

DORE GERARD

REGIMENTAL No. 1 0004

WILL  
REQUIRED

GNR. 5 D.D.

UNIT OF ENLISTMENT

WSG  
COMPLETED

H.Q. FILE No. 405-D-16,914

UNIT AT DATE OF S.O.S.

REGIMENTAL DOCUMENTS

NON-EFFECTIVE BY

28902

NON-EFFECTIVE BY

COMBINED DECLARATION FORM OR ATTESTATION AND MEDICAL HISTORY (M.F.M. 1 & 1A) OR (M.F.M.2 & 2A)

DISCHARGE

DISCHARGE

SERVICE AND CASUALTY FORM (M.F.M.4 & 4A) (A.F.B 103)

DATE

DATE

PARTICULARS OF FAMILY (M.F.M.5)

REASON

REASON

FIELD CONDUCT SHEET (M.F.M.6) (A.F.B.122)

AUTHORITY

AUTHORITY

CERTIFICATE OF SERVICE (M.F.M. 8) COPY OF, OR DISCHARGE CERTIFICATE (M.F.M.7) COPY OF.

FORM OF WILL (M.F.M.10 OR M.F.M.10A)

DISCHARGE

DENTAL RECORD (M.F.B. 465)

DATE

DATE

MEDICAL REPORT OR CASE HISTORY SHEET (M.F.B. 313) or (P.&N.H.100)

REASON

REASON

MEDICAL BOARD PROCEEDINGS (M.F.B. 227)

AUTHORITY

AUTHORITY

TRANSFER CLOTHING STATEMENT (M.F.C. 800)

LAST PAY CERTIFICATE (M.F.D.930A)

PROCEEDINGS ON DISCHARGE (M.F.M. 23)

DESERTION

PROCEEDINGS OF COURT MARTIAL (M.F.B. 271)

DATE

DATE

DECLARATION OF COURT OF ENQUIRY (Copy of Record from M.B. 68)

AUTHORITY

CAUSE

PAY SHEETS

DESERTION

CARDS

DATE

SUNDRY

AUTHORITY

PROCESSED

MISSED  
FILM REF 13139-6

M

National Archives  
0.6.P.R.C. / C.D.G.P.O.  
05-78256 M  
W F

RETURN THIS TO WARRIOR DEPT. OF VETERANS AFFAIRS

X



# NOTICE

1. File should be retained no longer than absolutely necessary. If a file is frequently needed at short intervals, it is better to BF 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.

405-D-16914

RECORDS OFFICE OVERSEAS.  
CANADIAN MILITARY HEADQUARTERS.  
GRAVES REGISTRATION CARD.

VAL JALBERT, QUE., CAN.

NAME DORE, Gerard PLACE & DATE OF BIRTH 29 Aug 44  
RANK PTE REGTL NO. E.0584  
UNIT FUS MONT ROYAL NEXT OF KIN & ADDRESS FATHER:  
Isidore DORE - ROBERVAL, RUE FABRIQUE,  
CO. ROBERVAL, QUEBEC, CANADA.



PARTICULARS OF HOSPITALISATION

DATE OF ADMISSION \_\_\_\_\_ NAME & LOCATION OF HOSPITAL \_\_\_\_\_  
DIAGNOSIS \_\_\_\_\_

PARTICULARS OF DEATH.

DATE OF DEATH 23 JUL 44 PLACE OF DEATH \_\_\_\_\_  
HRS \_\_\_\_\_  
CAUSE OF DEATH KILLED

PARTICULARS OF BURIAL.

Bretteville-sur-Laize  
Cdn. Cemetery, France

DATE OF BURIAL Reburied CEMETERY Sh 7F/3 MR 084530 1/50000  
PLOT NO 26 ROW G GRAVE 11  
DEATH CERT NO. \_\_\_\_\_  
DATE OF REGN OF DEATH CERT \_\_\_\_\_  
RELIGION R.C.

DATE 21 Sep 45  
Ar. Bluteau Lt.  
(MBluteau) Capt.  
For COLONEL  
O i/c RECORDS,  
CANADIAN MILITARY HEADQUARTERS

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



le 15 septembre

5.

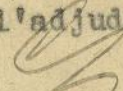
Monsieur,

Des renseignements maintenant reçus d'outre-mer indiquent que les restes de votre fils, le soldat Gérard DORE, matricule E-0584, ont maintenant été soigneusement exhumés de l'endroit original d'inhumation et respectueusement inhumés de nouveau dans la tombe 11, rangée G, lot XVI, du cimetière militaire de Bretteville-sur-Laize, à Bretteville-sur-Laize, en France. (Carte marquée ci-jointe). Ce cimetière est un lieu de sépulture reconnu et l'entretien en sera perpétuel.

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

Veuillez agréer, monsieur, mes sincères salutations.

M. Isidore Doré,  
Rue Fabrique,  
Roberval,  
Cté de Roberval, Qué.

Pour l'adjutant général,  
  
(C.L. Laurin) colonel,  
directeur des archives.



CANADA

QUOTE NO. H.Q. 405-D-16914  
D.R. 2 (D)

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

OTTAWA, CANADA,

14th September, 1945.

F.T. please



Isadore Dore, Esq.,  
Rue Fabrique,  
Roberval,  
Roberval Co., P.Q.

Dear Sir:

Information has just been received from overseas that the remains of your son, E.0584 Private Gerard Dore, have now been carefully exhumed from the original place of interment and reverently reburied in grave 11, row G, plot XVI, Bretteville-sur-Laize Military Cemetery, Bretteville-sur-Laize, France. Marked map is enclosed. This is a recognized military burial ground and will receive care and maintenance in perpetuity.

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

Yours faithfully,

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

40

1H

405-D-16914

CANADIAN MILITARY HEADQUARTERS



CANADA

ADDITION ENTERED

RECORDS OFFICE,

Director of Records  
A. G. Branch

GOVERNMENT BUILDING,

BROMYARD AVENUE,

ACTON, LONDON, W.3

SEP 11 1945

Nat. Defence <sup>4</sup> Sept. 45.  
Ottawa, - Canada

The Director of Records,  
Department of National Defence,  
Ottawa Ontario,  
CANADA.



15

E. 0584 Pte. DORE G., deceased.

Further to this office letter under the above file number dated 11 Aug. 45, a reply has now been received from 1st Ech. H.Q. 21 A Gp enclosing a burial form from DDGRE HQ Brit Army.

2. A copy of this Burial form is enclosed herewith, from which you will see that this soldier has apparently been reburied in Bretteville Sur Laize Cemetery.

3. It would be appreciated if you would amend the burial particulars now in your possession.

*M. Bluteau Capt.*

(M. BLUTEAU) Captain.  
for COLONEL,  
O i/c Records,  
CANADIAN MILITARY HEADQUARTERS.

Enc.

39

SUBJECT:- Enquiries - Graves Locations.

21 AGP/16716/1/GR.

Date: 25 Aug 45

To:- G.O. i/c,  
Cdn Section HQ,  
1 Echelon, 21 Army Group.



Ref your enquiry dated ... 21 Aug. 45... Ref .. 518/Burials/1/3.  
(AG. 2)  
The grave of ... E-0584 Pte DORE, G. FUS. M.R., K/A 23 Jul 44.....  
is located at ... BRETTEVILLE SUR LAIZE CDN CEMETERY FRANCE.. SHEET 7F/3....  
M.R. 084530 1/50,000 .. PLOT "XVI" ROW "G" GRAVE "11".....

This information is supplied to you on the distinct understanding that the location is not communicated to anyone in the U.K., although there is no objection to you informing friends, or relatives, that you have visited the grave.

In due course, War Office (A.G.13) will advise next-of-kin of the location of the grave, supplying also two photographs of the grave.

Graves R & E.,  
Rear HQ 21 Army Group,  
B. L. A.

*S. Hunt*  
S/Capt.,  
for. Col.,  
D.D.G.R.E.

38





MAILED

NOV 19 1900



RECEIVED  
NOV 19 1900

Handwritten text, mostly illegible due to fading and bleed-through.

RECEIVED

Handwritten signature or initials in blue ink.

Handwritten text: 1301, 27/8

ADDITION  
ENTERED

CANADIAN MILITARY HEADQUARTERS,

A. G. Branch  
AUG 23 1945  
Nat. Defence Bldg.  
Ottawa, - Canada

RECORDS OFFICE,  
Government Building,  
Bromyard Avenue,  
ACTON W. 3.

11 Aug. 45.

The Director of Records,  
Department of National Defence,  
Ottawa Ontario,  
CANADA.



E.0584 Pte DORE G., deceased.

With reference to your H.Q. 405-D-16914 D.R.2 (D) dated 31 Jul. 45, a copy of this has been forwarded to 1st Echelon H.Q. 21 Army Gp for verification of the Map Reference particulars of the burial of this soldier.

2. So soon as a reply is received this will be forwarded to you.

*AR Dillon* Lieut  
(L.S. APPLEFORD) Major.  
for COLONEL,  
O i/c Records,  
CANADIAN MILITARY HEADQUARTERS.

BOMBER MAIL.

*Noted  
20*

*37*

OTTAWA, Ont.

3rd Aug 5

Mr. Isidore Dore,  
P.O. Box 123,  
ROBERVAL,  
Que.

Re: - E-058A Pte. DORE, Gerard

Dear Mr. Dore:



With reference to your application for gratuity on behalf of your late son, under the War Service Grants Act, 1944,

Information received from the Chief-Treasury Officer, Dependents' Allowance and Assigned Pay Branch and the Canadian Pension Committee reveals you were not wholly dependent on the assignment of pay your late son had made in your behalf.

The Act provides that the gratuity is to be paid to a person who was wholly or partially dependent on the member on whose behalf the gratuity is claimed. For this reason your application has been referred to the Dependents' Allowance Board for investigation to ascertain whether or not you may be classed as a dependent within the Act.

If no applicant is found to be a dependent of the soldier then the gratuity shall form part of, and be comprised in the soldier's Service Estate to be distributed in accordance with his Will or, if there is no Will, then in accordance with the law applicable.

As certain procedure and formalities have to be observed to meet the regulations in such cases, some time will elapse before settlement can be made. You may rest assured, however, that your claim is receiving every attention.

Yours truly,

*K. Rice Lt*

for (A.R. Mortimore) Brigadier,  
Paymaster-General.

DEPARTMENT OF NATIONAL DEFENCE  
A R M Y

Ottawa, Ontario. 3rd Aug 45

Serial No: D-13246  
File No. : 405-D-16914  
(WSG/G)

Attention: B-44



The Chairman,  
Dependents' Allowance Board,  
Experimental Farm,  
Ottawa, Ontario.

