. 371  
500M-6-42 (5118)  
H.Q. 1772-39-164

# REPORT ON INJURIES

Other than Wounds Received in Action

To BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS OVER PAGE WITHIN 48 HOURS  
OF OCCURRENCE

1. Statement to be signed by injured officer or soldier:

I, D-650525 Pte. Dufresne A. (Deceased)  
(a) (number) (b) (rank) (c) (surname) (Christian names in full)

#2 Gen. Epl. Coy. hereby declare that the injury sustained by me  
(d) (unit)  
on the 19-Aug-45 did not\* occur while I was in the performance  
(e) (date of casualty)  
of military duty.

(Signature of officer or soldier)

Hamilton Military Hospital 19-Aug-45.  
(station) (date)

(\*Part not applicable to be struck out and initialled by Officer or Soldier signing.)

2. (a) Description of injuries..... Closed head injury--profoundly unconscious.  
Leaking C.S.F. through back of throat. Multiple abrasions  
and contusions.

(b) Are the injuries serious or of such a nature that they might be the exciting cause of disability later? } Yes.  
Critically ill.

(c) Whether admitted to hospital or sick in quarters? } To hospital.

(d) How long before initial treatment was given? } Unknown.

Date 19-Aug-45. Signature of medical officer D.D. Campbell  
D.D. Campbell, Maj., RCANC, C.A.

3. Short statement by injured person of the circumstances of the injury (see instruction 5). Signed statements of witnesses, or of persons to whom the injured person may have mentioned his injury, to be attached (see instructions 3 and 4):

(Signature of officer or soldier)

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(Witness to signature of Officer or Soldier signs here)

## 4. Statement of Commanding Officer:

- (a) Was the individual in the performance of military duty? **No**
- (b) Nature of duty **N/A**
- (c) (i) Was it incurred in a game or other form of physical recreation definitely organized with the approval of the unit commander? **No**
- (ii) Was participation pursuant to orders, written or verbal? **XXXX. N/a**
- (d) If it was incurred on leave, was such leave with or without pay? **A.W.L.**
- (e) Was the injured individual to blame? **No**
- (f) Was anyone else to blame? **This soldier was the victim of an automobile accident. It is understood that the driver of the car is being charged with manslaughter.**
- (i) Whom?
- (g) Did the injury occur on military premises and if so in what part of such premises? **No**
- (h) Court of Inquiry:
- (i) Has one been held? **No**
- (ii) Will one be held? **Yes**
- (iii) Date and place **To be determined by H.Q.'s, M.D.2.**

Date **27 Aug 45**

*A.H. Woods*  
 Commanding **(A.H. Woods) Major.**  
**O.C. No. 2. Gen. Emp. Coy.**

## 5. Remarks of District Officer Commanding or Division Commander:

Date .....

## IMPORTANT INSTRUCTIONS TO BE FOLLOWED

1. This form is to be rendered within 48 hours after the event in all cases of accidental or self-inflicted injuries to an officer or soldier involving:

- (a) death,  
 (b) absence from duty for 48 hours or more, or  
 (c) absence from duty of less than 48 hours when the medical officer should invariably be consulted as to whether the injury may be the exciting cause of disability later.  
 (d) in all accidents involving personnel whether there is evidence of injury or not.

2. A separate form is to be used in respect to each individual affected.

3. This form is to be rendered notwithstanding the holding of a court of inquiry or investigation. If a court of inquiry is held a copy of this form is to be included in the proceedings.

4. Full statements are to be taken by an officer from the witnesses of the accident or, where there was no witness, from any persons to whom the injured officer or soldier may have mentioned his injury immediately after the occurrence. These statements, when obtainable will be signed by the persons making them, and by the officer who takes them, and will be forwarded with this form. Where it is intended to take disciplinary action, duplicates of these statements should be retained by the unit for use in lieu of a summary of evidence.

5. Where it is possible to obtain it, a statement from the injured officer or soldier will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

6. This form will be prepared in triplicate, one copy to be retained by the unit and the two other copies to be forwarded to N.D.H.Q., through the usual channels. Where a Court of Inquiry is held the copies to be forwarded to N.D.H.Q. will be attached to the proceedings.

## SPECIAL INSTRUCTIONS AS TO EVIDENCE IN CASES OF SELF-INFLICTED WOUNDS

7. In these cases the statements mentioned in paragraphs 4 and 5 above should bring out all material points, e.g., statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).

8. An officer or a soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive this charge should not be used. The charge will therefore usually be laid under section 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under section 18 for wilful maiming.

S-161

File No. T.20-D-9107 (R6).

DEPARTMENT OF NATIONAL DEFENCE  
A R M Y  
Headquarters, Military District No.2,  
159 Bay Street., Toronto, Ontario.

Date. 21 Sep 45.

Director of Records  
National Defence Headquarters,  
OTTAWA, Ontario.

D.650525 Pte. DUFRESNE, Georges Andre  
DECEASED

(4)  
ADDITION  
ENTERED

CENTRAL REGISTRY Army  
PERS. SEC.  
SEP 22 1945  
File 809-A-6247  
Chgd. to MR  
Referred to Adm 22-9

Herewith M.F.W. 2570 (Report of a Death) and  
M.F.W. 2643 (Registration of Graves) for the m/n deceased  
for inclusion with balance of documents forwarded to  
N.D.H.Q. 24 Aug. 45.

NER/HJC

*C. J. L. Day*  
(C. J. L. Day) Major,  
District Records Officer,  
Military District No.2.

38

6

MEMORANDUM

Department of National Defence (Army)

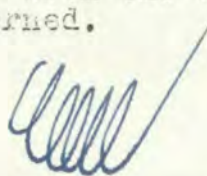
TO: Officer i/c Records

H.Q. \_\_\_\_\_

OTTAWA, ONT. \_\_\_\_\_

SEP 24 1945

Will you please place one copy of  
M.F.B. 371 (Report on Injuries) now on this  
file, with the documents of the soldier(s)  
concerned.



*Wes Barris*  
S. E. MacDermid  
Colonel,  
D. of Admin.

40

# FALSE DOCKET

H.Q. 869-D-6247 :

FALSE DOCKET

No. //

M.F.B. 387a  
450M-11-44 (5891-5948)  
H.Q. 1772-39-455

DEPARTMENT OF NATIONAL DEFENCE, OTTAWA

CROSS REFERENCE

D.650525

GEORGES ANDRE DUFRESNE

F.D.

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")					
		10 <sup>109</sup> 24	HAR	D.R.	with 2:00 SEP 24 1945		

39

DEPARTMENT OF NATIONAL DEFENCE  
(ARMY)

COURT OF INQUIRY - Death  
D.650525 Pte. DUFRESNE G.A.  
#2 Gen. Employ Coy.

Admin. No. 37473

HQ 869-D-6247 Adm.4(b)4

Date of Accident 19 Aug 45

OTTAWA, Ont. 27 Sep 45

Court Sat 30 Aug 45

Proc. forwarded 20 Sep 45

Proc. endorsed by DOC 20 Sep 45

PRECIS OF EVIDENCE: On 19 Aug 45 D.650525 Pte. Dufresne G.A. who had been attending a dance at Burlington Beach near Hamilton proceeded to cross the highway in company of a woman by the name of Mrs. Reeves. Approximately a quarter of a mile passed the junction of No.20 and Queen Elizabeth highways, both Pte. Dufresne and Mrs. Reeves were struck by a motorcar operated by P.O. Charles Sovereign, and owned by Clayton Maracle, proceeding in a southerly direction.

MEDICAL EVIDENCE: Death from injuries to head. A criminal charge has been laid against the driver of the automobile involved.

OPINION OF OC: In my opinion D.650525 Pte. Dufresne G.A. was not on duty and was not to blame.

OPINION OF DOC: Concurs.

REMARKS: No coroner's inquest was held. A criminal charge has been laid against the driver of the automobile. The provisions of RO 3022 have been complied with. Pass to D.G.M.S.

FINDINGS OF THE COURT: The cause of death was shock and hemorrhage due to fracture of the skull. Died at approximately 1240 hrs at Hamilton Military Hospital. Death was accidental. The time of discovery was approximately 0240 hrs 19 Aug 45. D.650525 Pte. Dufresne G.A. was not on duty and not to blame.

HOH/YDH

*H.O. Kessell*  
(H.O. Kessell) Lieut.

Admin.4(b)4

41



DEPARTMENT OF NATIONAL DEFENCE  
-Army-

TO: J.A.G.  
(Attention of Major P. Belcourt)

In reply quote No.

OTTAWA,

5-10/45

The proceedings of a Court of Inquiry  
(or Investigating Officer's Report) hereunder are passed  
herewith for necessary action and return to D. of Admin.  
please.

Admin  
Pls advise what, if any  
damages were incurred by  
the Crown herein. J.A.G.  
9/10/45

*J. E. MacDermid*  
(J. E. MacDermid)  
Colonel,  
D. of Admin.

RECEIVED  
Claims Section

OCT 6 1945

43  
J. A. G.



DEPARTMENT OF NATIONAL DEFENCE  
ARMY

In reply quote No. HQ 869-D-6247

Adm. 4(b)4

27 Sep 45

TO: D.G.M.S.

COURT OF INQUIRY / Death  
D.650525 Pte. Dufresne G.A.  
#2 Gen. Employ. Coy.

Proceedings of this Court of Inquiry held to inquire into the death of this soldier is passed for your consideration of the medical evidence therein.

*D. Adm*  
1. (a) yes  
    (b) yes  
    (c) no

2. no further  
    comments pls.  
    Ethnicity and  
    for  
    Review - cover

- (a) Are you satisfied as to the cause of death.
- (b) Is the medical evidence satisfactory.
- (c) Is there any negligence with respect to medical attention.

2. Your further comments would be appreciated.

Your further comments would be appreciated.

42

DATE

15-10-45

To CENTRAL REGISTRY.

Please cancel

adm 5-10-45

B. F. of

869-D-6247

To be pinned to face of  
Jacket affected

W.D.H.  
adm of B.H.  
P

M. F. B. 389

1,500 Pads of 100—12-43 (3264)  
H.Q. 1772-39-281

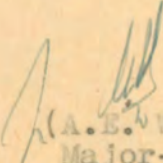
OTTAWA, 16 Oct, 5

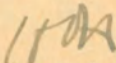
District Officer Commanding,  
Military District No. 2,  
Toronto, Ontario.

D.650525 Pte Dufresne, G.A.

Reference T-20-D-9107 (A-2b) dated 20 Sep 45.

2. May a statement be forwarded showing what, if any, damages were incurred by the Crown herein, please.

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

  
HOH/TC

44



IN REPLY PLEASE QUOTE

No. T-20-D-9107 A2 b

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

Headquarters M.D. No 2,  
159 Bay St., Toronto Ont.,  
2 November 1945

The Secretary,  
Dept. of National Defence,  
OTTAWA Ontario.

Court of Inquiry - Death  
D.650525 Pte. DUFRESNE, G.A.

ADDITION ENTERED  
CENTRAL REGISTRY Army  
PERS. SEC.  
NOV 3 1945  
File \_\_\_\_\_  
Chgd. to \_\_\_\_\_  
Referred to \_\_\_\_\_

✓ 16 Oct 45 Reference HQ 869-D-6247 (Adm 4 (b)4) dated

2. Attached hereto in duplicate is an expense account for the marginally named soldier.

*Hammerfeld*  
Captain  
for (A.E. POTTS)  
Major-General  
D.O.C. M.D. No 2

47



CANADA

IN REPLY PLEASE QUOTE No.

6-0D

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

No. 2 General Employment Coy.,  
Toronto Ont., 30 Oct 45.

Headquarters,  
M.D. No 2,  
Toronto Ont.

Court of Inquiry - Death  
D.650525 Pte. DUFRESNE, G.A.

Reference your T-20-D-9107 dated 20 Oct 45  
pertaining to Court of Inquiry on A/M

Expense account for A/M itemized-

Cost of telephone conversations on A/M....	\$14.30
Telegrams.....	.69
Hotels expenses, etc..Sgt Martin J.A.....	\$14.00
Travelling Warrants for Sgt. Martin J.A. and Body to Waterloo Que.....	\$43.14
<u>Total Expense....</u>	<u>\$72.12</u>

*94-45-  
J.A. -  
To notes  
AD/General  
admiral 10/14*

Thos. Bouckley Capt  
for (A.H. Woods) Major  
Officer Commanding  
#2 General Employment Coy.

46



CANADA

IN REPLY PLEASE QUOTE No.,

6-0D

# DEPARTMENT OF NATIONAL DEFENCE

ARMY

No. 2 General Employment Coy.,  
Toronto Ont., 30 Oct 45.

Headquarters,  
M.D. No 2,  
Toronto Ont.

Court of Inquiry - Death  
D.650525 Pte. DUFRESNE, G.A.

Reference your T-20-D-9107 dated 20 Oct 45  
pertaining to Court of Inquiry on A/M

Expense account for A/M itemized-

Cost of telephone conversations on A/M....	\$14.30
Telegrams.....	.69
Hotels expenses, etc..Sgt Martin J.A.....	\$14.00
Travelling Warrants for Sgt. Martin J.A. and Body to Waterloo Que.....	\$43.14
Total Expense....	\$72.12

Thos. Bouckley Capt  
for (A.H. Woods) Major  
Officer Commanding  
#2 General Employment Coy.

46

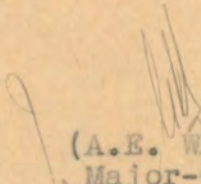
OTTAWA, 20 Nov, 5

District Officer Commanding,  
Military District No. 2,  
Toronto, Ontario.

D.650525 G.A. DUFRESNE

Reference T-20-D-9107 (A-2b) dated 20  
Sep 45.

2. Returned herewith one copy of the proceedings of this Court of Inquiry duly approved.
3. Attached hereto please find one copy of the precis for unit file.

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

49





In reply quote No. H.Q. 869-D-6247 (JAG/C)

DEPARTMENT OF NATIONAL DEFENCE  
ARMY  
INTER-OFFICE CORRESPONDENCE

Ottawa.  
November 14th, 1945.

To: Admin.

Re: Court of Inquiry - Death  
D.650525 Pte. Dufresne, G.A.

It is doubtful whether there is a legal basis upon which the Crown could claim reimbursement of the expenses incurred by reason of the death of the marginally noted soldier. In any event, I understand that it is not the policy of the Department to make claims under circumstances such as these. The file is accordingly returned to you as no further action is required by this office.

*R. J. Orde*  
(R.J.Orde) Brigadier,  
Judge Advocate-General.

BMA/7058/MW.

48



DEPARTMENT OF NATIONAL DEFENCE  
ARMY

In reply quote No. H.Q. 869-D-6247 (Adm 4b4)

OTTAWA, 20 Nov, 45.

TO: Records

D.650525 G.A. DUFRESNE

It appears the material on files H.Q. 869-D-6247 and H.Q. 869-D-7476 in many respects refers to one and the same soldier and the same accident.

If this is so, may the files be combined, please.

*HOH*  
HOH/7330/TC

*[Signature]*  
(H.M. Cathcart),  
Colonel,  
D. Adm.

50

D.M.O.

19 Aug 45



# REPORT ON INJURIES

Other than Wounds Received in Action

D-9107

1. Certificate to be signed by injured officer or soldier:

I, B-625525 Pte. Dufrene, A. 20-D-9107  
 (a) (number) (b) (rank) (c) (surname) (Christian names in full)  
#2 D.D. hereby declare that the injury sustained by me  
 (d) (unit)  
 on the 19 Aug 45 did\*  
 (e) (date of casualty) did not\* occur while I was in the performance  
 of military duty.

(Signature of officer or soldier)

Hamilton Military Hospital, 19 Aug 45.  
(station) (date)

2. (a) Description of injuries Closed head injury - profoundly unconscious. Leaking C.S.F. through back of throat. Multiple abrasions and contusions.

(b) Are the injuries serious or of such a nature that they might be the exciting cause of disability later? } Yes  
 } Critically ill.

(c) Whether admitted to hospital or sick in quarters? } To hospital.

(d) How long before initial treatment was given? } Unknown.

Date 19 Aug 45. Signature of medical officer D. D. Campbell

D.D. CAMPBELL, Major, RCMC. CA

3. Short statement by injured person of the circumstances of the injury (see instruction 5). Signed statements of witnesses, or of persons to whom the injured person may have mentioned his injury, to be attached (see instructions 3 and 4):



57

\*Strike out whichever is not applicable.

12

## 4. Statement of Commanding Officer:

- (a) Was the individual in the performance of military duty?..... **No**
- (b) Nature of duty..... **N/A**
- (c) Was it incurred in a game or other form of physical recreation definitely organized with the approval of the unit commander?..... **No**
- (d) If it was incurred on leave, was such leave with or without pay?..... **A.W.L.**
- (e) Was anyone else to blame? **This soldier was the victim of an automobile accident. It is understood that the driver of the car is**  
 (i) Whom? **being charged with manslaughter.**
- (f) Did the injury occur on military premises and if so in what part of such premises?..... **NO**

## (g) Court of Inquiry:

- (i) Has one been held?..... **No**
- (ii) Will one be held?..... **Yes**
- (iii) Date and place..... **To be determined by H.Q. M.D. 2.**

Date..... **27 Aug 45**..... Commanding **A.H. Woods**  
 (A.H. Woods) Major,

5. Remarks of District Officer Commanding or Division Commander: **#2 General Employment Coy.**

Date..... **5 Sep 45**..... **Forwarded**  
 for (A.E. Potts) Maj. Gen. D.O.C. M.D. No. 2 **Captain**

6. Received by N.D.H.Q. ....

7. Forwarded to D.P.N.H. ....

## INSTRUCTIONS

1. This form is to be rendered within 48 hours after the event in all cases of accidental or self-inflicted injuries to an officer or soldier involving:

- (a) death,  
 (b) absence from duty for 48 hours or more, or  
 (c) absence from duty of less than 48 hours when the medical officer should invariably be consulted as to whether the injury may be the exciting cause of disability later.  
 (d) in all accidents involving personnel whether there is evidence of injury or not.

2. A separate form is to be used in respect to each individual affected.

3. This form is to be rendered notwithstanding the holding of a court of inquiry or investigation. If a court of inquiry is held a copy of this form is to be included in the proceedings.

4. Full statements are to be taken by an officer from the witnesses of the accident or, where there was no witness, from any persons to whom the injured officer or soldier may have mentioned his injury immediately after the occurrence. These statements, when obtainable will be signed by the persons making them, and by the officer who takes them, and will be forwarded with this form. Where it is intended to take disciplinary action, duplicates of these statements should be retained by the unit for use in lieu of a summary of evidence.

5. Where it is possible to obtain it, a statement from the injured officer or soldier will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

6. This form will be prepared in triplicate, one copy to be retained by the unit and the two other copies to be forwarded to N.D.H.Q., through the usual channels. Where a Court of Inquiry is held the copies to be forwarded to N.D.H.Q. will be attached to the proceedings.

## SPECIAL INSTRUCTIONS AS TO EVIDENCE IN CASES OF SELF-INFLICTED WOUNDS

7. In these cases the statements mentioned in paragraphs 4 and 5 above should bring out all material points, e.g., statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).

8. An officer or a soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive this charge should not be used. The charge will therefore usually be laid under section 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under section 18 for wilful maiming.

(To be pinned on outside cover of file)

ADMINISTRATION 4

Date

29 Oct 45

TO: Registry Clerk (Adm. 4)

Is there any record of a Court of Inquiry or Investigating Officer's Report either at C.R. or in this office, with respect to:

Death of \_\_\_\_\_ date \_\_\_\_\_

Injury to Pte. Dufrene, A date 29 Aug 45

M.V. Acc. re \_\_\_\_\_ date \_\_\_\_\_

Claim \_\_\_\_\_ date \_\_\_\_\_

[Signature]  
Officer's Signature

CLERK'S REMARKS

No court Siv, Ed

29/10/45

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16

M E M O R A N D U M

Department of National Defence (Army)

TO: Officer i/c Records

H.Q. \_\_\_\_\_

OTTAWA, ONT. \_\_\_\_\_

SEP 25 1945

Will you please place one copy of  
M.F.B. 371 (Report on Injuries) now on this  
file, with the documents of the soldier(s)  
concerned.

*W. E. MacDermid*  
W. E. MacDermid  
Colonel,  
D. of Admin.

*FOR*

63

*to file*

*sent to SR check  
for Regt No. 1*

In reply please quote

T-20-D-9107 (A-4f)

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

Headquarters, M.D. No. 2,  
159 Bay Street, Toronto, Ont.  
5 Sep 1945. *By*

The Secretary,  
Dept. of National Defence,  
OTTAWA, Ontario.

CENTRAL REGISTRY Army
PERS. SEC.
869- <del>11</del> 7476
SEP 24 1945
File.....
Chgd. to.....
Referred to <i>Admin</i>

Injury - 19 Aug 45.  
B.625525 Pte. DUFRENE, A.  
No. 2 District Depot.

Attached hereto in duplicate are M.F.S.B. 371  
(Reports on Injuries) relative to an injury sustained by  
the marginally named.

*A. E. Potts* Captain  
for (A. E. Potts)  
Major-General  
D.O.C. M.D.No.2

*52*

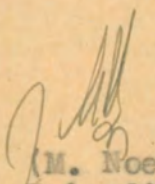
2 Nov 45

District Officer Commanding,  
Military District No.2,  
TORONTO, Ont.

Injury - 19 Aug 45  
E.625525 Pte. Duffrene, A.  
No.2 District Depot

Ref T-20-D-9107 (A-4f) dated 5 Sep 45  
enclosing MFB 371 in duplicate.

2. Form MFB 371 para 4(g) indicates a  
Court of Inquiry would be held.
3. May the proceedings of the Court  
be forwarded please.

  
(M. Noel)  
Brigadier  
Acting Adjutant General

  
HCH/CE

55

6





DEPARTMENT OF NATIONAL DEFENCE  
ARMY

In reply quote No. H.Q. 869-D-6247 (Adm 4b4)

OTTAWA, 20 Nov, 45.

TO: Records

D.650525 G.A. DUFRESNE

It appears the material on files H.Q. 869-D-6247 and H.Q. 869-D-7476 in many respects refers to one and the same soldier and the same accident.

If this is so, may the files be combined, please.

HOH/7330/TC

*D. Admin  
Combined  
23/11/45  
BA for LR*

*H.M. Cathcart*  
(H.M. Cathcart),  
Colonel,  
D. Adm.

57



DEPARTMENT OF NATIONAL DEFENCE  
ARMY

Headquarters M.D. No 2,  
159 Bay St., Toronto Ont.,  
15 November 45

The Secretary,  
Dept of National Defence,  
OTTAWA Ontario.

CENTRAL REGISTRY ARMY  
PERM SEC. (4)  
NOV 15 1945  
869-D-7476  
ADDITION ENTERED  
Referred to [Signature]

Injury - 19 August 45  
B.625525 Pte. DUFRENE, A.

Reference HQ 869-D-7476 (Adm 4(b)4) dated  
2 Nov 45

2. On the 20 Sep 45 the marginally noted Court of Inquiry was forwarded to your Headquarters in duplicate. Herewith is one copy of the Proceedings and it is requested that these be returned to this Headquarters in order that our files may be completed.

3. Your attention is also directed to this Headquarters letter dated 2 Nov 45 under cover of which an expense account for the marginally named soldier was forwarded.

*[Signature]*  
Captain  
for (A.E. POTTS)  
Major-General  
D.O:C. M.D. No 2

56


OTTAWA, 28 Nov, 5

District Officer Commanding,  
Military District No. 2,  
Toronto, Ontario.

D.650525 DUFRESNE, G.A.

Reference T-20-D-9107 (A2b) dated 15  
Nov, 45.

2. Returned herewith one copy of the proceedings of this Court of Inquiry duly approved.

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

  
HOH/TC

58

DATE.....

28 <sup>11</sup>/<sub>40</sub> -

To CENTRAL REGISTRY.

Please cancel

adm 28 <sup>11</sup>/<sub>40</sub> -

B. F. of.....

869-D-6247

Cancelled

1005  
skin 40514

To be pinned to face of  
Jacket affected

M. F. B. 389

1,500 Pads of 100—12-41 (3264)

H. Q. 1772-30-281

Cancelled

H.Q. File No. 869-D-6247 D.R. 7(a)DEPARTMENT OF NATIONAL DEFENCE  
- A R M Y -

OTTAWA, Canada. 20 Oct 45

The Canadian Pension Commission,  
Department of Pensions and National Health,  
Daly Building,  
OTTAWA.DOCUMENTATION, C.A.(A).D-650525 Pte. Georges Andre DUFRESNE  
#2GE Coy

Records indicate that the marginally  
named died on the 19 Aug 45  
Toronto, Ontario.

Documents covering his service in the  
Canadian Army (Active) have now been received and are on file  
in this Office.

For your information, please.

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

*for*

*60*

CASE - A.41

405 F.G.9-10-6247

DISCHARGE DOCUMENTS HAVE BEEN DETACHED  
AND PLACED IN DOCUMENT ENVELOPE IN  
RECORD OFFICE N.D.H.Q.

DATE \_\_\_\_\_

C.A.S.F. A.28

Director of Records  
A. G. Branch  
NOV 9 1945  
Nat. Defence Hq.  
Ottawa, - Canada

62

S-161

File No. T.20-D-10343 (R6)

DEPARTMENT OF NATIONAL DEFENCE  
A R M Y  
Headquarters, Military District No.2,  
159 Bay Street., Toronto, Ontario.

Date. 24 Aug. 45

Director of Records (Army)  
National Defence Headquarters,  
OTTAWA, Ontario.

✓ 869-D-6247  
D.650525 Pte. DURRENE, A.  
Deceased

Herewith regimental documents as listed below  
pertaining to service in the C.A. of the m/n who died  
at Hamilton Military Hospital 19 Aug. 45. MFW 2570  
and MFW 2643 will be forwarded upon receipt from Officer  
Commanding #2 Gen. Emp. Coy., Toronto, Ont.

MFM 2 dup ✓  
MFM 1&2A ✓  
MFM 4 ✓  
MFM 6 ✓  
MFM 105A ✓  
Trade Training ✓  
MFM 196 ✓  
MBM 1 Pt. 1 ✓  
MFB 465 ✓  
MBM 1 Pt. III ✓  
MFM 469 ✓  
MFM 213 ✓  
MFM 468 ✓  
Med. Misc. ✓

DOCUMENTS RECEIVED  
IN DISCHARGE SECT.  
OCT 5 1945  
DIRECTORATE OF  
RECORDS, N.D.H.Q.

NER/HJC

*L. Day*  
(L. Day) Major,  
District Records Officer,  
Military District No.2.

DISCHARGE DOCUMENTATION

CHECKERS' OBSERVATIONS

No. D-650528 RANK Plt NAME Dufresne Georges Andre

(Deceased)

19-8-45

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.....
- D.V.A. 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:—


**PLACE ON FILE AND**  
**P. A. ....**  
DR7a

13  
mea  
Checker.

869-D-6247

Date. OCT 19 1945



DR 2D → 

Local 3632

P

~~XXXXXXXXXX~~

F 235-

File photo 1200 hrs  
29 12/41

66

  
admission  
1/4



889-D-6247-

URGENT  
SPECIAL ENQUIRY



Date DEC 20 1945

No. 1929C

To: D. Admin

Reply addressed to P.M.A will be forwarded in duplicate (exclusive of file copy) to Special Enquiry Section, A.G. Branch, BY HAND at the earliest possible moment. If any part of the information is not available, or will involve a great deal of time to prepare, an Interim Reply or other advice will be forwarded to the Special Enquiry Section (Room 354 Aylmer Annex) immediately. Replies will be signed in the Directorate concerned, for the A.G.

D. Admin  
For your action please  
re claim - copy has been  
forwarded to D. Liaison  
for report re difference  
in pay.

*E. W. Atkinson*

E. W. Atkinson, Capt.  
SPECIAL ENQUIRIES  
A.G. COL-ORIG-3AG  
(S. E. Section)

DEC 20 1945

65

S.174

T-20-D-9107 (R6)

DEPARTMENT OF NATIONAL DEFENCE

A R M Y

Headquarters, Military District No. 2  
159 Bay Street, Toronto, Ontario

15th Dec. 45

Director of Records (Army),  
National Defence Headquarters,  
Ottawa, Ontario.

B.625525 DUFRESNE G.A.  
DECEASED

RECEIVED  
ADJUTANT GENERAL

REGISTRY Army  
REC.  
DEC 16 1945  
869-D-6247  
Referred to: *NR.*

Herewith Regimental Documents  
as listed hereunder, concerning the  
marginally named soldier. These docu-  
ments are forwarded for further com-  
pletion of his file, please.

- |  |                                    |
|--|------------------------------------|
| App. "A" Death Certificate             | APP. "G" Hospitalization Cost      |
| " "B" M.F.B. 371                       | " "F" Medical Report               |
| " "C" Cert. of Coroner re "No Inquest" | " "I" Diagram of scene of Accident |
| " "D" Letter from Crown Attorney       |                                    |
| " "E" Police Report                    |                                    |

*sm J.*

*C. J. L. Day*  
(C. J. L. Day), Major,  
District Record Officer,  
Military District No. 2.

NER/TJM

44



DEPARTMENT OF NATIONAL DEFENCE  
ARMY

In reply quote No. H.Q. 869-D-6247 (Adm 4)

OTTAWA, 31 Dec, 45.

TO: J.A.G.

D.650525 DUFRESNE, G.A.

This file is passed to you for consideration as to the claim made by A. Grandpre, Waterloo, Quebec through Mr. Marcel Boivin, M.P. on behalf of the father of the m/n soldier. *(advised 25 Nov 45)*

2. May your opinion be given, please, in order that a suitable reply may be forwarded.

*H.M. Cathcart*  
(H.M. Cathcart),  
Colonel,  
D. Adm.

GIS/5896/TC

83

Without Prejudice

January 23rd, 1946.

Mr. A. Grandpre,  
Notary,  
Waterloo, P.Q.

Dear Sir:     Re: D.650525 Pte. Andre Dufresne

Your letter of 25th November, 1945, addressed to Mr. Marcel Boivin, M.P. has been referred to this Department for consideration. Your letter indicates that a claim is being made against the Crown for some payment to Mr. Dufresne, Sr. as regards the difference between his Army pay and the amount which was paid by the International Harvester Company for the services of Pte. Andre Dufresne, but a reference is also made to some other claim due to the fact that Pte. Andre Dufresne was in the Army at the time of the accident.

Will you please write to me stating on exactly what grounds these claims are being made and itemize the amounts which your client is asking under each heading. The matter will then be referred to the appropriate legal officers of the Crown for their consideration and you will be informed of the decision which has been reached.

Yours truly,

84

  
DJC/MW.

Deputy Minister.

le 25 janvier 1946.

SOUS RESERVE DE TOUS DROITS:

Monsieur,

Votre lettre du 25 novembre 1945, adressée à monsieur le député Marcel Boivin, a été transmise à notre ministère pour qu'on l'étudie. D'après votre lettre, une réclamation est soumise à la Couronne pour qu'on paie à M. Dufresne, père, la différence entre la solde de l'armée et le montant qui a été versé par la compagnie International Harvester pour les services du soldat André Dufresne, matricule D-650525. On mentionne aussi une autre réclamation résultant du fait que le soldat André Dufresne était dans l'armée lors de l'accident.

Auriez-vous l'obligeance de me dire exactement sur quoi portent ces réclamations et détailler les montants que votre client demande sous chaque chef. La question sera ensuite soumise aux conseillers juridiques compétents de la Couronne, pour qu'ils l'examinent et dès qu'une décision aura été rendue, elle vous sera signalée.

Votre bien dévoué,

pour le sous-ministre,



(Paul Mathieu), colonel.

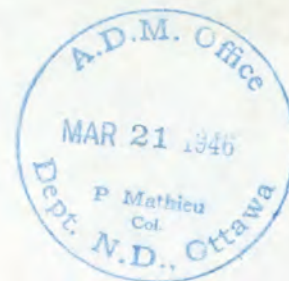
M. A. Grandpré, notaire,  
Waterloo, P.Q.

B

86



Chambre des Communes  
Canada



O t t a w a,  
le 20 novembre 1946.

Colonel Paul Mathieu,  
Sous-ministre de la Défense Nationale,  
Ottawa.

FOR TRANSLATION  
AND RETURN TO  
D.M. (A)

Mon cher Colonel,

re: soldat André Dufresne  
D-650525

Auriez-vous l'amabilité de  
m'aviser si vous avez donné suite à la lettre  
du notaire A. Grandpré en date du 1er février,  
relativement au cas du ci-haut mentionné.

Bien à vous,

Marcel Boivin, M.P.,  
Shefford,.

MB/sd



TRANSLATION  
TD/JLa  
22-3-46

D.M.(A)

House of Commons  
Canada

Ottawa, March 20, 1946.

Col. Paul Mathieu,  
Deputy Minister of National Defence,  
Ottawa.

My dear Colonel:

Re: D.650525, Pte André Dufresne.

Would you be kind enough to inform me if you have done anything to implement the request made by Notary A. Grandpré on February 1st, with reference to the above-mentioned.

Very truly yours,

(Sgd.) Marcel Boivin,  
M.P. for Shefford.