Reg. Number E-0584  
Name of deceased Pte. DORE, Gerard  
Applicant's Name Mr. Isidore Dore,  
Address P.O. Box 123,  
ROBERVAL,  
Que.  
Relationship to Deceased Father

1. The above named applicant for the War Service Gratuity who was in receipt of assigned pay of \$ monthly at the date of the serviceman's death/~~discharge~~ 23 Jul 1944, received neither a supplementary award of dependents' allowance subsequent to death nor a pension dating from the time of death.
2. Will, you therefore, please investigate to determine whether the applicant could be considered to be a dependent of the deceased within the spirit and intent of the War Service Grants Act, 1944, at the time of the member's death.
3. This case is that of a person who claims to be a dependent within Group "B" of the Directive issued by the Minister of Veterans' Affairs on the 16th December, 1944.
4. When the investigation has been completed and the question of dependency determined, may advice be forwarded to the War Service Gratuity Section of the Paymaster-General's Branch, please.

*K. R. Lt.*

for (A.R. Mortimore) Brigadier,  
Paymaster-General.

3rd August 1945.

Mr. J. A. Dion, Federal Member,  
Co. Lac St. Jean,  
Roberval, Que.



Re: #E.0584 DORE, G.

Dear Mr. Dion:

Your letter of July 7th, in reference to war service gratuity, payable on behalf of the above mentioned deceased soldier, is acknowledged.

The War Service Grants Act, 1944, and relative Regulations provide that in the case of a member who dies before payment of the gratuity is made in full, the gratuity, or the unpaid balance thereof, shall be paid to a dependent who was eligible to receive dependents' allowance, or to a dependent to whom pay was assigned by the member immediately prior to his death or discharge.

If there is no person qualified to receive payment of the gratuity as outlined above, then the amount payable shall form part of and be comprised in the member's Service Estate to be distributed in accordance with the member's Will, or if there is no Will, in accordance with the law applicable.

The application submitted by Mr. Dore is presently being investigated by the Dependents' Allowance Board and should dependency not be established, the gratuity will form part of the soldier's Service Estate as mentioned above.

Yours truly,

A handwritten signature in blue ink, appearing to read "Kerr" or "Kerr", written over the typed name "Mortimore".

for (A.R. Mortimore) Brigadier,  
Paymaster-General.

AW:

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER **E-0584** RANK **Private**

SERVICE UNIT

**Les Fusiliers  
Mont-Royal  
(CA)**

**DORE, Gerard**

DATE OF BIRTH **29-8-24**

DATE OF ENLISTMENT **7-4-43**

MARITAL STATUS **Single**

RELIGION **Roman Catholic**



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

**Father  
Rue Fabrique,  
Roberval, Roberval Co. P.Q.**

NAME  
ADDRESS  
D.A.B.

**Mr. Isadore Dore**

ADDRESS

ADDITIONAL PERSON  
TO BE NOTIFIED

ADDRESS

PARENTS NAME

ADDRESS  
( IF SOLDIER  
MARRIED OVERSEAS )

AUTHORITY CAS. SIG. NO. **8658**

**H.Q. 405-D-16914**

CASUALTY DETAILS **Killed in action**

DATE **23-7-44**

**FRANCE**

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

**NCL** YES/NO

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

YES/NO

DATE **30-8-44**

FORM NO. CAS. 6  
5M-4-44 (4184)  
Q. 1772-39-1989-1990

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 28 août 1947.



Monsieur,

Je vous envoie sous ce pli une photographie de la tombe et du monument commémoratif qui marque la sépulture de votre regretté fils, le soldat Gérard DORE, matricule E-0584, inhumé dans la fosse 11, rang G, lot 16, du cimetière militaire canadien de Bretteville-sur-Laize, à Bretteville-sur-Laize, en France.

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

Veillez agréer, Monsieur, mes respectueuses salutations.

Pour l'adjudant général,

Pièces jointes

A handwritten signature in dark ink, appearing to read 'H. M. Jackson'.

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

M. Isadore Doré,  
Rue Auger,  
Roberval,  
Cté de Roberval,  
P. Qué.

/BP



QUOTE NO. H.Q. 405-D-16914  
R. 4 (B).

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

OTTAWA, CANADA,

F.T.

27th August, 1947.



Mr. Isadore Dore,  
Rue Auger,  
Roberval,  
Roberval County, Quebec.

Dear Mr. Dore:

I am forwarding herewith a photograph of the grave and marker over the burial place of your late son, E0584 Private Gerard Dore, the location of which is grave 11, row G, plot 16, Bretteville-sur-Laize Canadian Military Cemetery, Bretteville-sur-Laize, France.

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

Yours faithfully,

Encl.

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

/ EMA 



VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. F-0584 Name Dore Gerard

Rank on Discharge Pte Date of Discharge \_\_\_\_\_

Authority for Discharge or Retirement Deceased

Served in:



Non-qualifying service

Canada from 7-4-43 to 30-4-44

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

United Kingdom from 1-5-44 to 6-7-44

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

Italy from \_\_\_\_\_ to \_\_\_\_\_

Northwest Europe from 8-7-44 to 123-7-44 Killed in Action

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

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

Eligible for award of:

1939 - 45 Star OK

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

France-Germany Star OK

Defence Medal NE

War Medal OK

Canadian Volunteer Service Medal OK

with clasp OK



Verified by J. Mcneard

N.R.D. Date JUL 4 1946

Carded JUL 9 1946

for french translation & return  
please.



CANADA

QUOTE NO. HQ. 405-D-16914  
(WSG-G) D.13246

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

OTTAWA, CANADA,  
3rd May, 1946.



Mrs. Marie Anne Doré,  
B. Postale 123,  
Roberval, P.Q.

Re: E.0584 DORE, Gerard

Dear Mrs. Doré:

Your letter of April 8th, addressed to the Director of Estates and in reference to war service gratuity has been referred to this department for reply.

The payment of gratuity you have received was paid on the basis of your son's service in Canada from the 7th April, 1943 to the 30th April, 1944, a period of 390 days and overseas from the 1st May to the date he was killed in action, the 23rd July, 1944, a further period of 84 days.

For service in Canada, gratuity is paid at the rate of \$7.50 for ever 30 days so served, and overseas at the rate of \$15.00 for every 30 days served. In addition, there is an overseas settlement of Pay and Allowances for every six months served overseas.

Yours truly,

(K. W. Rice) Capt.  
for PAYMASTER-GENERAL.





CANADA

QUOTE NO. H.Q. 405-D-16914 f.d. 138  
D.R. 2 (C)

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

OTTAWA, CANADA,



F.T.  
For translation, Please.

1st May, 1946.

Mrs. Marie A. Dore,  
P.O. Box 123,  
Roberval, Que.

E.0584, Private Gerard DORE

Dear Mrs. Dore:

The Director of Estates has referred to this office for attention that portion of your recent communication concerning a photograph of your late son's grave in France.

In reply, kindly note that arrangements have been made whereby all permanent graves overseas of deceased members of the Canadian Army are to be photographed and prints of the pictures will be forwarded to this office as soon as they are available for distribution to the next of kin. It should be pointed out, however, that owing to the number of graves to be covered over an extended area it will be some considerable time before this photographic work can be completed, but you may be assured that a picture of your son's grave will be forwarded to you as soon as it comes to hand from overseas.

Yours faithfully,

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

*mbh.*  
FBR/PIL



le 7 mai 1946.

Madame,

Au sujet du soldat Gérard Doré,  
matricule E-0584

Je suis chargé de répondre à votre lettre du 8 du mois dernier, adressée au Directeur des successions, relativement à la gratification de service de guerre.

La gratification que vous avez reçue s'établit d'après la durée du service de votre fils au Canada, du 7 avril 1943 au 30 avril 1944, soit une période de 390 jours et d'après la durée de son service outre-mer, du 1er mai au 23 juillet 1944, soit une période additionnelle de 84 jours.

La gratification pour le service au Canada est de \$7.50 pour chaque période de 30 jours, tandis qu'elle est de \$15.00 pour le service outre-mer. Il y a en plus un supplément de solde et d'allocations pour chaque six mois de service outre-mer.

Veillez agréer, madame, mes respectueuses salutations.

Pour le trésorier-payeur général,

(K. W. Rice), capitaine.

Mme Marie-Anne Doré,  
Case postale 123,  
Roberval, P.Q.



QUOTE NO. Q.G. 405-D-16,914

*Cat 23-4-46*

DEPARTMENT OF NATIONAL DEFENCE  
ARMY  
ESTATES BRANCH

OTTAWA, CANADA,

April 26th, 1946.



D. R. 2 (C),  
Records Office,  
O T T A W A .

DORE, Gérard, Pte., (Deceased)  
No. E-0584, Canadian Army

A portion of a letter received here from the mother of the marginally noted as translated from the French reads as follows:

" I read in the newspaper that the Department sent pictures of the graves of soldiers killed in action in France. I would like very much to receive a photo of my son's grave."

2. Will you reply direct to the mother who is Mrs. Marie Anne Doré, P.O. Box 123, ROBERVAL, P.Q., in French.

OG/TD

*for*  
*[Signature]*  
(L.M. Birth) Colonel,  
Director of Estates.

DIVISION DES SUCCESSIONS

26 avril 1946.



Madame Marie Anne Doré,  
B. Postale 123,  
ROBERVAL,  
P.Q.

DORE, Gérard, Soldat, (décédé)  
No. E-0584, Armée Canadienne

Chère Madame Doré,

Nous accusons réception de votre lettre du 8 avril et notons que vous avez reçu le montant de la Gratification de Service de Guerre de votre fils. La Gratification a été établie par le Payeur-Général et est basée sur le nombre de jours que votre fils a servi au Canada et outre-mer.

Votre demande d'une photographie de la tombe de votre fils a été soumise aux autorités concernées avec prière de communiquer directement avec vous.

Votre dévoué,

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

OG/TD

DEPARTEMENT DE LA DEFENSE NATIONALE

DIVISION DES SUCCESSIONS

OTTAWA, CANADA



Date... *8 avril* ..... 194*6*.

Reçu ce jour un chèque du Trésor pour la somme de

..... CENT VINGT ET UN-----<sup>34</sup> Dollars (.....121.34.....)  
100

en rapport avec la succession militaire du défunt mentionné ci-dessous.  
W.S. G.

DORE, Gérard, Soldat, (décédé)

E-0584, A. C.

*Mme Marie Anne Dore*

Signature

DIVISION DES SUCCESSIONS

29 mars 1946.