TRANSLATION

PO:GD

WITHOUT-PREJUDICE

H.Q.869-D-6247 (JAG/C-1)

Ottawa, March 27th, 1946.

Mr. Marcel Boivin, M.P.,  
House of Commons,  
Ottawa, Ontario.

Dear Sir:

Pursuant to your request of the 20th instant, I am pleased to advise you that I communicated with Notary Grandpré on the 25th January 1946, in reply to his letter of the 25th November transmitted by you to this Department.

I brought to the attention of Mr. Grandpré the fact that his letter contained two claims, one for the difference of salary and the other for damages as a result of the death of Pte. Dufresne.

I asked notary Grandpré to determine in a clear way on what basis and for what amounts those claims were being made.

Our file reveals that Mr. Grandpré has not yet replied to our letter of the 25th January 1946.

Yours truly,

Deputy Minister  
Army.

*[Handwritten signature]*

**A. G. ENQUIRY**  
*Final*  
No. *BDF 1934*  
Date. **MAR 27 1946**  
Passed. *[Signature]*

le 27 mars 1946.

Sous réserve de tous droits

Monsieur,

Il me fait plaisir de vous aviser, à la suite de votre requête du 20 courant, que le 25 janvier 1946, j'écrivais au notaire A. Grandpré en réponse à sa lettre du 25 novembre transmise par vous à ce ministère.

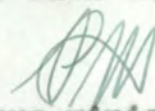
J'attirais alors l'attention du notaire sur le fait que sa lettre contenait deux réclamations, l'une pour différence de salaire, l'autre pour dommages par suite de la mort du soldat Dufresne.

Je demandais au notaire Grandpré de bien vouloir déterminer de façon précise sous quels chefs et pour quels montants ces réclamations étaient faites.

Nos dossiers révèlent que monsieur Grandpré n'a pas encore répondu à cette lettre du 25 janvier 1946.

Votre bien dévoué,

PO:GD

  
le sous-ministre.

Monsieur Marcel Boivin, député,  
Chambre des Communes,  
Ottawa, Ontario.

*Trans*



**Chambre des Communes  
Canada**

O t t a w a,  
le 2 avril 1946.



Lt-Colonel Paul Mathieu,  
Sous-ministre,  
Ministère de la Défense Nationale,  
O t t a w a.



Cher monsieur,

J'accuse réception de votre  
lettre du 27 mars relativement au soldat  
Dufresne décédé.

Je vous remercie sincèrement  
pour l'information fournie.

Veillez me croire,

Votre tout dévoué,

Marcel Boivin, M.P.,  
Shefford.

MB/sd

Inaus

~~person~~  
Translated  
attached  
letter and  
return TO ck  
for registration  
3 4 46 Folger  
ck.

TRANSLATION

L.P.

5/4/46

C.R.

HOUSE OF COMMONS  
Canada

Ottawa, April 2nd, 1946.

Lt.-Colonel Paul Mathieu,  
Deputy-Minister,  
Department of National Defence,  
OTTAWA.

Dear Sir:

I hereby acknowledge receipt of your letter  
of March 27th relative to the late Private Dufresne.

I sincerely thank you for the information  
supplied.

I beg to remain,

Yours truly,

( SCD ) Marcel Boivin, M.P.,  
Shefford.

TRANSLATION

L.P.

5/4/46

869-D 6247  
C.R.

HOUSE OF COMMONS  
Canada

Ottawa, April 2nd, 1946.

Lt.-Colonel Paul Mathieu,  
Deputy-Minister,  
Department of National Defence,  
OTTAWA.

Dear Sir:

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I beg to remain,

Yours truly,

( SGD ) Marcel Boivin, M.P.,  
Shefford.

TRANSLATION

L.P.

5/4/46

C.R.

HOUSE OF COMMONS  
Canada

Ottawa, April 2nd, 1946.

Lt.-Colonel Paul Mathieu,  
Deputy-Minister,  
Department of National Defence,  
OTTAWA.

Dear Sir:

I hereby acknowledge receipt of your letter  
of March 27th relative to the late Private Dufresne.

I sincerely thank you for the information  
supplied.

I beg to remain,

Yours truly,

( SGD ) Marcel Boivin, M.P.,  
Shefford.



\*N.B.—As this form is applicable to any Board of Officers or Committee or Court of Inquiry, the blank is to be filled in accordingly.

The signature of each Officer composing the Board, etc., should appear on the last page of this form in the space provided therefor.

PROCEEDINGS of a\* COURT OF INQUIRY  
assembled at TORONTO, ONTARIO,  
on the 30th day of August 1945  
by order of Major A.H. Woods, O.C. #2 General Employment Coy.  
for the purpose of inquiring into and reporting upon the  
circumstances surrounding the death of D-650525 Pte.  
DUFRESNE, GEORGE ANRÉ, on or about the 19th August 1945.

PRESIDENT

(Thos. Bouckley) Capt.  
Second in Command #2 General Employment Coy.

MEMBERS

(W.F. Smith) Lieut.  
Admin. Offr.  
#2 General Employment Coy.

(J.W. Gibson) Lieut.  
Platoon Comd.  
#2 General Employment Coy.

The Court having assembled pursuant to order, proceed to hear the evidence.

First Witness. D-650446, Pte. ROCHON, J.M. having been duly sworn states:-

At Burlington Beach, at approximately 0230 hours, 19 August 1945 I had been to a dance with Mrs. Reeves and Andre Dufresne. We were escorting Mrs. Reeves to her home, and I left them to go to a restaurant to buy some Cigarettes. I then went to Mrs. Reeves's house, and while there I heard a noise on the highway, and a girl came from across the road and told me there had been an accident. I went to the accident and saw Andre Dufresne lying on the side of the road. Mrs. Reeves was lying about thirty feet from him.

Question #1. How long have you known Andre Dufresne?

Answer #1. I met him a year ago in Valcartier, and we have been stationed together ever since.

Question #2. How long was it before a Doctor arrived?

Answer #2. About Five or Ten minutes.

Question #3. How long was it before an ambulance arrived?

Answer #3. A civilian ambulance came in about half an hour and took Dufresne away.



Second Witness. Miss.FRANCIS RUTH ATKINS; Aldershot having been duly sworn states:-

Shortly after 2 A.M. on the 19th August 45, P.O.Charles Sovereign and I were proceeding South in a car loaned by Clayton Miracle on highway No.2. approximately  $\frac{1}{2}$  mile past the junction of Highway No.20 and the Queen Elizabeth Highway. We slowed down to nearly a stop as we intended to go into a small restaurant on the right hand side, but it was closed, and we started up again and a few hundred yards on two people dashed out directly in front of us. P.O.Sovereign applied the brakes and swerved to the left in an effort to avoid hitting them, but it was useless as we did not have enough warning. We came to a stop on the other side of the road and found the woman we had hit was still clinging to the front of the car. I was told later that the soldier was lying back a few yards at the left of the road, but I did not see him as I was rushed away from the scene by a girl who worked in a restaurant just ahead of the scene of the accident.

Third Witness. Mr.R.D.BOOK. having been duly sworn states:-

At approximately 2.35 A.M. 19th August 1945 I was driving my car North bound on No.20 Highway, about 40 ft.in rear of an American car, when I noticed two people, a man and a woman walking arm and arm in the middle of the highway crossing from West to East diagonally and waiting for me to pass. At the moment the front end of my car had passed them a South-bound car struck the two pedestrians as they were opposite the door of my own car. I proceeded on, approximately 75 ft and swung completely around on the highway to make sure that it was not a Hit-and-Run driver. I stopped on opposite side of the highway where the injured pedestrian was lying, and noticed by the flow of blood from his south that he was very seriously hurt. I summoned a person who came from a nearby cottage to call a doctor immediately. I had previously noticed before the accident the Beach Police Cruiser car in the vicinity of Byne's Hotel approx:  $\frac{1}{2}$  miles South of the scene of the accident, and remembering this returned to notify them. They were not there but passed my car on the way back to the scene of the accident. When I arrived back at the scene of the accident again I found the Burlington and Beach Police officers officiating. I then gave them the a/m details relating to that which I had witnessed.

Following are listed Appendices attached:-

- App. "A" Death Certificate.
- App. "B" N.F.B.371.
- App. "C" Certif: of Coroner re "No Inquest"
- App. "D" Letter from Crown Attorney.
- App. "E" Police Report.
- App. "F" Medical Report.
- App. "G" Hospitalization Cost.
- App. "H" Pay and Allowances.
- App. "I" Diagram of scene of Accident.

REGISTRATION OF DEATH

Registration Number

For use of Registrar General only.

COPY

**1. PLACE OF DEATH** Re: D-650525 Pte. DUFRESNE G.A.  
 City, Town or Village of... City of Hamilton Street... Hamilton Military Hospital  
(If death occurred in a hospital or institution, give the name instead of street and number)  
 Township of... Barton County or District of... Wentworth

**2. LENGTH OF STAY** In Municipality where death occurred... About 8 hours In Province... since Nov. 14/44 In Canada (if immigrant) Since... May 19/44  
(in years, months and days)

**3. PRINT FULL NAME OF DECEASED** DUFRESNE; Georges Andre  
(Surname or last name) (Given or Christian names)

**4. PERMANENT RESIDENCE OF DECEASED:**  
 City, Town or Village of... WATERLOO, QUEBEC Street... 18 Ellice St.  
 Township of... County or District of... Shefford Province of... QUEBEC

**5. SEX** MALE **6. CITIZENSHIP** FR. CANADIAN **7. RACIAL ORIGIN** FR. CANADIAN **8. Single, Married, Widowed or Divorced** SINGLE **9. BIRTHPLACE (Province or Country)** QUEBEC, CANADA

**10. Date of Birth** APRIL 2nd 1922 **11. AGE** Years 23 Months 4 Days 18  
(Month by name) (Day) (Year) (If less than one day)

**12. (a) Trade, profession or kind of work as spinner, grader, clerk, etc. (b) Kind of industry or business, as paper mill, lumber, bank, etc.** Mechanicist (IN ARMY SINCE 15 Nov 43)  
La Grandeur Auto Service, Waterloo, Que.  
(If "Labourer" specify kind of work above)

**13. Date deceased last worked at this occupation** 1943 **14. Total years spent in this occupation** 3 years

**15. If married, widowed or divorced give name of husband or maiden name of wife of deceased.** n/a

PERMANENT RECORD.

"Canadian" should be used as descriptive of a citizen of another country. Other English, Irish, Scottish, French, German, or express CITIZENSHIP (NATIONALITY).

ON HIS MAJESTY'S SERVICE.

FASTEN Envelope by gumming this Label across Flap OPEN by cutting Label instead of tearing Envelope.

EMBALMING DONE BY

TUSKITT BROS. UNDERTAKERS.

GRANGE ST. HAMILTON. ONT.

of father... ADOLPHE DUFRESNE Adolphe  
(Surname or last name) (Given or Christian names)

name of mother... Houhiette Bernadette.  
(Surname or last name) (Given or Christian names)

Place of birth... Ontario, Canada Mother... Quebec, Canada  
(Province or Country) (Province or Country)

I declare the foregoing to be true and correct to the best of my knowledge and belief.

Witnessed under my hand at... TORONTO, ONT. this 21st day of AUGUST 19 45

Signature of informant... A.H. Woods Relationship to deceased... nil  
(A.H. Woods) Major

Address... O.C. No. 2 General Employment Coy. Toronto, Ont.

Cremation or Removal... Removal Date... August 20th 19 45  
(Month by name) (Day) (Year)

Burial... Waterloo, P.Q. Cemetery... Roman Catholic  
(Municipality)

Permit was issued by... James F. Berry Address... Hamilton, Ontario  
 Director: Truscott Bros. Address... Hamilton, Ontario  
 (Notations (Office use only))

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH... August 19th 19 45  
(Month by name) (Day) (Year)

BY CERTIFY that I attended deceased from... CORONER'S INVESTIGATION (only) 19...  
 19... and last saw h... alive on... 19...

MARGIN RESERVED

CITIZENSHIP (NATIONALITY) is defined person who was born in Canada or w...

RACIAL ORIGIN is defined in terms of the Russian, Ukrainian, etc. The terms "C...

**I CAUSE OF DEATH**

Immediate cause <small>Give disease, injury or complication which caused death, nor the mode of dying, such as heart failure, asphyxia, asthenia, etc.</small>	(a) due to	DURATION		
		Yrs.	Mos.	Dys.
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	(a) <u>Shock and Hemorrhage</u>			
	(b) <u>Fracture of the Skull</u>			
	(c) <u>Violence</u>			
Other morbid conditions (if important) contributing to death but not causally related to immediate cause.				

**25. If a woman, was the death associated with pregnancy?** Duration... weeks. Was there a delivery? 76

**26. Was there a surgical operation?** NO Date of operation... 19...

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

Accident, suicide or homicide? Accident Date of injury... August 19th 19 45  
(State which)

Manner of injury... Knocked down by automobile  
(How sustained)

Nature of injury... See above

Specify whether injury occurred in INDUSTRY, in HOME, or in PUBLIC PLACE... Public Place

Signed by... [Signature] Designation... Chief Coroner & M.D. Coroner etc.  
 Address... Hamilton, Ontario Date... August 29th 19 45

Division Registrar's Record No. \_\_\_\_\_  
 Date of Registration... 19...  
(For use of Division Registrar only) (Signature of Division)

In case of stillbirth consult reverse side before making out certificate.

REGISTRATION OF DEATH

Registration Number

For use of Registrar General only.

COPY

1. PLACE OF DEATH **Re: D-650525 Pte. DUFRESNE G.A.**  
 City, Town or Village of **city of Hamilton** **Hamilton Military Hospital**  
(If death occurred in a hospital or institution, give the name instead of street and number)  
 Township of **Barton** County or District of **Wentworth**

2. LENGTH OF STAY In Municipality where death occurred **About 8 hours** In Province **since Nov. 14/44** In Canada (if immigrant) **Since May 19/44**  
(in years, months and days)

3. PRINT FULL NAME OF DECEASED **DUFRESNE; Georges Andre**  
(Surname or last name) (Given or Christian names)

4. PERMANENT RESIDENCE OF DECEASED:  
 City, Town or Village of **WATERLOO, QUEBEC** Street **18 Ellice St.**  
 Township of \_\_\_\_\_ County or District of **Shefford** Province of **QUEBEC**

5. SEX **MALE** 6. CITIZENSHIP **FR. CANADIAN** 7. RACIAL ORIGIN **FR. CANADIAN** 8. Single, Married, Widowed or Divorced **SINGLE** 9. BIRTHPLACE (Province or Country) **QUEBEC, CANADA**  
(See marginal note) (See marginal note) (Write the word)

10. Date of Birth **APRIL 2nd 1922** 11. AGE **23** Years **4** Months **18** Days **18** If less than one day **hrs. or min.**  
(Month by name) (Day) (Year)

OCCUPATION 12. (a) Trade, profession or kind of work as spinner, grader, clerk, etc. **Mechinist (IN ARMY SINCE 15 Nov 43)**  
 (b) Kind of industry or business, as paper mill, lumber, bank, etc. **La Grandeur Auto Service, Waterloo, Que.**  
(If "Labourer" specify kind of work above)

13. Date deceased last worked at this occupation **1943** 14. Total years spent in this occupation **3 years**

15. If married, widowed or divorced give name of husband or maiden name of wife of deceased **n/a**

16. Name of father **ADOLPHE DUFRESNE** **Adolphe**  
(Surname or last name) (Given or Christian names)

17. Maiden name of mother **Bouthiette** **Bernadette.**  
(Surname or last name) (Given or Christian names)

18. Birthplace: Father **Ontario, Canada** Mother **Quebec, Canada**  
(Province or Country) (Province or Country)

19. I certify the foregoing to be true and correct to the best of my knowledge and belief.  
 Given under my hand at **TORONTO, ONT.** this **21st** day of **AUGUST** 19 **45**  
 Signature of informant **(A.H. Woods) Mayor** Relationship to deceased **nil**  
 Address **O.C. No. 2 General Employment Coy. Toronto, Ont.**

20. Burial, Cremation or Removal **Removal** Date **August 20th** 19 **45**  
(Month by name) (Day) (Year)  
 Place of Burial **Waterloo, P.Q.** Cemetery **Roman Catholic**  
(Municipality)  
 Burial Permit was issued by **James F. Berry** Address **Hamilton, Ontario**

21. Funeral Director: Name **Truscott Bros.** Address **Hamilton, Ontario**

22. Marginal notations (Office use only)

MEDICAL CERTIFICATE OF DEATH

23. DATE OF DEATH **August 19th** 19 **45**  
(Month by name) (Day) (Year)

24. I HEREBY CERTIFY that I attended deceased from **CORONER'S INVESTIGATION (only)** 19 **45**  
 to 19 **45** and last saw h **alive on** 19 **45**

I Immediate cause Give disease, injury or complication which caused death, nor the mode of dying, such as heart failure, asphyxia, asthenia, etc.	CAUSE OF DEATH	DURATION		
		Yrs.	Mos.	Dys.
(a) <b>Shock and Hemorrhage</b> due to				
(b) <b>Fracture of the Skull</b> due to				
(c) <b>Violence</b> due to				
II Other morbid conditions (if important) contributing to death but not causally related to immediate cause.				

25. If a woman, was the death associated with pregnancy? **No** Duration **weeks** Was there a delivery? **No**

26. Was there a surgical operation? **No** Date of operation **19 45**  
 State findings \_\_\_\_\_ Was there an autopsy? **No**

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

Accident, suicide or homicide? **Accident** Date of injury **August 19th** 19 **45**  
(State which)

Manner of injury **Knocked down by automobile**  
(How sustained)

Nature of injury **See above**

Specify whether injury occurred in INDUSTRY, in HOME, or in PUBLIC PLACE **Public Place**

Signed by **(Signature)** Designation **Chief Coroner & M.D. Coroner of**

Address **Hamilton, Ontario** Date **August 29th** 19 **45**

Division Registrar's Record No. \_\_\_\_\_

Date of Registration \_\_\_\_\_ 19 \_\_\_\_\_  
(For use of Division Registrar only) (Signature of Division)

PERMANENT RECORD.

"Canadian" should be used as descriptive of a person who was born in Canada or who has rights of a Canadian citizen of another country.

RACIAL ORIGIN is defined in terms of the people or race to which the person—traced through the father—belongs, whether English, Irish, Scottish, French, German, Russian, Ukrainian, etc. The terms "Canadian" or "American" should not be used for RACIAL ORIGIN, as they express CITIZENSHIP (NATIONALITY).

MARGIN RESERVED

CITIZENSHIP (NATIONALITY) is defined person who was born in Canada or who has rights of a Canadian citizen of another country.

In case of stillbirth consult reverse side before making out certificate.



*(Handwritten signature)*  
 [Illegible handwritten notes]

## INSTRUCTIONS

**Physician's Statement of Cause of Death.**—The morbid conditions relating to death are divided on the certificate into two groups. In Group I are those related to the "Immediate Cause" of death, and in Group II, those not causally related thereto. In most cases a statement of cause under Group I will suffice. Detailed certification is not desired, the entry of a single cause being preferable in all cases where this can be regarded as adequate (see Example I), but where the physician finds it necessary to record more than one cause it is important that these be stated in the position provided on the form as indicative of their mutual relationship. This information is sought so that the selection of the cause for tabulation may be made in the light of the certifier's viewpoint:—

- (a) Name first the "Immediate Cause" of death, i.e. the disease, injury or complication which caused death (not mode of dying or terminal condition).
- (b) Then give other morbid conditions (if any) of which it was the consequence, in order of causal relationship (due to) stating the most recent one first and then others in order.
- (c) Entries under Group II should be reserved for "other important contributory morbid conditions" in those instances particularly in which death was due to a combination of maladies, none of which would have been fatal alone. In such cases the physician's judgment alone can afford guidance to the tabulator.
- (d) Use always accepted terms for morbid conditions and never record mere symptoms.
- (e) **Maternal Deaths.**—Qualify all diseases resulting from childbirth, miscarriage or abortion by the word "Puerperal", e.g., puerperal septicaemia. Distinguish between septicaemia originating in abortion and in childbirth.
- (f) **Cancer.**—In all cases the organ or part first affected should be specified.
- (g) **Violent Deaths.**—Coroners, medical examiners and physicians who certify to deaths from violent causes should always clearly indicate the fundamental distinction of whether the death was due to **accident, suicide, or homicide**, and then state the manner and nature of injury. The circumstances of each accident should be stated as fully as possible, e.g., an **automobile accident** should always be designated as such.

The following examples illustrate the essential principles in the use of the form.

	Example 1	Example 2	Example 3	Example 4	Example 5
I.					
Immediate Cause.....	(a) Lobar pneumonia	(a) Pulmonary tuberculosis	(a) Acute peritonitis	(a) Bronchopneumonia	(a) Uraemia
Morbid Conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	due to (b) _____	due to (b) _____	due to (b) Acute appendicitis	due to (b) Operation	due to (b) Chronic nephritis
	due to (c) _____	due to (c) _____	due to (c) _____	due to (c) Strangulated inguinal hernia	due to (c) _____
II.	II.	II.	II.	II.	II.
Other morbid conditions (if important) contributing to death but not causally related to immediate cause.	_____	_____	_____	Chronic interstitial nephritis	Chronic bronchitis

### STILLBIRTH

"A dead-birth (stillbirth) is the birth of a (viable) foetus, after at least twenty-eight weeks pregnancy, in which pulmonary respiration does not occur; such a foetus may die either: (a) before, (b) during or (c) after birth, but before it has breathed."

**The special stillbirth registration form (buff coloured) must be used in registering a stillbirth.**

APP. B

M.F.B. 371  
500M-6-42 (5115)  
H.Q. 1772-39-164

# REPORT ON INJURIES

Other than Wounds Received in Action

To BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS OVER PAGE WITHIN 48 HOURS  
OF OCCURRENCE

1. Statement to be signed by injured officer or soldier:

I, D-650525 Pte. Dufresne A. (Deceased)  
(a) (number) (b) (rank) (c) (surname) (Christian names in full)

#2 Gen. Epl. Coy. hereby declare that the injury sustained by me  
(d) (unit)

on the 19-Aug-45 did not\* occur while I was in the performance  
(e) (date of casualty)  
of military duty.

(Signature of officer or soldier)

Hamilton Military Hospital 19-Aug-45.  
(station) (date)

(\*Part not applicable to be struck out and initialed by Officer or Soldier signing.)

2. (a) Description of injuries..... Closed head injury--profoundly unconscious.  
Leaking C.S.F. through back of throat. Multiple abrasions  
and contusions.

(b) Are the injuries serious or of such a nature that they might be the exciting cause of disability later? } Yes.  
 } Critically ill.

(c) Whether admitted to hospital or sick in quarters? } To hospital.

(d) How long before initial treatment was given? } Unknown.

Date 19-Aug-45. Signature of medical officer D.D. Campbell, Maj., RCAMC, C.A.

3. Short statement by injured person of the circumstances of the injury (see instruction 5). Signed statements of witnesses, or of persons to whom the injured person may have mentioned his injury, to be attached (see instructions 3 and 4):

(Witness to signature of Officer or Soldier signs here)



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## 4. Statement of Commanding Officer:

- (a) Was the individual in the performance of military duty?..... **So**
- (b) Nature of duty.....
- (c) (i) Was it incurred in a game or other form of physical recreation definitely organized with the approval of the unit commander?..... **XIXX. W/A**
- (ii) Was participation pursuant to orders, written or verbal?..... **A.W.L.**
- (d) If it was incurred on leave, was such leave with or without pay?..... **No**
- (e) Was the injured individual to blame?..... **No**
- (f) Was anyone else to blame?..... **This soldier was the victim of an automobile accident. It is understood that the driver of the car is being charged with manslaughter.**
- (i) Whom?..... **No**
- (g) Did the injury occur on military premises and if so in what part of such premises?.....
- (h) Court of Inquiry:
- (i) Has one been held?..... **No**
- (ii) Will one be held?..... **Yes**
- (iii) Date and place..... **To be determined by H.Q's, W.D.2.**

Date.....

**27 Aug 45**Commanding **(A.H. Woode) Major.**  
**O.C. No. 2. Gen. Insp. Coy.**

## 5. Remarks of District Officer Commanding or Division Commander:

Date.....

## IMPORTANT INSTRUCTIONS TO BE FOLLOWED

1. This form is to be rendered within 48 hours after the event in all cases of accidental or self-inflicted injuries to an officer or soldier involving:

- (a) death,
- (b) absence from duty for 48 hours or more, or
- (c) absence from duty of less than 48 hours when the medical officer should invariably be consulted as to whether the injury may be the exciting cause of disability later.
- (d) in all accidents involving personnel whether there is evidence of injury or not.

2. A separate form is to be used in respect to each individual affected.

3. This form is to be rendered notwithstanding the holding of a court of inquiry or investigation. If a court of inquiry is held a copy of this form is to be included in the proceedings.

4. Full statements are to be taken by an officer from the witnesses of the accident or, where there was no witness, from any persons to whom the injured officer or soldier may have mentioned his injury immediately after the occurrence. These statements, when obtainable will be signed by the persons making them, and by the officer who takes them, and will be forwarded with this form. Where it is intended to take disciplinary action, duplicates of these statements should be retained by the unit for use in lieu of a summary of evidence.

5. Where it is possible to obtain it, a statement from the injured officer or soldier will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

6. This form will be prepared in triplicate, one copy to be retained by the unit and the two other copies to be forwarded to N.D.H.Q., through the usual channels. Where a Court of Inquiry is held the copies to be forwarded to N.D.H.Q. will be attached to the proceedings.

## SPECIAL INSTRUCTIONS AS TO EVIDENCE IN CASES OF SELF-INFLICTED WOUNDS

7. In these cases the statements mentioned in paragraphs 4 and 5 above should bring out all material points, e.g., statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).

8. An officer or a soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive this charge should not be used. The charge will therefore usually be laid under section 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under section 18 for wilful maiming.

APP 'C'

J. HEURNER MULLIN  
JAMES STREET SOUTH

THE OFFICE OF THE CHIEF CORONER  
FOR THE  
CITY OF HAMILTON  
CANADA

IN OFFICE  
BY APPOINTMENT

August 29th, 1945


TO WHOM IT MAY CONCERN:

THIS IS TO CERTIFY THAT on August 19th, 1945, a Death was reported to me at the Military Hospital in Hamilton.

I proceeded as quickly as possible to the scene and viewed the Body, then in a bed on a Ward in that Hospital, which was later identified as Georges Andre Dufresne of No. 2 General Employment Coy., Toronto.

AND FURTHER THAT a Coroner's and Police Investigation is still in progress, which concerns an automobile accident in which the Deceased sustained injuries through which he later expired.

As a criminal charge has been laid against the driver of the automobile involved, no Coroner's Inquest will be held.

  
J. Heurner Mullin M.D., F.R.C.P. (Can)  
Chief Coroner for the City of Hamilton

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APP'D

W.I. Dick, K.C.  
Barrister, Solicitor  
Notary Public

Crown Attorney  
and  
Clerk of the Peace

COUNTY OF HALTON

Milton, Ontario,  
September 5, 1945.

Lieutenant J.W. Gibson,  
No. 2DD General Employment Coy.  
Government Buildings, Exhibition Park,  
Toronto, Ontario.

Dear Lt. Gibson:    Re : D650525, D. A. G. A.  
                            Aubrey Dufresne.

I beg to inform you that the Crown  
will not be represented at your Military Invest-  
igation into the death of the above named.

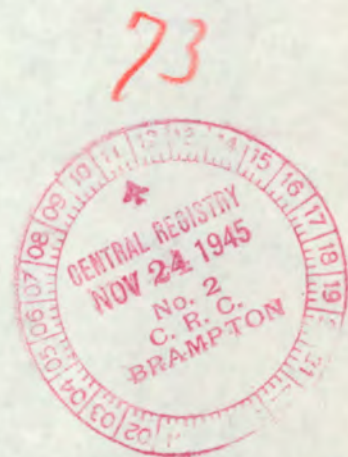
Yours very truly

WID/B

W.I. Dick

Certified true copy:

Tos. Bouckley Capt.  
(T. Bouckley) Captain,  
President,  
Court of Inquiry.



Burlington, 24 Aug 45.

At 2 A.M. Aug.19th an accident occurred at Station #26, Burlington Beach in which Alice Mary Reeves was killed outright and Pte. Dufresne.A. died 11 hours later.

F.O.Sovereign was operating the vehicle at the time it struck the A/M deceased. Ruth Atkins of Aldershot was driving with Sovereign at the time. The vehicle in question was owned by Clayton Maracle, (a flying officer).

The evidence would show that the two deceased were walking arm in arm angling across the highway and were struck at a point almost in the centre of the pavement and were dragged approx: 100 ft and 131 ft for the man and woman respectively. When the car came to rest off the pavement on the driver's wrong side of the road, the woman was found partly under the car, the man had fallen off.

There were no skid marks on the pavement that would indicate that the brakes of the car had been applied. The condition of the car was, as follows: (a) Brakes would not work unless the foot pedal was pumped. (b) There was no horn on the car. (c) No windshield wiper and the windshield itself was very dirty. (d) The left headlight was broken with the accident and the right one, remaining intact, was later tested as being "fair". There were no tail lights on the car.

The model of vehicle in question was a 1932 Plymouth coupe. It was bearing licence number "Y 2236".

An eye witness to the accident was R.D.Book (Beach address. cottage 162, Station #26 Burlington) (Permanent address: 28 London St.N., Hamilton)

Witnesses likely to be summoned are:

- (1) Dr. Russell Dingle - Burlington (Coroner)
- (2) Dr. James Goodbrand - Burlington
- (3) Ruth Atkins - Aldershot.
- (4) R.D.Book - Cottage #26. Burlington Beach.
- (5) Constables, K. Scott  
H. Hunt
- (6) Chief Constable Smith, L.J.
- (7) Rob't Rookes - Burlington.

The above observations were made by Chief Smith & Constable Scott.

Signed: Lee. J. Smith  
Chief Constable.

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Certified True Copy.....*Thos Bouckley* Capt.  
(Thos Bouckley)  
President.  
Court of Inquiry.



WITNESS:

Major D.D. Campbell, Officer i/c Surgery,  
Hamilton Military Hospital, R.C.A.M.C., C.A.,  
Hamilton, Ontario, having been called and  
duly sworn, states:

"D-650525, Pte. DUFRESNE, A., was admitted  
to Hamilton Military Hospital on 19th August  
1945, at 0400 hours, having been knocked  
down by a car. He was deeply unconscious.  
He was bleeding and leaking spinal fluid from  
the back of his throat. There were multiple  
contusions and abrasions of his body and  
extremities. His condition was considered  
hopeless. He was treated for shock but did  
not respond, nor did he regain consciousness.  
He died about 1240 hours on the 19th August  
1945."

*D.D. Campbell*

D.D. Campbell, Major, RCAMC  
Surgical Consultant.  
Hamilton Military Hospital.

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APP. "G"

28th August 1945

Hamilton Military Hospital,  
R.C.A.M.C? C.A.  
Gage Avenue N, Hamilton, Ont.

Capt. T. Bouckley,  
No. 2. General Employment Coy,  
Exhibition Barracks,  
Toronto, Ontario.

B-625525. Pte. DUMRESN. A. (deceased)

As the marginally named deceased was hospital-  
ized here for a period less than 24 hours (8 hours),  
prior to his decease, there will be no charges re his  
hospitalization.

Signed:- Jas. McKeown Lieut.  
for B.L. Guyatt, Lieut. Col., O.C.  
Hamilton Military Hospital  
R.C.A.M.C. C.A.

Certified True Copy *Thos Bouckley* Capt.  
(Thos. Bouckley)  
President.  
Committee of Adjustment.



APP. "H"

No.2, General Employment Coy.,  
Toronto, Ontario  
~~25th~~ 6th September 1945

D-650525 - Pte DUFRESNE, Georges Andre.  
Deceased 1230 Hrs 19th Aug 45

Rate of pay per diem.....\$1.50

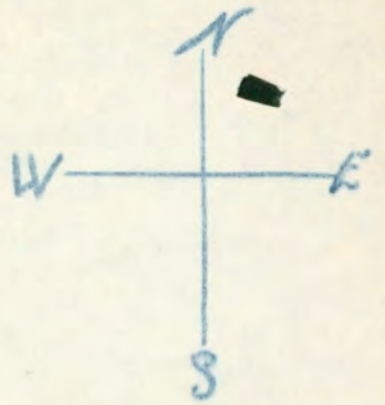
(No other allowances)

Certified correct.

*H.D. Burk*

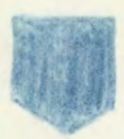
.....Capt., RCAPC.,  
(H.D. BURK) Paymaster  
No.2, General Employment Coy.

CENTRAL REGISTRY  
NOV 24 1945  
No. 2  
C. R. C.  
BRAMPTON  
69



Highway No 20  
(400 yds south of  
junction of No. 20  
and Queen Elizabeth)

← 20ft →



Vehicle driven  
by Sovereign



Soldier & Girl  
hit here

160ft



Soldier's body  
thrown off  
at 120ft. on other  
side of road.



Car comes to a stop  
160ft on the other  
side of the road.  
(girl's body still on front  
of car)

Diagram of accident, where D. 650525  
Pte. Dupresne, G. A was killed, <sup>68</sup>shot by  
Lieut. J. W. Gibson with the aid of  
Constable K. Scott of the ~~Burton~~  
Police, at the scene of the accident.



2/13

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FINDING IF REQUIRED:—

The Court deduce the following facts from the evidence shown in the proceedings of Court of Inquiry are as follows:

1. That the cause of death was Shock and Hemorrhage due to Fracture of the Skull.
2. That the time and place of death was approx: 1240 hrs, 19 Aug 45 at Hamilton Military Hospital, Hamilton, Ont.
3. That the death was accidental.
4. That the time of discovery was approx: 0240 hrs, 19 Aug 45.
5. That D-650525, Pte. DUFRESNE, G.A. was NOT on duty and was NOT to blame.

Signed at

*Thos. Bouckley Capt.*  
(Thos. Bouckley) Capt

(Signature)

PRESIDENT

Toronto, Ontario

#2. General Employment Coy

(Unit)

this 7th day of

*W. I. Smith Lieut.*  
(W. I. Smith) Lieut.

(Signature)

September 1945

#2. General Employment Coy

(Unit)

MEMBERS

*J. W. Gibson Lieut.*  
(J. W. Gibson) Lieut.

(Signature)

#2. General Employment Coy.

(Unit)

Opinion of  
Commanding  
Officer:—

In my opinion D-650525, Pte. DUFRESNE, G.A. was NOT on duty, and was NOT to blame.

*A. H. Woods*

(A. H. Woods) Major.  
Officer Commanding.  
#2. General Employment Coy.

The Secretary,  
Dept. of National Defence,  
OTTAWA, Ontario.

FORWARDED: This Headquarters concurs in the opinion of the Officer Commanding.

APPROVED

C. I. Shram Maj

OTTAWA? ONT. MAJOR-GENERAL  
ADJUTANT-GENERAL

NOV 20 1945

*James Potts* Captain  
for (A. E. Potts)  
Major-General

D.C.C. H.D. No. 2

Date 20 Sep. 1945.



TRANSLATION  
MB/JLa  
12-12-45

December 5, 1945.

Mr. Marcel Boivin, M.P.,  
House of Commons,  
Ottawa.

Dear Mr. Boivin:

I acknowledge the receipt of your letter of December 1st, regarding D.650525, Pte André DUFRESNE, who was accidentally killed last August.

I am referring the letter from Notary Grandpré to the appropriate authorities of the Department for their information and a report.

I shall write to you again as soon as this report is received.

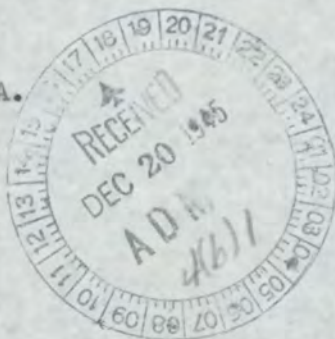
Yours very truly,

Hugues Lapointe,  
Parliamentary Assistant.

A.G.(Co-Ord. 3)  
For your consideration  
and report, please.

15-12-45

P. M. A.



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TRANSLATION  
MB/LLa  
12-12-45

House of Commons  
Canada

Ottawa, December 1, 1945.

Mr. Hugues Lapointe,  
Parliamentary Assistant,  
Department of National Defence,  
Ottawa.

My dear Hugues:

I am sending you herewith a letter which I have received from Notary A. Grandpré, of Waterloo, P.Q., regarding D.650525, Pte André Dufresne, who was accidentally killed last August.

You would oblige me very much in perusing the said letter and referring same to the appropriate authorities. I must say that the Dufresne family of Waterloo is not rich and that prior to his admission to the Army, Pte André Dufresne used to give from \$300. to \$400. to his family, in addition to his board, to help them.

Trusting that you will give this case your best attention and thanking you, I am,

Yours truly,

(Sgd.) Marcel Boivin,  
M.P. for Shefford.

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TRANSLATION

MB/JLa

12-12-45

A. Grandpré,  
Notary

WATERLOO, P.Q., November 25, 1945.

Mr. Marcel Boivin, M.P.,  
M.P. for Shefford,  
House of Commons,  
Ottawa, Canada.

Re: D.650525, Pte André Dufresne.

Dear Marcel:

I was about to close my letter when I received the visit of Mr. Adolphe Dufresne, father of the above-named soldier, who was killed by a car driven by another ~~officer~~, P.O. Charles Fred Sovereign, R.C.A.F., who has been a German prisoner and who was stationed at Ancaster Convalescent Camp, Ontario; the accident occurred at Burlington, near Hamilton, Ont., on August 25th, 1945, and Pte Dufresne was mortally injured and died at noon the next day.

Apparently, Airman Sovereign, the driver, should have been at the hospital at the time of the accident and the military hospital authorities would be to blame for having given him leave; on the other hand, Mr. Dufresne has no chance at all before a civil court because the man is worth nothing and neither is the car which is an old 1932 Plymouth coupé, and he carried no insurance at all.

Pte Dufresne was quartered with board at the Army Staff House, Burlington St., Hamilton, Ont.; while belonging to the Army, he was working at the International Harvester Co. of Hamilton, Ont., which has paid to the Department of National Defence the salary which Pte Dufresne earned at the plant. In the meantime, Pte Dufresne was drawing only his Army pay but given to think that the difference would be paid to him by the Government upon his release from the Army. According to the information we have obtained from the plant, Mr. Adolphe Dufresne and myself, because we have been over there, Pte Dufresne was working very hard as he was a caster and this is the hardest work there is in a foundry. As his foreman said to us: "He was earning twice his salary"; these men were working at 70 cts. per hour but should not have been paid less than \$1.00 per hour while ~~he was~~ drawing but a soldier's pay, namely \$1.40 per day.

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At any rate, we are aware that the International Harvester Co. has paid the Department of National Defence for Pte Dufresne's hard work from the middle of November, 1944, to the middle of August, 1945, the sum of \$952.40, while Pte Dufresne has drawn during that period but his daily Army pay of \$1.30 or \$1.40. Mr. Adolphe Dufresne of Waterloo, father of the deceased soldier, /is a poor man with a /who family to support, in addition to a crippled relative whom he keeps out of charity, would like to receive the difference in salary which his son has earned and which the Department of National Defence has kept.

Furthermore, Mr. Dufresne contends that his son, like the driver of the automobile, was in the care of the Army at the time of the accident and that consequently, in strict justice, the Government should pay certain damages in such a case; and the liability of the Army or the Department of National Defence is greater still if Airman Sovereign should not have been granted permission to go out by the medical officers, as the Burlington Chief of Police gave us to understand.

I would therefore beg you, on Mr. Dufresne's behalf, to see the appropriate authorities in Ottawa in this regard and to communicate with me.

Thanking you in advance, I am,

Yours truly,

(Sgd.) A. Grandpré,  
Notary.

P.S. The Army attended to the funeral and burial of Pte Dufresne who was given a military funeral here at Waterloo, the whole at the expense of the Army.

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TRANSLATION  
TD/CGa  
24/4/46

A. GRANDPRÉ  
NOTARY

Waterloo, P.Q., April 20th, 1946.

Colonel Paul Mathieu,  
Department of National Defence,  
Ottawa, Ont.

Re: D-650525, Pte. André Dufresne,  
H.Q. 869-D-6247 (JAG/C-1)

My dear Colonel:

I am sending you herewith copy of a letter which I addressed to you on February 1st in reply to your communication of January 25th.

Really, bad luck is tagging this letter which you have apparently never received. In fact, on March 14th, I sent a copy of it to my Member of Parliament, Mr. Marcel Boivin, asking him to send it to you with his recommendations, and you apparently have not yet received it.

I trust that this time it will reach you, and that in the near future, I shall be in a position to prove to Mr. Dufresne that I did not neglect his case as he believes, and rightly so.

It is my impression that this matter should not drag as long as that, because one must admit that the longer investigations drag, the more difficult they are to complete in cases such as this one.

May I rely on your usual kindness so that my friend, Mr. Adolphe Dufresne, can obtain justice in the near future.

Thanking you in anticipation, I remain,

Yours very truly,

(SGD) A. Grandpré,  
Notary.

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TRANSLATION  
TD/CGa  
24/4/46

A. GRANDPRÉ  
NOTARY

Waterloo, P.Q.,  
February 1st, 1946.

COLONEL Paul Mathieu,  
Department of National Defence,  
Ottawa, Ont.

Re: D-650525, Pte. André Dufresne

My dear Colonel:

In reply to your letter of January 25th, Mr. Adolphe Dufresne, father of Pte. André Dufresne, requests me to inform you that he is submitting the following claims as a result of his son's death, to wit:

1.- He claims the difference between the pay received from the Army and the sum of \$952.40 which he earned at the International Harvester Co., at Hamilton, Ont., between the month of November 1944 and the month of August 1945, when he (said André Dufresne) was working under the instructions of the Department of National Defence.

2.- He claims the sum of \$10,000. as a result of the accidental death of said Pte. André Dufresne, occasioned by the culpable negligence of another serviceman, P/O Charles Fred SOVEREIGN, R.C.A.F., who was then driving an automobile, which vehicle was in bad condition in all respects, as noted at the time by the Chief of Police of Burlington, Ont., and as a result of the apparent negligence of the military authorities who allowed the Airman Sovereign to leave the military hospital where he was convalescing. This accident occurred when Pte. André Dufresne, who was perfectly sober, was crossing the street at Burlington, Ont., and when the Airman Sovereign was carelessly driving a Plymouth Coupe 1932 automobile at a fast rate of speed, without any brakes and with a windshield in very poor condition.

Mr. Adolphe Dufresne, father of Pte. André Dufresne, a poor man with a large family and who, moreover, has an invalid dependent at home, hopes that your Department will grant him justice with regard to the above claims.

He thanks you in anticipation.

Yours very truly,

(SGD) A. Grandpré,  
Notary

COPY  
A.G.

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DEPARTMENT OF NATIONAL DEFENCE  
ARMY

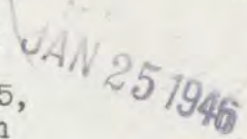
OTTAWA, CANADA,

Without Prejudice

January 23rd, 1946.

Mr. A. Grandpre,  
Notary,  
Waterloo, P.Q.

*Translation*



Dear Sir: Re: D.650525 Pte. Andre Dufresne

Your letter of 25th November, 1945, addressed to Mr. Marcel Boivin, M.P. has been referred to this Department for consideration. Your letter indicates that a claim is being made against the Crown for some payment to Mr. Dufresne, Sr. as regards the difference between his Army pay and the amount which was paid by the International Harvester Company for the services of Pte. Andre Dufresne, but a reference is also made to some other claim due to the fact that Pte. Andre Dufresne was in the Army at the time of the accident.

Will you please write to me stating on exactly what grounds these claims are being made and itemize the amounts which your client is asking under each heading. The matter will then be referred to the appropriate legal officers of the Crown for their consideration and you will be informed of the decision which has been reached.

Yours truly,

*85*

Deputy Minister.

A. GRANDPRÉ

NOTAIRE - NOTARY

FOR TRANSLATION  
AND RETURN TO  
D. M. (A)

WATERLOO, P.Q., 1er février 1946

Colonel Paul Mathieu,  
Ministère de la Défense Nationale,  
Ottawa, Canada.

Mon cher Colonel:-

RE:- Soldat André Dufresne -D-650,525

En réponse à votre lettre du 25 janvier dernier, Monsieur Adolphe Dufresne, le père du soldat André Dufresne, me charge de vous dire qu'il fait les réclamations suivantes, à la suite du décès de son fils, savoir:-

1- Il réclame la différence entre la ~~s~~ solde qu'il a reçue de l'armée et la somme de \$952.40 qu'il a gagnée chez International Harvester Co. à Hamilton, Ont., entre le mois de Novembre 1944 et le mois d'août 1945, alors qu'il (le dit André Dufresne) travaillait sous les ordres du Ministère de la Défense Nationale.

2- Il réclame la somme de \$10,000.00, par la suite de la mort accidentelle du dit Soldat André Dufresne, causée par la négligence coupable d'un autre militaire, P.O. - Charles Fred Sovereign, R.C.A.F. alors qu'il conduisait une automobile en mauvais ordre sous tous rapports, tel que constaté dans le temps par le Chef de Police de Burlington, Ont., et par suite de la négligence apparente des autorités militaires qui ont laissé sortir de l'Hôpital militaire l'Aviateur Sovereign, qui y était en convalescence. Cet accident est arrivé alors que le soldat André Dufresne, parfaitement sobre, traversait la rue à Burlington, Ont., et que l'Aviateur Sovereign conduisait étourdiment une automobile "Plymouth Coupe, 1932" à vive allure, pas de freins du tout, et avec un pare-brise en bien mauvais état pour la vision.

M. Adolphe Dufresne, le père du soldat André Dufresne, un pauvre homme avec une grosse famille, et en plus ayant à sa charge un invalide à la maison, espère bien que votre Département lui donnera justice au sujet des réclamations susdites.

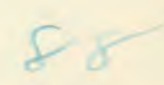
Il vous remercie à l'avance, et je me souscris

Votre bien dévoué,

(Signé) A. Grandpré,

Notaire.

Copie.





TRANSLATION  
TD/CGa  
24/4/46

A. GRANDPRÉ  
NOTARY

Waterloo, P.Q.,  
February 1st, 1946.

COLONEL Paul Mathieu,  
Department of National Defence,  
Ottawa, Ont.

Re: D-650525, Pte. André Dufresne

My dear Colonel:

In reply to your letter of January 25th, Mr. Adolphe Dufresne, father of Pte. André Dufresne, requests me to inform you that he is submitting the following claims as a result of his son's death, to wit:

1.- He claims the difference between the pay received from the Army and the sum of \$952.40 which he earned at the International Harvester Co., at Hamilton, Ont., between the month of November 1944 and the month of August 1945, when he (said André Dufresne) was working under the instructions of the Department of National Defence.

2.- He claims the sum of \$10,000. as a result of the accidental death of said Pte. André Dufresne, occasioned by the culpable negligence of another serviceman, P/O Charles Fred SOVEREIGN, R.C.A.F., who was then driving an automobile, which vehicle was in bad condition in all respects, as noted at the time by the Chief of Police of Burlington, Ont., and as a result of the apparent negligence of the military authorities who allowed the Airman Sovereign to leave the military hospital where he was convalescing. This accident occurred when Pte. André Dufresne, who was perfectly sober, was crossing the street at Burlington, Ont., and when the Airman Sovereign was carelessly driving a Plymouth Coupe 1932 automobile at a fast rate of speed, without any brakes and with a windshield in very poor condition.

Mr. Adolphe Dufresne, father of Pte. André Dufresne, a poor man with a large family and who, moreover, has an invalid dependent at home, hopes that your Department will grant him justice with regard to the above claims.

He thanks you in anticipation.

Yours very truly,

(SGD) A. Grandpré,  
Notary

COPY  
A.G.

89



**A. GRANDPRÉ**  
NOTAIRE - NOTARY

FOR TRANSLATION  
AND RETURN TO  
D. M. (A)

RE:- Q.G. 869-D-6247  
JAG/C-1

WATERLOO. P.Q.. 20 avril 1946

Colonel Paul Mathieu,  
Ministère de la Défense Nationale,  
Ottawa, Canada.



RE:- Soldat André Dufresne D- 650,285

Mon cher Colonel:-

Je vous envoie copie d'une lettre que je vous ai adressée le 1er. Février dernier en réponse à la vôtre du 25 janvier.

Vraiment la malchance court cette lettre que, apparemment vous n'avez jamais reçue. En effet, le 14 mars j'en adressais une copie à mon député, M. Marcel Boivin, le priant de vous la transmettre avec ses recommandations, et vous ne l'auriez pas encore eue ?

J'espère que cette fois-ci, elle vous parviendra, et qu'enfin dans un avenir prochain, je serai en mesure de prouver à Monsieur Dufresne que je n'ai pas négligé son affaire comme il le croit actuellement, et avec raison !

Je vous avouerai que je ne crois pas bien bon que cette affaire traîne tant que cela, car il faut admettre que plus cela traîne plus les enquêtes deviennent difficiles dans les cas semblables.

Je compte donc sur votre bienveillance accoutumée pour que mon ami, M. Adolphe Dufresne, obtienne justice dans un avenir prochain.

Merci à l'avance, et veuillez me croire

Votre dévoué serviteur,

Notaire.

90

TRANSLATION  
TD/CGa  
24/4/46

CENTRAL REGISTRY ARMY  
APR 26 1946  
Chgd. to  
Referred to

A. GRANDPRE  
NOTARY

C.R.  
To register and  
pass to  
April 20th, 1946.

Waterloo, P.Q.

Colonel Paul Mathieu,  
Department of National Defence,  
Ottawa, Ont.

①

Re: D-650525, Pte. André Dufresne,  
H.Q. 869-D-6247 (JAG/C-1)

My dear Colonel:

I am sending you herewith copy of a letter which I addressed to you on February 1st in reply to your communication of January 25th.

Really, bad luck is tagging this letter which you have apparently never received. In fact, on March 14th, I sent a copy of it to my Member of Parliament, Mr. Marcel Boivin, asking him to send it to you with his recommendations, and you apparently have not yet received it.

I trust that this time it will reach you, and that in the near future, I shall be in a position to prove to Mr. Dufresne that I did not neglect his case as he believes, and rightly so.

It is my impression that this matter should not drag as long as that, because one must admit that the longer investigations drag, the more difficult they are to complete in cases such as this one.

May I rely on your usual kindness so that my friend, Mr. Adolphe Dufresne, can obtain justice in the near future.

Thanking you in anticipation, I remain,

Yours very truly,

(SGD) A. Grandpré,  
Notary.

To: AG. (for J.A.G.)  
For consideration and draft reply

V. D. M. signature please

*Paul Mathieu*

PAUL MATHIEU  
Asst. Deputy Minister

91

F.T.

For translation and  
return to D.M. (Army)  
in quadruplicate for  
signature, please.

(H. J. Orde), Brigadier,  
Judge Advocate-General.

H.Q.869-D-6247 (JAG/C-1)

Ottawa, May 13th, 1946.

WITHOUT PREJUDICE

Mr. A. Grandpré,  
Notary,  
Waterloo, P.Q.

Re: D.650525 Pte. Dufresne, G.A. (Deceased)

Dear Sir:

I wish to acknowledge receipt of  
your letter dated 20th April 1946, to which  
you had attached copy of a letter dated February  
1st, 1946.

Please be advised that the enquiry  
rendered necessary by your specific claim, as stated  
in your letter dated 1st February 1946, is being  
made.

As soon as this enquiry is completed  
it will be transmitted to the legal officers of the  
Crown, who will advise this Department as to whether  
or not the Crown will admit liability in this case,  
and you will be further advised.

Yours truly,

Deputy Minister  
Army.

*FO:CD*



le 15 mai 1946.

Au sujet du soldat G.-A. Dufresne (décédé),  
matricule D-650525.

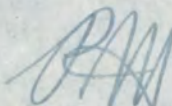
Monsieur,

Je vous accuse réception de votre lettre du 20 avril 1946, à laquelle vous aviez joint copie d'une lettre du 1er février 1946.

Je vous informe qu'on procède présentement à l'enquête rendue nécessaire par la réclamation contenue dans votre lettre du 1er février 1946.

Dès l'enquête terminée, on en communiquera le résultat aux conseillers juridiques de la Couronne, qui renseigneront le ministère sur la question de savoir si la Couronne doit se reconnaître responsable dans ce cas, après quoi nous vous écrirons de nouveau.

Votre bien dévoué,  
pour le sous-ministre,



(PAUL MATHIEU).

M. A. Grandpré,  
Notaire,  
Waterloo, P.Q.

94

le 15 mai 1946.

Au sujet du soldat G.-A. Dufresne (décédé),  
matricule D-650525.

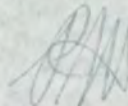
Monsieur,

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Je vous informe qu'on procède présentement à l'enquête rendue nécessaire par la réclamation contenue dans votre lettre du 1er février 1946.

Dès l'enquête terminée, on en communiquera le résultat aux conseillers juridiques de la Couronne, qui renseigneront le ministère sur la question de savoir si la Couronne doit se reconnaître responsable dans ce cas, après quoi nous vous écrirons de nouveau.

Votre bien dévoué,  
pour le sous-ministre,



(PAUL MATHIEU).

M. A. Grandpré,  
Notaire,  
Waterloo, P.Q.

B

97

le 15 mai 1946.

Au sujet du soldat G.-A. Dufresne (décédé),  
matricule D-650525.

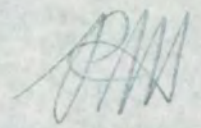
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Votre bien dévoué,  
pour le sous-ministre,

  
(PAUL MATHIEU).

M. A. Grandpré,  
Notaire,  
Waterloo, P.Q.

96

le 15 mai 1946.

Au sujet du soldat G.-A. Dufresne (décédé),  
matricule D-650525.

Monsieur,

Je vous accuse réception de votre lettre du 20 avril 1946, à laquelle vous aviez joint copie d'une lettre du 1er février 1946.

Je vous informe qu'on procède présentement à l'enquête rendue nécessaire par la réclamation contenue dans votre lettre du 1er février 1946.

Dès l'enquête terminée, on en communiquera le résultat aux conseillers juridiques de la Couronne, qui renseigneront le ministère sur la question de savoir si la Couronne doit se reconnaître responsable dans ce cas, après quoi nous vous écrirons de nouveau.

Votre bien dévoué,  
pour le sous-ministre,

  
(PAUL MATHIEU).

M. A. Grandpré,  
Notaire,  
Waterloo, P.Q.

95-



TRANSLATION  
MJD/gd  
17/5/46

S. R.  
To register and <sup>D.M. (A)</sup>  
pass to

A. GRANDPRE,  
Notary,  
Waterloo, P.Q.

1

May 14th, 1946.

CENTRAL REGISTRY Army

REC

ADDITION  
ENTERED

MAY 18 1946

File 869-D-6247

Chgd. to  
Referred to

4

Colonel Paul Mathieu,  
Dept. of National Defence,  
O t t a w a, Ont.

Sir: Re: D-650525, Pte André DUFRESNE

Mr. Adolphe Dufresne, father of the late Pte André Dufresne, who calls at my office almost every three or four days, is very anxious to know if your Department will take his claims into consideration.

You have undoubtedly received my last letter regarding this matter dated April 20th.

For the benefit of my client, you would greatly oblige me by telling me by return mail if your Department is making enquiries in the case and if Mr. Dufresne may hope that his requests will be complied with.

I thank you in anticipation and beg to remain,

Yours truly,

(Sgd) A. Grandpré, notary.

101

To:—J. A. G. signature please  
For consideration and draft reply

2

PAUL MATHIEU  
Asst. Deputy Minister

TRANSLATION

MJD/gd  
17/5/46

D.M.(A)

A. GRANDPRE,  
Notary,  
Waterloo, P.Q.

May 14th, 1946.

Colonel Paul Mathieu,  
Dept. of National Defence,  
O t t a w a, Ont.

Sir:        Re: D-650525, Pte André DUFRESNE

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For the benefit of my client, you would greatly oblige me by telling me by return mail if your Department is making enquiries in the case and if Mr. Dufresne may hope that his requests will be complied with.

I thank you in anticipation and beg to remain,

Yours truly,

(Sgd) A. Grandpré, notary.

100

TRANSLATION  
MJD/gd  
17/5/46

D.M.(A)

A. GRANDPRÉ,  
Notary,  
Waterloo, P.Q.

May 14th, 1946.

Colonel Paul Mathieu,  
Dept. of National Defence,  
O t t a w a, Ont.

Sir:           Re: D-650525, Pte André DUFRESNE

Mr. Adolphe Dufresne, father of the late Pte André Dufresne, who calls at my office almost every three or four days, is very anxious to know if your Department will take his claims into consideration.

You have undoubtedly received my last letter regarding this matter dated April 20th.

For the benefit of my client, you would greatly oblige me by telling me by return mail if your Department is making enquiries in the case and if Mr. Dufresne may hope that his requests will be complied with.

I thank you in anticipation and beg to remain,

Yours truly,

(Sgd) A. Grandpré, notary.

99



**A. GRANDPRÉ**  
NOTAIRE - NOTARY  
WATERLOO, P. Q.

FOR TRANSLATION  
AND RETURN TO  
D. M. (A)

14 mai 1946

Colonel Paul Mathieu,  
Ministère de la Défense Nationale,  
Ottawa, Canada.



RE:- Soldat André Dufresne D-650,525

Cher Colonel:-

M. Adolphe Dufresne, père du dit soldat décédé, qui passe à mon bureau presque à tous les 3 ou 4 jours, a bien hâte de savoir si votre Département prendra ses réclamations en considération.

Vous avez sans doute reçu ma dernière lettre à ce sujet, en date du 20 avril ?

Pour la satisfaction de mon client, je vous serais bien reconnaissant si vous vouliez me dire par un prochain courrier si votre Département fait enquête dans cette affaire, et si M. Dufresne peut espérer que l'on acquiescera à ses demandes.

Vous remerciant à l'avance, je vous prie de me croire

Votre dévoué serviteur,

Notaire.

F.T.  
For translation and  
return to D.M. (Army)  
for signature, pls.  
*[Handwritten signature]*  
(R.J. Orde), Brigadier,  
Judge Advocate-General.

H.Q. 869-D-6247 (JAG/C-1)

Ottawa, May 23rd, 1946.

WITHOUT PREJUDICE

Mr. A. Grandpré,  
Notary,  
Waterloo, P.Q.

Re: Claim by Mr. A. Dufresne

Dear Sir:

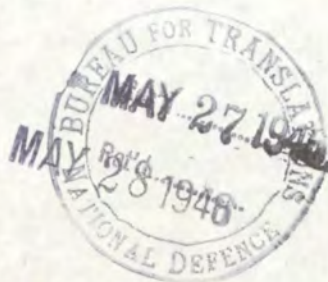
I beg to acknowledge receipt of your letter dated 14th May 1946, in which you request information as to the standing of the marginally noted matter.

I believe that my letter of the 15th May 1946 must have reached you by this time and that it contains the information that you requested in your above mentioned letter.

Yours truly,

Deputy Minister  
Army.

*[Handwritten signature]*  
PO:CD



*[Handwritten numbers]*  
120  
102

le 28 mai 1946

SOUS RESERVE DE TOUS DROITS

Monsieur,

Je vous accuse réception de votre lettre du 14 mai 1946, dans laquelle vous demandez où en est rendue la réclamation soumise par M. A. Dufresne.

Vous devez maintenant avoir reçu ma lettre du 15 mai 1946 et qui contient, je crois, les renseignements demandés dans la vôtre du 14 mai.

Votre bien dévoué,  
pour le sous-ministre,



(PAUL MATHIEU)

M. A. Grandpré,  
Notaire,  
Waterloo, P.Q.

D

703

CASUALTIES ONLY

For purpose of W.S.G.  
Casualties include death  
subsequent to discharge.

Register No. C.D.5054  
File No. 869.D.6247

WAR SERVICE GRANTS ACT 1944

Ottawa 18th July 1946

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

Service No. D.650525

Name G.A. DUFRESNE  
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.	\$ <u>nil</u>

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.	<u>nil</u>
--	------------

Names, address and relationship of persons to whom assigned pay was continued by supplementary award after death.	<u>nil</u>
---	------------

Amount of overpayment of dependents' allowance and/or assigned pay deductible from the War Service Gratuity and name of person to whom paid.	<u>nil</u>
--	------------

24-7-1946

*M. Allen*  
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

*105*

For C.T.O.

CASUALTIES ONLY

For purpose of W.S.G.  
Casualties include death  
subsequent to discharge.

Register No. C.D.5054

File No. 869.D.6247

WAR SERVICE GRANTS ACT 1944

Ottawa 18th July 1946

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

Service No. D.650525

Name C.A. DUFRESNE  
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.	\$ <u>nil</u>

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.	<u>nil</u>
--	------------

Names, address and relationship of persons to whom assigned pay was continued by supplementary award after death.	<u>nil</u>
---	------------

Amount of overpayment of dependents' allowance and/or assigned pay deductible from the War Service Gratuity and name of person to whom paid.	<u>nil</u>
--	------------

24. 7. 1946

*M. Allen*  
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 \_\_\_\_\_

*104*

For C.T.O.



TRANSLATION

TD/CGa

10/7/46

HOUSE OF COMMONS  
CANADA

C. R.  
To register and  
Pass to

SF A9

(1) Ottawa, July 6th, 1946.

Lieut.-Colonel Paul Mathieu,  
Deputy Minister of National Defence,  
Ottawa, Ont.

Re: D-650525, Pte. Dufresne (deceased)  
-----

Sir:

Would you kindly check the above-mentioned serviceman's file in order to find out what decision has been arrived at by your Department since May 15th. I would deeply appreciate your letting me hear about this matter as soon as possible.

Yours very truly,

(SGD) Marcel Boivin,  
M.P. for Shefford.

(1)  
S.E. A.G.

Passed please for report and draft reply to Mr. Boivin for the Deputy Minister's signature.

11/7/46

*A. G. Soudain*  
for D.M. (Army)

107

(For French Translation)

H.Q.869-D-6247 (JAG/C-1)  
BDF-SE-AG 3898 (JAG/C-1)

Ottawa, July 26, 1946.

Mr. Marcel Boivin, M.P.,  
House of Commons,  
O t t a w a, Canada.

Re: D-650525 Pte. G. A. Dufresne (deceased)



Dear Sir:

I have for acknowledgment your letter dated 6th July, 1946.

Kindly note that this matter is still under investigation. The delay is due to the fact that it had to be referred to the R.C.A.F. authorities for completion of the investigation rendered necessary by your claim. The R.C.A.F. authorities have advised this Department that the investigation should be completed within the next few days after which it will be submitted to the legal officers of the Crown for their opinion as to legal liability.

Every possible effort will be made by this Department to expedite this matter and you will be informed as soon as a decision is reached.

Yours truly,

Deputy Minister.

<b>A. G. ENQUIRY</b>	
No.	<i>Interim</i> 3898
Date.	JUL 27 1946
Passed.	<i>[Signature]</i>

*WES*  
LYV:3503

108

, le 29 juillet 1946.

Cher monsieur Boivin,


Je vous accuse réception de votre lettre du 6 juillet 1946, au sujet de feu le soldat G.-A. Dufresne, matricule D-650525.

Je dois vous faire remarquer que la question est encore à l'étude. Le retard provient du fait que nous avons dû soumettre le cas aux autorités du C.A.R.C., pour qu'elles terminent l'enquête rendue nécessaire par votre réclamation. Les autorités du C.A.R.C. nous ont signalé que l'enquête se terminerait probablement d'ici quelques jours, après quoi on soumettra la question aux conseillers juridiques de la Couronne, en vue d'obtenir leur opinion en ce qui concerne la responsabilité en droit.

Nous nous efforcerons de faire diligence et, dès qu'on aura rendu une décision, nous vous en aviserons.

Bien sincèrement,

pour le sous-ministre,

  
(Paul Mathieu)

M. Marcel Boivin, député,  
Chambre des Communes,  
Ottawa, Canada.



H.Q. 869-D-6247 (JAG/C-1)  
BDF-SE-AG 3898 (JAG/C-1)

In reply quote No. ....

DEPARTMENT OF NATIONAL DEFENCE  
ARMY  
INTER-OFFICE CORRESPONDENCE

Office of the Judge Advocate-General

To: Special Enquiries - AG Ottawa, July 26, 1946.

Re: D.650525 Pte. G. A. Dufresne (deceased)

1. Reference your memorandum dated 16th July, 1946.
2. Enclosed herewith draft reply for signature of the Deputy Minister (Army) to letter dated 6th July, 1946, from Mr. Marcel Boivin, M.P. for Shefford, House of Commons, Ottawa.

*W E Scott*  
for (R. J. Orde) Brigadier,  
Judge Advocate-General.

LYV:3503

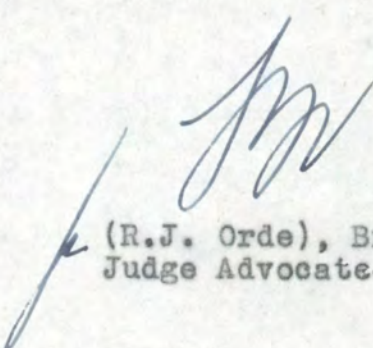
13th August, 1946.

D. of P.

Court of Inquiry - Death  
D.650525, Pte. Dufresne, G.A.

With reference to my memorandum dated 13 May 46, may this Office be informed, please, as to how this matter now stands.

LYV/AB



(R.J. Orde), Brigadier,  
Judge Advocate-General.

111

FALSE DOCKET  
ARMY

No. 10

ESTATES

DEPARTMENT OF NATIONAL DEFENCE, CANADA  
D. 650525

CROSS REFERENCE

DUFRESNE, GEORGES ANDRE,

R.S. & P.