Madame Marie Anne Doré,  
P.O. Boite 123,  
ROBERVAL, P.Q.

DORE, Gérard, Soldat, (décédé)  
No. E-0584, Armée Canadienne

Chère Madame Doré,

La Gratification de Service de Guerredûe  
à votre fils a été fixée au montant indiqué à la formule  
ci-incluse.

Demande a été faite au Bureau du Trésor  
de vous faire parvenir un chèque payable à votre ordre  
pour le montant de la Gratification en votre qualité  
d'unique bénéficiaire au testament de votre fils. Sur  
réception du chèque vous voudrez bien signer et retour-  
ner à notre Division la quittance ci-incluse.

Votre dévoué,

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

OG/TD  
Pc.adj.(2)





Roberval 8 avril 1944



Departement de la Defense Nationale  
Division des Successions, Ottawa

Je vous salue que de l'argent envoié  
mais j'esperais recevoir une gratification plus  
elevation, vu que nous avions que ce garçon qui  
serait en âge de nous aider, quand on a un fils  
qui finis ses études et sur lequel on compte  
pour nous aider a vivre, c'est dur de le voir  
se faire tuer a seize ans et onze mois  
j'avais bien commence des démarches pour le  
faire sortir de l'armée mais je me croyais pas  
qu'on l'emmènerait si vite au feu, a cet âge, malgré  
qu'il était très courageux et qu'il voulait  
absolument aller defendre la patrie car il s'est  
enrolé a notre usage, pensant pouvoir nous aider  
pareille, mais il n'as pas eu de chance

J'ai vu sur le journal que vous envoyiez  
des photos des tombes des soldats mort en France  
je desirerais beaucoup en recevoir celle de mon  
fils Gerard Dore  
N<sup>o</sup> E-0584

Bien a vous  
Mme Marie Anne Dore

**DISTRIBUTION OF SERVICE ESTATES**

Estates Form "P. 4"

ARMY

HG

Name DORE Gerard No. E.0594  
 Surname Christian Names

Pte. C.A.O/S 23-7-44  
 Rank Unit Date of Death

	<u>AMOUNT</u>	<u>W.S.G.</u>	<u>121.54</u>
		L.P.C.....\$	<u>46.38</u>
Date..... <u>21-3-46</u>		Other Credits.....	<u>23.54</u>
		<u>Total.....</u>	<u>191.26</u>
		<u>Prev. Dist.</u>	<u>69.92</u>
		<u>This Dist.</u>	<u>121.34</u>



SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Marie-Anne Dore, P.O. Box 123, ROBERVAL, Que.  (Sole beneficiary under will)	\$121.34

DO NOT REMOVE FROM FILE  
 P4 TO TREAS.  
 APR 1 1946

W.S.G.

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	\$121.34
CLASSIFIED BY			EXAMINED BY		
<i>P.</i>			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Colonel  
 Director of Estates

AUDITED FOR PAYMENT



DISTRIBUTION

SERVICE  
NAVY  
ARMY ✓  
AIR FORCE  
C.E.F.

NAME Dore Gerard

NO K 0584 RANK PTE

REGT: C.A. 9/5 DATE OF DEATH 23-7-44

All Mother :-  
Mrs. Marie-Anne Dore  
P.O. Box 123.

W.S.G. 121.34  
L.P.C. 46.38  
OTHER CREDITS. 23.54

PAY TO:  
Koberwal, Dore.

TOTAL 191.26  
Prev Dist 69.92  
This Dist 121.34  
W.S.G. *W.S.G.*

(Sole beneficiary under will)

Est 7-3-46

File No 405-D-16914

REBURIAL

NO E 0584

RANK PTE



NAME DORE G

NAME OF CEMETERY Bretteville-sur-Laize Canadian Military Cemetery

LOCATION OF CEMETERY Bretteville-sur-Laize, France.

GRAVE LOCATION Grave 11 Row G Plot 16

AUTHORITY 54-27-88-2 Vol. 20

Reburial list.

Noted  
D.R. 2(c)

# COMPUTATION OF WAR SERVICE GRATUITY

MEMBER'S NAME GERARD DORE  
(Christian Names) (Surname)

PAYEE'S NAME Estates  
(Christian Names) (Surname)

ADDRESS .....

DATE OF TERMINATION OF OVERSEAS SERVICE 23-7-44

Register No. D-13246

File No. 405-D-16,914

Date 19-2-46

Service No. E0584

Final Rank Pte

Date of Discharge 23-7-44



	AMOUNT	
	\$	c
<b>A. TOTAL QUALIFYING SERVICE</b> No. of day <u>474</u> / <u>30</u> = <u>15</u> Periods @ \$7.50	112	50
<b>B. QUALIFYING OVERSEAS SERVICE</b> No. of days <u>84</u> less <u>24</u> Ineligible days, equal <u>60</u> Days @ 25c. per day	15	00
<b>C. SUPPLEMENT FOR OVERSEAS SERVICE</b>	127	50
Daily Rate of Pay \$ <u>1.50</u>		
Subsistence Allowance \$ <u>1.25</u>		
Additional Pay \$ <u>✓</u>		
Dependents' Allowance 1/30 \$ <u>✓</u>		
TOTAL \$ <u>2.75</u> × 7 = \$ <u>19.25</u>		
No. of Days <u>84</u> / <u>183</u> × \$ <u>19.25</u>	8	84
<b>D. WAR SERVICE GRATUITY</b> Computed By <u>Gates</u>	136	34
<b>E. DEDUCTIONS</b>		
Overpayment of (1) Pay & Allowance \$ .....		
(2) D.A. & A.P. \$ <u>15.00</u>	15	00
Other Deductions \$ .....		
Entered By <u>JAB</u>		
<b>F. AMOUNT PAYABLE</b> (This amount is payable in ..... monthly instalments of \$ ..... each)	121	34

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

\$ ..... × 30 = \$ .....

REMARKS

DEPARTMENT OF NATIONAL DEFENCE  
NAVY ===== ARMY ===== AIR FORCE  
STATEMENT OF WAR SERVICE GRATUITY

104504 2  
10479 ARMY

DECEASED MEMBER'S NAME

Gerard  
(CHRISTIAN NAMES)

DORE  
(SURNAME)



REGISTER NO. D-13246  
FILE NO. 405-D-16914  
DATE 19-2-46  
SERVICE NO. # E-0584  
FINAL RANK OR RATING Pte.  
DATE OF DISCHARGE 23-7-44

PAYEE Director of Estates  
ADDRESS

DATE OF TERMINATION OF OVERSEAS SERVICE 23-7-44

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 474 EQUAL TO 15 COMPLETE PERIODS AT \$7.50

\$ 112.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 84 LESS 24 INELIGIBLE DAYS, EQUAL TO 60 DAYS @ 25c. PER DAY  
SEE PAR. 2 OVERLEAF FOR EXPLANATION

15.00

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

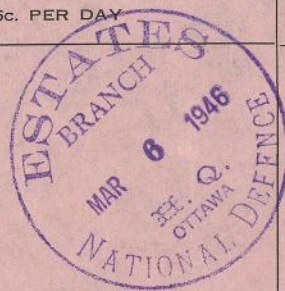
PAY \$ 1.50  
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE \$ 1.25  
ADDITIONAL PAY \$

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ 2.75 X 7 = \$ 19.25  
NO. OF DAYS 84 X \$ 19.25

127.50

8.84



D. WAR SERVICE GRATUITY

136.34

E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES \$  
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$ 15.00  
OTHER DEDUCTIONS \$

15.00

F. TOTAL AMOUNT PAYABLE

121.34

G. YOUR PORTION OF GRATUITY IS--

100%

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ \_\_\_\_\_ OF \$ = \$  
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

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

PREPARED BY KRM  
CHECKED BY [Signature]

TREASURY  
CHECKED BY [Signature]  
DATE 25/2/46

SERVICE REPRESENTATIVE [Signature]

le 6 février 1946.



Monsieur,


Au sujet du soldat G. Doré,  
matricule E.0584.

Relativement à votre demande de gratification de service de guerre à l'égard de feu votre fils, nous transférons ladite gratification au directeur des successions, pour qu'il en fasse le partage, conformément à votre demande.

Comme certaines formalités sont nécessaires pour procéder au règlement de cette façon, il s'écoulera quelque temps avant qu'on donne suite à votre réclamation. Soyez assuré cependant que rien n'est négligé à ce sujet, afin que le partage soit effectué le plus tôt possible.

Veillez agréer, monsieur, mes sincères salutations.

Pour le trésorier-payeur général,

  
(K.W. Rice), capitaine.

M. Isidore Doré,  
Case postale 123,  
Roberval, P.Q.



CANADA

FRENCH TRANSLATION

QUOTE NO. D-13246  
405-D-16914  
(WSG/G)

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

OTTAWA, CANADA,

30th Jan 46



Mr. Isidore Dore,  
P. O. Box 123,  
Roberval, P. Q.

Re: - E-0584 Pte. DORE, G.

Dear Mr. Dore:

With reference to your application for War Service  
Gratuity on behalf of the m/n late soldier, in compliance with  
your request, it is now being referred to the Director of  
Estates for distribution.

As certain procedure and formalities are necessary in  
order to make settlement in this manner, some time will elapse  
before this claim can be brought to a finality. You are assured,  
however, that it is being given every consideration to enable  
distribution to be made at the earliest possible date.

Yours truly,

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







CANADA

# Dependents' Allowance Board

## Department of National Defence

Your file No.  
H.Q. 405-D1614  
Serial No. D-13246

Ottawa, Canada

January 25th, 1946.

W.S.G. 23



Paymaster-General,  
War Service Gratuity Branch,  
No. 8 Temporary Building,  
O T T A W A.

Re: E-0584 - DORE, G.

1. Reference your memorandum of October 2nd, 1945.
2. As the applicant for War Service Gratuity Miss Rita Doré has not replied to inquiries as to dependency sent by this Board over six weeks ago, it is suggested that action might now be taken to make War Service Gratuity payable to the service estate of the marginally-named, vide P.C. 2239 if there are no other applicants.

DEPENDENTS' ALLOWANCE BOARD

B44/FB

*R. O. G. Bennett*  
For R.O.G. Bennett - Chairman

le 10 janvier 1946.



Monsieur le député,

On a transmis à notre division, pour que nous y répondions, votre lettre du 17 novembre adressée au bureau des allocations familiales militaires, au sujet de la gratification de service de guerre payable à l'égard de feu le soldat Gérard Doré, matricule E-0584.