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")		
	22/12	BF	Q		Estates Per request	BA	28/9/45
	6/1/5	ja	G		WITH PAPERS SEP 5 1945		
	13/1/5	p.a.	G		WITH PAPERS SEP 8 1945		
					WITH PAPERS SEP 13 1946		
	2/10	PA	Eff		no papers attached	Eff	25/9
	7/10	34	L		effs sent off o p.a.	G	2/10
					WITH PAPERS OCT 17 1945		
				N	QV O P Y	G	25/10
	15-11	BF	QV	QV	V+ P4	H	20-10
	30-11	BF	QV	QV	PER. B. F. NOV 15 1945		
	24/12	BF	QV	QV	PER. B. F. NOV 30 1945		
	12-1	34	L	G	Per B. F. DEC 7 1945		
				G	WITH PAPERS DEC 18 1947		
	15/1	BF	QV	QV	Per B. F.	G	12/19
	30/1	BF	QV	QV	PER. B. F. JAN 15 1946		
	13/3	BF	QV	QV	PER. B. F. JAN 30 1946		
				QV	PER. B. F. MAR 15 1946		
				Q4	P 4	QV	22/3
	30/4	BF	N	SA	519	WSH	16-3
				G	With mail	N	16-4
				SA	for 24	G	16/4
	15/1	BT	L	G	Dist & Qc	A	1-5
		PA	Qc	Qc	noted	G	9/6
	p/2	ja	G	G	WITH PAPERS MAY 23 1946		
	7/70	BT	G	G	WITH PAPERS MAY 15 1946		

CLOSED

869-D-6247 F.D. 10,

FILE NO. H.Q. No.

DIED..... 19 Aug 1946..... CANADA Hamilton..... FORM TO UNIT.....

PRESUMED DEAD..... 194..... OVERSEAS..... Estates No. 39908

Casualty Report—  
Date Received 28 Aug 46  
Date Despatched  
Dufresne, Georges A. D-650524

Service { Canada 12 Nov 43  
O/Seas.....  
Beneficiary Mr. Adolphe Dufresne (Father)  
Will Civil.....  
None.....  
Probate (or L of A).....  
Residing { Canada   
Elsewhere.....

Particulars of Family  
Form dated 12 Nov 43  
None.....  
Single  Married.....  
Parents both Children..... (Minors.....)  
Life Insurance Metropolitan Life Ins.

Form P. 64  
Dated 7-9 1 Sept 46  
By Father Single  M.....  
Other N/K.....  
Domicile Swi. Father  
Will nil Debts nil  
Civil Estate V. 3. 7

Action Required	Action Taken	Date	App'd
Bank a/c.....			
W.S.C.....			
Bonds.....			

C. of A. Report..... 12-9-45 Approved CE  
Service Debts nil  
Service Will nil

L.P.C. \$24.57 11 J.V. 10764 8/3/46

Amended.....  
Bank Credits.....

DISTRIBUTION—  
Effects { Canada..... 54711  
Overseas..... 3-10-45  
To Father  
Bulk via 1 Ctm. C.P.X. A199  
Valuables via.....  
Letter as to, dated 1/10/45

Total Cash \$ 24.57 To

Date of Despatch 3/5/46  
\$ Father - Adolphe Dufresne (permanently)  
\$ NR 875  
\$ 1087  
\$ 1-7-46

ADVICE RECEIVED  
APR 25 1946  
NO WILL IN REC. OFF.

Will/No. 1/2/46

# A. GRANDPRÉ

NOTAIRE - NOTARY

RE:- Dufresne, Georges Andr., Sdt.  
No. D-650,525,  
Armée Canadienne.

WATERLOO, P.Q.. 6 septembre 1945

Le Directeur des Successions,  
Ministère de la Défense Nationale,  
Ottawa, Ont.

Réf. 869-D-6247 FD10



Monsieur:-

Ci-joint veuillez trouver le rapport de M. Adolphe  
Dufresne, sur Formule P-64, signé par lui-même en ma présence.

Espérant que ce rapport sera jugé conforme à vos  
désirs, je vous prie de me croire

Votre tout dévoué,

*A. Grandpré*  
Notaire.

DUFRESNE, G. A.



DIVISION DES SUCCESSIONS

12 septembre 1945.

Monsieur A. Grandpré,  
Notaire,  
Waterloo,  
P. Q.

DUFRESNE, Georges André, Soldat, (décédé)  
No. D-630325, Armée Canadienne

Cher Monsieur Grandpré,

Nous accusons réception de votre lettre du 10 septembre ainsi que de notre formule P.64 dûment remplie par Monsieur Dufresne.

Vous voudrez bien faire part au père du défunt que nous détenons ici dans notre dossier un testament en date du 18 novembre 1943 par lequel son fils lui a légué tous ses biens. Si une copie du testament est nécessaire pour les fins du règlement de la police d'assurance de la Metropolitan Life, nous serons très heureux de la communiquer à qui de droit sur demande.

Nous n'avons pas encore reçu le rapport de l'Unité et par suite sommes dans l'impossibilité, du moins pour le moment, de vous fournir aucune précision sur la succession militaire. Dès que nous aurons obtenu ces détails nous ne manquerons pas de communiquer avec vous.

Votre dévoué,

OG/TD

Major,  
le Directeur des Successions.

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\*N.B.—As this form is applicable to any Board of Officers or Committee or Court of Inquiry, the blank is to be filled in accordingly.

The signature of each Officer composing the Board, etc., should appear on the last page of this form in the space provided therefor.

PROCEEDINGS of a **\*COMMITTEE OF ADJUSTMENT**

assembled at **TORONTO, ONTARIO**

on the **20th day of August 1945**

by order of **Major .A.H.Woods**

for the purpose of **dealing with the Service Estate of D-650525.**

**Pte.DUFRESNE.Georges Andre.No.2.General Employment Coy**

**who died at Hamilton, Ont. on the 19th day of August 1945**

**as a result of injuries sustained in an Automobile accident.**

PRESIDENT

(Thos.Bouckley)Capt.  
#2.General Employment Coy.  
MEMBERS

(W.T.Smith)Lieut.  
#2.General Employment Coy.

(J.W.Gibson)Lieut.  
#2.General Employment Coy.



The **Committee** having assembled pursuant to order, proceed to take action on the service estate of the deceased in accordance with F.R.and I for C.A.S.F.(Canada)Article 221 as amended under the following headings:-

1. Personal effects.
2. Public Clothing and equipment,
3. Last illness and funeral expenses.
4. Preferential charges(service debts)
5. Ordinary debts and claims.
6. Paymaster.
7. Last Pay Certificate.
8. Last Will and Testament.

and report thereon as follows:-

1. Personal effects as per inventory annexed hereto marked "A" were secured and forwarded on Wednesday..(date)22nd.August.1945. to the Administrator of Estates,Dep't of National Defence,Ottawa;the Clothing etc,together with a copy of the inventory by Registered Mail
2. Public Clothing and Equipment;were secured,inventoried,and returned to Quarter Master Stores;there were no deficiencies.M.F.C.512 is annexed hereto and marked "B".

M.F.B. 303

500M—12-42 (7535)  
H.Q. 1772-89-133

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3.(a) Itemized accounts for expenses of last illness to be paid by the Government have been obtained and certified and two copies lodged with the Unit Paymaster for forwarding to the District Paymaster M.D.2. for payment. One copy of such accountx is annexed hereto marked "C".

(b) Funeral expenses were incurred at Hamilton. Ontario, and Waterloo, Quebec in the total sum of \$ 103.04...

(a) The account of Truscott Bros: funeral directors, Hamilton. Ontario, was for \$50.00 and being within the allowance authorized by F.R. & I 220(1). 5 copies have been obtained and certified and 2 copies lodged with the Unit Paymaster for forwardal to the District Paymaster M.D.2. for payment. A copy of the bill is annexed hereto, marked "D".

(b) The account of Mr. Ledoux. Levough. Undertaker 454 Main St. Waterloo. Quebec was for \$ 53.04 and 5 copies of a bill for \$53.04 payable under F.R. & I 220(2) & (1) have been obtained and certified and 2 copies lodged with the Unit Paymaster for forwardal to the District Paymaster M.D.2. for payment (a Copy of the bill is annexed hereto marked "E").

(c) The deceased was buried in the Roman Catholic Cemetery, Waterloo. Quebec

(d) A warrant was obtained for the transportation of the body from Hamilton. Ont. to Waterloo. Quebec-----F.R. & I 220 (8)

4. Preferential charges.....NIL.

5. Ordinary debts or claims....None have come to the Committee's notice.

6. The Committee has lodged with the Paymaster:-

(a) the sum of \$ .77 found on the person or in the effects of the deceased (receipt therefore is hereto annexed marked "F").

(b) certified travelling claim.....Nil

(c) Statement of deficiencies in public clothing and equipment to the amount of \$NIL.

(d) the last illness and funeral accounts to be paid by the Government.

7. Last Pay Certificate was obtained from the Paymaster showing the sums mentioned in para. 6 (a) and (c) above and a balance at credit of \$24.57. A copy whereof is annexed hereto.

8. Nil record in Unit of any Will.

Signed..... 11. Sep. 45 date.....

President.....

Member.....

Member.....

"A"

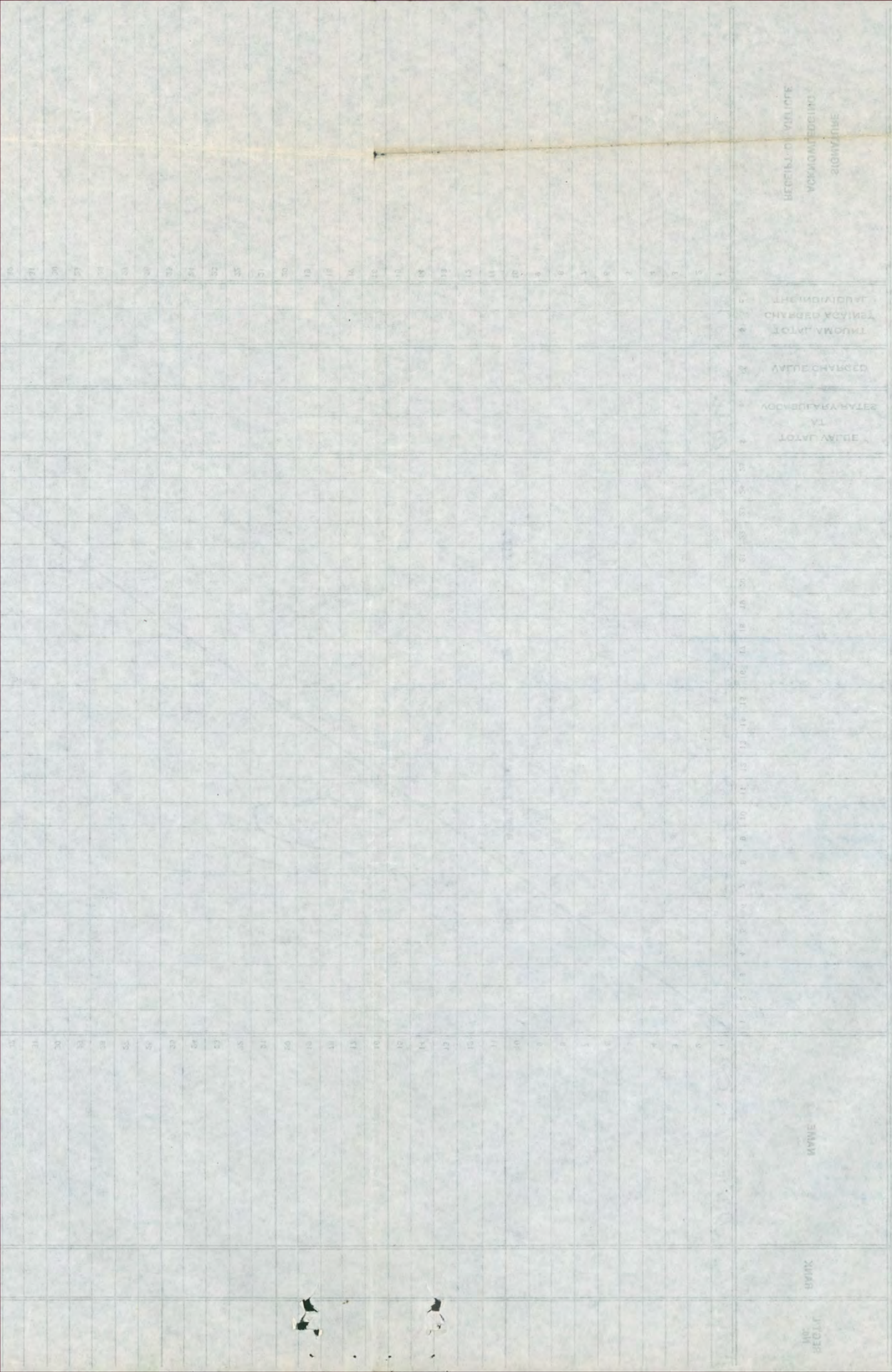
INVENTORY OF PERSONAL EFFECTS OF D-650525.Pte.DUPRESNE.G.A.

- 1 Black Utility Case
- 1 Tooth Brush
- 1 Gillette Razor and Case
- 4 Gillette Razor Blades
- 1 Tube Tooth Paste
- 1 Part Tube Shaving Cream
- 1 Box Letters
- 1 Copy of Military Standing Orders
- 1 Copy Manual of Canadian Soldier
- 24 Snapshots
- 1 Certif: S-9 Can Army Motor Mechanic School
- 1 Religious Picture Postcard
- 1 Pr: Brown Kid Gloves
- 1 White Handkerchief
- 1 Khaki Handkerchief
- 2 Pr:Wool Socks(Black)
- 1 Red Sock
- 1 Leather Tan Belt
- 1 Rosary and Case
- 1 Lock
- 1 Pr:Scissors
- 1 Lipstick
- 3 Cotton Under Shirts
- 4 Cotton Under Drawers
- 1 Kit Bag(Khaki)

*Thos. Bouckley*  
.....Capt.  
(Thos. Bouckley)  
President.  
Committee of Adjustment.







BECTEJ-ON VPICTE  
 BCKHOMI EDCIMO  
 EIONV IPIE

DATE  
 STATION  
 NAME  
 I. A. NUMBER

ТИМУА ЛАТО  
 ТИМУА ЛАТО  
 ТИМУА ЛАТО  
 ТИМУА ЛАТО  
 ТИМУА ЛАТО

УКАЗЫ

1. Внимательно прочтите инструкцию по эксплуатации прибора. Особое внимание уделите разделу "Технические характеристики".  
 2. Прибор должен использоваться только в соответствии с назначением.  
 3. Не допускайте попадания влаги и пыли на прибор.  
 4. Не используйте прибор вблизи источников открытого огня.  
 5. Не используйте прибор вблизи высоковольтных линий.  
 6. Не используйте прибор вблизи магнитных полей.  
 7. Не используйте прибор вблизи радиостанций.  
 8. Не используйте прибор вблизи электрических сетей.  
 9. Не используйте прибор вблизи железных дорог.  
 10. Не используйте прибор вблизи аэропортов.  
 11. Не используйте прибор вблизи военных объектов.  
 12. Не используйте прибор вблизи государственных учреждений.  
 13. Не используйте прибор вблизи объектов культурного наследия.  
 14. Не используйте прибор вблизи объектов исторического наследия.  
 15. Не используйте прибор вблизи объектов археологического наследия.  
 16. Не используйте прибор вблизи объектов биологического наследия.  
 17. Не используйте прибор вблизи объектов животного мира.  
 18. Не используйте прибор вблизи объектов растительного мира.  
 19. Не используйте прибор вблизи объектов почвенного наследия.  
 20. Не используйте прибор вблизи объектов геологического наследия.  
 21. Не используйте прибор вблизи объектов гидрологического наследия.  
 22. Не используйте прибор вблизи объектов метеорологического наследия.  
 23. Не используйте прибор вблизи объектов климатического наследия.  
 24. Не используйте прибор вблизи объектов биосферного наследия.  
 25. Не используйте прибор вблизи объектов культурного ландшафта.  
 26. Не используйте прибор вблизи объектов исторического ландшафта.  
 27. Не используйте прибор вблизи объектов археологического ландшафта.  
 28. Не используйте прибор вблизи объектов биологического ландшафта.  
 29. Не используйте прибор вблизи объектов животного ландшафта.  
 30. Не используйте прибор вблизи объектов растительного ландшафта.

INSTRUCTIONS

1. Read the instruction manual carefully before using the instrument.  
 2. The instrument should be used only for its intended purpose.  
 3. Do not allow moisture and dust to enter the instrument.  
 4. Do not use the instrument near open flames.  
 5. Do not use the instrument near high voltage power lines.  
 6. Do not use the instrument near magnetic fields.  
 7. Do not use the instrument near radio stations.  
 8. Do not use the instrument near electrical power lines.  
 9. Do not use the instrument near railway tracks.  
 10. Do not use the instrument near airports.  
 11. Do not use the instrument near military installations.  
 12. Do not use the instrument near government buildings.  
 13. Do not use the instrument near cultural heritage sites.  
 14. Do not use the instrument near historical heritage sites.  
 15. Do not use the instrument near archaeological heritage sites.  
 16. Do not use the instrument near biological heritage sites.  
 17. Do not use the instrument near animal heritage sites.  
 18. Do not use the instrument near plant heritage sites.  
 19. Do not use the instrument near soil heritage sites.  
 20. Do not use the instrument near geological heritage sites.  
 21. Do not use the instrument near hydrological heritage sites.  
 22. Do not use the instrument near meteorological heritage sites.  
 23. Do not use the instrument near climatic heritage sites.  
 24. Do not use the instrument near biosphere heritage sites.  
 25. Do not use the instrument near cultural landscape sites.  
 26. Do not use the instrument near historical landscape sites.  
 27. Do not use the instrument near archaeological landscape sites.  
 28. Do not use the instrument near biological landscape sites.  
 29. Do not use the instrument near animal landscape sites.  
 30. Do not use the instrument near plant landscape sites.

ИМ  
 BECTE

ИМВЕ

ИМВК

"C"

28th August 1945

Hamilton Military Hospital,  
R.C.A.M.C? C.A.  
Gage Avenue N, Hamilton, Ont.

Capt. T. Bouckley,  
No. 2. General Employment Coy,  
Exhibition Barracks,  
Toronto, Ontario.

D-625525. Pte. DUFRESNE. A. (deceased)

As the marginally named deceased was hospital-  
ized here for a period less than 24 hours (8 hours),  
prior to his decease, there will be no charges re his  
hospitalization.

Signed:- Jas. McKeown Lieut.  
for B.L. Guyatt, Lieut. Col., O.C.  
Hamilton Military Hospital  
R.C.A.M.C. C.A.

Certified True Copy *Thos. Bouckley* ..... Capt.  
(Thos. Bouckley)  
President.  
Committee of Adjustment.

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"D"

Funeral Home  
BARTON ST. EAST AT BIRCH AVE.

Hamilton, August 20/45.  
ONTARIO

*M* No. 2 General Employment,  
Coy. Can Army Gov. Bldg.,  
Exhibition Grounds #2. D.D.  
Toronto Ontario

IN ACCOUNT WITH

**Truscott Bros.**  
**Funeral Service**

PHONE  
4-5755

5% DISCOUNT 30 DAYS

DIRECTOR  
J. GORDON TRUSCOTT

net price,

Burial of "Private A. Dufrene".

Professional Service, - - \$ 50.00

Cemetery Charges, - - \$

\$50.00

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Technical assistance

50,000	Equipment
20,000	Travel
10,000	Living
	(Maintenance)
	Travel charges
	Living

Technical assistance

Technical assistance



Technical assistance

Itemized account:-

Embalming-	\$20.00
Casket.	20.00
Shell	10.00
Professional)	
Press Charges	
Gratis. )	

---

\$50.00 Total.

TRUSCOTT BROS.  
Signed: L.I. Hunt.



Certified True Copy.....Capt  
President.  
Committee of Adjustment.

TEL. 384

E"  
} Main Street  
454 } Rue Principale

Waterloo, P. Q., .Septembre 6.....194 5..

M. Ré- Monsieur André Dufresne..... D- 650525.....

... 18 rue Ellis, Waterloo, Qué.....

En compte avec — In account with

# LÉO-PAUL LEDOUX

DIRECTEUR DE FUNERAILLES — FUNERAL DIRECTOR

AMBULANCE

TAXI

MONUMENTS

AOÛT	23	Frais Funéraires	20.00
		Chambre Mortuaire	15.00
		Descente & Verdure (cimetière)	10.00
		Transport	5.00
		Annonce	2.00
			<u>52.00</u>
		Taxe Provinciale 2%	1.04
			<u>53.04</u>

CERTIFIED.....

*Thos Bouckley Capt.*  
.....  
(Thos Bouckley) Captain.  
President.  
Committee of Adjustment.

122

#2. General Employment Coy.  
Toronto, Ontario.  
21 Aug 45

"F"

Received from the Committee of Adjustment the sum  
of .7¢ (Seven cents) found on the person of D-650525  
Pte. Dufresne, G.A. (Deceased)

*H. D. Burk*  
.....  
(H. D. Burk) Capt. and Paymaster  
#2. General Employment Coy.



# CANADIAN ARMY (A)

## LAST PAY CERTIFICATE

M.F.D. 930A  
750M-9-43 (1730)  
H.Q. 1772-39-1548

Regtl. No. D.650525 Rank and Name Pte. DUFRESNE Georges Andre  
of No.2, General Employment Coy., Toronto, Ontario Unit on  
(Transfer, Posting or Discharge) to S.O.S. DECEASED on 19th August 1945  
(Unit and Station)  
Reason for discharge DECEASED Authority D.O. 174 d/20 Aug 45

On TRANSFER of OFFICER or WARRANT OFFICER, Class I

Outfit allowance of \$ NA has been paid by the Treasury Officer, Military District No.

**REMARKS:**

- State (1) Date of appointment or enlistment 15 November 1943 No.4, D.D.  
(2) If individual has dependents eligible for Dependents Allowance, has application been submitted? NA  
(3) Has assignment of pay been made? NO If so, amount \$ NA  
Effective date NA  
(4) In the case of Officers in receipt of a Service (P.F.) Pension state monthly deduction \$ NA  
(5) **Soldier deceased 19th Aug 45 and account credited to end of current month**

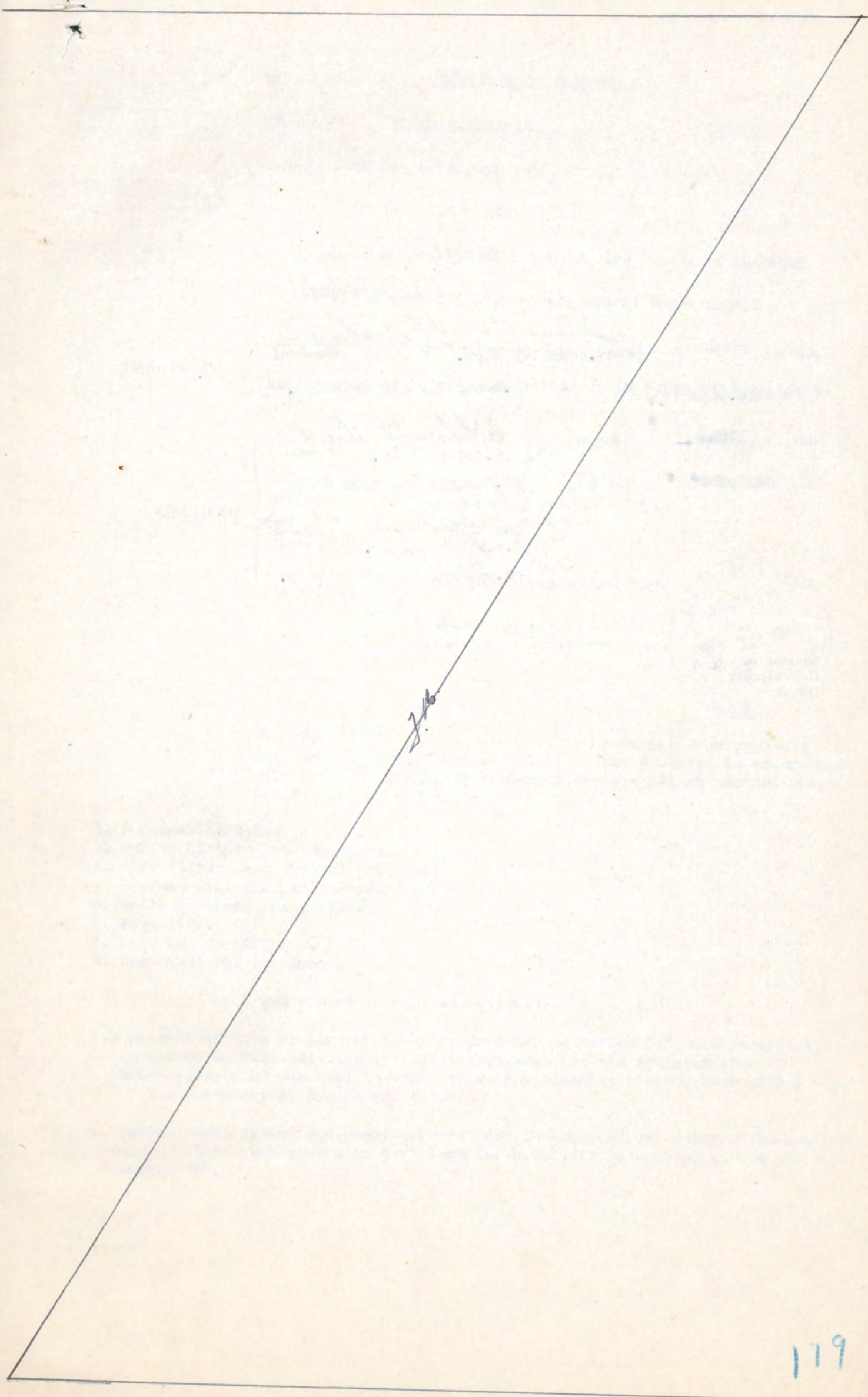
The following is a statement of the account of the above named from 1st Aug 45 to 31st Aug 45 194  
~~the inclusive date of transfer, posting or discharge to end of month next~~ ~~RT~~ **in which deceased.**

Dr.		Cr.	
PARTICULARS	AMOUNT	PARTICULARS	AMOUNT
	\$    c.		\$    c.
Balance Dr. from last account	6 00	Balance Cr. from last account	
First Monthly Payment <u>AR #A.69</u>	18 00	Regimental Pay <u>31</u> days at \$ <u>1.50</u>	46 50
Casual Payments		Tradesmen's Pay.....days at \$	
Payment on Transfer, Posting or Discharge		Additional Pay (Give particulars)	
Assigned Pay		.....days at \$	
Regimental Charges		Allowances (Give particulars)	
Public Stoppages (Give particulars):		.....days at \$	
		<b>Ration All. D.O. 163</b>	
		<b>4 days @ .50¢</b>	2 00
		<b>Receiver General Deposit</b>	
		<b>Receipt No. 408</b>	07
To Balance Cr. (To be paid by new unit)	24 57	By Balance Dr. (To be deducted by new unit)	
<b>Total</b>	<b>48 57</b>	<b>Total</b>	<b>48 57</b>



Toronto, Ontario  
(Place)  
  
22 August 45  
(Date)

I certify that the above is a true and correct statement of the account of the above named ~~on transfer, posting or discharge~~ **deceased**  
*H.D. Burk* 120  
(H.D. BURK) Paymaster or Accounting Officer





Signed at Toronto, Ontario #2. General Employment Coy.  
(Thos. Bouckley) Capt. (Signature) PRESIDENT

Toronto, Ontario #2. General Employment Coy.  
(Unit)

this 11th day of September 1945  
(W.T. Smith) Lieut. (Signature)

September 1945 #2. General Employment Coy.  
(Unit)

MEMBERS

(J.W. Gibson) Lieut. (Signature)

#2. General Employment Coy.  
(Unit)

Opinion of  
Commanding  
Officer:—

\*N.B.--As this form is applicable to any Board of Officers or Committee or Court of Inquiry, the blank is to be filled in accordingly.

The signature of each Officer composing the Board, etc., should appear on the last page of this form in the space provided therefor.

PROCEEDINGS of a \* COMMITTEE OF ADJUSTMENT

assembled at TORONTO, ONTARIO

on the 20th day of August 1945

by order of Major A.H. Woods

for the purpose of dealing with the Service Estate of D-650525

Pte. DUFRESNE, Georges Andre, No. 2, General Employment Coy

who died at Hamilton, Ont. on the 19th day of August 1945

as a result of injuries sustained in an Automobile accident.

PRESIDENT

(Thos. Bouckley) Capt.  
#2, General Employment Coy.  
MEMBERS

(W.T. Smith) Lieut.  
#2, General Employment Coy.

(J.W. Gibson) Lieut.  
#2, General Employment Coy.



The Committee having assembled pursuant to order, proceed to take action on the service estate of the deceased in accordance with F.R. and I for C.A.S.F. (Canada) Article 221 as amended under the following headings:-

1. Personal effects.
2. Public Clothing and equipment,
3. Last illness and funeral expenses.
4. Preferential charges (service debts)
5. Ordinary debts and claims.
6. Paymaster.
7. Last Pay Certificate.
8. Last Will and Testament.

and report thereon as follows:-

1. Personal effects as per inventory annexed hereto marked "A" were secured and forwarded on Wednesday.. (date) 22nd. August. 1945. to the Administrator of Estates, Dep't of National Defence, Ottawa; the Clothing etc, together with a copy of the inventory by Registered Mail
2. Public Clothing and Equipment were secured, inventoried, and returned to Quarter Master Stores; there were no deficiencies. M.F.C. 512 is annexed hereto and marked "B".

ND

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- 3.(a) Itemized accounts for expenses of last illness to be paid by the Government have been obtained and certified and two copies lodged with the Unit Paymaster for forwarding to the District Paymaster M.D.2. for payment. One copy of such accountx is annexed hereto marked "C".
- (b) Funeral expenses were incurred at Hamilton, Ontario, and Waterloo, Quebec in the total sum of \$103.04...
- (a) The account of Truscott Bros: funeral directors, Hamilton, Ontario, was for \$50.00 and being within the allowance authorized by F.R.&I 220(1). 5. copies have been obtained and certified and 2 copies lodged with the Unit Paymaster for forwardal to the District Paymaster M.D.2. for payment. A copy of the bill is annexed hereto, marked "D".
- (b) The account of Mr. Ledoux, Levough, Undertaker 454 Main St. Waterloo, Quebec was for \$53.04 and 5 copies of a bill for \$53.04 payable under F.R. & I 220(2)&(1) have been obtained and certified and 2 copies lodged with the Unit Paymaster for forwardal to the District Paymaster M.D.2. for payment (a Copy of the bill is annexed hereto marked "E").
- (c) The deceased was buried in the Roman Catholic Cemetery, Waterloo, Quebec
- (d) A warrant was obtained for the transportation of the body from Hamilton, Ont. to Waterloo, Quebec-----F.R. & I. 220 (8)
- 4. Preferential charges.....NIL.
- 5. Ordinary debts or claims....None have come to the Committee's notice.
- 6. The Committee has lodged with the Paymaster:-
  - (a) the sum of \$ .7¢ found on the person or in the effects of the deceased (receipt therefore is hereto annexed marked "F").
  - (b) certified travelling claim.....Nil
  - (c) Statement of deficiencies in public clothing and equipment to the amount of \$NIL.
  - (d) the last illness and funeral accounts to be paid by the Government.
- 7. Last Pay Certificate was obtained from the Paymaster showing the sums mentioned in para.6 (a) and (c) above and a balance at credit of \$24.57. A copy whereof is annexed hereto.
- 8. Nil record in Unit of any Will.

Signed.....ll..Sep..45 date.....

President.....

Member.....

Member.....

- 1 Black Utility Case
- 1 Tooth Brush
- 1 Gillette Razor and Case
- 4 Gillette Razor Blades
- 1 Tube Tooth Paste
- 1 Part Tube Shaving Cream
- 1 Box Letters
- 1 Copy of Military Standing Orders
- 1 Copy Manual of Canadian Soldier
- 24 Snapshots
- 1 Certif: S-9 Cdn Army Motor Mechanic School
- 1 Religious Picture Postcard
- 1 Pr: Brown Kid Gloves
- 1 White Handkerchief
- 1 Khaki Handkerchief
- 2 Prs:Wool Socks(Black)
- 1 Red Sock
- 1 Leather Tan Belt
- 1 Rosary and Case
- 1 Lock
- 1 Pr:Scissors
- 1 Lipstick
- 3 Cotton Under Shirts
- 4 Cotton Under Drawers
- 1 Kit Bag(Khaki)

*Thos Bouckley* Capt.  
.....  
(Thos. Bouckley)  
President.  
Committee of Adjustment.



D6505W PKE DUFRESINE, G.A.

*M/S*

NO DEFICIENCIES OF KIT.

Total Number Each Article																								
Vocabulary Rate per Article																								
Total Value per Article at Vocabulary Rate	\$																							
Ledger Folio.																								

\$	c.	\$	c.
<i>Nil</i>		<i>Nil</i>	
TOTALS			
\$	c.	TOTAL VALUE AT VOCABULARY RATES	

Extension & Add. by.....  
 Extension & Add. checked by.....  
 Ledger posting made by.....  
 Ledger posting checked by.....

M.F.C. 512 Misc.  
 4M pads 8-42 (5792)  
 H.Q. 1772-39-170

CERTIFIED THAT THE AMOUNTS CHARGED AGAINST INDIVIDUALS HAVE BEEN RECOVERED  
 IN THE UNITS PAY-LIST FOR THE MONTH OF..... 19.....

DATE.....  
 PAYMASTER.....

CERTIFIED CORRECT  
*A.H. Woods*  
 (A.H. Woods) Major.  
 COMMANDING #2. General Employment Coy.

DATE 21 Aug. 45.....

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100																														
										NO										DELEGEMACE										OL										KUM										DUAL LATOT										DSTAR VRAVUCADOL										VALDE CHAFCE										THOMA LATOT										THE INDIVIDUAL										RECEIPIA VALIETE										YCKKOMFEDUNG										SIGNATURE									

RECEIPIA

RECEIPIA VALIETE (RECEIPT) - A document used to confirm the receipt of goods or services. It is a legal document that serves as proof of payment and is often used in business transactions. The receipt typically includes the date, the name of the provider, the name of the recipient, and a detailed description of the goods or services received. It is important to keep receipts for tax purposes and to resolve any disputes that may arise.

IMSTURCATIONS  
 CASE 122NE2-122NE2 ON BELVA  
 (PLEASE PRINT NAME AND ADDRESS)  
 NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_  
 STATE: \_\_\_\_\_  
 ZIP: \_\_\_\_\_

DATE: \_\_\_\_\_  
 SIGNATURE: \_\_\_\_\_



IN REPLY PLEASE QUOTE

"c"

No.....

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

28th August 1945

Hamilton Military Hospital,  
R.C.A.M.C. C.A.  
Gage Avenue N, Hamilton, Ont.

Capt. T. Bouckley,  
No. 2 General Employment Coy,  
Exhibition Barracks,  
Toronto, Ontario.

P-625525, Pte. DUFRESNE, A. (deceased)

As the marginally named deceased was hospital-  
ized here for a period less than 24 hours (8 hours), prior  
to his decease, there will be no charges re his hospitaliz-  
ation.

*E. L. Guyatt Lieut*  
E.L. Guyatt, Lieut.Col., O.C.  
Hamilton Military Hospital.  
R.C.A.M.C. C.A.

:DC

134



Itemized account:-

Embalming- \$20.00  
 Casket. 20.00  
 Shell 10.00  
 Professional)  
 Press Charges  
 Gratis. )

\$50.00 Total.

TRUSCOTT BROS.  
Signed: L.I.Hunt.

Certified True Copy.....*Hon. Bowdley* Capt.  
 President.  
 Committee of Adjustment.

Funeral Home

BARTON ST. EAST AT BIRCH AVE.

Hamilton, Aug 20th 1945.  
ONTARIO

*No. 2* General Employment,  
 Coy. Can Army Gov. Bldg.,  
 Exhibition Grounds #2. D.D.  
 Toronto

IN ACCOUNT WITH

**Truscott Bros.**  
**Funeral Service**

PHONE  
4-5755

5% DISCOUNT 30 DAYS

DIRECTOR  
J. GORDON TRUSCOTT

net price.

Burial of "Private A. Dufrene".  
 B. 625525

Professional Service, - - \$ 50.00

Cemetery Charges, - - \$           

\$50.00

—Wm. Wood & Sons Ltd

00.00  
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(I refer to...)  
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TEL. 384

} Main Street  
454 } Rue Principale

Waterloo, P. Q., *septembre 6* 194*9*

M. ~~36- Monseigneur André Dufresne~~ *D- 680825*

*18 rue Ellis, Waterloo, Qué.*

En compte avec — In account with

# LÉO-PAUL LEDOUX

DIRECTEUR DE FUNERAILLES — FUNERAL DIRECTOR

AMBULANCE

TAXI

MONUMENTS

<i>Adit</i>	<i>23</i>	<i>Frais Funéraires</i>	<i>20.00</i>
		<i>Chambre Mortuaire</i>	<i>15.00</i>
		<i>Descente &amp; Voiture (cimetière)</i>	<i>10.00</i>
		<i>Transport</i>	<i>5.00</i>
		<i>Annonce</i>	<i>55 2.00</i>
			<i>382.00</i>
		<i>Taxe Provinciale 25</i>	<i>1.04</i>
			<i>383.04</i>

CERTIFIED *Thos Bouckley est.*  
 (Thos Bouckley) Captain.  
 President.  
 Committee of Adjustment.

132

#2. General Employment Coy.  
Toronto, Ontario.  
21 Aug 45.

Received from the Committee of Adjustment the sum  
of .7¢ (Seven cents) found on the person of D-650525  
Pte. Dufresne. G.A. (Deceased)

*H. D. Burk*  
.....  
(H.D. Burk) Capt. and Paymaster  
#2. General Employment Coy.

131

CANADIAN ARMY (A)  
**LAST PAY CERTIFICATE**

M.F.D. 930A  
 750M-9-43 (1730)  
 H.Q. 1772-39-1548

Regl. No. D.650525 Rank and Name Pte. DUFRESNE Georges Andre  
 of No.2, General Employment Coy., Toronto, Ontario Unit, on  
 (~~From date of transfer or posting or discharge~~ to S.O.S. DECEASED on 19th August 1945  
 (Unit and Station)  
 Reason for discharge DECEASED Authority D.O. 174 d/20 Aug 45

On TRANSFER of OFFICER or WARRANT OFFICER, Class I

Outfit allowance of \$ NA has been paid by the Treasury Officer, Military District No. \_\_\_\_\_

**REMARKS:**

- State (1) Date of appointment or enlistment 15 November 1943 No.4, D.D.  
 (2) If individual has dependents eligible for Dependents Allowance, has application been submitted? NA  
 (3) Has assignment of pay been made? NO If so, amount \$ NA  
 Effective date NA  
 (4) In the case of Officers in receipt of a Service (P.F.) Pension state monthly deduction \$ NA  
 (5) Soldier deceased 19th Aug 45 and account credited to end of current month

The following is a statement of the account of the above named from 1st Aug 45 to 31st Aug 45 1945  
~~to include the date of transfer, posting or discharge, to end of month next after in which deceased.~~

Dr.		Cr.	
PARTICULARS	AMOUNT	PARTICULARS	AMOUNT
	\$      c.		\$      c.
Balance Dr. from last account.....	6 00	Balance Cr. from last account.....	
First Monthly Payment <u>AR #A.69</u> .....	18 00	Regimental Pay <u>31</u> days at \$ <u>1.50</u> .....	46 50
Casual Payments.....		Tradesmen's Pay..... days at \$.....	
Payment on Transfer, Posting or Discharge.....		Additional Pay (Give particulars).....	
Assigned Pay.....		..... days at \$.....	
Regimental Charges.....		Allowances (Give particulars).....	
Public Stoppages (Give particulars):.....		..... days at \$.....	
		<u>Ration All. D.O. 163</u>	
		<u>4 days @ .50¢</u> .....	2 00
		<u>Receiver General Deposit</u>	
		<u>Receipt No. 408</u> .....	07
To Balance Cr. (To be paid by new unit).....	24 57	By Balance Dr. (To be deducted by new unit).....	
Total.....	48 57	Total.....	48 57



Toronto, Ontario (Place)

22 August 45 (Date)

I certify that the above is a true and correct statement of the account of the above named ~~to include the date of transfer, posting or discharge, to end of month next after in which deceased~~

*H.D. Burk*  
 (H.D. BURK) Paymaster or Accounting Officer



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Signed at Thos. Bouckley Capt.  
(Thos. Bouckley) Capt. (Signature)

PRESIDENT

Toronto, Ontario #2. General Employment Coy.  
(Unit)

this 11th day of W. T. Smith Lieut.  
(W. T. Smith) Lieut. (Signature)

September 1945 #2. General Employment Coy.  
(Unit)

MEMBERS

J. W. Gibson Lieut.  
(J. W. Gibson) Lieut. (Signature)  
#2. General Employment Coy.  
(Unit)

Opinion of  
Commanding  
Officer:—



15/9/45

IN REPLY PLEASE QUOTE

No. 6-0-D

*WTS*  
CANADA  
AUG 24 1945

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

#2 General Employment Coy.,  
Toronto, Ont. 21 Aug 1945

Administrator of Estates  
Department of National Defence  
Ottawa, Ontario.



Deceased Personnel

D 650525 Pte. DUFRESNE G.A.

We are forwarding, under  
separate cover the Inventory and Personal Effects  
of the m/n soldier who died from injuries sustained  
in an automobile accident at Beach Road, Burlington,  
Ont., on Sunday 19 Aug 45.

WTS/CRP

*Thos. Bouckley Capt.*  
(Thos. Bouckley) Captain,  
President,  
Committee of Adjustment.

140

15/9/45



DEPARTMENT OF NATIONAL DEFENCE  
ARMY

#2 General, Employment Coy.,  
Toronto, Ont. 21 Aug 1945

AUG 24 1945

Administrator of Estates  
Department of National Defence  
Ottawa, Ontario.

Deceased Personnel

D 650525 Pte. DUFRESNE G.A.

Please find enclosed, Personal Effects and Inventory of the m/n soldier who died from injuries sustained in an automobile accident at Beach Road, Burlington, Ont., on Sunday 19 Aug 45.

2. The Committee of Adjustment will forward to your office the proceedings as soon as completed.

WTS/CRP

*Thos. Bouckley Capt.*  
(Thos. Bouckley) Captain,  
President,  
Committee of Adjustment.

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CANADA

IN REPLY PLEASE QUOTE No.

6-0(D)

# DEPARTMENT OF NATIONAL DEFENCE

ARMY

#2.General Employment Coy.  
TORONTO.ONT.  
11 Sep 45.

Administrator of Estates.  
Department of National Defence.  
OTTAWA. ONTARIO.



Deceased Personnel(Fatality)  
D-650525.Pte.DUFRESNE.G.A.

Herewith in duplicate M.FSM.303,  
Proceedings of a Committee of Adjustment on  
the m/n soldier,with Appendices lettered "A"  
to "G" attached.

2. Pte.Dufresne died in Hamilton  
Military Hospital,Hamilton,Ont on the 19th  
August 1945 of injuries sustained in an auto-  
mobile accident.

*Thos Bouckley Capt.*  
.....  
(Thos.Bouckley)Capt.  
President.  
Committee of Adjustment.

738

Personal Effects fo D.650525 Pte. DUFRESNE, G.A.

1 Black Utility Case  
1 tooth brush  
1 Gillette Razor and case  
4 Gillette razor blades  
1 Tube tooth paste  
1 part tube shaving cream  
1 box letters  
1 Copy of Military Standing Orders  
1 Copy Manual of Canadian Soldier  
24 Snapshots  
1 Certif; S-9 Canadian Army Motor Mechaic School  
1 Religious picture postcard  
1 pr. brown kid gloves  
1 white handkerchief  
1 khaki handkerchief  
2 prs. wool socks (black)  
1 red sock  
1 leather tan belt  
1 rosary and case  
1 lock  
1 pr. scissors  
1 lipstick  
3 cotton under shirts  
4 cotton under drawers  
1 kit bag (khaki)

EFFECTS SECTION

SD 59

O/S CASE NO. *Page 4058*

OUR CASE NO.

DATE REC'D *23/8/45* FROM *Yoronto*

*DUFRESNE*

NAME

INITIALS *GA*

RANK *PTE*

NO. *D658525*

V - VALUABLES

M - MISSING

S - SURPLUSES

D - DESTROYED (reason why)

*Very dirty*

VALUABLE DOCUMENTS

R - RETAINED (reason why)

MONEY: W.S.C.'S ETC.

DIARIES

LETTERS *Mother, in*

CONTAINERS REC'D

*1 Parcel*

CONTAINERS REPACKED

*1 Parcel Rep'd*

REMARKS

INVENTORIES (DATES: NO. OF PAGES: FIRST AND LAST ARTICLE ON EACH INVENTORY)

*Inventory dated no date 1 Page  
From 1 Black utility case  
to 1 Kit bag*

DATE CHECKED *27/8/45* BY *W. G. Cox*

CHECKER

CHECKER

OFF. OR N.C.O. i/c

*J. Brown 5/59*

*Copy made from duplicate of original BCF (copy)*

# EFFECTS SECTION

EST. No. **SD 59**

O/S CASE No. *Reg. No. 58* OUR CASE No. ....

DATE RECEIVED *23/10/45* FROM *Japanese*

NAME *DUFRESNE* INITIALS *G.A.* RANK *PTE.* No. *D650525*

V—VALUABLES  
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.....  
.....

M—MISSING  
.....  
.....  
.....

S—SURPLUSES  
.....  
.....  
.....

D—DESTROYED (reason why).....  
*Very dirty*  
.....  
.....

VALUABLE DOCUMENTS  
.....  
.....

R—RETAINED (reason why).....  
.....  
.....

MONEY: W.S.C.'s, ETC.  
.....  
.....

DIARIES  
.....  
LETTERS *With in*

CONTAINERS RECEIVED  
*1 Parcel*

CONTAINERS REPACKED  
*1 Parcel Rept.*

REMARKS  
.....  
.....

INVENTORIES (Dates; No. of Pages; first and last article on each inventory)  
*Inventory: No date 1 Page*  
*From - 1 P.B. Utility Case*  
*To - 1 Kit Bag*

DATE CHECKED *23-10-45* By *W.H. Cox* CHECKER  
*W.H. Cox* CHECKER

OFF. OR N.C.O. i/c *J. Brown, 1/Lt.*

*(Copy)*

*End*

*143*

DIVISION DES SUCCESSIONS.

1 octobre, 1945.

Monsieur Adolphe Dufresne,  
18 Avenue Ellis,  
Waterloo,  
Cté. Shefford,  
P.Q.

DUFRESNE, Georges André. Sdt.(Décédé)  
No. D650525, Armée Canadienne

Cher Monsieur Dufresne,

Les articles énumérés à la copie d'inventaire ci-dessus sont ceux recouverts par les autorités de l'Unité de votre fils après le décès et subséquemment transmis à notre Division. D'ici quelques jours nous vous ferons expédier ces articles dans un colis par Malle Recommandée et dès que vous les aurez reçus vous voudrez bien signer une des copies de l'inventaire et la retourner à notre Division.

Dès que nous serons en mesure de vous faire remise du reliquat de soldé, nous vous écrirons de nouveau.

Votre tout dévoué

OG/YC

Major  
Le Directeur des Successions.

144 P.

# A. GRANDPRÉ

NOTAIRE - NOTARY

Quote No. 869-D-6247 FD-10

WATERLOO, P.Q., 16th. October 1945

Departement de la Défense Nationale,  
Division des Successions;  
Ottawa, Canada.



Mr. le Directeur:-

RE:- FUFRESNE, Georges-André, Soldat (décédé)  
No. D-650,525 - Armée Canadienne.

Dans votre lettre du 12 Septembre 1945, vous me disiez que si nous avions besoin d'une copie du Testament de ce Soldat, vous pourriez nous en fournir une.

Bien, dans le moment, nous en aurions besoin; alors je vous serais reconnaissant de me la faire tenir par un prochain courrier, avec votre compte s'il y a lieu.

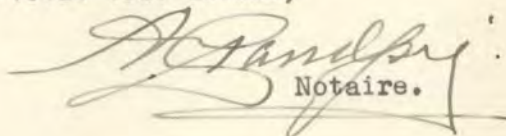
Maintenant, êtes-vous au courant si la firme <sup>pour</sup> qui ce soldat travaillait ne devait pas retenir la plus forte partie du salaire, qui devait lui être remis quand il serait licencié de l'armée. Le soldat décédé a déjà dit cela à son père, M. Adolphe Dufresne, et ce dernier veut en faire la réclamation, s'il y a lieu.

Ce soldat travaillait à Hamilton dans une usine de guerre où il gagnait plus de \$10,00 par jour, et il ne retirait que son salaire comme soldat, comme il a dit à son père.

Maintenant, il est vrai qu'il est mort accidentellement, mais par le fait même, il se trouve licencié de l'armée, et nous sommes d'avis que cette Compagnie qui retenait le salaire du soldat André Dufresne, devrait maintenant le payer à son père.

Merci à l'avance, et veuillez me croire

Votre tout dévoué,

  
Notaire.

P.S.-Il est très urgent pour Dufresne  
d'avoir la copie de Testament.

145



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

# WILL

M.F.M. 10  
150M-3-42 (5290)  
H.Q. 1773-80-1656

(1) I, Georges Andre DUFRESNE, of the TOWN (Name in Full) (City, Town, Village, Township)

Address in civil life.

of WATERLOO, in the County of SHERBROOKE District of SHERBROOKE

Province of QUEBEC, (Civil Occupation) MACHINIST

Regimental No. D-650525, Unit N.R.M.A. 4 DD, do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

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

(2) I GIVE, DEVISE AND BEQUEATH unto "MY FATHER" Mr. Adolphe DUFRESNE  
RESTING AT: 18 Ellice St., Waterloo, Que. Canada.

*AS*

All my estate both Real and Personal.

Relationship, names and address of residuary beneficiaries.

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

*AS*

(4) I appoint..... (Name) (Address)....., to be the Executor of this my Last Will. (Civil Occupation) Executrix

IN WITNESS WHEREOF I have hereunto set my hand this 18 day of Nov. 19 43

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.

*Georges Andre Dufresne*  
(Signature of soldier)

First witness sign here.

(5) Signature Shelma Harton  
Civil Address 189B Main St. Lennoxville Que.  
Civil Occupation Office Clerk

Second witness sign here.

Signature Ursa Giff  
Civil Address 4837 Coyle St. mtl.  
Civil Occupation waitress

(Witnesses are not to be beneficiaries.)

[OVER]

146

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

WILL

M.F.M. 10  
150M-3-42 (8280)  
H.Q. 1772-29-1658

(1) I, Georges Andre DUFRESNE of the TOWN  
(Name in Full) (City, Town, Village, Township)

Address in civil life.

of WATERLOO, in the County of SHERBROOKE  
District

Province of QUEBEC, MACHINIST  
(Civil Occupation)

Regimental No. D-650525, Unit N.R.M.A. 4 DD, do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

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

(2) I GIVE, DEVISE AND BEQUEATH unto  
"MY FATHER" Mr. Adolphe DUFRESNE  
RESIDING AT: 18 Ellice St., Waterloo, Que. Canada.

*AS*

All my estate both Real and Personal.

Relationship, names and address of residuary beneficiaries.

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

*AS*

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

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

IN WITNESS WHEREOF I have hereunto set my hand this 18 day of Nov.,  
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.

*Georges Andre Dufresne*  
(Signature of soldier)

First witness sign here.

(5) Signature Shelma Harton  
Civil Address 189B Main St. Lennoxville Que.  
Civil Occupation Office Clerk

Second witness sign here.

Signature Ursa Giff  
Civil Address 4837 Caylaia St. mtl.  
Civil Occupation witness

(Witnesses are not to be beneficiaries.)

[OVER]

DIVISION DES SUCCESSIONS.

Monsieur Adolphe Dufresne,  
18 Avenue Ellis,  
WATERLOO,  
Cté. Shefford,  
P.Q.

Ottawa, 1 octobre, 1945.

DUFRESNE, Georges André Sdt.(Décédé)  
No. D650525, Armée Canadienne

Cher Monsieur Dufresne,

Les articles énumérés à la copie d'inventaire ci-dessus sont ceux recouverts par les autorités de l'Unité de votre fils après le décès et subséquemment transmis à notre Division. D'ici quelques jours nous vous ferons expédier ces articles dans un colis par <sup>la</sup> Maille Recommandée et dès que vous les aurez reçus, vous voudrez bien signer une des copies de l'inventaire et la retourner à notre Division.

Dès que nous serons en mesure de vous faire remise du reliquat de solde, nous vous écrirons de nouveau.

Votre tout dévoué,

SIGNE ) O. Godbout(Major)  
Le Directeur des Successions.

OG/YC

*Adolphe Dufresne*  
Signature.

.....  
Date.

150

DIVISION DES SUCCESSIONS.

11 décembre, 1945.

Monsieur Adolphe Dufresne,  
18 Avenue Ellis,  
WATERLOO,  
Cté. Shefford,  
P.Q.

DUFRESNE, Georges André Sdt. (Décédé)  
No. D650525, Armée Canadienne

Cher Monsieur Dufresne,

Le 3 octobre nous vous avons fait expédier par express un colis contenant les quelques objets recouverts par les autorités militaires après le décès de votre fils. Nous remarquons cependant que vous ne nous avez pas retourné une des copies de l'inventaire incluses dans notre lettre du 1 octobre. Par suite, voudrez-vous avoir l'obligeance de nous la faire parvenir, dûment signée. Si, par hasard, vous ne l'avez plus en votre possession, vous voudrez bien signer et retourner à notre Division la copie de lettre ci-incluse.

Votre tout dévoué,

OG/YC

Major  
Le Directeur des Successions.

DIVISION DES SUCCESSIONS

25 octobre 1945.

Monsieur A. Grandpré,  
Notaire,  
Waterloo,  
P. Q.

DUPRESNE, Georges André, Soldat, (décédé)  
No. D-650525, Armée Canadienne

Cher Monsieur Grandpré,

En réponse à votre lettre du 16 octobre, vous  
trouverez sous pli une copie photographique du testament du soldat  
ci-dessus mentionné.

Notre dossier ne relève <sup>rien</sup> aucun renseignement  
concernant la portion remboursable mentionnée dans votre lettre.  
Vous pourrez obtenir tous ces renseignements en écrivant au  
Sous-Ministre, Division de l'Impôt sur le Revenu, Ministère du  
Revenu National, 444, rue Sussex, Ottawa, et si un montant de  
cette nature est réellement dû à la succession du Soldat Dufresne,  
vous voudrez bien nous en informer et nous serons très heureux  
de faire les démarches nécessaires pour en obtenir le remboursement  
de façon à ce que le tout soit porté au compte de la succession  
militaire et distribué en même temps que cette dernière.

Votre dévoué,

OG/TD  
Pc.adj.(1)

Major,  
le Directeur des Successions.

148



QUOTE NO. Q.G.869-D-6247 FD10

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

DIVISION DES SUCCESSIONS.

OTTAWA, CANADA,

11 décembre, 1945.

Monsieur Adolphe Dufresne,  
18 Avenue Ellis,  
WATERLOO,  
Cté. Shefford,  
P.Q.



DUFRESNE, Georges André Sdt. (Décédé)  
No. D650525, Armée Canadienne

Cher Monsieur Dufresne,

Le 3 octobre nous vous avons fait expédier par express un colis contenant les quelques objets recouverts par les autorités militaires après le décès de votre fils. Nous remarquons cependant que vous ne nous avez pas retourné une des copies de l'inventaire incluses dans notre lettre du 1 octobre. Par suite, voudrez-vous avoir l'obligeance de nous la faire parvenir, dûment signée. Si, par hasard, vous ne l'avez plus en votre possession, vous voudrez bien signer et retourner à notre Division la copie de lettre ci-incluse.

Votre tout dévoué,

Major

*Jour* Le Directeur des Successions.

OG/YC

24.57  
WB

DISTRIBUTION

SERVICE

NAVY

ARMY

AIR FORCE

C.E.F.

NAME Dupresne Georges A

NO D 650525 RANK Pte

REGT: # 2 Gen Emp. Coy <sup>Can.</sup> Toronto DATE OF DEATH 19-8-45

all further

Adolphe Dupresne W.S.G.  
18 Ellis Ave L.P.C. 24.57  
OTHER CREDITS.

PAY TO: Waterloo 2nd TOTAL 24.57

*Red handwritten mark*

(Sole beneficiary under will) 152

MEMORANDUM



DEPT. OF NATIONAL DEFENCE

*Open*  
TO: Director of Estates  
308 Sparks St.,  
Ottawa.

T.C.19

OTTAWA, *Mar. 11/46*

---

RE: *D650525 Phe. Dupresne G.A.*

1. Herewith is copy of J.V. # *10764*  
~~debiting~~/crediting *24.57* the estate of the  
m/n deceased member of the Canadian Army  
necessitated by amended L.P.C. dated —  
from *M.D. 2.*

2. This account was previously trans-  
ferred by J.V. # — dated —

*J. McBride*  
(D.G. Whittle),  
Chief Treasury Officer,  
Army Services.



DEPARTEMENT DE LA DEFENSE NATIONALE

DIVISION DES SUCCESSIONS

OTTAWA, CANADA



Date... *23 mai* ..... 194*6*...

Reçu ce jour un chèque au Trésor pour la somme de

..... VINGT QUATRE ----- 57.  $\frac{24.57}{100}$  Dollars (\$.....)

en rapport avec la succession militaire du défunt mentionne ci-dessous.

DUFRESNE, Georges A., Soldat, (décédé)

No. D-650525, A. C.

*Georges A. Dufresne*  
Signature

156

DIVISION DES SUCCESSIONS

3 mai 1946.

Monsieur Adolphe Dufresne,  
18 avenue Ellis,  
WATERLOO, P.Q.

DUFRESNE, Georges A., Soldat, (décédé)  
No. D-650525, Armée Canadienne

Cher Monsieur Dufresne,

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 \$24.57 et est  
fait comme suit:

Argent trouvé parmi les effets personnels.....	\$ .07
Reliquat de solde.....	24.50

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

Nous avons demandé au Bureau du Trésor de vous  
faire parvenir un chèque payable à votre ordre pour la somme de \$24.57.  
Sur réception du chèque, vous voudrez bien signer et retourner à notre  
Division la formule ci-incluse.

Votre dévoué,

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

OG/TD  
Pc.dadj.(1)

V4B

155

ESTATES BRANCH

June 3rd, 1946.

Mr. J.S. Sutherland,  
Chief Clerk,  
Dept. of Finance,  
O T T A W A .

DUPRESNE, Georges André, Pte., (deceased)  
No. D-650525, Canadian Army

Our records indicate that the Marginally  
noted purchased a \$100.00 Seventh Victory Loan Bond.

If your records confirm this, please  
advise to whom the Bond was delivered and in whose name regis-  
tered.

OG/TD

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

Ref: Seventh V.L.

DEPARTMENT OF FINANCE

Ottawa, June 17, 1946.

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



Re: D.650525 Pte. Georges Andre Dufresne  
Your file: HQ 869-D-6247 FD 10

Receipt is acknowledged of your letter of the 3rd June, 1946, in connection with Victory Loan Bonds purchased by the above mentioned.

We wish to advise that an application to purchase \$100.00-Seventh Victory Loan bearer bond was cancelled by the Chief Treasury Officer, Dependents' Allowance and Assigned Pay Branch, Ottawa.

A handwritten signature in cursive script, reading "J. S. Sutherland".

/OL

J. S. Sutherland,  
A/Chief Clerk,  
Employees' Instalment Purchase Plan.

158

Without Prejudice

Ottawa, October 22, 1946.

Mr. A. Grandpre,  
Notary,  
Waterloo, P.Q.

Re: D.650525 Pte. G. Andre Dufresne (deceased)

Dear Sir:

Kindly refer to my letter dated 10th October, 1946, in connection with the claim of your client, Mr. Adolphe Dufresne.

This matter has now been fully investigated and as stated in my letter to you dated 10th October, submitted to the Deputy Minister of Justice for his opinion as to legal liability.

This Department is advised that the investigation does not reveal any facts which would lead to the conclusion that the Crown is liable. The investigation reveals that at the time of the accident the driver of the Departmental vehicle was not acting within the scope of his duties or employment.

Under the circumstances, this Department regrets that it has no alternative but to deny liability on behalf of the Crown.

Yours truly,

Deputy Minister.

II. To: French Translator

For translation, please, and transmission to the Deputy Minister (Army) for signature.

*W. E. Scott, Maj*  
for J.A.G.

LYV:3503



173

le 10 octobre 1946.

SOUS RESERVE DE TOUS DROITS

Monsieur,


Je vous accuse réception de votre lettre du 19 septembre 1946 relative à feu le soldat G.- André Dufresne, matricule D-650525.

Comme la question n'est pas de notre compétence, nous l'avons soumise au sous-ministre de la Justice aux fins d'obtenir son opinion quant à la responsabilité en droit.

Soyez assuré que notre ministère prendra toutes les dispositions possibles pour hâter les choses.

Votre bien dévoué,

pour le sous-ministre,

  
(Paul Mathieu)

M. A. Grandpré,  
Notaire,  
Waterloo, P.Q.

171

TRANSLATION  
MJD/JLa  
31-7-46

D.M.(A)  
H.Q. 869-D-6247 (JAG/C-1)

GENERAL INVESTIGATIVE DIVISION  
 AUG 1 1946  
 File # 31-7  
 Referred to [Signature]

A. GRANDPRE  
Notary

Waterloo, P.Q., July 29, 1946.

C.R.  
 To register and  
 pass to  
 [Signature]

Lt. Col. Paul Mathieu,  
Department of National Defence,  
Ottawa, Canada.



My dear Colonel:

Re: D.650525, Pte G. André Dufresne (deceased)

Mr. Adolphe Dufresne, the above-named soldier's father, who finds there is much delay in being done justice with respect to his claims and who was advised to secure a barrister's services so as to expedite matters, called on me this morning in order to secure his file; being aware that he is poor and that he cannot afford to comply with the advice given him, I suggested to him not to do that and to wait a little longer, assuring him he would receive good news in the end.

Therefore, I beg you once more to tell me how the matter stands in connection with the investigation alleged to be made in the case. In a few days it will be a year that his son was killed by another serviceman who was driving a vehicle whereas he should have been kept at the military hospital, according to a trustworthy informant met a short time following the accident.

Mr. Adolphe Dufresne still hopes that his legitimate claims will be dealt with and he would be very grateful to you if, through your influence with the appropriate authorities or Crown legal advisers, he should be done justice in the near future.

Since said accident occurred almost a year ago, Mr. Dufresne does not wish to run the risk of seeing the matter drop because of the prescription.

I beg you to excuse me for troubling you again and thank you in anticipation for your support in the case.

I beg to remain,

Yours truly,

(Sgd.) A. Grandpré, Notary.

②  
 J.A.G.  
 for your consideration  
 + draft reply  
 for DM (A)  
 signature. [Signature]  
 P. Mathieu  
 AIDM.

162

TRANSLATION  
MJD/JLa  
31-7-46

D.M.(A)  
H.Q. 869-D-8247 (JAG/C-1)

A. GRANDPRE  
Notary

Waterloo, P.Q., July 29, 1946.

Lt. Col. Paul Mathieu,  
Department of National Defence,  
Ottawa, Canada.

My dear Colonel:

Re: D.650525, Pte G. André Dufresne (deceased)

Mr. Adolphe Dufresne, the above-named soldier's father, who finds there is much delay in being done justice with respect to his claims and who was advised to secure a barrister's services so as to expedite matters, called on me this morning in order to secure his file; being aware that he is poor and that he cannot afford to comply with the advice given him, I suggested to him not to do that and to wait a little longer, assuring him he would receive good news in the end.

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Since said accident occurred almost a year ago, Mr. Dufresne does not wish to run the risk of seeing the matter drop because of the prescription.

I beg you to excuse me for troubling you again and thank you in anticipation for your support in the case.

I beg to remain,

Yours truly,

(Sgd.) A. Grandpré, Notary.

162

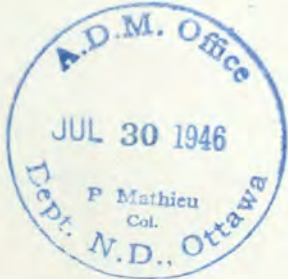


**A. GRANDPRÉ**  
NOTAIRE - NOTARY

Q.G. 869-D-6247 (JAG/C-1)

**WATERLOO, P.Q.** 29 juillet 1946

FOR TRANSLATION  
AND RETURN TO  
D. M. (A)



Lt.Colonel Paul Mathieu  
Ministère de la Défense Nationale,  
A R M E E,  
Ottawa, Canada.



Mon cher Colonel:-

Sujet:- Soldat G.André Dufresne (décédé)  
Matricule No. D-650,525.

M. Adolphe Dufresne, le père du soldat sus-mentionné, qui trouve que l'on prend du temps à lui donner justice au sujet de ses réclamations, et à qui on a conseillé de se servir d'un Avocat pour faire hâter les choses, est venu me voir ce matin pour avoir son dossier; et sachant qu'il est pauvre et qu'il n'a pas les moyens de suivre le conseil qu'on lui a donné je lui ai conseillé de ne pas faire ça, d'attendre encore, en l'assurant qu'il finirait par avoir des bonnes nouvelles.

Je viens donc vous demander de nouveau où en est rendu l'enquête qui est supposée être faite dans ce cas ? Il y aura un an dans quelques jours que son fils s'est fait tuer par un autre militaire qui conduisait un automobile alors qu'il aurait dû être gardé à l'hôpital militaire, et ce d'après un informateur digne de foi rencontré quelque temps après l'accident.

M. Adolphe Dufresne espère toujours qu'on donnera suite à ses réclamations légitimes, et il vous serait très reconnaissant si, par votre influence auprès des autorités ou des Conseillers juridiques de la Couronne, il pouvait avoir justice dans un avenir prochain.

Comme il y aura un an bientôt que l'accident est arrivé, Monsieur Dufresne ne voudrait pas courir le risque de voir tomber l'affaire à cause de la prescription.

Je vous prie de m'excuser si je vous importune encore, et je vous remercie à l'avance pour votre appui dans cette affaire.

Veillez me croire

Votre bien dévoué,

*A. Grandpré*  
Notaire.

CENTRAL REGISTRY  
AUG 8 1946

Central Registry: J. L. G.

Please create a false docket for the attached correspondence. HQ file is 869-D-6247. May false docket be returned as soon as possible.