Lorsque le soldat Doré est mort, sa soeur, Mlle Rita Doré, recevait une délégation de solde et, en vertu de la Loi de 1944 sur les indemnités de service de guerre, il est nécessaire qu'on procède à une enquête en vue de déterminer si elle comptait sur cette délégation de solde pour son entretien, aux termes de la Loi. Le bureau des allocations familiales militaires fait actuellement cette enquête.

Si l'on découvre que Mlle Doré n'est pas une personne à charge, la gratification sera alors comprise dans la succession militaire de son frère et versée à sa mère qui, dites-vous, est désignée comme la seule bénéficiaire dans le testament.

Aucune autre formule n'est requise et, dès que le bureau aura terminé son enquête, nous vous en aviserons.

Veillez agréer, monsieur le député, mes sincères salutations.

Pour le trésorier-payeur général,

(K.W. Rice), capitaine.

M. J.-Alfred Dion, député,  
Chambre des Communes,  
Ottawa, Ontario.



QUOTE NO. HQ. 405-D-16914  
(WSG-C)

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

OTTAWA, CANADA,  
27th December, 1945.

Mr. J. Alfred Dion, M.P.  
House of Commons,  
Ottawa, Ontario.



Re: E.0584 DORE, Gerard

Dear Mr. Dion:

Your letter of November 17th, addressed to the Dependents' Allowance Board and in reference to the war service gratuity payable on behalf of the above-mentioned deceased soldier has been referred to this department for reply.

At the date of the above soldier's death, his sister Miss Rita Dore was receiving assigned pay and under the War Service Grants Act, 1944, it is necessary that an investigation be made to see whether or not she was dependent upon this assigned pay within the meaning of the Act. This investigation is presently being made by the Dependents' Allowance Board.

Should it be found that Miss Dore is not a dependent, the gratuity will then be included in her brother's Service Estate and paid to his mother whom you state was named sole beneficiary in the Will.

No further forms are required and as soon as the Board complete their investigation we will advise you further.

Yours truly,

(K. W. Rice) Capt.  
for Paymaster-General.





DEPARTMENT OF NATIONAL DEFENCE  
ARMY

In reply quote No.....E-0584.....

December 3rd, 1945.

Paymaster-General,  
War Service Gratuity Branch,  
No. 8 Temporary Building,  
Ottawa.




Re- E-0584 - DORE, G.

We are enclosing a letter received today from  
J. A. Dion Esq. M. P. and have advised that you will reply direct.

DEPENDENTS' ALLOWANCE BOARD

B44/FB

  
For R.O.G. Bennett - Chairman



Chambre des Communes  
Canada

Ottawa, 17 Novembre 1945.

Chairman,  
DEPENDENTS' ALLOWANCE BOARD,  
Ottawa, Ontario.

NOV 19



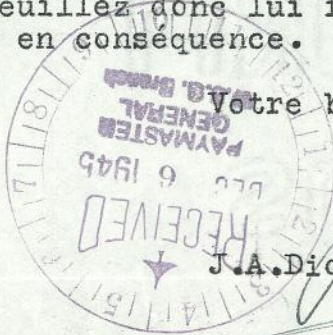
Re: G. DORE, E-0584.

Cher Monsieur,

Dans cette affaire, je suis averti que le soldat Doré décédé avait un testament en faveur de sa mère Madame Isidore Doré, née Marie-Anne Leboeuf. Dans ce cas, je crois que la gratuité devrait être payée à Madame Isidore Doré.

Veuillez donc lui faire parvenir les formules en conséquence.

Votre bien dévoué



J.A. Dion, M.P.

JAD: FH





L  
400 D-16,914.

W. S. G.

(Ottawa)  
(17-11-45)



TRANSLATION  
(Dec.7-1945)

Re- G. DORE, E/0584.

*D.13246*

Dear Sir:

I am informed that the late Private Doré left a will naming his mother, Mrs. Isidore Doré, née Marie-Anne Leboeuf, as his beneficiary.

Under the circumstances, I think that the war gratuity ought to be paid to Mrs. Isidore Doré.

I would ask you to send her the necessary forms in that connection, please.

Yours faithfully,

(SGD) J. Alfred Dion, M.P.

*Locate*

Chairman,  
Dependents' Allowance Board,  
Ottawa.



CHJ

*2003 11/10 / 45*

DEPARTMENT OF NATIONAL DEFENCE  
ARMY

OTTAWA, Ont. 10th Oct 1945

Miss Rita Dore,  
Rue Anger,  
Roberval Co., P.Q.Re: - E-0584 DORE, G.

Depuis ~~Miss Dore~~ suite à votre demande de gratification, en vertu de la Loi des Indemnités de Service de Guerre, 1944, au sujet de feu votre ~~frere~~ frere.

L'Officier-Trésorier-en-chef, division des Allocations familiales et délégations de solde, ainsi que le Comité canadien des Pensions; nous signalent que vous ne comptiez pas totalement sur la délégation de solde que feu votre frere fit en votre faveur.

La Loi stipule que la gratification doit être versée à une personne totalement ou partiellement à charge de ce membre des Forces armées au sujet duquel la réclamation de gratification est faite. Par conséquent, votre demande a été transmise au Bureau des Allocations familiales, où une enquête sera faite dans le but de vérifier si vous devez être considéré comme ayant droit, tel que l'exige la teneur de cette loi.

S'il est déterminé qu'aucun candidat ne peut être considéré comme ayant droit, la gratuité fera alors partie de la succession militaire du soldat et sera distribuée selon les clauses de son testament ou, le cas échéant, selon la loi en vigueur.

Comme il doit intervenir certaine procédure et formalités afin d'adhérer strictement aux règlements de cette loi, il devra s'écouler un intervalle de temps avant de compléter cette affaire. Ayez toutefois l'assurance que votre réclamation reçoit notre entière collaboration.

Bien à vous,

*Krup*  
pour, (A.R. Mortimore) Brigadier,  
Trésorier-payeur-général.



DEPARTMENT OF NATIONAL DEFENCE  
A R M Y

Ottawa, Ontario. 2nd Oct 45

Serial No: D-13246  
File No. : 405-D-16914  
(WSG/G)

Attention: B-44

The Chairman,  
Dependents' Allowance Board,  
Experimental Farm,  
Ottawa, Ontario.



Reg. Number E-0584  
Name of deceased DORE, G.  
Applicant's Name Miss Rita Doré,  
Address Rue Anger  
Roberval Co., P. Q.  
Relationship to Deceased  
Sister

1. The above named applicant for the War Service Gratuity who was in receipt of assigned pay of \$ 15.00 monthly at the date of the serviceman's death/discharge 1944, received neither a supplementary award of dependents' allowance subsequent to death nor a pension dating from the time of death.
2. Will, you therefore, please investigate to determine whether the applicant could be considered to be a dependent of the deceased within the spirit and intent of the War Service Grants Act, 1944, at the time of the member's death.
3. This case is that of a person who claims to be a dependent within Group "B" of the Directive issued by the Minister of Veterans' Affairs on the 16th December, 1944.
4. When the investigation has been completed and the question of dependency determined, may advice be forwarded to the War Service Gratuity Section of the Paymaster-General's Branch, please.

*K. R. Mortimore Lt.*

for (A.R. Mortimore) Brigadier,  
Paymaster-General.



# Dependents' Allowance Board

No. E-0584

## Department of National Defence

Serial No. D-13246  
Your file No.  
H.Q.405-D-16914  
(W.S.G./G.)

WSG 29

Ottawa, Canada

September 25th, 1945.



Paymaster-General,  
War Service Gratuities Branch,  
Room 1500, New Army Building,  
O T T A W A.

Re: E-0584 - Pte. DORE, Gerard

1. Referring to your memorandum of August 3rd, 1945 the applicant **Mr. Isidore Dore** has requested that War Service Gratuity be paid to the Service Estate of the marginally noted, vide P.C. 2239.

DEPENDENTS' ALLOWANCE BOARD

  
For R. O. G. Bennett - Chairman

B44/FB





le 3 août

5

Madame,

Je vous accuse réception de votre lettre du 7 juillet dans laquelle vous sollicitez de plus amples renseignements au sujet de la mort de votre fils, le soldat Gérard Doré, matricule E-0584.

Je regrette de vous dire que les seuls renseignements reçus par notre Bureau signalent que votre fils a été tué au combat dans le théâtre de guerre de l'Europe occidentale, le 23 juillet 1944.

Notre bureau ne reçoit pas d'autres détails sur les circonstances qui entourent la mort d'un officier ou soldat. A cet égard, lorsqu'un membre de l'Armée canadienne donne sa vie outre-mer au service de sa patrie, une lettre contenant tous les détails connus est habituellement adressée au plus proche parent par le commandant de l'unité en campagne ou en son nom. Ladite lettre a été envoyée directement d'outre-mer à M. Isidore Doré le 27 août 1944. M. Doré doit avoir reçu cette lettre depuis quelque temps déjà. Toutefois, s'il ne l'a pas encore reçue, nous vous saurions gré de bien vouloir nous le signaler. Dès la réception de votre lettre, nous demanderons, par la poste aérienne, au quartier général militaire canadien en Angleterre d'envoyer à M. Doré une copie de ladite lettre, si possible.

Le rapport reçu d'outre-mer au sujet de l'inhumation du soldat Doré était incomplet et nous avons de nouveau soumis la question aux autorités d'outre-mer, pour qu'elles mettent les choses au point. Vous pouvez être assurée que, dès que nous aurons reçu des détails complets, nous vous en aviserons.

Mme Isidore Doré,  
Case postale 123,

Roberval, P.Q.

(verso)

36

Permettez-moi de vous offrir mes  
vives et sincères condoléances pour la perte  
irréparable que vous avez subie.

Veillez agréer, madame, mes  
respectueuses salutations.

Pour l'adjudant général,

Le directeur des Archives,



(C.L. Laurin), colonel.



**10.T.**  
FOR TRANSLATION PLEASE

1 August, 1945.

Mrs. Isidore Dore,  
Box 123,  
Roberval, Quebec.



Dear Mrs. Dore:

Receipt is acknowledged of your letter of the 7th July in which you request further information concerning the regretted death of your son, E.0584 Private Gerard Dore.

I regret that the only information received in this Office is that your son was killed in action in the Western European Theatre of War on the 23rd day of July, 1944.

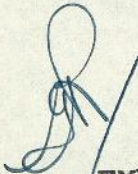
No further particulars are received in this Office concerning the actual circumstances surrounding the death of an officer or soldier. In this connection, it is the custom, when a member of the Canadian Army gives his life in the Service of his Country Overseas, for a letter to be written, by or for the Officer Commanding the Unit in the Field, direct to the next-of-kin giving all available details. Such a letter was despatched direct to Mrs. Isadore Dore from Overseas on the 27th day of August, 1944. Mr. Dore should have received this letter some time ago. However, if he has not received it to date, it would be appreciated if you would advise this Office. On receipt of your letter, ~~XXXXXX~~ Canadian Military Headquarters, England, will be requested by bomber mail to forward ~~XXXXXXXXXX~~ Mr. Dore a copy of the letter if at all possible.

The burial return received from Overseas in respect of Private Dore was incomplete and the matter has been referred back to the Overseas Authorities for clarification. Please be assured that as soon as complete details are received, you will be immediately notified.

In closing, I wish to express to you my sincere and heart-felt sympathy for the irreparable loss you have suffered.

Yours truly,

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

  
EMD



35'



H.Q. 405-D-16914  
In reply quote No. D.R. 2 (D)

DEPARTMENT OF NATIONAL DEFENCE  
ARMY  
INTER-OFFICE CORRESPONDENCE

31 Jul 45.

D.R. 2 (B)



E.0584, Private Gerard DORE

The copy letter at folio 31 from the mother of the above named deceased is passed, please, for your attention insofar as circumstances of death are concerned. In your reply, would you kindly inform Mrs. Dore that burial information received from Canadian Military Headquarters in England in respect of Private Dore was incomplete and the matter has been referred back to them for clarification. Immediately upon receipt of their reply the location of the grave will be forwarded to his next of kin.

(1)

*J. B. Radine*

Graves Registration.

PIL/3632/FBR

*Unit letter despatched to father  
from overseas 27 Aug 1944*

BOMBER MAIL

OTTAWA, 31 Jul

5.

Officer i/c Records,  
Canadian Military Headquarters,  
Bromyard Avenue,  
Acton, London W.3, ENGLAND.



E.0584, Private Gerard DORE

Army Form B.2090A gives the place of the marginally named late soldier's burial as sheet 7F/1 M.R. 044015, near Barres.

2. As this map reference would appear to be incorrect may it be checked with your records and verification forwarded to this office as soon as possible, please, in order that reply may be made to an enquiry which has been received from the next of kin.

*P. B. Loring*  
for C.L. Laurin, Colonel,  
Director of Records,  
for Adjutant-General.

FBR/PIL

33

405-D-16,914

QUOTE No. H.Q. 405-D-16,914 FD34



DEPARTMENT OF NATIONAL DEFENCE  
ARMY  
ESTATES BRANCH  
OTTAWA, CANADA,

July 18, 1945.

Director of Records,  
Temporary Building No.8  
O T T A W A, Ont.

Director of Records  
A. G. Branch  
JUL 21 1945  
Nat. Defence  
Ottawa, - Can.



DORE, Gerard Pte.(Deceased)  
No. E-0584, Canadian Army

1. We are enclosing herewith copy of a letter received here from the mother of the above mentioned Deceased.
2. Will you please communicate direct with Mrs. Dore concerning the information requested.

OG/YC

*Opalmond*  
for ( L.M.FIRTH ) Colonel  
Director of Estates.

32



DIVISION DES SUCCESSIONS.

18 juillet, 1945.

Madame Isidore Doré,  
Boite Postale 123,  
ROBERVAL,  
Cté. Roberval,  
P.Q.

DORE, Gérard Sdt.(Décédé)  
No. E-0584, Armée Canadienne



Chère Madame Doré,

Nous accusons réception de votre lettre du 7 juillet mais comme les renseignements que vous désirez obtenir ne relèvent pas de notre Division il nous est malheureusement impossible de vous les fournir. Il nous fait plaisir cependant de communiquer le contenu de votre lettre au Directeur des Archives, avec prière de vous répondre directement.

Votre tout dévoué

OG/YC

Major  
Le Directeur des Successions.

TRANSLATION . COPY  
 RB/AM  
 25-7-45

Roberval, July 7, 1945.

Department of National Defence,  
 Estates Branch,  
 OTTAWA.

RE: Pte. Doré, Gérard (Deceased)



Sir:

I wish to thank you sincerely for the kind attention granted to my applications in behalf of my son Gérard. I return to you this very day, the two forms indicating the reception of the belongings received to date.

25 || However, there are still certain questions which I would like to clear out and it seems that nobody else but you could inform me to that effect. Would it be possible to know where my son has been buried? Are there any ways of finding the grave, through some particular indication, should I one day visit the place of his burial? Is his name on his tombstone? Was a religious service held on the battle-field?

2B || The few informations we have been able to secure are not sufficient; we were told that he died at Verrière. Is Verrière an important locality or an ordinary farm in Normandy? He was attached to "Les Fusiliers Mont-Royal"; do you think that, among his friends who have been repatriated, that I could secure more precise information and if so, will you be kind enough to give me an address where I could obtain the information I wish, his Commanding Officer, his padre or some friend.

I would like you to understand me, I do not wish to secure what is impossible, but I would like to know what I am in the right of knowing and besides, now that ~~he~~ deceased, I wonder why I would not know everything.

Therefore, I rely on your kind attention and I thank you in advance.

Yours truly,

ORIGINAL Mrs. Isidore Doré,  
 Box 123,  
 ROBERVAL,  
 County of Roberval, P.Q.



Roberval, 7 juillet, 1945.

Département de la Défense Nationale  
Division des Successions,  
OTTAWA.



Monsieur le Directeur

re: Doré, Gérard Sdt.(Décédé)

Je tiens d'abord à vous remercier sincèrement pour la bonne attention accordée à mes demandes en faveur de mon fils Gérard. Je vous retourne aujourd'hui même les deux formules indiquant la réception des effets reçus à date.

Cependant, il est encore certaines questions que je voudrais éclaircir et il me semble que nul mieux que vous saurait me renseigner... Est-il possible de savoir où est enterré le corps de mon fils? Y a-t-il moyen de reconnaître l'endroit par un signe quelconque si, par exemple, un jour je veux visiter cet endroit? Son nom est-il inscrit sur sa tombe. Un service religieux a-t-il été chanté, là-bas sur le champ de bataille.

Les petits détails qu'on est venu à bout d'obtenir ne nous suffisent pas; on nous a dit qu'il était tombé à Verrière. Verrière est-il un endroit important ou une simple ferme de Normandie..... Il était avec les Fusilliers Mont-Royal; pensez-vous que, parmi ses compagnons revenus au pays, je pourrais me renseigner avec plus de précision et si oui, auriez-vous l'obligeance de me donner une adresse où je pourrais obtenir ce que je désire, soit son commandant, son aumonier, ou un ami quelconque.

Je voudrais que vous me compreniez, je ne veux pas ce qui est impossible, mais je voudrais savoir ce que j'ai le droit de savoir et d'ailleurs, maintenant qu'il est décédé, je me demande pourquoi on ne me dirait pas tout.

Donc, je compte sur votre bonne attention, et je vous remercie à l'avance.

Votre dévoué

Madame Isidore Doré,  
Boite Postale 123,  
ROBERVAL,  
Cté. Roberval, P.Q.

YC



TRANSLATION

H/D

11-7-45

*W.S.G.-G'*

W.S.G.

Roberval, 7 Jul 45



Mr. A.R. Mortimore, Brig.,  
Paymaster General,  
Dept. of National Defence,  
Ottawa, Canada.

RE: File D-13246

Dear Sir,

Mister I. Dore, of Roberval,  
whose son died at the front, has asked me if  
the army will grant gratuities to his family,  
on account of his death.

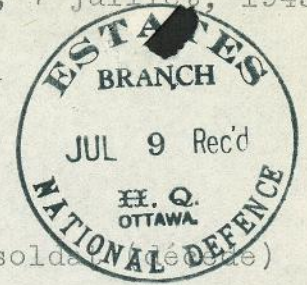
Would you be good enough to  
examine his file, as soon as possible, and  
let me know what the National Defence Depart-  
ment will be able to do in this case.

Yours truly,

J.A. Dion, Federal Member,  
Co. Lac St.Jean - Roberval.

Roberval, 7 juillet, 1945.

Département de la Défense Nationale  
Division des successions  
Ottawa.



Re: Doré Gérard, soldat (écarte)

Monsieur le Directeur,

Je tiens d'abord à vous remercier sincèrement pour la bonne attention accordée à mes demandes en faveur de mon fils Gérard. Je vous retourne aujourd'hui même les deux formules indiquant la réception des effets reçus à date.

Cependant, il est encore certaines questions que je voudrais éclaircir et il me semble que nul mieux que vous saurait me renseigner... Est-il possible de savoir où est enterré le corps de mon fils? Y a-t-il moyen de reconnaître l'endroit par un signe quelconque si, par exemple, un jour je veux visiter cet endroit? son nom est-il inscrit sur sa tombe. Un service religieux a-t-il été chanté, là-bas, sur le champ de bataille.

Les petits détails qu'on est venu à bout d'obtenir ne nous suffisent pas; on nous a dit qu'il était tombé à Verrière. Verrière est-il un endroit important ou une simple ferme de Normandie... Il était avec les Fusilliers Mont-Royal; pensez-vous que, parmi ses compagnons revenus au pays, je pourrais me renseigner avec plus de précision et si oui, auriez-vous l'obligeance de me donner une adresse où je pourrais obtenir ce que je désire, soit son commandant, son aumonier, ou un ami quelconque.

Je voudrais que vous me compreniez, je ne veux pas ce qui est impossible, mais je voudrais savoir ce que j'ai le droit de savoir et d'ailleurs, maintenant qu'il est décédé, je me demande pourquoi on ne me dirait pas tout.

Donc, je compte sur votre bonne attention, et je vous remercie à l'avance

Votre dévouée

*Mme Marie Anne Doré*

Mme Isidore Doré  
Boîte postale 123., Roberval  
Co. Roberval  
P.Q.

WSG



*J. Alfred Dion, C. R.*  
*Avocat*  
*Roberval, Qué.*

7 juillet, 1945.

Monsieur A.R. Mortimore, Brigadier,  
Paymaster-General,  
Département de la Défense Nationale,  
Ottawa, CANADA.



Re: DOSSIER: D. 13246.

Cher Monsieur,

Monsieur I. Doré de Roberval, dont le fils est mort au front, me demande si l'armée accordera des gratuités à sa famille, à l'occasion de son décès.

Auriez-vous l'obligeance d'examiner son dossier, le plus tôt possible, et me dire ce que le Département de la Défense Nationale sera en mesure de faire dans ce cas.

Votre bien dévoué

J.-A. Dion, député fédéral,  
Comté Lac St. Jean- Roberval.