2/46

H. W. M. J. M. J.  
for SAC.



CANADA

DEPARTMENT OF NA  
ARM

CABLE TELEGRAPH TEL

---

7th August, 1946.

Without Prejudice

Mr. A. Grandpré, Notary,  
WATERLOO, P.Q.

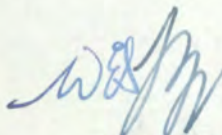
D.650525, Pte. G. André Dufresne (deceased)

Dear Sir:

I have for acknowledgment  
your letter dated 29th July, 1946.

Kindly note that this  
matter is still under investigation. The delay  
is due to the fact that it had to be referred  
to the R.C.A.F. authorities for completion of  
the investigation rendered necessary by the  
claim of Mr. Adolphe Dufresne. The R.C.A.F.  
authorities have advised this Department that  
the investigation should be completed within  
the next few days after which it will be sub-  
mitted to the legal officers of the Crown for  
their opinion as to legal liability.

Every possible effort  
will be made by this Department to expedite  
this matter and you will be informed as soon  
as a decision is reached.

  
LYV/AB

Deputy Minister  
A R M Y



DEPARTMENT OF NATIONAL DEFENCE  
ARMY

OTTAWA, CANADA,

7th August, 1946.

Without Prejudice

Mr. A. Grandpré, Notary,  
WATERLOO, P.Q.

D.650525, Pte. G. André Dufresne (deceased)

Dear Sir:

I have for acknowledgment  
your letter dated 29th July, 1946.

Kindly note that this  
matter is still under investigation. The delay  
is due to the fact that it had to be referred  
to the R.C.A.F. authorities for completion of  
the investigation rendered necessary by the  
claim of Mr. Adolphe Dufresne. The R.C.A.F.  
authorities have advised this Department that  
the investigation should be completed within  
the next few days after which it will be sub-  
mitted to the legal officers of the Crown for  
their opinion as to legal liability.

Every possible effort  
will be made by this Department to expedite  
this matter and you will be informed as soon  
as a decision is reached.



Deputy Minister  
A R M Y

*translation  
please.  
PM*

164

le 10 août 1946.

SOUS RESERVE DE TOUS DROITS

Monsieur,

Je vous accuse réception de votre lettre du 29 juillet 1946, au sujet de feu le soldat G.-André Dufresne, matricule D-650525.

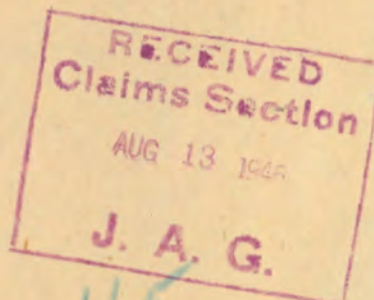
Permettez-moi de vous faire remarquer que la question est encore à l'étude. Le retard provient du fait que nous avons dû soumettre le cas aux autorités du C.A.R.C., pour qu'elles terminent l'enquête rendue nécessaire par la réclamation de M. Adolphe Dufresne. Les autorités du C.A.R.C. nous ont informés que l'enquête serait probablement terminée d'ici quelques jours, après quoi on soumettra la question aux conseillers juridiques de la Couronne en vue d'obtenir leur opinion au sujet de la responsabilité en droit.

Nous nous efforcerons de faire diligence et nous vous communiquerons la décision dès qu'on l'aura rendue.

Votre bien dévoué,

pour le sous-ministre,

M. A. Grandpré, notaire,  
Waterloo, P.Q.

  
(Paul Mathieu)



(For French Translation)

Without Prejudice

Ottawa, October 8, 1946.

Mr. A. Grandpre,  
Notary,  
Waterloo, P.Q.

Re: D.650525 Pte. G. Andre Dufresne (deceased)

Dear Sir:


I have for acknowledgment your letter dated 19th September, 1946.

This matter being beyond the jurisdiction of this Department, it was submitted to the Deputy Minister of Justice for his opinion as to legal liability. As soon as his opinion is known, I shall be glad to inform you.

Every possible step will be taken by this Department to expedite the settlement of this matter.

Yours truly,

Deputy Minister.

  
LYV:3503



TRANSLATION  
TD/JLa  
23-9-46

D.M.(A)

A. GRANDPRE  
Notary  
Waterloo, P.Q.

September 19, 1946.

④  
CENTRAL REGISTRY Army  
PERG. SEC.  
869-11-6247  
SEP 24 1946  
4-9  
File  
Chgd. to  
Referred to

①  
GRANDPRE  
NOTARY

Lt. Col. Paul Mathieu,  
Department of National Defence,  
Army,  
Ottawa, Canada.

Dear Colonel:

Re: D.650525, Pte G. André Dufresne,  
deceased.

Please forgive me for writing you again,  
but my client, Mr. Adolphe Dufresne, father of the  
above-mentioned serviceman, is urging me.

I should be very grateful if you would  
kindly let me know how the matter stands in this  
investigation which was started as a result of Mr.  
Adolphe Dufresne's claim.

Thanking you in anticipation, I remain,

Yours very truly,

(Sgd.) A. Grandpré, Notary.

J. A. G.  
SEP 25 1946  
RECEIVED  
Claims Section

169

②  
C.R.  
To register and  
pass to  
J.A.G.

for your consi-  
deration + draft  
rply for D.M.  
signature. pls.

P. Mathieu  
A/D.M.

TRANSLATION  
TD/JLa  
23-9-46

D.M.(A)

A. GRANDPRE  
Notary  
Waterloo, P.Q.

September 19, 1946.

Lt. Col. Paul Mathieu,  
Department of National Defence,  
Army,  
Ottawa, Canada.

Dear Colonel:

Re: D.650525, Pte G. André Dufresne,  
deceased.

Please forgive me for writing you again,  
but my client, Mr. Adolphe Dufresne, father of the  
above-mentioned serviceman, is urging me.

I should be very grateful if you would  
kindly let me know how the matter stands in this  
investigation which was started as a result of Mr.  
Adolphe Dufresne's claim.

Thanking you in anticipation, I remain,

Yours very truly,

(Sgd.) A. Grandpré, Notary.

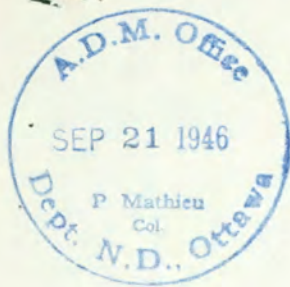
168

# A. GRANDPRÉ

NOTAIRE - NOTARY

WATERLOO, P. Q.

19 septembre 1946



Lt.Colonel Paul Mathieu,  
Ministère de la Défense Nationale,  
Armée,  
Ottawa, Canada.



Cher Colonel:-

re:- Soldat G. André Dufresne (décédé)  
Matricule No. D-650,525

Veillez m'excuser si je reviens à la charge;  
c'est que mon client, M. Adolphe Dufresne, le père du  
soldat sus-mentionné, me presse.

Je vous serais bien reconnaissant si vous  
vouliez bien me dire où on en est rendu avec l'enquête  
dans cette affaire, commencée à la suite des réclamations  
de M. Adolphe Dufresne.

Vous remerciant par anticipation, je vous prie  
de me croire

Votre bien dévoué,

*A. Grandpré*  
Notaire.



In reply quote No. H.Q.869-D-6247 (JAG/C-1)

DEPARTMENT OF NATIONAL DEFENCE  
ARMY  
INTER-OFFICE CORRESPONDENCE

Office of the Judge Advocate-General

To:

The French Translator

Ottawa, October 8, 1946.

Please translate letter hereunder  
addressed to Mr. A. Grandpre and pass to the Deputy  
Minister (Army) for signature.

*W E Stratton*  
for (R. J. Orde) Brigadier,  
Judge Advocate-General.

*LYV*  
LYV:3503



172

le 24 octobre 1946.

SOUS RESERVE DE TOUS DROITS

Au sujet de feu le soldat G.-André Dufresne,  
matricule D.650525.

Monsieur,


Je viens faire suite à ma lettre du 10 octobre 1946 relative à la réclamation de votre client, M. Adolphe Dufresne.

La question a maintenant fait l'objet d'une enquête approfondie et, ainsi que je vous le disais dans ma lettre du 10 octobre, nous l'avons soumise au sous-ministre de la Justice aux fins d'obtenir son opinion quant à la responsabilité en droit.

On nous informe que l'enquête ne révèle rien qui pourrait mener à la conclusion que la Couronne soit responsable. L'enquête indique que, lors de l'accident, le conducteur de notre véhicule n'était pas dans l'exercice de ses fonctions ou de son emploi.

Dans ces conditions, nous regrettons de ne pouvoir que décliner toute responsabilité de la part de la Couronne.

Votre bien dévoué,  
pour le sous-ministre,

  
(Paul Mathieu).

M. A. Grandpré, notaire,  
Waterloo, P.Q.

174

OTTAWA Ontario

13 Apr 49

TO: D S

Funeral Expenses

D 650525 Pte DUFFRESNE G A

1 Reference Min File 139-25 Gen dated 7 Apr 49, regarding an account of Leo-Paul Ledoux, Funeral Director, Waterloo, P.Q., for expenses connected with the funeral of the m/n soldier who died at Hamilton, Ont., in August 1945 and was buried at Waterloo, P.Q.

2 The regulations in effect at this time were contained in FR&I (Canada) para 220, and the following are extracts of the pertinent paragraphs:

- (2) In addition to the burial expenses proper, as provided for above, if burial takes place in a cemetery at a distance from the place at which death occurred and is not conducted by the Funeral Director who prepared the body and furnished the casket, an expenditure not in excess of \$25 may be paid to the Funeral Director who furnishes the necessary services at the place of burial.
- (3) If the funeral and burial are arranged by a person entitled to the custody of the body, the Department, on the presentation of certified accounts from the undertaker covering the expenses in question, may pay an amount not exceeding that which would have been authorized had the Department made the arrangements.
- (5) The cost of opening and closing the grave, where necessary, may be paid at the prevailing rates.
- (14) If the relatives desire to make more elaborate arrangements than provided above they must bear the additional cost.

3 It will be noted that, in this particular case, provision is

179

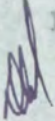
made under para (2) for \$25.00 and (5) for \$10.00, or a total amount of \$35.00, which is all that could be authorized under these regulations.

4 There is no information on file at AHQ covering the specific arrangements made with this Funeral Director in Waterloo, P.Q., and an effort is being made to obtain information in this regard.

5 Such detailed arrangements are normally made verbally and it will be appreciated that it may not be possible to obtain definite information in this regard at this late date.

  
(J. A. Hutchins)

Lieutenant-Colonel  
Director of Administration

 DKS/2117/rp

13 Apr 49

Headquarters,  
Central Command,  
Ortona Barracks,  
OAKVILLE, Ontario.

Funeral Expenses

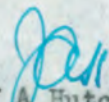
D 650525 Pte DUFRÉSNE, G A


1 An inquiry has been received respecting the arrangements made with Leo-Paul Leduc, Funeral Director, Waterloo, P.Q., in connection with the funeral of the m/n soldier who was killed in an accident at Hamilton, Ont., in Aug 45 and was buried at Waterloo, P.Q., file T-20-D9107 refers.

2 An account was submitted by the Funeral Director in Waterloo, P.Q., in the amount of \$53.04 and it is understood that it was subsequently returned by Central Command to the Funeral Director with a note to the effect that it should be made out in the amount of \$35.00. This, of course, would be in accordance with FRAI (Canada) para 220 (2) and (5).

3 With a view to making a comprehensive reply to this inquiry, any information respecting the original arrangements made with this Funeral Director, which may be available, is requested, please.

4 As this is a Ministerial inquiry, it is requested that this matter be treated as urgent.

  
(J A Hutchins)  
Lieutenant-Colonel  
Director of Administration

 DKS/2117/rp



D 160584

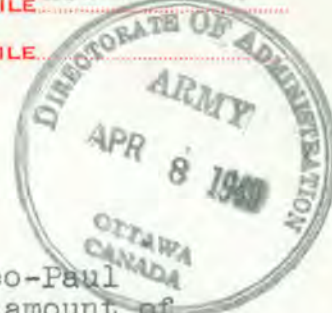
OFFICE OF THE MINISTER OF NATIONAL DEFENCE

MEMORANDUM

139-25 Gen.  
MIN. FILE.....

April 7, 1949.

H. Q. FILE.....



D. Admin.  
-----

Attention: Captain Smith

I attach herewith copy of a bill from Leo-Paul Ledoux, Funeral Director, Waterloo, Que., in the amount of \$53.04 for funeral fees in connection with the burial of Andre Dufresne, a soldier of the Canadian Army Active Force killed during an accident in August 1945.

2. It has been represented to the Minister that this account was submitted by the Funeral Director to Mr. Adolphe Dufresne, Waterloo, Que., father of the victim, who it is understood forwarded this same account to Central Command for payment. The account was returned to the Funeral Director with a note to the effect that it should be made out in the amount of \$35 before it could be honoured for payment.

3. The information available from the Minister's correspondent does not provide sufficient details to say what original arrangements had been made in connection with this case and it would, therefore, be appreciated if you would look into it and let me have a report, please, on which a reply to the Minister's correspondent could be based.

CORRECT FILE  
OBTAINED 12 APR

dit  
Adm A2(6)

*H. L. Cameron*  
for (H. L. Cameron) Brigadier  
Defence Secretary.

177

C  
O  
P  
Y

454 (Rue Principal  
(Main Street

Waterloo, P.Q., 3 juillet 1948

M. Adolphe Dufresne, Waterloo, Que.

Re: André Dufresne Décédé.

En compte avec - In account with

LÉO-PAUL LEDOUX

Frais Funeraires  
Ambulance

Taxi

Funeral Direction  
Monuments

6% après 30 jours

6% after 30 days

---

Aout	23/45	Frais Funéraires	52.00	
		Taxe Prov. 2%	<u>1.04</u>	\$53.04

176



HEADQUARTERS CENTRAL COMMAND

CC D-650525 (ADM A)

Ortona Barracks,  
OAKVILLE, Ont.

✓✓ APR 49

Army Headquarters  
Department of National Defence  
OTTAWA, Ontario

Dept. of Veterans Affairs War Service Records Received To: <i>adm A.24</i> APR 25 1949 <i>J. Admin 11-4-49</i> Checked To: .....
---

FUNERAL EXPENSES

D-650525 PTE DUFRESNE G A

Your HQ 869-D-6247 (Adm A2(b)) dated 13 APR 49.

- 2 A search of files available at this headquarters does not reveal the final disposition of the account of Leo-Paul Leduc, Funeral Director, Waterloo, P.Q., in the amount of \$53.04.
- 3 From the copies of letters attached, it will be noted that the account was returned by the District Paymaster MD No.2 to the Paymaster No.2 General Employment Coy for correction. This letter is the last folio on the file of the late Pte Dufresne.
- 4 It is assumed that further correspondence was carried on between No.2 General Employment Coy and Mr. Leduc, but the files of No.2 General Employment Coy are not available at this headquarters, so the matter cannot be pursued further at this point.

*(L. B. Vokes)*  
Major-General  
GOC Central Command

AD 4085 Local 113

encls:

187

C O P Y

T. 20-D-9107 (Q1)

Headquarters, Military District No. 2.  
159 Bay Street, Toronto, Ont.  
18 Sep 5.

District Officer Commanding  
Military District No. 4,  
MONTREAL, P.Q.

Funeral Accounts  
D.650525 Pte. Dufresne, G.A. (Deceased)

The Committee of Adjustment, No. 2 Gen.  
Employment Coy. have requested itemized accounts of  
Mr. Ledoux Levough, Undertaker, 454 Main St., Waterloo,  
Quebec.

May these accounts be obtained and forwarded  
as promptly as possible, please.

(Sgd) (A.E. Potts)  
Major-General  
District Officer Commanding  
Military District No.2.

186

COPY

LEO-PAUL LEDOUX

Waterloo, P.Q. November 4/45

Lt-Col. E.C. Armstrong,  
AA & QMG MD No. 4  
Montreal, QUE.

Re: FUNERAL ACCOUNTS - D 650525 Pte DUFRESNE G A

In answer to your letter dated Oct 22, 1945, I must tell you that four copies of the Funeral Accounts were sent to Major A.H. Woods, Officer Commanding, No 2 Gen. Emp. Coy, Toronto, Ont. as requested by the above.

I am including another copy of this account for your own convenience and trust that this matter be cleared as soon as possible.

Yours truly

(Sgd) Leo Paul Ledoux

185

C O P Y

M-1-D-16660 ADIS

MONTREAL, Que  
8 Nov 45

District Commanding Officer,  
Military District No 2,  
TORONTO, Ont

Funeral Accounts

D 650525 Pte DUFRESNE G A(Deceased)

Ref your letter T 20-D-9107 (Q1) dated 18 Sep 45.

Att hereto is detailed account together with  
letter dated 4 Nov 45 from LEO-PAUL LEDOUX.

It will be noted that four (4) copies of this  
funeral account were fwd to the OC No 2 Gen Emp Coy.

(Sgd) (E J RENAUD)Maj-Gen  
DOC MD No 4

184

COPY

Main Street  
454 Rue Principale

WATERLOO, P.Q.

Funeral Account - D 650525 Pte DUFRESNE G A

C/o Lt-Col E C Armstrong AA & QMG MD No 4  
Montreal, Que.

LEO-PAUL LEDOUX

FUNERAL DIRECTOR

AUG 23	Funeral Expenses	20.00
	" Room "	15.00
	Cemetery "	10.00
	Tpt & Advertizements	<u>7.00</u>
		52.00
	Provincial Tax 2%	1.04
		<hr/>
		53.04

183

COPY

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

PMR No 2 General Employment Coy  
Exhibition Barracks, Toronto, Ont.  
11 Sept 1945

District Paymaster  
MD No 2  
Army Building  
120 Front St, West,  
Toronto, Ontario

B-625525 PTE DUFRESNE A (Deceased)

- 1 With further reference to my letter of 7th, inst regarding the marginally named.
- 2 Attached, please find a further Funeral Account in duplicate from LEO-PAUL LEDOUX of Waterloo, P.Q. in the amount of \$53.04.

(Sgd) 'H D Burk) Capt RCAPC  
Paymaster, No 2 Gen Emp Coy

II

Paymaster  
No 2 Gen Employment Coy

Returned for resubmission in  
accordance with District Order No. 679  
dated 16 May 44.

(Sgd) ???????? Major  
for DPM ., MD 2

182



COPY

DEPARTMENT OF NATIONAL DEFENCE

ARMY PMR No 2 General Employment Coy  
Exhibition Barrack,s, Toronto, Ont  
12 Sepetember 1945

District Paymaster,  
M.D. Number 2  
Army Building  
120 Front St, West.,  
TORONTO, Ontario

Funeral Account

B-625525 Pte DUFRESNE A (DECEASED)

- 1 Your letter of the 11th. inst. (File T.36-6-23 (Vol 23)  
regarding the marginally noted is acknowledged.
- 2 I am enclosing Funeral Account of Truscott Bros, in triplicate  
duly certified by President of Committee of Adjustment.
- 3 Also, please find third copy of Funeral Account of LEO-PAUL  
LEDOUX in the amount of \$53.04 duly certified.  
This will complete the two sent in yesterday under my letter  
of 11th. inst.

(Sgd) (H.D. Burk) Capt. RCAPC  
Paymaster, No 2 General Employment Coy.

181

COPY

T. 20-D-9107 (P6)  
T. 36-6-23 (Vol 23) (P6)

District Paymaster's Office, M.D. 2  
120 Front St, W. Toronto, 1, Ontario  
25th September, 1945

Paymaster  
No. 2 General Employment Coy.,  
Exhibition Barracks,  
Toronto, Ont.

FUNERAL ACCOUNTS

B.625525 Pte DUFRESNE A

1. Reference the marginally noted and your letter (no file shown), dated 12 Sep 45.
- 2 Leo-Paul Ledoux Account, in the amount of \$53.04, is returned herewith and it is advised \$25.00 is the maximum payable under Article 220 (2) FR&I.
3. A further \$10.00 is payable under Art 220 (5) FR&I., provided receipts are produced, in accordance with District Order No. 679, dated 16 May 44, copy of which was forwarded to your office 11 Sep 45.
- 4 Funeral Account - \$50.00 - Truscott Bros., - has been submitted through DAQMG MD. No.2 to the District Treasury Officer, M.D. 2, for payment.
5. For your necessary action, please.

(Sgd)?????????Major  
for (M W Turner) Colonel  
District Paymaster  
Military District No. 2

150

30 Apr 49.

Headquarters, Central Command,  
Ortona Barracks,  
OAKVILLE, Ont.

Funeral Expenses  
D.650525 Pte Dufresne, G.A.

Reference CG D-650525 (ADM A)  
dated 22 Apr 49 respecting the account from  
Leo-Paul Ledoux in the amount of \$53.04.

2. Information is requested as to  
whether this account has been paid in part  
or in full by MD 2 or Central Command, please.

*DKS*  
DKS/2117/AMc

*J.A.H.*  
(J.A. Hutchins)  
Lieutenant-Colonel  
Director of Administration

159

30 Apr 49.

Headquarters, Quebec Command,  
3530 Atwater Ave.,  
MONTREAL, P.Q.

Funeral Expenses  
D-650525 Pte Dufresne, G.A.

An account has been received from Leo Paul Ledoux, Funeral Director, Waterloo, PQ, in the amount of \$53.04, for expenses connected with the funeral of the m/n soldier who died at Hamilton, Ont, on 19 Aug 45 and was buried at Waterloo, PQ.

2. Information is requested as to whether this account has been paid in part or in full by MD 4 or Quebec Command, please.

*Dal* DKS/2117/AMc

*Jen*  
(J.A. Hutchins)  
Lieutenant-Colonel  
Director of Administration

*Reply at JAL 194*

*158*



In reply quote No. HQ 869-D-6247 (Adm A2(b))

DEPARTMENT OF NATIONAL DEFENCE  
ARMY  
INTER-OFFICE CORRESPONDENCE

OTTAWA Ontario

2 May 49

C T O

Funeral Expenses

D 650525 Pte Dufresne G A

- 1 An account has been received from Leo Paul Ledoux, Funeral Director, Waterloo, PQ, in the amount of \$53.04, for expenses connected with the funeral of the m/n soldier who died at Hamilton, Ont, on 19 Aug 45 and was buried at Waterloo, PQ.
- 2 Information is requested as to whether this account has been paid in part or in full by NDHQ, please.

*J A Hutchins*  
 (J A Hutchins)  
 Lieutenant-Colonel  
 Director of Administration

DKS/2117/rp

②  
16-5-49.

D/Adm.

The paid files, Army, for the fiscal years 1945/46 to 1948/49 inclusive have been checked.

There is no record of payment of the account mentioned in your memo. above.

*J H Bailey*  
to C.T.O.

RECEIVED  
190

DEPARTMENT OF NATIONAL DEFENSE  
ARMY

INTER-OFFICE CORRESPONDENCE

1. An amount has been received from the  
 donor, Mrs. J. H. [Name], in the  
 amount of \$55.00 for expenses incurred with the  
 donor of the [Name] and his [Name].  
 Out on 12/15/48 and was dated at [Location].

2. Information is requested as to whether this  
 amount has been paid in full or in part by [Name].

*[Handwritten signature]*  
 [Name]  
 [Title]

**RECEIVED**  
 MAY 4 1949  
 TREASURY OFFICE

COPY

M-1-D-16660 ADIS

Montreal, Que  
8 Nov 45

District Officer Commanding  
Military District No 2  
TORONTO, Ont

Funeral Accounts

D650525 Pte DUFRESNE G A (Deceased)

Ref your letter T 20-D-9107 (Q1)  
dated 18 Sep 45.

2. Att hereto is detailed account  
together with letter dated 4 Nov 45 from LEO-  
PAUL LEDOUX.

3. It will be noted that four (4)  
copies of this funeral account were fwd to  
the OC No 2 Gen Emp Coy.

(E J RENAUD) Maj Gen  
DOC MD No. 4

192

COPY

TELEPHONE 384

LEO-PAUL LEDOUX

DIRECTEUR DE FUNERAILLES

WATERLOO, PQ November 4 1945

Lt col EC ARMSTRONG  
AA & QMG MD No 4  
MONTREAL que

Re: FUNERAL ACCOUNTS - D 650525 Pte DUFRESNE G A

In answer to your letter dated Oct 22, 1945, I must tell you that four copies of the Funeral Accounts were sent to Major A H WOODS, Officer Commanding, No 2 Gen Emp Coy, Toronto, Ont, as requested by the above.

I am including another copy of this account for your own convenience and trust that this matter be cleared as soon as possible.

Yours truly

(sgd) (Leo-Paul Ledoux)

192



C O P Y

TEL 384

Main Street  
454 Rue Principale

WATERLOO, P.Q.

Funeral Account - D 650525 Pte DUFRESNE G A

C/O Lt Col EC ARMSTRONG AA & QMG MD No 4  
MONTREAL, Que

En Compte Avec - In account with  
LEO - PAUL LEDOUX  
FUNERAL DIRECTOR

Account removed and  
closed for payment.  
12769  
For Chief Treasury Officer,  
Naval Services

Aug 23	Funeral Expenses	\$ 20.00
	Funeral Room Expenses	15.00
	Cemetary Expenses	10.00
	Tpt & Advertisements	7.00
		/// _____
		52.00
	Provincial Tax 2%	1.04
		\$ 53.04

AMOUNT	Q.B.D.	G.A.C.B.	PRI	VOTE	EST.	LIV.	AMOUNT	
				140	99	30	650	35.00
CLASSIFIED BY							EXAMINED BY	AUTHORITY
							For Treasury Officer	TOTAL

191



CANADA

# DEPARTMENT OF NATIONAL DEFENCE

## ARMY



Quebec Veterans Affairs  
War Service Records  
Referred To: *Adm A2 (B)*  
MAY 12 1949  
File No. ....  
Charged To: *Admin. D.*

Army Headquarters  
Department of National Defence  
OTTAWA, Ontario

Funeral Expenses  
D-650525, Pte DUFRESNE, GA

Reference HQ 869-D-6247 (Adm A2(b))  
dated 30 APR 49 relative to the marginally named  
subject.

*11-4-49*  
*-John 88*

2. Please be advised that on 8 NOV 45  
at the request of the DOC MD No. 2 (their T.20  
-D-9107 (Q1) dated 29 Oct 45 refers), completed  
copy of bills were forwarded to MD No. 2.

3. For your information enclosed here-  
with please find:

- (a) Copy of funeral bill
- (b) Copy of letter received  
from Funeral Director
- (c) Copy of this HQ letter  
addressed to MD No. 2  
forwarding said bills.

4. There is no evidence that this bill  
has been paid.



enclos

*R.O.G. MORTON*  
(R.O.G. MORTON), Major-General  
General Officer Commanding  
Quebec Command

*194*

*Adm*

IN

# ARMY MESSAGE

MAY 06 22 54 z49

457



407RCO

OQTY JCO

121 CIP 119/06

OAKVILLE 6 MAY 49

ARMY OTTAWA

A 8762 UNCLAS

RELET HQ 869-D-6247 (ADM A2(B) DATED 30 APR 49 REFERS FUNERAL EXPENSES  
 D 650525 PTEDUFRESNE GA STOP COMMAND TREASURY OFFICER HAS NO RECORD OF   
 PAID BILL OF LEO-PAUL DEDOUX STOP TREASURY OFFICER STATES THAT IT IS  
 VERY LIKELY THIS ACCOUNT WOULD HAVE BEEN PASSED TO TREASURY OFFICER  
 QUEBEC COMMAND FOR PAYMENT STOP ADVISE IF FURTHER ACTION REQUIRED HERE

COMMANDING CETNRL

062053

IF IMPROPERLY DELIVERED, COMPLETE  
 BELOW AND RETURN TO THE ORIGINAL  
 OFFICE ROOM 1449 "E" BLDG. D. N. D.  
 (UNCLAS)

BRANCH	TIME	SIGNATURE

C.A.F.B. 1442C-715M-6-48 (1235) H.Q. 224-21-B-1442



In reply quote No. HQ 869-D-6247 (Adm A2(b))

DEPARTMENT OF NATIONAL DEFENCE  
ARMY  
INTER-OFFICE CORRESPONDENCE

11 Jun 49

C T O (through AG Accts)

Funeral Expenses

D 650525 Pte DUFRESNE G A


1 It has been brought to the attention of this Directorate that the account of Leo-Paul Ledoux, Funeral Director, Waterloo, PQ, in connection with the funeral of the m/n soldier who died at Hamilton, Ontario, in Aug 45 and was buried at Waterloo, PQ, has not yet been paid.

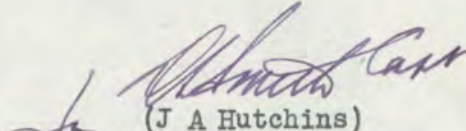
2 This account is in the amount of \$53.04 and copies of the account may be found at folios 132 and 191. Of this account, only \$35.00 was authorized under FR&I (Canada) Art 220 which was in effect at the time in question.

3 It has been ascertained that this account has not been paid by AHQ (folio 190), Central Comd (folio 187) or Quebec Comd (folio 194).

4 It is now proposed that this account be paid in the amount of \$35.00 authorized by FR&I (Canada) Art 220(2) and (5) and a requisition for cheque has been prepared accordingly.

5 It is requested that the cheque be passed to D Adm in order that it can be forwarded to Mr. Ledoux under cover of an explanatory letter from the DM, please.



  
(J A Hutchins)  
Lieutenant-Colonel  
Director of Administration

DKS/4659/p

C.T. 17A  
M.F.D. 941  
40M-2-48 (771)  
H.Q. 1772 30-1583

# REQUISITION FOR CHEQUE

TO BE USED FOR ADVANCES OR AUTHORIZED PAYMENTS FOR WHICH THERE ARE NO ACCOUNTS

DEPT. NO.....  
FILE NO.....  
TREAS. NO.....

DEPARTMENT..... Department of National Defence

BRANCH..... ARMY DATE..... 11 Jun 49

APPLICATION IS HEREBY MADE FOR THE ISSUE OF THE FOLLOWING CHEQUE OR CHEQUES:—

CHEQUE No.	IN FAVOUR OF	AMOUNT
	<p>Leo-Paul Ledoux</p> <p>Funeral Director  454 Main Street,  Waterloo, P.Q.</p> <p>(Please forward cheque to D Adm for transmission)</p>	35 00

STATE BELOW, WITH DETAILS IN EVERY CASE, WHETHER (a) STANDING ADVANCE, (b) ADVANCE FOR SPECIFIC JOURNEY—ESTIMATING NUMBER OF DAYS, (c) OTHER ACCOUNTABLE ADVANCE, OR (d) AUTHORIZED PAYMENT.

Authorized payment \$25.00 FR&I (Canada) 220(2)

Authorized payment \$10.00 FR&I (Canada) 220(5)

N.D.H.Q.-F.E. No. (4)0000	DIV. (2)00	ESTAB. (3)000	VOTE (3)000	PRI. (2)00	DIST. ALT. OR H.Q. SUB. ALT. (2)00	OBJECT (3)000	AMOUNT	DIST. SUB. AL. (2)00	DIST. F.E. NO. (4)0000
FE7823			140	99	30	650	3500		

I CERTIFY THAT THIS APPLICATION IS MADE UNDER THE REQUISITE AUTHORITY, AND THAT THE EXPENDITURE IS NECESSARY IN THE INTERESTS OF THE PUBLIC SERVICE.

Original signed  
**E. H. BRADLEY**

*[Signature]*  
W. J. SHEPHERD  
Major  
O/c ADM-L. PAY  
**JUN 13 1949**

HEAD OF BRANCH

TREASURY OFFICE APPROVAL

DEPUTY HEAD

C.T. 17A  
M.F.D.:941  
40M-2-48 (771)  
H.Q. 1722-39-1593

# REQUISITION FOR CHEQUE

TO BE USED FOR ADVANCES OR AUTHORIZED PAYMENTS FOR WHICH THERE ARE NO ACCOUNTS

DEPT. NO.....

FYLE NO.....

TREAS. NO.....

DEPARTMENT..... Department of National Defence

BRANCH..... ARMY DATE..... 11 Jun 49

APPLICATION IS HEREBY MADE FOR THE ISSUE OF THE FOLLOWING CHEQUE OR CHEQUES:-

CHEQUE No.	IN FAVOUR OF	AMOUNT
	<p>Les-Jual Leduc</p> <p>Funeral Director  454 Main Street,  Waterloo, P.C.</p> <p>(Please forward cheque to B Adm For transmission)</p>	35 00

STATE BELOW, WITH DETAILS IN EVERY CASE, WHETHER (a) STANDING ADVANCE, (b) ADVANCE FOR SPECIFIC JOURNEY—ESTIMATING NUMBER OF DAYS, (c) OTHER ACCOUNTABLE ADVANCE, OR (d) AUTHORIZED PAYMENT.

Authorized payment \$25.00 7802 (Canada) 220(2)

Authorized payment \$10.00 7802 (Canada) 220(5)

N.D.H.Q.-F.E. No. (4)0000	DIV. (2)00	ESTAB. (3)000	VOTE (3)000	PRI. (2)00	DIST. ALT. OR H.Q. SUB. ALT. (2)00	OBJECT (3)000	AMOUNT	DIST. SUB. AL. (2)00	DIST. F.E. NO. (4)0000
FE7823			140	99	30	650	35 00		

I CERTIFY THAT THIS APPLICATION IS MADE UNDER THE REQUISITE AUTHORITY, AND THAT THE EXPENDITURE IS NECESSARY IN THE INTERESTS OF THE PUBLIC SERVICE.