JAD: FH

DEPARTMENT OF NATIONAL DEFENCE

A R M Y

Ottawa, Ontario

7th Jul 1945  
H.Q. 405-D-16914  
D-13246 (WSG/G)

Chief Treasury Officer,  
Department of Veterans' Affairs,  
OTTAWA, Ontario.

Dear Sir:

An Application for the War Service Gratuity  
in respect of the late E-0584 Pte. DORE, Gerard  
has been received from Miss Rita Dore  
residing at



Will you kindly notify the undersigned as to  
whether or not the applicant is receiving a pension, or did re-  
ceive a pension in respect of the deceased member effective from  
the date of his death 23rd Jul 44 1945. For this  
purpose please do not include a pension payable under Section 33  
(3) of the Pension Act, dating from a time subsequent to the  
members' death.

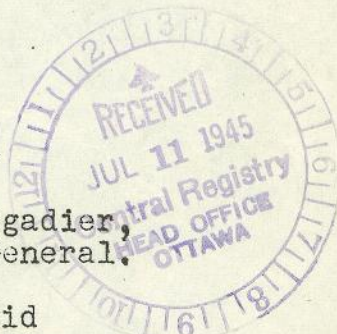
For convenience, please use the space provided  
below and return this request to the Secretary, Department of  
National Defence (Army) Attention: Paymaster-General.

If no pension is now being paid, but at a later  
date the Canadian Pension Commission authorizes payment of a  
pension to the applicant, other than under Section 33 (3) of the  
Pension Act, will you kindly notify this office accordingly  
by separate communication, giving the date from which the pen-  
sion was awarded.

Yours truly,

*K. W. Rice Lt.*

for (A.R. Mortimore) Brigadier,  
Paymaster-General.



Is the applicant receiving a pension or did  
the applicant receive a pension effective from the date of the  
member's death? no

Yes or No

Certified Correct

*J. A. Johnson*  
Chief Treasury Officer,  
Department of Veterans' Affairs.

DIVISION DES SUCCESSIONS.

4 juillet, 1945.

Madame Marie Anne Doré,  
Boite Postale 123,  
Roberval,  
P.Q.



DORE, Gérard Sdt.(Décédé)  
No. E-0584, Armée Canadienne

Chère Madame Doré,

D'ici quelques jours nous vous ferons expédier par  
Malle Recommandée un colis contenant les effets personnels de votre  
fils reçus récemment d'outre-mer. Ces quelques articles sont mal-  
heureusement les seuls que les autorités de l'Unité ont pu recueillir  
après le décès. Sur réception vous voudrez bien signer et retourner  
à notre Division la formule ci-incluse.

Votre tout dévoué

2522

OG/YC

Major  
Le Directeur des Successions.



Department of National Defence

Estates Branch

Ottawa,

Canada

Date..... 4 juillet, ..... 1945.....

Received this day from the Director of Estates.....

..... UN COLIS PAR MALLE RECOMMANDEE.....

containing personal effects of my deceased..... FILS.....

H.Q. ... 405-D-16,914 FD34.

DORE, Gérard Sdt. (Décédé)  
No. E-0584, A.C.



*Mme Marie Ann Dore*  
Signature



# Department of National Defence

Ottawa, Canada

Date 3 juillet 1945

Received this date from the Treasury Branch cheque for the sum of

SOIXANTE NEUF-----92 Dollars (\$ 69.92)  
-----  
100

being en rapport avec la succession militaire de mon fils



Mme Marie Anne Dore'  
Signature

DORE, Gérard, Soldat, (décédé)  
No. E-0584, Armée Canadienne

# EFFECTS SECTION

84,669

122  
(O/S Case No.)

145  
(Section Case No.)

DORE  
(Name)

Pte.  
(Rank)

G.  
(Initials)

E.0584  
(Reg.No.)

Date rec'd 7-5-45

From

O/S

V - Valuables

M - Missing



D - Destroyed (reasons why destroyed)

Surpluses

R - Retained (reasons why retained)

Diaries,

Letters,

Etc.

Remarks

Containers received

Containers re-packed

1 Back

1 Pl. Rm.

Date checked

20/6/45 By

S Mansfield

(Clerk)

(Inven. 1 pgs.) d/4 Jan/45 Xmas snapshots to Newspaper Clippings

(Clerk)

" " d/

" " d/

Officer or N.C.O. i/c

Riddell cpl

Register No. D13246

Nominal Roll No. D310

To: P.M.G.

H.Q. File No. 110 105-D-16914

**CANADIAN ARMY (ACTIVE)**

**Computation of Service**

**WAR SERVICE GRANT**

Regt. No.	Rank when S.O.S.	Surname	Christian Name in Full
<u>E0584</u>	<u>PTE</u>	<u>DORE</u>	<u>GERARD</u>

REASON FOR TERMINATION OF SERVICE:

1st Enlistment..... Killed in Action CARO ( )  
 2nd Enlistment..... CARO ( )  
 3rd Enlistment..... CARO ( )

**Total Service**

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. <u>7 Apr 43</u>	T.O.S. ....	T.O.S. ....
S.O.S. <u>23 Jul 44</u> MD	S.O.S. .... MD	S.O.S. .... MD
Total Days <u>474</u>	Total Days.....	Total Days.....

**Total Service** ..... 474 DAYS

	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere.....	<u>390</u>	<u>Nil</u>	<u>390</u>
Overseas Service.....	<u>84</u>	<u>Nil</u>	<u>84</u>
Totals.....	<u>474</u>	<u>✓</u>	<u>474</u>
Add Non-qualifying Service.....			<u>✓</u>
<b>Total Service</b> .....			<u>474</u>

EMBARKATION DETAILS:

1. Date S.O.S. Overseas 23 Jul 44 ..... 2. Date S.O.S. Overseas.....

REMARKS:

**KILLED IN ACTION**

23 Jul 44

Computer's Signature [Signature]

Checker's Signature [Signature]

Date Computed 18 Jun 45

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.



## DIVISION DES SUCCESSIONS

18 juin 1945.

Madame Marie Anne Doré,  
Boite Postale 123,  
Roberval,  
P. Q.



DORE, Gérard, Soldat, (décédé)  
No. E-0584, Armée Canadienne

Chère Madame Doré,

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 \$69.92 et est fait comme suit: -

Argent trouvé parmi les effets personnels.....	\$ 1.45
Remboursement des montants appliqués à l'achat d'une Obligation du Sixième Emprunt.....	25.20
Remboursement d'un paiement en trop pour l'Impôt sur le Revenu.....	23.54
Reliquat de solde.....	19.73
Total.....	\$69.92

L'Obligation ci-dessus mentionnée n'était pas entièrement payée au moment du décès et les quelques versements faits par le moyen d'une délégation de solde ont été portés à son compte.

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 directement un chèque payable à votre ordre pour la somme

--au verso-----

de \$69.92, et sur réception vous voudrez bien signer et retourner à notre Division la formule d'accusé de réception ci-incluse.

Votre dévoué,



OG/TD  
Pc.adj.(1)

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

CASUALTIES ONLY

For purpose of W.S.G.  
Casualties include death  
subsequent to discharge.

Register No. D.13246

File No. 1

WAR SERVICE GRANTS ACT 1944

Ottawa 12th June 194 5

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



Service No. 0584

Name 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) Lieutenant,  
for (A.R. Mortimore) Brigadier,  
Paymaster-General

	Name	Amount
Names and relationship of persons in receipt of D.A. and amount of monthly award.	<u>nil</u>	\$ <u>nil</u> ✓

If no D.A. in issue, list names 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>Miss Rita Dore</u> <u>Sister</u>	<u>15.00</u> ✓
---	--	----------------

Names and relationship of persons to whom assigned pay was continued by supplementary award after death.	<u>nil</u>	<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>15.00</u> ✓
---	--	----------------

A Purgeon 23 1945

*A Purgeon*  
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. \$ 15.00

Feb 26 1946

*J. M. Watson*  
for C.T.O.



7th June, 1945.

Mr. I. Dore,  
Box 123,  
Roberval, P.Q.

Dear Mr. Dore:



Your application for payment of War Service Gratuity on behalf of the service of the late E.0584, Dore, G. is acknowledged.

You are advised that the War Service Grants Act, 1944, and relative Regulations provide that in the case of a member who dies before payment of the gratuity is made in full, the gratuity, or the unpaid balance thereof, shall be paid to a dependent who was eligible to receive dependents' allowance, or to a dependent to whom pay was assigned by the member immediately prior to his death or discharge.

If there is no person qualified to receive payment of the gratuity as outlined above, then the amount payable shall form part of and be comprised in the member's Will or, if there is no Will, in accordance with the law applicable.

By reason of certain procedure which must be followed to determine under which condition of the Act settlement of this gratuity is to be made, some time will elapse before this can be brought to a finality. You are assured, however, that this claim is receiving every attention, and you will be advised at the earliest possible moment.

Yours truly,

for (A.R. Mortimore) Brigadier,  
Paymaster-General.

DIVISION DES SUCCESSIONS

7 juin 1945.

Monsieur Isidore Doré,  
C. P. 123,  
Roberval,  
Cté Roberval,  
P. Q.



DORÉ, Gérard, Soldat, (décédé)  
No. E-0584, Armée Canadienne

Cher Monsieur Doré,

Nous accusons réception de votre lettre du 28 mai concernant certains frais funéraires que vous avez payés à la suite du décès de votre fils.

L'Article 25 de notre formule signifie que le Gouvernement ne paye les frais funéraires qu'en autant qu'ils sont autorisés par les règlements. Or, les règlements ne permettent pas que le coût d'un service religieux tenu ici au Canada soit payé par le Gouvernement, car celui-ci ne se charge que des frais funéraires encourus à l'endroit même de l'inhumation. Nous regrettons donc, dans les circonstances, de ne pouvoir vous être d'aucune utilité.

Dans le courant de la semaine prochaine, nous serons probablement en mesure d'adresser à Madame Doré un chèque au montant de \$69.92 en règlement de la succession militaire. Nous communiquerons donc sous peu avec Madame Doré à cet égard.

Votre dévoué,

OG/TD

Major,  
le Directeur des Successions.

PAYMASTER-GENERAL  
(WSG, etc.)



(May-28-45)

TRANSLATION  
(May-30-1945)

Re- Pte. Gérard Doré, E/0584.  
Deceased.

D13746

Sir:

A few months ago, the Dept. of N. Def. has officially announced that parents of deceased soldiers would receive an indemnity (overseas service). My son died at Falaise, July 23/44, and I was drawing \$15. per month's assigned pay. I have a large family, and his financial assistance was most useful to me.

As I have so far received no indemnity, I would ask you to let me have the following information:

- 1- What is the amount paid by the Govt. to parents of deceased soldiers who, during their lifetime, were helping their families? (Assigned Pay)
- 2- If that indemnity is payable to parents, how is it that I have not received same?
- 3- If I am entitled to anything, I would ask you to kindly send me the necessary forms to fill in.
- 4- <sup>Are the</sup> Expenses I have incurred for a funeral service (\$75.) according to your regulations, ~~not~~ supposed to be reimbursed? When may I expect to have a remittance?

Hoping that I shall receive my due, I ...

(SGD) Isidore Doré,  
P.O.Box 123,  
Roberval, QUE.



CHJ

*Dept. National Defense Ottawa Branch*

*E*  
*29-5-SA*

**RECEIVED**  
MAY 30 1945  
TAXATION DIVISION  
DEPT. OF NATIONAL REVENUE

Monsieur le Directeur des Successions,  
Ministère de la Défense Nationale,  
Division des Successions,  
Ottawa.

Re. Doré Gérard, *S. Laan* (décédé)  
No, E-0584, Armée canadienne.

*COPYED Archives*

*ESTABLISHED*  
BRANCH  
MAY 31 1945  
OTTAWA  
NATIONAL DEFENCE

Monsieur le Directeur,

Vers le 10 janvier dernier, vous m'aviez envoyé la formule le P.64 Dossier 405-D-16,FD,34 , au sujet de la succession militaire de mon fils décédé outre-mer; il s'agit du Soldat Doré Gérard, E-0584 Armée canadienne.

Or, à l'article 25 de cette formule il était question d'un montant de \$75.00 versé en honoraires pour un service religieux . Ce service a été chanté en l'église Notre-Dame de Roberval, le 4 septembre 1944 et le Curé de la dite paroisse pourra certifier la chose si nécessaire.

Etant donné que le Ministère de la Défense Nationale paie ces frais, auriez-vous l'obligeance de me faire savoir si ce compte est accepté et si le gouvernement va me rembourser ce montant.

Vous remarquerez qu'il y a déjà plusieurs mois que ce service a été chanté et que rien jusqu'ici n'a été fait par votre ministère pour défrayer ces frais, tel que prévu par les lois et règlements du Ministère de la Défense Nationale.

Espérant que vous voudrez bien vous occuper promptement de cette affaire

Je me souscris,  
Votre tout dévoué,  
*Isidore Doré*  
Isidore Doré  
B.P.123 Roberval  
Co. Roberval, P.Q.

Roberval , 28 mai 1945.

REC'D  
MAY 30 1945

MAY 31 1945

Monsieur le Sous-Ministre,  
Ministère de la Défense Nationale,  
Ottawa.

Sujet: Doré Gérard (décédé)  
E-0584, Armée canadienne.



Monsieur,

Un officiel du Ministère de la Défense Nationale annonçait il y a quelques mois qu'une indemnité était versée aux parents des soldats tombés outre-mer.

J'ai un fils le Soldat: Doré Gérard, E-0584 Armée Canadienne, qui est décédé le 23 juillet 1944, en Normandie, (à Falaise).

Etant père d'une nombreuse famille, ce fils m'était d'un soutien appréciable pour ses revenus puisqu'il me fournissait un montant de \$15.00 mensuellement sur sa solde.

Comme je n'ai rien obtenu depuis sa mort , des avantages que le gouvernement donne aux parents des militaires tombés au champ de bataille, auriez-vous l'obligeance de me dire:

1o-Quelle est l'indemnité que le gouvernement paie aux parents de militaires décédés, lorsque ce militaire aide partiellement ses parents à vivre, sur le montant de sa solde...?

2 o-Si cette indemnité est payable aux parents, pour quelle raison n'y aurais-je pas droit comme les autres...?

3o-Dans l'alternative, auriez-vous l'obligeance de m'envoyer les formules nécessaires à remplir pour obtenir cette indemnité ...

4o-Les frais encourus tel qu'un service religieux au montant de \$75.00 que j'ai payé vont-ils m'être remboursés ? comme l'indiquent les lois et règlements du Ministère de la Défense Nationale et combien de temps après que le dit service a eu lieu ?



Espérant obtenir justice dans cette affaire, dans la  
mesure que le prévoient les règlements dans un tel cas

Je demeure

Votre tout dévoué

*Isidore Doré*



Isidore Doré

B.P. 123, Roberval

H.D./ID

Co. Roberval P. Q.



E-0584  
 No. **E-0584** RANK **Gnr** NAME **DORE Gerard** A  
 \*Married  
 \*Widower  
 \*Single  
 Place of **\*Appointment** **Quebec** Date of **\*Appointment** **7-4-43**  
**\*Enlistment** **\*Enlistment**

RATE OF PAY **Cat A-1**

D.O. No.	Date	Rank	Group	P.F. or A.S.	Daily Rate	Effective Date	If liable Pen. Ded.	REMARKS
87-13-4-43		pte		AS.	1.30	7-4-43		
23/2	27-9-43	<i>Pl</i>		"	1.40	7-9-43		
124.	22-4-44	PTE		A.S.	1.50	7-11-44		



*Lidore Dore (father) Anger St. Roberval, Lac St Jean Co.*

ASSIGNMENTS

DEPENDENTS' ALLCES. No. Deps. **2**

Name and Address of Assignees	Effective Date	Amount	Date Application Forwarded	Relationship	Amount Awarded	Effective Date
Miss. Rita Dore. Sister.						
Rue Anger. Roberval Que.	1-5-44	15.00				
<i>6 Rue Laron</i>	<i>1-5-44</i>	<i>8.40</i>				
Total		23.40				

\*Outfit } Allce. \$ ..... Paid on .....  
 \*Clothing }  
 Rehabilitation Grant \$ ..... Paid on .....  
 \*Delete words which are inapplicable.

**M. F. M. 14**  
 200M-5-42 (4876)  
 H.Q. 1772-39-1662

In Receipt of Pension under Pension Act or Militia Pension Act (1910) \$ ..... P.A.  
 Occupational Form Completed .....



## CASUALTIES, ETC.

Part II. D.O.		Nature and particulars	If in Hospital note name
No.	Date		
87-13-4-43	4-43	TOS DD 5 eff 7-4-43 having enlisted with A/1 BTY R.C.A. REINF CA/AF (prev. serv. NIL) Att. for all purp.	
95-22-4-43	4-43	Gr leave fr 1700 hrs 16-4-43 to 1700 hrs 21-4-43	
102-30-4-43	4-43	SOS DD5 on proc. to CABTC 53 Lauzon eff <del>30</del> <sup>29</sup> -4-43	
103	29-4-43	TOS CABTC/53 Lauzon for all purp. w.e.f. 30-4-43	
147	18-6-43	Leave from 1700 hrs 18 to 23-6-43 0 700 hrs Auth R/A 4 day	
155	28-6-43	SOS CABTC/53 Lauzon on transfer for all purp. to A-13 INF R VALCARTIER QUE MD5 w.e.f. 30-6-43.	
159	2-7-43	T.O.S. A. (I) T. C. - A13 E.F.F. <u>1-7-43</u>	
215	6-9-43	S.O.S. A. (I) T. C. - A13 E.F.F. <u>6-9-43</u> to Sherbrooke	
213	7-9-43	Attached TC. 43 all purp. from A-13 Valcartier w.e.f. 7-9-43	
		<del>P. &amp; A. LEV. ACRES SEP 21 1943</del> <u>1-40</u>	
231	27-9-43	Ceases to be attached all purp. on transfer to A-8 Long	
232	6-10-43	Borden 5-10-43	
113	7-10-43	TOS #1 CACTR from #43 CA(B)TC eff. 6-10-43.	
141	8-11-43	SOS #1 CACTR to A-13 CITC Valcartier, Que. wef 9-11-43	
275	15-11-43	O.S. A. (I) T. C. - A13 E.F.F. <u>10-11-43</u>	



\*Married  
\*Widower  
\*Single

No. .... RANK ..... NAME .....

Place of { \*Appointment  
\*Enlistment

Date of { \*Appointment  
\*Enlistment

RATE OF PAY

D.O. No.	Date of D.O.	Rank	Group	P.F. or A.S.	Daily Rate	Effective Date	If liable Pen. Ded.	REMARKS

ASSIGNMENTS

DEPENDENTS' ALLGES.

No. Deps. ....

Name and Address of Assignees	Effective Date	Amount		Date Application Forwarded	Relationship	Amount Awarded		Effective Date
Total .....								

\*Outfit { Allice. \$ ..... Paid on .....  
\*Clothing {  
Rehabilitation Grant \$ ..... Paid On .....  
\*Delete words which are inapplicable.

**M. F. M. 14**  
200M-2-43 (8705)  
H.Q. 1772-39-1662

In Receipt of Pension under Pension Act or Militia Pension Act (1910) \$ ..... P.A.  
Occupational Form Completed .....

## CASUALTIES, ETC.

Part II. D.O.		Nature and particulars	If in Hospital note name
No.	Date		
3	4-1-44	Adm. to Camp. H. 23-12-43 + (P.O. 19)	
19	22-1-44	Disch. from " " " " 21-1-44	
28	2-2-44	100. 12 Double entry is case.	
22	3-2-44	furlough. R. 5-2-44 to T. 18-2-44	
68	4-3-44	Emb. leave 0800-20-3-44 to 0700-24-3-44	
85	10-4-44	S.O.S. A. (I) T. C. - A13 E.F.F. 11-4-44 to NO 1 Tr. Br. Debest N.S.	
117	14-4-44	TOS No 1 Ing Bele upon TR from A 13 w/ 12-4-44	
125	27-4-44	att No 2 Trained Camp eff 27-4-44	
131	27-4-44	Sol of S Serial 2946 Eff 27-4-44	
110	9-5-44	TOS from Cdr Army (Can) w/ 8-5-44	
130	1-6-44	S.O.S. #6 C1 R U to X4 List FMR. 1-6-44	
39	9-6-44	T.O.S. FMR from X4 list, 11 BN w/ 4 Jun 44.	
48	13-7-44	Embarked U.K 6 July 44, disembarked France 8 Jul 44.	
C.R.	24-7-44	S.O.S. FMR. deceased w/ 23 Jul 44. Killed in action.	



13053

FORM No. 1

Register No. ....

Nominal Roll No. ....

To: P.M.G. ....

H.Q. File No. ....