Original signed  
E. H. BRADLEY

*W. J. Shepherd*  
W. J. SHEPHERD  
Major  
C/O ADMSTRY  
HEAD OF BRANCH

*J. D. Day*  
JUN 13 1949  
DEPUTY HEAD

TREASURY OFFICE APPROVAL

"M E M O R A N D U M"  
.....

N.D.T. 2/11

Ottawa, June 30, 1949.

TO: A.G. Branch, Accounts Section,  
Directorate of Pay Services

ATTENTION: Capt. Watson

RE: Requisition for Cheque for  
Leo-Paul Ledoux - \$35.00

The above-noted requisition is returned herewith as it is not supported by the original account. Please attach the original account to the original of C.T. 17-A. If original account cannot be obtained the duplicate should be certified as follows:

"Certified that the original of this account has become lost and that same has not and will not be presented for payment."

The account also has to be certified in accordance with Sec. 30 of the Consolidated Revenue and Audit Act.

For your necessary action and return for payment, please.

*R. C. Playfair*  
for (R.C. PLAYFAIR)  
CHIEF TREASURY OFFICER

Encl. *610*

*II*  
*Copy of account attached  
certified as requested  
4 Jul 49  
R. Watson Capt  
AG Accts Sec.  
DPS*







TREASURY OFFICE  
DEPARTMENT OF NATIONAL DEFENCE

COPY  
**3**

GENERAL SERVICES  
OTTAWA, Ont.  
(SOURCE 14)

To Le-Paul Ledoux,  
Funeral Director,  
454 Main Street,  
WATERLOO, P. Q.

DATE

JUL 18 1949

CHEQUE NO.	PARTICULARS	AMOUNT
	Authorized payment \$25.00 PRAI (Canada) 220(2)	
	Authorized payment \$10.00 PRAI (Canada) 220(5)	35 00
	FILE: H.Q.869-D-6247	
	Please forward cheque with file to D. Adm. for transmission - (in accordance with Paragraph 5 of his letter of 11 June 1949)	

234856

N.D.H.Q.-F.E. No. (4)0000	DIV. (2)00	ESTAB. (3)000	VOTE (3)000	PRI. (2)00	DIST. ALT. OR H.Q. SUB. ALT. (2)00	OBJECT (3)000	AMOUNT	DIST. SUB. AL. (2)00	DIST. F.E. No. (4)0000
7823			140	99	30	650	35 00		

HG/ July 13/49

TOTAL

July 19, 1949

Mr Leo-Paul Ledoux,  
Funeral Director,  
454 Main Street,  
Waterloo, P.Q.



Dear Mr. Ledoux,

A recent review of our files has disclosed that your account for expenses connected with the funeral of D650525 Private G A Dufresne, who died at Hamilton, Ontario, on August 19th, 1945, and was buried at Waterloo, P.Q., has not been paid.

It is noted that your account is in the amount of \$53.04. The regulations in effect at that time, covering these charges, provided only for the payment of \$25.00 to the funeral director who furnished the necessary services at the place of burial and, in addition, the cost of opening and closing the grave. The regulations also provided that if the relatives desired to make more elaborate arrangements they must bear the additional cost.

Your account has, therefore, been approved in the amount of \$35.00 and a cheque in that amount is enclosed. Would you kindly acknowledge receipt on the attached duplicate copy of this letter.

I regret that this account is so long overdue and that it is not possible, under the regulations, to pay all of the items on your account.

Yours very truly,

(C. M. Drury)  
Deputy Minister

DM

Recommended for signature please.

(E G Weeks)  
Major-General  
Adjutant-General

TRANS : For French translation and pass to DM for signature, please. Please ensure that a duplicate copy of this letter is sent to Mr Ledoux and that the cheque is also enclosed.

July 19, 1949

Mr Lee-Paul Ledoux,  
Funeral Director,  
454 Main Street,  
Waterloo, P.Q.

Dear Mr. Ledoux,

A recent review of our files has disclosed that your account for expenses connected with the funeral of D650525 Private G A Dufresne, who died at Hamilton, Ontario, on August 19th, 1945, and was buried at Waterloo, P.Q., has not been paid.

It is noted that your account is in the amount of \$53.04. The regulations in effect at that time, covering these charges, provided only for the payment of \$25.00 to the funeral director who furnished the necessary services at the place of burial and, in addition, the cost of opening and closing the grave. The regulations also provided that if the relatives desired to make more elaborate arrangements they must bear the additional cost.

Your account has, therefore, been approved in the amount of \$35.00 and a cheque in that amount is enclosed. Would you kindly acknowledge receipt on the attached duplicate copy of this letter.

I regret that this account is so long overdue and that it is not possible, under the regulations, to pay all of the items on your account.

Yours very truly,

DM

Receiv for signature, please.

*[Signature]*  
(E. S. Weeks)  
Major-General  
Assistant-General  
*htol*

(C. M. Drury)  
Deputy Minister

TRANS : For French translation and pass to DM for signature, please. Please ensure that a duplicate copy of this letter is sent to Mr Ledoux and that the cheque is also enclosed.



le 21 juillet 1949.

Monsieur Léo-Paul Ledoux,  
Directeur de funérailles,  
454, rue Principale,  
Waterloo, P.Q.

Cher monsieur Ledoux,

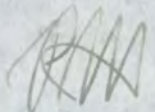
Un récent examen de nos dossiers révèle que votre compte relatif aux funérailles du soldat G.-A. Dufresnes, D650825, - militaire décédé à Hamilton, Ontario, le 19 août 1945, et inhumé à Waterloo, P.Q., - n'a pas encore été payé.

Je constate que votre compte s'élevait à \$53.04. Or, aux termes des règlements en vigueur à cette époque, la somme de \$25.00 seulement était prévue pour défrayer la dépense du directeur de funérailles à l'endroit de l'inhumation, le coût du creusage et du remplissage de la fosse, à part. Les règlements stipulaient en outre que si les parents désiraient des obsèques plus fastueuses, ils devaient supporter le supplément de frais ainsi occasionnés.

En conséquence, votre compte a été approuvé jusqu'à concurrence de la somme de \$35.00. Vous trouverez sous ce pli un chèque de ce montant. Auriez-vous l'obligeance d'en accuser réception sur la copie de la présente lettre.

Je regrette le délai survenu dans le paiement du compte précité, et que, aux termes des règlements, il soit impossible de défrayer tous les articles figurant sur votre compte.

Votre tout dévoué,

  
C.M. Drury,  
Sous-ministre.

25 Jul 49

DS

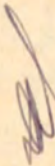
Funeral Expenses  
D650525 Pte Dufresne G A

1 Reference Min File 139-25 Gen, dated 7 Apr 49, and further to my letter of even reference dated 13 Apr 49, regarding an account of Leo-Paul Ledoux, Funeral Director, Waterloo, P.Q., for expenses connected with the funeral of the m/n soldier who died at Hamilton, Ontario, in August 1945 and was buried at Waterloo, P.Q.

2 This account has now been paid in the amount of \$35.00 and copies of the letter from the Deputy Minister to Mr Ledoux in this regard, which are self explanatory, are forwarded for completion of your file, please.



(J. A. Hutchins)  
Lieutenant-Colonel  
Director of Administration



DKS/4659/grl

~~Ch~~

Please PA on Hel 869-1)-6247

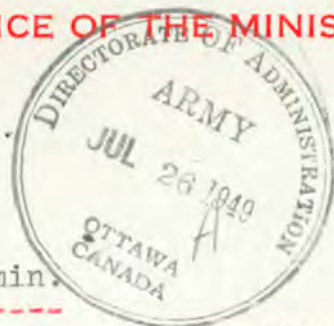
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2 Aug 49

Alvin C. Case  
Adm A2(5)

OFFICE OF THE MINISTER OF NATIONAL DEFENCE

MEMORANDUM



MIN. FILE 139-25 Gen.

July 25, 1949.

H. Q. FILE

D. Admin.

Attention: Captain D.K. Smith

Further to our recent telephone conversation and D. Admin's memorandum on H.Q. 869-D-6247 (Adm A2(b)) dated 13th April, 1949, in connection with the funeral expenses of D-650525 Private Dufresne, G.A.

2. Would you be good enough to let us know what further development, if any, has taken place in connection with the claim of Mr. Leo-Paul Ledoux, Funeral Director, Waterloo, Quebec, for expenses regarding the funeral of Private Dufresne.

*Crossed with report submitted 25 Jul 49. Confirm that report received by JS and PA*

*27 Jul 49*

*Adm A2(b)*

*Report rec'd by JS and no further action req'd by Adm. O.K.*

*J. H. Bellin*  
(H.L. Cameron) Brigadier,  
Defence Secretary.



869-D-6247

~~CR~~

Please PA on Hd

869-D-6247

5 Aug 49

Oldmuth Capt

Adm A2 (b)



# Ministère de la Défense Nationale

**P.A.**

OTTAWA,

le 21 juillet 1949.

Monsieur Léo-Paul Ledoux,  
Directeur de funérailles,  
454, rue Principale,  
Waterloo, P.Q.

Cher monsieur Ledoux,

(1)

Un récent examen de nos dossiers révèle que votre compte relatif aux funérailles du soldat G.-A. Dufresnes, D650525, - militaire décédé à Hamilton, Ontario, le 19 août 1945, et inhumé à Waterloo, P.Q., - n'a pas encore été payé.

Je constate que votre compte s'élevait à \$53.04. Or, aux termes des règlements en vigueur à cette époque, la somme de \$25.00 seulement était prévue pour défrayer la dépense du directeur de funérailles à l'endroit de l'inhumation, le coût du creusage et du remplissage de la fosse, à part. Les règlements stipulaient en outre que si les parents désiraient des obsèques plus fastueuses, ils devaient supporter le supplément de frais ainsi occasionnés.

En conséquence, votre compte a été approuvé jusqu'à concurrence de la somme de \$35.00. Vous trouverez sous ce pli un chèque de ce montant. Auriez-vous l'obligeance d'en accuser réception sur la copie de la présente lettre.

Je regrette le délai survenu dans le paiement du compte précité, et que, aux termes des règlements, il soit impossible de défrayer tous les articles figurant sur votre compte.

Votre tout dévoué,

*Paul Mathew*  
C.M. Drury,  
Sous-ministre.

**RECU PAIEMENT ET MERCI** (Received payment and thank you)

*Léo Paul Ledoux*

REPORT OF DEATH OF A SOLDIER

*[Handwritten signature]*

BE FORWARDED TO THE SECRETARY, DEPARTMENT OF NATIONAL DEFENCE. (MARKED "FOR OFFICER IN CHARGE OF RECORDS") IMMEDIATELY AFTER DATE OF DEATH

Unit 2. General Employment Coy. Toronto. Ont.

Reg't No. D-650525 Rank Private

Name in full DUFRESNE. Georges Andre

Date and place of birth 2nd April 1922. Bonsecours, Quebec, Canada.

Married or single Single

Enlisted, when and where 15 Nov 43. No. 4. District Depot. Montreal, Quebec.

Died	Date <u>19 Aug 45</u>	Buried	Date <u>23 August 45</u>
	Place <u>Hamilton, N.H. Hamilton, Ont.</u>		Name of cemetery <u>R.C. Cemetery.</u>
	Cause of death <u>Automobile Accident.</u>		Location of cemetery <u>Waterloo, Quebec.</u>

Whether he leaves a Will or not, and if so, where deposited } No Will

Statement as to existence of any personal effects } Personal effects turned over to Committee of Adjustment.

Latest particulars as to Next of Kin

- Mr. Adolphe Dufresne. 18 Ellice Street, Waterloo, Quebec.
- Mrs. Adolphe Dufresne. 18 Ellice Street, Waterloo, Quebec.
- Five Brothers and Two Sisters.

I hereby certify that Next of Kin and District Headquarters have been informed. (Strike out Next of Kin if not informed)

**DISCHARGED**

Secretary, Department of National Defence.

Forwarded, please

*Day* MAJOR

*A.H. Woods*  
 (A.H. Woods) Major, Officer Commanding  
 2. General Employment Coy.

Date 14 Sep 45.

for (A.E. Potts) Maj.-Gen. D.O.C., M.D. 2

Date 21 Sep 1945

M.F.W. 2570  
25M-6-41 (758)  
H.Q. 1772-39-1356

1945  
 O.  
 M.D. No. 2

32





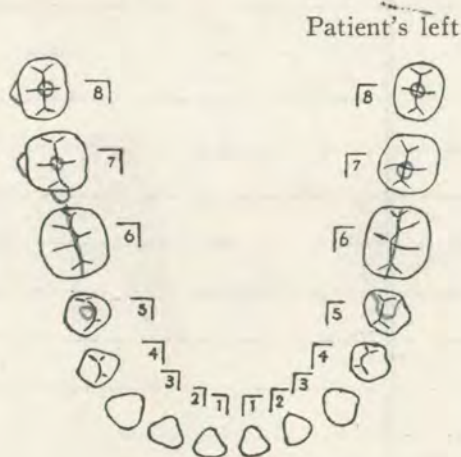
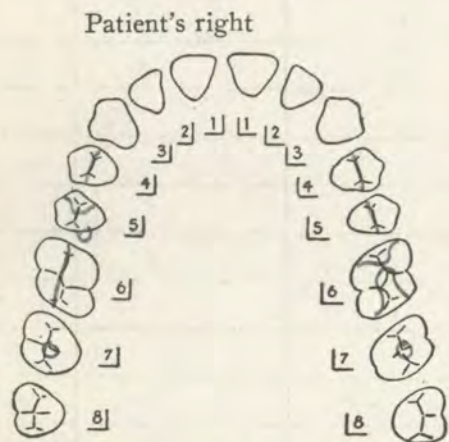




NAME DUFRESNE Georges Andre RANK Pte. AGE 21 REG. No. D-650525

UNIT N. R.M.A. Clearing Depot 4 INF(AUTO) T.T. DATE November 18 1933

Use black, blue or blue black ink. Write plainly and abbreviate as indicated below.



ORAL HYGIENE } Good  
Fair  
Neglected } Strike out  
inapplicable  
words.

PROPHYLAXIS required } Yes  
No }

MUCOSA  
(Describe any pathological condition briefly)

*Gingivitis*

Abbreviations:—

- X Irreparable teeth—extraction
- A Amalgam
- Ce Cement
- S Synthetic Porcelain
- F Foil

- |              |   |       |
|--------------|---|-------|
| GI Gold      | } | Inlay |
| PI Porcelain |   |       |
| GC Gold      | } | Crown |
| PC Porcelain |   |       |
| RC Richmond  |   |       |
| JC Jacket    |   |       |

- |       |               |
|-------|---------------|
| RC    | Treatment     |
| V's   | Root Canal    |
| Pe    | Vincent's     |
| Misc. | Periodontia   |
|       | 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.

*George L...*  
 Signature and unit of examining officer  
 NO. 24 OCT. 1933





PLEASE ATTACH TO MFB 465.

CANADIAN DENTAL CORPS

M.F.B. 465B  
8M pads of 100-2-44 (3825)  
H.Q. 1772-49-950

MEMORANDUM

Dental Coy. No. 22 Clinic 3, No Record Date 9 FEB 45  
Reg. No. 1650523 Rank PIE Name DUFRESNE SA Unit 1 D A P

Detail work completed during this appointment. Refer to abbreviations on reverse side. Specify laboratory instructions and enter remarks in the space provided below. Write plainly, indicate treatment using abbreviations and sketch the outline of all restorations.

Patient's right

Patient's left

TEMP CHART

Shade

V.A - CHROMIC ACID, SODIUM  
PERBORATE & GLYCERIN. *Chad*

Mould

3 APR. 45

V's - H<sub>2</sub>CHO<sub>3</sub> + SOD. PER. + GLYCERIN. *Chad*

4 APR. 45

V's - H<sub>2</sub>CHO<sub>3</sub> + SOD. PER. & GLYCERIN. *Chad*

5 APR. 45

V's - H<sub>2</sub>CHO<sub>3</sub> + SOD. PER. & GLYCERIN. *Chad*

Shade

✓ *Georges Andre  
Dufresne*

Mould

*B. Betancourt*  
Signature of Operator



Mesial — M  
Distal — D  
Incisal — I

Labial — La  
Buccal — Bu  
Lingual — Li

Occusal — O

ABBREVIATIONS:—

X Extraction  
A Amalgam  
Ce Cement  
S Synthetic Porcelain  
F Foil

GI Gold }  
PI Porcelain } Inlay  
GC Gold }  
PC Porcelain } Crown  
RC Richmond }  
JC Jacket }

TREATMENT  
RC Root Canal  
V's Vincent's Angina  
Pe Periodontia  
Misc. Miscellaneous

Br Bridge }  
PD Partial Denture } Describe  
CU Complete upper } with  
CL Complete lower } sketch  
Ra X-ray } Denture

INFORMATION

CONVULSIVE DISORDER

THE UNIVERSITY OF CHICAGO  
PUBLISHED BY THE UNIVERSITY OF CHICAGO PRESS

*Camp Chart*

CANADIAN DENTAL CORPS

M.F.B. 465B  
8M pads of 100-2-44 (3825)  
H.Q. 1772-49-950

MEMORANDUM

Dental Coy. No. 22 Date 9 JUNE 45  
Reg. No. B-650573 Rank PTE Name DUFRESNE Unit I.D.A.P.

Detail work completed during this appointment. Refer to abbreviations on reverse side. Specify laboratory instructions and enter remarks in the space provided below. Write plainly, indicate treatment using abbreviations and sketch the outline of all restorations.

Patient's right

Patient's left

Shade

Mould

Shade

Mould



V's

C.D.C. - MOUTH WASH

*J. V. O'Handley Capt*

*J. V. O'Handley Capt*  
Signature of Operator  
# 22 Coy. C.D.C.

Mesial — M  
 Distal — D  
 Incisal — I

Labial — La  
 Buccal — Bu  
 Lingual — Li

Occusal — O

ABBREVIATIONS:—

X Extraction  
 A Amalgam  
 Ce Cement  
 S Synthetic Porcelain  
 F Foil

GI Gold }  
 PI Porcelain } Inlay  
 GC Gold }  
 PC Porcelain } Crown  
 RC Richmond }  
 JC Jacket }

TREATMENT

RC Root Canal  
 V's Vincent's Angina  
 Pe Periodontia  
 Misc. Miscellaneous

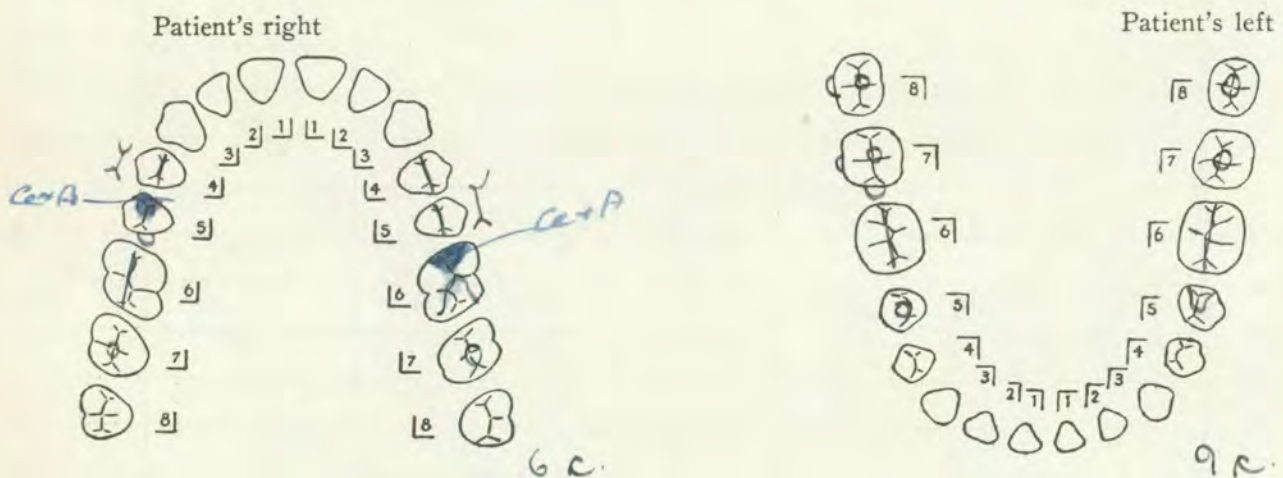
Br Bridge } Describe  
 PD Partial Denture } with  
 CU Complete upper } sketch  
 CL Complete lower } Denture  
 Ra X-ray }

*Print*

NAME DUFRESNE Georges Andre RANK Pte. AGE 21 REG. No. D-650525

UNIT N. R.M.A. Clearing Depot 4 INF(AUTO) T.T. DATE November 18 1943

Use black, blue or blue black ink. Write plainly and abbreviate as indicated below.



ORAL HYGIENE Good  
Fair  
Neglected } Strike out  
 PROPHYLAXIS required Yes  
No } inapplicable  
 words.

MUCOSA  
 (Describe any pathological condition briefly)  
*Gingivitis*

- |                                |              |         |                     |                   |
|--------------------------------|--------------|---------|---------------------|-------------------|
| Abbreviations:—                | GI Gold      | } Inlay | Treatment           |                   |
| X Irreparable teeth—extraction | PI Porcelain |         | RC Root Canal       | Br Bridge         |
| A Amalgam                      | GC Gold      | } Crown | V's Vincent's       | PD Partial        |
| Ce Cement                      | PC Porcelain |         | Pe Periodontia      | CU Complete Upper |
| S Synthetic Porcelain          | RC Richmond  |         | Misc. Miscellaneous | CL Complete lower |
| F Foil                         | JC Jacket    |         | Ra X-Ray            | 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.

*Moore L...*  
 Signature and unit of examining officer

NO. 24 COV.

Indicate surfaces of teeth as follows:

Mesial — M                      Labial — La  
 Distal — D                     Buccal — Bu  
 Incisal — I                      Lingual — Li  
 Occlusal — O

Indicate tooth by the notation below.

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	
14 Dec 43	Misc. <del>DE</del>	Ging. H <sub>2</sub> CrO <sub>4</sub> +H <sub>2</sub> O <sub>2</sub>	} Wm. Lefebvre Capt.					
		This man was a painter in civilian life. Gingivitis was most likely caused by lead poisoning.						
16 Dec 43	Misc.	Ging. scaling + Mercurochrome		Wm. Lefebvre Capt.				
18 Dec 43	Misc.	H <sub>2</sub> CrO <sub>4</sub> + H <sub>2</sub> O <sub>2</sub>		Wm. Lefebvre Capt.				
20 Dec 43	Misc.	Scaling, Mercurochrome		Wm. Lefebvre Capt.				
20 Dec 43	16 MO	Ce + A	} Wm. Lefebvre Capt.					
22 Dec 43	51 MO	Ce + A		Wm. Lefebvre Capt.				

DEPARTMENT OF NATIONAL DEFENCE

(ARMY)

SUPPLEMENT TO PERSONNEL SELECTION RECORD

(M.F.M. 196A)

To be attached to M.F.M. 196, and to be initiated only when M.F.M. 196 is completely filled.

D.650525	Pte.	DUFRESNE, Andre.		R	21									
Regtl. No.	Rank	Surname	First Name	A or R	Age	Cat.								
"M" Test:	104	"A"	Fr.	18	13	10	18	14	3	9	19	41	32	31
	Total	Form	Eng. or Fr.	1	2	3	4	5	6	7	8	1-3	4-5	6-8

ADDITIONAL FOLLOW-UP: YOB PULHEMS  
22 1111111

23 May 45. (Checked for HWE Survey) Army Bldg., Front & York Sts., Toronto.  
Mil. Back.: SOS #2 D.D., 6 Nov 44. Industrial Duty. SOS No. 2 D.D. to  
 #2 General Employment Coy., 8 Feb 45. Industrial Duty.  
 Suitable for o/s Service, C.I.C. (Operational).

RWU:BD

*R.W. Umphrey*  
 (R.W. Umphrey), Lt.  
 Army Examiner.



OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER **D.650525** RANK **Pte.** SERVICE UNIT **#2 Gen Exp Coy., Toronto**  
 NAME **DUPRESNE, Georges Andre**

DATE OF BIRTH **2-4-22** DATE OF ENLISTMENT **15-11-43**  
 MARITAL STATUS **Single** RELIGION **R.C.**

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP **Father** NAME **Mr. Adolphe Dufresne**  
 ADDRESS **18 Wilice St., Waterloo, Que.** ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME  
 ADDRESS  
 ( IF SOLDIER MARRIED OVERSEAS )

AUTHORITY CAS. SIG. NO. **TA 5651 , TR 85 d/24 Aug 45 H.C. 869-D-6247** DATE

**DIED in Hamilton Military Hospital from injuries. struck by private automobile** **19-8-45**

**Records indicate that this soldier served in Canada only.**

**AMENDED AS TO CAUSE OF DEATH.**

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 **24 AUG 45.**

FORM NO. CAS. 6  
 25M-4-44 (4184)  
 H.Q. 1772-39-1989-1990

*G. Robertson Capt*  
 DIRECTOR OF RECORDS

**6**

**COPY FOR DOCUMENT FILE**

Regimental No. D-650525 Rank Private

Sheet No. 1

M.F.M. 1 & 2 (a)  
300M-5-43 (154)  
H.Q. 1772-39-1046

Name DUFRESNE, G.A.

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc.—

	Rank Shown	Effective Date	Unit	Place	Authority	
					D.O. Number	Dated
Att. fap from A-13 CITC (reporting from S-9 CAMMS)	Pte.	13 Aug 44	CD&MS	Woodstock	185	17 Aug 44
Qual. Dvr. IC class 111(W) and class 111(UC)	"	24 Aug 44	"	"	190	24 Aug 44
Ceases att. fap from A-13 CITC	"	25 Aug 44	"	"	191	25 Aug 44
Ceases Att. F.A.P. to S-5 C.D.&MS.	"	26 Aug 44	A-13	Valcartier	206	29 Aug 44
<i>Granted furlough till 14 Sep 44</i>	"	<i>1 Sep 44</i>	"	"	<i>209</i>	<i>1 Sep 44</i>
Granted emb leave till 0700hrs 27 sep 44	"	23 sep 44	"	"	227	22 sep 44
Issued warrant transport No. A775111	"	22 sep 44	"	"	230	26 sep 44
<i>To receive \$1.40 per diem</i>	"	<i>15 Mar 44</i>	"	"	<i>231</i>	<i>23 Sep 44</i>
<i>To receive \$1.50 per diem</i>	"	<i>15 Aug 44</i>	"	"		



# CLINICAL CHART

D-433

Hospital Hamilton Military Hospital Service B. Ward B.  
 Regt'l No. B-625525 Rank Pte. Name Dufrene, A. Age 20  
 Unit #2 D.D. Toronto, Ont. Att'd Internation Harvester Co., of Canada Ltd. Date of Admission 19 Aug, 45. 1945

DATE		19																															
Pulse	Temperature	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME		
		a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.		
160	107																																
150	106																																
140	105																																
130	104																																
120	103																																
110	102																																
100	101																																
90	100																																
80	99																																
70	98																																
60	97																																
Respirations		28		28																													
Stools																																	
Fluid Intake, 8 a.m.-5 a.m.																																	
Blood Pressure																																	

**CASE SHEET (SPECIALIST REPORT)**

Referred by: *Dr. J. H. Campbell* Date: *12 July 44*

No. *D 650525* Rank *Pt* Name *Dufresne George Andrew*

Address *5-9 C.A.P. S. Queens Park, London* Age *22*

Unit or Ship *S-9* Trade *Student* Class or Category *P.D.T.*

Referred to: *Dermatologist* Profile { Army Air

Y	O	B	P	U	L	H	E	M	S
2	2		1	1	1	1	1	1	1

History and Physical Findings (to be filled out by M.O. i/c case)

*About two months ago patient developed area of alopecia. Has since grown markedly larger. Large quantities of hair come out daily.*

Y	O	B	P	U	L	H	E	M	S
2	2		1	1	1	1	1	1	1

Opinion Requested Re: *Alopecia areata, treatment*  
 Type of Case—Ambulatory, Wheelchair, Stretcher, Bed M.O. Signature: *Dr. J. H. Campbell*

CONSULTANT'S REPORT

Hospital..... Report No.....  
 X-Ray No.....

This man has a large area of Alopecia areata on his scalp. From the story I think the condition now is more or less stationary. The usual treatment for this condition is weekly doses of ultra violet therapy, giving an erythema dose each time. From the fact that this is now of two months standing I would be inclined to recommend 2% salicylic acid ointment in a vaseline base, applied once a day. This condition seems to belong to the neuro-dermatosis group and is usually self limited. If there is no response in three weeks he should be seen again.

Diagnosis.....  
 Is this man fit for his duty?.....  
 Recommendation.....

Date: *July 14th, 1944*  
 C/S *F.J.H. Campbell* (Specialist's or Consultant's Signature)

**CASE SHEET (SPECIALIST REPORT)**

Referred by: ARMY EXAMINER Date 11th January 1944

No. D-650523<sup>5</sup> Rank Pte Name D U F R E S N E, A.

Address C.I.(B)T.C. No. 45, Sorel, Que.

Unit or Ship INFANTRY AUTOMOTIVE Trade T.T. {Class or Category "A" Age 21

Referred to: PSYCHIATRIST

**PRESENT PROFILE.**

History and Physical Findings (to be filled out by M.O. i/c case)

Y.O.B.	P	U	L	H	E	M	S
22	1	1	1	1	1	1	1

This man was accepted into the army for recheck. He complains of heart troubles, dyspnoea, palpitations after route-marches, or P.T. - On Exam: Pulse is rapid. Possibility of effort syndrome. 115-130-115 after 5 t.t. - This man is unlikely to become an efficient soldier and I don't think he will qualify. This man seems below average intelligence. Has tremor of hands & sweating palms. Coy. Commander states he is unable to keep up with the other members of his platoon.

Opinion Requested Re: intelligence. M.O. Signature [Signature]

Type of Case—Ambulatory, Wheelchair, Stretcher, Bed

(J. Hetu) Capt. RCAMC CA  
CMO/T.C.#45-Sorel, P.Q.

CONSULTANT'S REPORT

Hospital..... Report No.....

Complaining of "heart trouble". He believes he has this because following pleurisy in 1942 his doctor told him he should be careful of his heart. Previously active in hockey and tennis and all sports he stopped these then. Now he is bothered by precordial pain, palpitation, dyspnoea and fatigue with exercise and he has some difficulty in sleeping with many bad dreams. His father had pleurisy 5 or 6 times and his mother is supposed to have heart trouble. M/A does not think he was nervous as a child. No neuropathic traits - usual sports & fights until 1942. Pulse is 96 and palms moist - no tremor or bitten finger nails. M/s 104. Coy Commander says.

**SUGGESTED PROFILE.**

Y.O.B.	P	U	L	H	E	M	S
22	1	1	1	1	1	1	4

**APPROVED PROFILE**

Y.O.B.	P	U	L	H	E	M	S
22	1	1	1	1	1	1	1

D.O.F.  
15-11-43

Diagnosis Effort syndrome with no discoverable psychiatric factors as far as

Is this man fit for his duty? He is on psychiatric grounds.

Recommendation Carry on - M.O. to arrange with Capt Stansfield of the R.V.H. as to when there might be a bed available there for investigation of effort syndrome. He can be seen again for psychiatric factors there

Date Jan 26/44 [Signature]  
(Consultant's Signature)

NO.D.650525 Rank Private Name DUFRESNE, Georges Andre ✓

Unit No. A.13 C.A.(Inf.)T.C Date of death 19th August, 1945.

Died at Hamilton Military Hospital, Hamilton, Ontario.

Cause Automobile accident.

Death occurred on strength of Forces H.Q. 889-D-6247

N/K Mr. Adolphe Dufresne, Relationship Father

Address 18 Ellis Avenue, Waterloo, Quebec.  
~~18 Prince Street~~

Remains buried in Roman Catholic Cemetery

Waterloo, Quebec.

Grave location

CHK

GRAVE DESPATCHED  
DEC 8 1945  
FOR THE BROTHERS

BURIAL REPORT TO N.K.

RETURN TO BUR. OF STAT.

ROYAL MESSAGE DESP'D.

CAN. MESSAGE DESP'D.



**CASE HISTORY SHEET**

I. Hospital Hamilton Military Hospital Force I.D.A.F.

Active F. No. B-625525 Rank Pte. Unit or Ship #2 District Depot  
 Reserve F. No. Rank Unit or Ship  
 C.E.F. No. D650525 Rank Unit or Ship  
 Others Rank Unit or Ship  
 Surname Dufrene DUFRESNE Christian Names George Andre  
 Address Gov't. Bldgs. Exhibition Grds. #2 D.D. Toronto, Ont.  
 Age 20 Trade Religion R.C. Total Service (Mos.)  
 Next-of-Kin Mr. A. Dufrene Relationship Father  
 Address 18 Ellice St., Waterloo, Que.  
 Admitted direct (as transfer) from Accident 0430 hrs. Date 19 Aug. 45. Class

Disposal } Discharged to (Duty, Medical Board, Home, Sick Leave, Died) Date 19 Aug 45 Class  
 of Case } Transferred to Date 19-8-45 Class  
 Condition on Discharge (or transfer) Days in Hospital 1  
 Final Diagnosis Fracture of skull. 1712

II. Admission Note:

Multiple injuries, haemorrhage, coma.

Provisional Diagnosis:

S.A. Yaffe, Major, R.C.A.M.C.  
Signature of Admitting Officer

III. History and Physical Examination (in chronological order) Date

Struck by a car about 3.30 - 4.00 am today.  
Admitted 4.30 in profound coma with extensive head injury & multiple abrasions & contusions of body.  
B.P. on admission 150/70. Temp 99.  
Bleeding & C.S.F. leaking profusely from nasopharynx.  
Given Plasma i.v.  
at 0930 hrs B.P. 100/50. Temp 104° Respiration labored. Bleeding diminished but C.S.F. still leaking.  
10.30. Throat cleared with suction. Condition deteriorating. B.P. 70/35.  
11.00 Hrs. Temp 105.5° ~~Respiration~~ P. 140.  
11.30. Spinal puncture - fluid almost

Date

DATE

CLINICAL NOTES

pure blood. No pressure registered.  
Died 1240 hrs.

IV. Condition on Discharge.....

Died.

Disposal of Case.....

Date.....

19 Aug 45

*D. Campbell*  
Medical Officer i/c Case.

DOMINION OF CANADA — MEDICAL SERVICES  
**REQUEST FOR LABORATORY EXAMINATION**

Laboratory Report

No. 9274-A

*Released*

No. D-6595-25 Rank Pte Name Dufresne Age 23

Unit or Ship #20.D Hospital G.M.H Ward C13

To M.O. i/c Laboratory at .....

Accompanying specimen of Blood

Examination required Malaria, Babes

Points requiring special investigation: .....

DIAGNOSIS—Short statement of case, including treatment and progress, and references to any previous laboratory reports:

V.D.H

Lab. No. 9808

**Kahn: Blood badly Hemolyzed  
Please Repeat**

Station .....

Date and hour of collection ..... M. O. i/c Case

**LABORATORY REPORT**

Date specimen received ..... M. O. i/c Lab.

Date report despatched ..... Station

P. & H. ... 105A

R.C.A.F. M. 55A

Militia ..... M.F.B. 1477A—300M—8-43 (1311) H.Q. 1772-45-8

R.C.N. .... 2010A

USE REVERSE SIDE IF ADDITIONAL SPACE IS REQUIRED

D-65-0525  
Pte Dufrene.

LABORATORY REPORT

REQUEST FOR LABORATORY EXAMINATION

DOMINION OF CANADA - MEDICAL SERVICES

Examination - *[faint text]*  
Specimen - *[faint text]*  
Date of report - *[faint text]*  
Name of patient - *[faint text]*  
Address - *[faint text]*  
City - *[faint text]*  
Province - *[faint text]*  
Signature - *[faint text]*

*DMO*

# REPORT ON INJURIES

*20-D-9107*

Other than Wounds Received in Action

TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS OVER PAGE WITHIN 48 HOURS OF OCCURRENCE

1. Statement to be signed by injured officer or soldier:

I, D-650525 Pte. DUFRESNE, Georges  
(a) (number) (b) (rank) (c) (surname) (Christian names in full)

#2 D.D. I.D.A.P. Toronto, Ont hereby declare that the injury sustained by me  
(d) (unit)  
on the 2nd March 1945 did occur while I was in the performance  
(e) (date of casualty) ~~did not~~  
of military duty.

*[Signature]*  
(Signature of officer or soldier)

H.M.H. 2/Mar/45  
(station) (date)

(\*Part not applicable to be struck out and initialed by Officer or Soldier signing.)

2. (a) Description of injuries Small cut on palm of left hand--skin  
thickness only.

(b) Are the injuries serious or of such a nature that they might be the exciting cause of disability later? No.

(c) Whether admitted to hospital or sick in quarters? No.

(d) How long before initial treatment was given? 2 hours.



Date 2/Mar/45 Signature of medical officer (C. TAYLOR), Captain, R.C.A.M.C.

3. Short statement by injured person of the circumstances of the injury (see instruction 5). Signed statements of witnesses, or of persons to whom the injured person may have mentioned his injury, to be attached (see instructions 3 and 4):

While moulding at the International Harvester Malleable Foundries on March 2, 1945 at 1300 hrs., I cut my left hand on a piece of metal unseen in the sand, as I was levelling the mould off. Immediately I reported the accident to Robt. Robinson, superintendent, and was sent to the first-aid room. A bandage was put on at the first-aid room and I was sent to the Hamilton Military Hospital where I arrived at 1430 hrs.

*[Signature]*  
(Signature of officer or soldier)

*[Signature]*  
(Witness to signature of Officer or Soldier signs here)

## 4. Statement of Commanding Officer:

- (a) Was the individual in the performance of military duty? Yes
- (b) Nature of duty Industrial Duty at International Harvester, Hamilton
- (c) (i) Was it incurred in a game or other form of physical recreation definitely organized with the approval of the unit commander? n/a
- (ii) Was participation pursuant to orders, written or verbal? .....
- (d) If it was incurred on leave, was such leave with or without pay? n/a
- (e) Was the injured individual to blame? no
- (f) Was anyone else to blame? no
- (i) Whom? .....
- (g) Did the injury occur on military premises and if so in what part of such premises? at International Harvester Co. Hamilton, where detailed for duty.
- (h) Court of Inquiry:
- (i) Has one been held? .....
- (ii) Will one be held? no
- (iii) Date and place .....

Date 8 Mar 45.

Commanding (A.O. Thompson) Major.  
~~O.C. No. 2 General Employment Coy~~

## 5. Remarks of District Officer Commanding or Division Commander:

Forwarded:

Date 15 Mar 45

(A.E. Potts) Maj.-Gen., D.O.C., No. 2.

## IMPORTANT INSTRUCTIONS TO BE FOLLOWED

1. This form is to be rendered within 48 hours after the event in all cases of accidental or self-inflicted injuries to an officer or soldier involving:

- (a) death,  
 (b) absence from duty for 48 hours or more, or  
 (c) absence from duty of less than 48 hours when the medical officer should invariably be consulted as to whether the injury may be the exciting cause of disability later.  
 (d) in all accidents involving personnel whether there is evidence of injury or not.

2. A separate form is to be used in respect to each individual affected.

3. This form is to be rendered notwithstanding the holding of a court of inquiry or investigation. If a court of inquiry is held a copy of this form is to be included in the proceedings.

4. Full statements are to be taken by an officer from the witnesses of the accident or, where there was no witness, from any persons to whom the injured officer or soldier may have mentioned his injury immediately after the occurrence. These statements, when obtainable will be signed by the persons making them, and by the officer who takes them, and will be forwarded with this form. Where it is intended to take disciplinary action, duplicates of these statements should be retained by the unit for use in lieu of a summary of evidence.

5. Where it is possible to obtain it, a statement from the injured officer or soldier will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

6. This form will be prepared in triplicate, one copy to be retained by the unit and the two other copies to be forwarded to N.D.H.Q., through the usual channels. Where a Court of Inquiry is held the copies to be forwarded to N.D.H.Q. will be attached to the proceedings.

## SPECIAL INSTRUCTIONS AS TO EVIDENCE IN CASES OF SELF-INFLICTED WOUNDS

7. In these cases the statements mentioned in paragraphs 4 and 5 above should bring out all material points, e.g., statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).

8. An officer or a soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive this charge should not be used. The charge will therefore usually be laid under section 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under section 18 for wilful maiming.

Mark  where indicated

# NOTIFICATION OF A NEW VENEREAL INFECTION

CONFIDENTIAL

NOTE: If a syphilis infection was it diagnosed by routine serologic test?

Yes  No

SYPHILIS

GONORRHOEA

Reg. No. 2-650525

Rank Pvt. Name Dufresne, George Date of Birth 2 April/22  
day mo. yr.

Date of Enlistment 13 Nov. /43 Date of Appearance of First Symptom 1 May/43

DIAGNOSIS Gonorrhoea  
(Use code name as given below)

Canadian Army (A.F.)

C.W.A.C.

Date of Diagnosis 2 May /45

N.R.M.A. Recruit and Home Defence

MAY 11 1945

CODE OF DIAGNOSIS OF DISEASE
Gonorrhoea (report all forms as Gonorrhoea)
Syphilis—Prenatal (Congenital)
Syphilis—Acquired—Primary
Syphilis—Acquired—Secondary
Syphilis—Acquired—Latent (including tentative)
Syphilis—Acquired—Tertiary—Cardiovascular
Syphilis—Acquired—Tertiary—Neurosypilis
Syphilis—Acquired—Tertiary—Other
Syphilis—type undetermined

Unit # 2 P.P. Toronto

M.D. No. 2 Division or Command

Signature of Medical Officer

*[Handwritten Signature]*  
Unit, Medical Unit or Hospital HMH

Date 2-5-45

### RECORD OF TRANSFERS OF PATIENT

Date	From		To		Date	From		To	
	M.D.	Unit	M.D.	Unit		M.D.	Unit	M.D.	Unit

### RECORD OF TERMINATION OF TREATMENT

Date.....

Reason.....





Date

Disease

Darkfield

Serology

C.S.F.

Smear G.C.

Culture GC

Mapharsen

Bismuth

Other

S.thiazol

To Return

Adeq. Rx.

Transfer

Absent

Disch Army

Other

Hospital

Remarks

6M-11-44(M-4455)

Confidential

# CASE RECORD

D-650525

Rank *Pvt.* Name *Dufresne, J. E.* (Surname) (Christian names) Reg. No. ....

Unit *# 2 W. Toronto (Det. 1st. Harvester, Hamilton, Ont.)* Canadian Army (A.F.)   
C.W.A.C.

Date of Enlistment *13 Nov. 1943* N.R.M.A. Recruit   
Enlisted in M.D. No. *2*

Date of Birth *2 April 1922* Marital Status *5* Racial Origin *French*

DIAGNOSIS *Gonorrhoea*

Date of Diagnosis *2 May 1945*

Signature of Medical Officer  
*Pherguson, Capt.*

Medical Services, Canadian Army

M.F.M. 295  
12M-8-43 (1484)  
H.Q. 1772-39-2022

## Instructions in the use of this Form

1. THIS IS A CONFIDENTIAL RECORD AND IS TO BE PROTECTED AT ALL TIMES FROM UNNECESSARY AND CARELESS DISPLAY.

2. This record will be commenced by the Medical Officer on every patient applying for examination for possible venereal infection. Upon determining the diagnosis this will be entered on page 1. Where no evidence of venereal infection is found, enter the diagnosis as Non-Venereal with the diagnosis of the condition found. Close the record and send it to the District Venereal Disease Control Officer. When venereal infection is diagnosed, a Personal Case Record M.F.M. 296 will be commenced and handed to the patient.

3. When treatment of a venereal infection is terminated this record will be entered with details on the disposal of the case and forwarded at once to the District Venereal Disease Control Officer.

4. For each entry made on this record on treatment or results of examination a similar entry is to be made at the same time in the Personal Case Record.

5. Upon diagnosis of every venereal infection the Medical Officer will complete Form M.F.M. 293 on Notification of a New Venereal Infection.

6. All entries are to be made in ink or by typewriter.

### MEDICAL HISTORY

Date of First Symptom

*May / 45*

History of Condition

*Exposed 27 April / 45. Last night developed creamy urethral discharge. This P.M. more profuse, & dysuria.*

#### Early Preventive Treatment

- states E.P.T. taken.  
Type.....  
Time elapsed after exposure.
- states no E.P.T. taken.
- drunk at time of exposure.
- had been drinking.

(NOTE.—If suspicious lesions are present obtain date of onset)



(6)  
NOTES ON PHYSICAL EXAMINATION

Date	Entry—date and sign all entries	M.O.
2-5-45	V.A.D. except scart, creamy urethral disch, & urethral irritation	J.P.H.

TREATMENT RECORD—GONORRHOEA

Date	Type	Dosage	Progress Notes	M.O.
2-5-45	Penicillin	25,000 u I.M. q 3h x 4		J.P.H.
3-5-45			Disch gone	J.P.H.
7-5-45	"	25,000 u I.M. q 3h x 4	Scart, thick yellow disch. last night. Disch. gone this a.m. No dysuria, return 10 days	J.P.H.
8-5-45				J.P.H.







(12)  
TREATMENT RECORD—SYPHILIS

Date	Drug	Dose	Reaction	M.O.	Date	Drug	Dose	Reaction	M.O.

## NOTES ON REACTION TO TREATMENT

Date	Details of any Significant Reaction—date and sign all entries	M.O.
7-5-45	Recurrence of urethral discharge last night. Smear Positive. Repeat Penicillin.	OK JL
18-5-45	Disch. stopped about 3 days after 2nd course of Penicillin. No disch. or dysuria since. Prost. smear - NEG. 2-glass test - I occ. wbs. II occ. wbs.	JL



## FINAL DISPOSITION AND SUMMARY OF THE CASE

Date Treatment Commenced.....

2 May / 45

Date Treatment Completed.....

18 May / 45

Summary of Syphilis Treatment: Number of Arsenical Injections.....

Number of Bismuth Injections.....

Date Serologic Check Due.....

2 Aug. / 45

NOTE: For Gonorrhoea Cases—serology to be checked 3 months after date of diagnosis.

Discharged for Other Reason (state reason)

NOTE: For Syphilis Cases—serology to be checked 6 months after completion of standard treatment.

Signature of  
Medical Officer.....

J. H. Morgan, Capt.

Date.....

Unit or Hospital.....

H. N. H.

## MORNING SICK REPORT

7 May/45

19.....

Reg't No.	RANK AND NAMES (Christian Names in full)	Age	Religion	Whether for duty a prisoner or defaulters	Married or Single	DISEASE	Medical Officer's Remarks and Initial
D-850525	Pte. DUPRESNE J.E.	23	R/C	Duty	S	V.D.G.	
	Next of Kin (Mother) Mrs. B. Dufresne WATERLOO, P.Q.						
	<del>.....</del> <i>M.O.</i>						



*MA*

*Alb...*

*N.O.*

Medical Officer

*L. J. G...*

*File*

Orderly N.C.O.

M. F. B. 292

2,500M-2-44 (3642)

H.Q. 1772-39-248

UNIT COPY

(OVER)



{ Squadron  
Battery  
Company  
Detachment }

# 2 General Employment Coy.

9874-A

# 2 District Depot Toronto Unit or Battalion

MORNING SICK REPORT

4 May 45

19

Regt'l No.	RANK AND NAMES (Christian Names in full)	Age	Religion	Whether for duty a prisoner or defaulter	Married or Single	DISEASE	Medical Officer's Remarks and Initial
D-650525	Pte. DUFRESNE, J.E	23	R.C	Du.	S	N.Y.D.	
<p><i>Slight, pilot, slender man kindness. San Diego Excuse duty for May 4 &amp; 5.</i></p>							



*Thompson, Capt.* Medical Officer  
FILE

Pte. R.H. Prentis, Orderly N.C.O.



9874-A

Squadron  
Battery  
Company  
Detachment

# 2 D.D. Toronto

Unit or Battalion

# 2 General Employment Coy.

MORNING SICK REPORT

2 May 45

19

Regt'l No.	RANK AND NAMES (Christian Names in full)	Age	Religion	Whether for duty a prisoner or defaulter	Married or Single	DISEASE	Medical Officer's Remarks and Initial
D-650525	Pte. DUFRESNE, J. E.  1. 4p. Sull dect 2. Penicillin - 25,000 u.t. M. of 3 h x 4  [Signature]	23	R.C.	Du.	S	N.Y.D.  Next of Kin. Mother Mrs. B. Dufresne, Waterloo, Que.  DETAIN X.O.P.O. <del>Detain in M.O.</del> C. 13. [Signature]	

Release  
[Signature]



Medical Officer

Pte. F.E. Prantia

Orderly N.C.O.

FILE



# TO BE DISCHARGED FROM HOSPITAL TO-MORROW

Troop, Battery or Company	Corps	Reg't No.	RANK AND NAMES
			<div style="margin-bottom: 10px;">Detained 0930 Hrs. 2 May / 45</div> <div style="margin-bottom: 10px;">Released 1130 Hrs. 3 May / 45</div> <div>Returned by S. Trutlar.</div>





APP. B

# REPORT ON INJURIES

Other than Wounds Received in Action

TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS OVER PAGE WITHIN 48 HOURS  
OF OCCURRENCE

1. Statement to be signed by injured officer or soldier:

I, D-650525 Plt. Dufresne A. (Deceased)  
(a) (number) (b) (rank) (c) (surname) (Christian names in full)  
82 Gen. Hq. Coy. hereby declare that the injury sustained by me  
(d) (unit)  
on the 19-Aug-45 did  
(e) (date of casualty) did not\* occur while I was in the performance  
of military duty.

.....  
(Signature of officer or soldier)

Hamilton Military Hospital 19-Aug-45.  
(station) (date)

(\*Part not applicable to be struck out and initialled by Officer or Soldier signing.)

2. (a) Description of injuries..... Closed head injury--profoundly unconscious.  
Loosening C.S.F. through back of throat. Multiple abrasions  
and contusions.

(b) Are the injuries serious or of such a nature that they *might* be the exciting cause of disability later? } Yes.  
} Critically ill.

(c) Whether admitted to hospital or sick in quarters? } To hospital.

(d) How long before initial treatment was given? } Unknown.

Date 19-Aug-45. Signature of medical officer D.B. Campbell, M.D., RCANO, C.A.

3. Short statement by injured person of the circumstances of the injury (see instruction 5). Signed statements of witnesses, or of persons to whom the injured person may have mentioned his injury, to be attached (see instructions 3 and 4):

.....  
(Signature of officer or soldier)

.....  
(Witness to signature of Officer or Soldier signs here)

## 4. Statement of Commanding Officer:

- (a) Was the individual in the performance of military duty? **No**
- (b) Nature of duty **N/A**
- (c) (i) Was it incurred in a game or other form of physical recreation definitely organized with the approval of the unit commander? **No**
- (ii) Was participation pursuant to orders, written or verbal? **XXXX. N/A**
- (d) If it was incurred on leave, was such leave with or without pay? **A.W.L.**
- (e) Was the injured individual to blame? **No**
- (f) Was anyone else to blame? **This soldier was the victim of an automobile accident. It is understood that the driver of the car is being charged with manslaughter.**
- (i) Whom?
- (g) Did the injury occur on military premises and if so in what part of such premises? **No**
- (h) Court of Inquiry:
- (i) Has one been held? **No**
- (ii) Will one be held? **Yes**
- (iii) Date and place **To be determined by H.Q.'s, M.D.2.**

Date **27 Aug 45**Commanding **A.H. Woods** Major.

## 5. Remarks of District Officer Commanding or Division Commander:

**O.C. No. 2. Gen. Amp. Coy.**

Date

## IMPORTANT INSTRUCTIONS TO BE FOLLOWED

1. This form is to be rendered within 48 hours after the event in all cases of accidental or self-inflicted injuries to an officer or soldier involving:

- (a) death,
- (b) absence from duty for 48 hours or more, or
- (c) absence from duty of less than 48 hours when the medical officer should invariably be consulted as to whether the injury may be the exciting cause of disability later.
- (d) in all accidents involving personnel whether there is evidence of injury or not.

2. A separate form is to be used in respect to each individual affected.

3. This form is to be rendered notwithstanding the holding of a court of inquiry or investigation. If a court of inquiry is held a copy of this form is to be included in the proceedings.

4. Full statements are to be taken by an officer from the witnesses of the accident or, where there was no witness, from any persons to whom the injured officer or soldier may have mentioned his injury immediately after the occurrence. These statements, when obtainable will be signed by the persons making them, and by the officer who takes them, and will be forwarded with this form. Where it is intended to take disciplinary action, duplicates of these statements should be retained by the unit for use in lieu of a summary of evidence.

5. Where it is possible to obtain it, a statement from the injured officer or soldier will also be forwarded. This, however, should not be used as evidence against him in any subsequent disciplinary proceedings.

6. This form will be prepared in triplicate, one copy to be retained by the unit and the two other copies to be forwarded to N.D.H.Q., through the usual channels. Where a Court of Inquiry is held the copies to be forwarded to N.D.H.Q. will be attached to the proceedings.

## SPECIAL INSTRUCTIONS AS TO EVIDENCE IN CASES OF SELF-INFLICTED WOUNDS

7. In these cases the statements mentioned in paragraphs 4 and 5 above should bring out all material points, e.g., statements to the effect that the witness was with the accused standing on the fire step (or sitting in a dug-out); that the accused was cleaning his rifle; position of safety catch, magazine, etc., if known; muzzle of rifle on toe of foot; hand on muzzle; that accused pulled trigger; that the rifle was afterwards examined and an empty cartridge case was found in chamber; that accused was seen to be wounded; what accused said ("I have shot myself," "I did not know it was loaded," etc.).

8. An officer or a soldier is specially trained in the safe use of his rifle and revolver, and evidence of any neglect of the ordinary precautions as to their handling in such cases usually has considerable bearing on the question of negligence. In cases of wilful self-wounding the fullest possible evidence should be obtained; unless the evidence is conclusive this charge should not be used. The charge will therefore usually be laid under section 40 Army Act—"Conduct to the prejudice of good order and military discipline in wounding himself through negligently handling a rifle," and an alternative charge to this effect should be made, even if the accused is to be tried under section 18 for wilful maiming.

WITNESS:

Major D.D. Campbell, Officer i/c Surgery,  
Hamilton Military Hospital, R.C.A.M.C., C.A.,  
Hamilton, Ontario, having been called and  
duly sworn, states:

"D-650525, Pte. DUFRESNE, A., was admitted  
to Hamilton Military Hospital on 19th August  
1945, at 0400 hours, having been knocked  
down by a car. He was deeply unconscious.  
He was bleeding and leaking spinal fluid from  
the back of his throat. There were multiple  
contusions and abrasions of his body and  
extremities. His condition was considered  
hopeless. He was treated for shock but did  
not respond, nor did he regain consciousness.  
He died about 1240 hours on the 19th August  
1945."

D.D. Campbell, Major, RCAMC  
Surgical Consultant.  
Hamilton Military Hospital.

W.I. Dick, K.C.  
Barrister, Solicitor  
Notary Public

APP 'D'  
Crown Attorney  
and  
Clerk of the Peace

COUNTY OF HALTON

Milton, Ontario,  
September 5, 1945.

Lieutenant J.W. Gibson,  
No. 2DD General Employment Coy.  
Government Buildings, Exhibition Park,  
Toronto, Ontario.

Dear Lt. Gibson:    Re : D650525, D. A. G. A.  
                            Aubrey Dufresne.

I beg to inform you that the Crown  
will not be represented at your Military Invest-  
igation into the death of the above named.

Yours very truly

WID/B

W.I. Dick

Certified true copy:

Thos. Bouckley Esq.  
(T. Bouckley) Captain,  
President,  
Court of Inquiry.

Office of the Chief Coroner  
for the City of  
HAMILTON.  
Canada.

APPIC

August 29th, 1945

TO WHOM IT MAY CONCERN:

THIS IS TO CERTIFY THAT on August 19th, 1945, a  
Death was reported to me at the Military Hospital in Hamilton.

I proceeded as quickly as possible to the scene and  
viewed the Body, then in a bed on a Ward in that Hospital, which  
was later identified as Georges Andre Dufresne of No. 2 General  
Employment Coy., Toronto.

AND FURTHER THAT a Coroner's and Police Investigation  
is still in progress, which concerns an automobile accident in  
which the Deceased sustained injuries through which he later  
expired.

As a criminal charge has been laid against the driver  
of the automobile involved, no Coroner's Inquest will be held.

Signed: J. Heurner Mullin.

J. Heurner Mullin M.D., F.R.C.P. (Can)  
Chief Coroner for the City of  
Hamilton.

Certified True Copy.....  
*Thos Bouckley*  
(Thos Bouckley)  
President.  
Court of Inquiry.



APP "H"

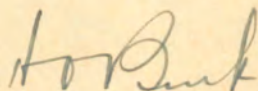
No.2, General Employment Coy.,  
Toronto, Ontario  
~~25th~~ 6th September 1945

D-650525 - Pte DUFRESNE, Georges Andre.  
Deceased 1230 Hrs 19th Aug 45

Rate of pay per diem.....\$1.50

(No other allowances)

Certified correct.



.....Capt., RCAPC.,  
(H.D. BURK) Paymaster  
No.2, General Employment Coy.

APP. G

28th August 1945

Hamilton Military Hospital,  
R.C.A.M.C. C.A.  
Gage Avenue N, Hamilton, Ont.

Capt. T. Bouckley,  
No. 2. General Employment Coy,  
Exhibition Barracks,  
Toronto, Ontario.

E-625525. Pte. DUFFHENSE, A. (deceased)

As the marginally named deceased was hospital-  
ized here for a period less than 24 hours (8 hours),  
prior to his decease, there will be no charges re his  
hospitalization.

Signed:- Jas. McKeown Lieut.  
for B.L. Guyatt, Lieut. Col., O.C.  
Hamilton Military Hospital  
R.C.A.M.C. C.A.

Certified True Copy .....  
*Thos. Bouckley* Capt.  
(Thos. Bouckley)  
President.  
Committee of Adjustment.

PERSONAL  
CASE RECORD  
CARNET  
MÉDICAL PERSONNEL

M.F.M. 296  
20M-4-43 (9581-376)  
H.Q. 1772-39-2023

### Instructions to Patients

1. This record is to be kept in the possession of the patient at all times. It is made to fit into the Soldier's Service and Pay Book (Militia Book M1). When carried, insert it into this book.

2. If **LOST**, report loss to the Medical Officer, who will issue a duplicate copy.

3. If **FOUND**, will the finder please turn it in to the nearest Army centre or mail it to—

Director General of Medical Services  
Canadian Army,  
Ottawa, Ontario.

**THIS IS YOUR PERSONAL RECORD. IT IS IMPORTANT  
NOT TO DAMAGE OR LOSE IT. DO NOT WRITE IN IT**

### Instructions aux Malades

1. Le malade doit toujours avoir ce carnet en sa possession. Il est fait pour s'adapter au livret individuel de service et de solde (livret de la milice M1). Lorsque vous le portez sur vous, insérez-le dans ce livret.

2. En cas de perte, signalez-la au médecin militaire qui vous délivrera un duplicata.

3. Toute personne qui trouvera ce carnet voudra bien le remettre au centre militaire le plus proche ou l'adresser par la poste au—

Directeur général du Service de Santé  
Armée canadienne  
Ottawa, Ontario.

**CECI EST VOTRE CARNET PERSONNEL ET IL EST  
IMPORTANT DE NE PAS L'ABIMER NI LE PERDRE.  
N'Y FAITES AUCUNE INSCRIPTION.**

(1)

### Notes to Medical Officer

1. This record will be commenced by the Medical Officer upon diagnosis and given to the patient after carefully explaining its use to him.

2. The patient must present this record to the Medical Officer at each visit.

3. The Medical Officer will enter the results of any examination and amount of treatment, notes on any significant reaction to treatment with the date and his signature added to each entry.

4. When the soldier is transferred he will report as soon as possible to the Medical Officer at his next post, presenting this record to the Medical Officer.

5. All entries are to be made in ink.

6. When treatment is completed this record is to be handed in to the Medical Officer.

### Notes pour le médecin militaire

1. Le médecin militaire commencera les inscriptions dans ce carnet dès le diagnostic et le remettra au malade après lui avoir expliqué comme il faut quelle en est l'utilité pour lui.

2. Le malade doit présenter ce carnet au médecin militaire à chaque visite.

3. Le médecin militaire consignera les résultats de tout examen et le traitement, ainsi que les notes sur toute réaction significative au traitement, y compris la date, et signera chacune de ces inscriptions.

4. En cas de mutation, le soldat se présentera aussitôt que possible devant le médecin militaire à son nouveau poste et lui présentera ce carnet.

5. Toutes les inscriptions doivent être faites à l'encre.

6. Une fois le traitement terminé, ce carnet doit être remis au médecin militaire.

78790-1

(2)

### MEDICAL HISTORY

 Regimental Number D-650525

 Rank Pvt.

 Name Dufresne, J. E.

 Age 23

 Date of Diagnosis 2 May 45

 Signature of  
Medical Officer

Thompson, Capt.

Unit or Hospital

4MM

(3)

### Laboratory Confirmation of Diagnosis

Test	Date	Result
Darkfield Examination		
Serologic Kahn Test	<u>2-5-45</u>	
Serologic W.R. Test		
Smear for Gram-negative Diplococcus	<u>2-5-45</u>	<u>Positive</u>
	<u>7-5-45</u>	<u>Positive</u>
	<u>18-5-45</u>	<u>(Prostate) NEG.</u>
Culture for Gram-negative Diplococcus		

(Enter result as Pos., Doubtful, Neg.)

(4)

## Laboratory Tests during Treatment Period

Smear		Culture	
Date	Result	Date	Result

Serologic Kahn Test		Serologic W.R. Test	
Date	Result	Date	Result

(5)

## OTHER LABORATORY TESTS

## Spinal Fluid Examination

Date Examined.....

Cells per mm<sup>3</sup>.....

Protein.....

Kahn or W.R. Reaction.....

Colloidal Test.....

## Other Tests

18-5-45 -  
 2-glass test -  
 I - pos. wks  
 II - pos. wks







**Record of Antiluetic Therapy**

(NOTE: Under Reaction enter a red letter "R" if any significant reaction)

Date	Drug	Dose	Reaction	Signature of M.O.

Describe reaction in detail on pp. 17-19

**Record of Antiluetic Therapy**

(NOTE: Under Reaction enter a red letter "R" if any significant reaction)

Date	Drug	Dose	Reaction	Signature of M.O.

Describe reaction in detail on pp. 17-19



(14)

**Record of Antiluetic Therapy**

(NOTE: Under Reaction enter a red letter "R" if any significant reaction)

Date	Drug	Dose	Reaction	Signature of M.O.

Describe reaction in detail on pp. 17-19

(15)

**Record of Antiluetic Therapy**

(NOTE: Under Reaction enter a red letter "R" if any significant reaction)

Date	Drug	Dose	Reaction	Signature of M.O.

Describe reaction in detail on pp. 17-19





**Note on Termination of Treatment**

(Summarize amount of treatment and dates given. State reason for termination of treatment)

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CANADIAN ARMY

PROCEEDINGS ON DISCHARGE

Regimental No. D-650525 Rank Pte

DECEASED

Surname DUFRESNE

Christian names Georges Andre

NOTE.—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Unit or Corps No. 2 GE Coy. Date of Enlistment (CA) 15 Nov 43

Date of Discharge 19 Aug 45 Total Service (CA) yrs. days

Place of Discharge Toronto Military District No. 2

1. DESCRIPTION AT DATE OF DISCHARGE

Age 21 years months

Descriptive marks:

Height 5 feet 6 inches

Scar on left knee.

Complexion

Eyes Brown

Hair Brown

Intended place of residence (Street and Number)

(P.O., City or Town, etc.) (Province)

(To be given as fully as practicable: i.e., mailing address)

2. The above-named is discharged in consequence of "DECEASED"

Authority for discharge

DECEASED

(N.B.—The cause of discharge must be worded in accordance with Canadian Army Routine Orders as may be published. If discharged by superior authority, the number and date of the letter to be quoted.)

No reference to Conduct is to be made on the discharge certificate.

AMO

3.

(a) Decorations and Gallantry Awards awarded during previous wars.

(b) Medals and Decorations earned during the present war.

(To be copied by the Commanding Officer on to the Discharge Certificate.)

NOTE:—If not at present entitled to any medals or decorations, leave space blank, do not show "NIL".

4.

**Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances, and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted in para. 6 and that I have received:—

My discharge certificate.

\*War Service Badge "General Service Class" No.....

\*(Strike out if not applicable).

(Place).....(Signature of Soldier)

(Date).....(Signature of Witness)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

5. I have impartially enquired into all matters concerning this discharge brought before me in accordance with Regulations, and the discharge is hereby confirmed.

(Place)..... (Signature).....

(Date)..... Commanding.....

6.

**Reservations referred to at Para. 4**

(To be signed by the soldier. When there are none, it is to be stated, and signed by the soldier.)

DECEASED

(Signature of Soldier)



35TH GROUP

DUFRESNE GEORGES ANDRE

N.P.A.M. Tr. Centre No. 4

Mil. Unit NRMA CLEAR. DEPOT 4

WILL NAME REQUIRED

Reg. No. D 650525

NRMA

MFM 2

Contents

PROCESSED

H.G. File No.

869-D-6247

Non-Effective By

38034

DECEASED

19/8/45  
No 174- 20/8/45

- 1 N.W.S. I (Med. Exam.)
- M.F.M. 227 (Med. Board)
- Case History Sheets
- Morn. Sick Report (M.F.B. 292)
- Conduct Sheets
- Declaration of C. of I.  
(Copy of Record From M.B. 68)

- 1 MFM 5
- 1 MFM 10

H

M

RETURN THESE DOCUMENTS TO WAR SERVICE RECORDS DEPT. OF VETERANS AFFAIRS

MICROFILMED  
FILM REF

X

Handwritten initials

9812



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Canada

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Ottawa, ON K1A 0N4

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DATE OCTOBRE 2012 \_\_\_\_\_