**CANADIAN ARMY (ACTIVE)**  
**Computation of Service**  
**WAR SERVICE GRANT**

Regt. No.	Rank when S.O.S.	Surname	Christian Name in Full
E.O.S. 84	PTE.	Dore	Gerard

REASON FOR TERMINATION OF SERVICE:

1st Enlistment..... *Deceased*..... CARO..... ( )

2nd Enlistment..... CARO..... ( )

3rd Enlistment..... CARO..... ( )



**Total Service**

1ST ENLISTMENT	2ND ENLISTMENT	3RD ENLISTMENT
T.O.S. <i>7 Apr. 43</i>	T.O.S. ....	T.O.S. ....
S.O.S. <i>23 Jul 44</i> MD. <i>05</i>	S.O.S. .... MD. ....	S.O.S. .... MD. ....
Total Days..... <i>474</i>	Total Days.....	Total Days.....

**Total Service** ..... *474* DAYS

	Total Service	Less Non-qualifying Service	Net Service
Western Hemisphere.....	<i>390</i>	<i>—</i>	<i>390</i>
Overseas Service.....	<i>84</i>	<i>—</i>	<i>84</i>
Totals.....	<i>474</i>	<i>—</i>	<i>474</i>
Add Non-qualifying Service.....			
<b>Total Service</b> .....			<i>474</i>

EMBARKATION DETAILS:

*7.05 0.5-1 May 44*

1. Date S.O.S. Overseas..... *23 Jul 44* ..... 2. Date S.O.S. Overseas.....

REMARKS:

Computer's Signature..... *H. Sharp*

Checker's Signature..... *Peter North (pl)*

Date Computed..... *18 May 45*



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

*23 Jul 44*

*C. L. Laurin*

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



DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

Name: DORE, Gerard, No.: E-0584  
 Surname Christian Names

Pte. C.A. O/S 23-7-44  
 Rank Unit Date of Death

AMOUNT

Date: 17 May 45

L.P.C.....\$ 46.38  
 Other Credits..... 23.54  
 Total..... 69.92



SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Marie - Anne Dore, P.O. Box, 123, Roberval, Quebec.  (Sole beneficiary under will)	69.92 <i>R</i>

**TO BE FORWARDED BY REG. MAIL DIRECT**  
**26 TO TREAS. 20-6-45**  
*QW*

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	69.92
CLASSIFIED BY			EXAMINED BY		
Original Signed by <b>K. L. McCUAIG</b>			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

*Original signed by*

(L. M. FIRTH) Colonel  
 Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH	Municipal county	Official name of civil municipality or township	Place an X over the word which applies to this municipality or this territory City   Town   Village   Parish   Township											
	Street	No.	Hospital or Institution	(a) In hospital or institution			(b) In municipality where death occurred			(c) In Province			(d) In Canada (if immigrant)	
2. LENGTH OF STAY	Years	Months	Days	Years	Months	Days	Years	Months	Days	Years	Months	Days		

3. NAME OF DECEASED

Surname: **DORE**  
(Block letters)

Given names: **Gerard**

4. RESIDENCE

Street: **Fabrique**

Official name of civil municipality or township: **Roberval**

Municipal county: **Roberval**

Province: **Quebec**

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: **July** (Month) **Day** (Day) **19** (Year)

23. I HEREBY CERTIFY that I attended deceased from **19** to **19** and last saw him **19** alive on **19**

5. SEX: **M**

6. NATIONALITY (Citizenship): **Quebec**

7. RACIAL ORIGIN: **White**

8. Single, Married, Widowed or Divorced (Write the word): **Single**

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

24. CAUSE OF DEATH

I  
Immediate cause  
Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthma, etc.

(a) **Killed in action**

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

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

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

(a) Date of appearance: **19**

(b) Duration of disease: **days**

10. BIRTHPLACE (Province or Country): **Quebec**

11. DATE OF BIRTH: **August** (Month) **20** (Day) **19** (Year)

12. AGE OF DECEASED

Years: **19**

Months: **19**

Days: **19**

If less than one day old: **hrs. or min.**

OCCUPATION

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

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

15. Date deceased last worked at this occupation

16. Total years spent in this occupation

17. NAME

FATHER: **DORE Isidore**

MOTHER (Maiden Name)

18. BIRTHPLACE (Province or Country)

19. Place of burial, cremation or removal: **France**

20. Date of burial: **19**

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church

(b) Civil municipality of

(c) Municipal county

(d) Date: **19** (Month) **19** (Day) **19** (Year)

25. If a woman, was there a puerperal condition? **19**

26. Was there a surgical operation? **19**

State findings: **Was there an autopsy?**

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

Accident, suicide or homicide: **19** (Date)

(State which)

Manner of injury: **19** (How sustained)

Nature of injury: **19**

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

Signed: **19** M.D.

Address: **19** Date: **19**

28. Signature of person who fills in the form (curate, coroner, hospital authority, etc.)

29. Name of clergyman in charge of Register of Civil Status in which registration of this burial was made.

This signature authorizes the collector to accept this form as authentic.

(Voir l'autre côté pour le français)

OVERSEAS CASUALTY  
JANUARY ANNUITY

MAY 4 1945

1. LIEU DU DÉCÈS	Comté municipal		Nom officiel de la municipalité civile ou du canton						Apposer un X sur le mot qui s'applique à cette municipalité ou ce territoire Cité   Ville   Village   Paroisse   Canton												
	Rue		No.						Hôpital ou institution												
2. SÉJOUR	(a) dans l'hôpital ou l'institution	Années	Mois	Jours	(b) dans la municipalité du décès	Années	Mois	Jours	(c) dans la province	Années	Mois	Jours	(d) au Canada (s'il s'agit d'un immigré)	Années	Mois	Jours					
3. NOM DU DÉFUNT	Nom de famille..... (Lettres moulées)						N'écrivez pas dans cet espace						CERTIFICAT MÉDICAL CONFIDENTIEL DE DÉCÈS								
4. RÉSIDENCE	Noms de baptême ou prénoms.....						22. Date du décès.....						19..... (année)								
	Rue.....No..... Nom officiel de la municipalité civile ou du canton.....						23. JE CERTIFIE PRÉSENTEMENT que j'ai donné mes soins au défunt depuis le .....19..... jusqu'au.....19..... que je l'ai vu vivant pour la dernière fois le.....19.....														
5. SEXE	6. NATIONALITÉ (Citoyenneté)	7. ORIGINE RACIALE		8. Célibataire, marié, veuf ou divorcé (Écrire l'un de ces mots)		24. CAUSE DU DÉCÈS															
9. Si le défunt était marié, nom de son conjoint						I Cause immédiate Mentionner la maladie, blessure ou complication, causant la mort, non pas son syndrome final, tel: syncope, asphyxie, asthénie, etc.															
10. LIEU DE NAISSANCE (Province ou pays)						États morbides, s'il y en a, ayant produit la cause immédiate (Les indiquer dans l'ordre chronologique inverse de leur apparition).															
11. DATE DE NAISSANCE.....						II Autres conditions morbides (importantes seulement) ayant contribué au décès mais n'ayant aucune portée sur la cause immédiate.															
12. ÂGE DU DÉFUNT				Années	Mois	Jours	Si âgé de moins d'un jour .....hrs. ou.....min.		III Si une maladie contagieuse est mentionnée à ce certificat, donner						(a) Date d'éclosion.....19..... (b) Durée de la maladie.....jours						
13. Métier, profession ou occupation, ex. tisserand, voiturier, employé de bureau, etc.				14. Genre d'industrie ou d'entreprise, tel que filature de coton, industrie du bois, banque, etc.		15. Dernière date à laquelle le défunt vaquait à ce travail		16. Nombre d'années occupées dans cette profession		25. S'il s'agit d'une femme, y avait-il état puerpéral?.....											
17. NOM				18. LIEU DE NAISSANCE (Province ou pays)		26. Y a-t-il eu intervention chirurgicale?..... Date de l'opération.....19.....															
PÈRE						Constatations..... Y a-t-il eu autopsie?.....															
MÈRE (Nom de fille)						27. Dans les cas où le décès est attribuable à des causes extérieures (violence):—															
19. Lieu de l'inhumation, de l'incinération ou destination du transport						Accident, suicide ou homicide..... Date.....19..... (Spécifier)															
20. Date de l'inhumation.....						Manière de la blessure..... (Dans quelle circonstance)															
21. LIEU DE L'ENREGISTREMENT DE CETTE SÉPULTURE						Nature de la blessure.....															
(a) Nom de la paroisse ou église.....						Indiquer si la blessure a été infligée au lieu du travail, dans l'habitation ou dans un endroit public.....															
(b) Municipalité civile de.....						Signature.....M.D.															
(c) Comté municipal.....						Adresse.....						Date.....19.....									
(d) Date.....						28. Signature de la personne qui remplit la formule (vicaire, coroner, autorité d'un hôpital, etc.)						29. Nom du ministre du culte gardien du registre de l'État civil où est inscrit l'acte de cette sépulture.									
(jour)						Cette signature autorise le collecteur à accepter la formule comme authentique.						(For English see other side)									
(mois)																					
(année)																					



## DIVISION DES SUCCESSIONS

23 mars 1945.

Monsieur Isidore Doré,  
Boite Postale 123,  
Roberval,  
P.Q.



DORE, Gérard, Soldat, (décédé)  
No. E-0584, Armée Canadienne

Cher Monsieur Doré,

Nous accusons réception de votre lettre du 17 mars.

Ainsi que nous vous l'avons écrit, d'après notre dossier, il n'apparaît pas que votre fils ait acheté une autre Obligation que celle du Sixième Emprunt qui n'était pas entièrement payée au moment de son décès. Les versements qu'il avait faits ont été transportés à son compte de solde et sont compris dans le montant que nous avons en mains pour distribution.

Nous sommes informés que les effets personnels de votre fils nous ont été expédiés récemment d'Angleterre, mais il est impossible de préciser à quelle date ils nous parviendront. Soyez assuré, toutefois, que sur réception nous en ferons immédiatement remise à Madame Doré. Si vous désirez communiquer avec le Brigadier Gauvreau, nous vous suggérons d'adresser votre lettre à Armée Canadienne Outre-Mer. C'est là la seule adresse que nous avons pu obtenir du Brigadier Gauvreau.

Nous vous écrirons d'ici les prochaines semaines concernant la distribution de la succession militaire. Nous tenons à vous assurer que les délais à régler cette succession sont absolument hors de notre contrôle, car, pour notre part, dès que nous avons reçu d'outre-mer le matériel nécessaire pour procéder, nous agissons avec la plus grande célérité.

Votre dévoué,

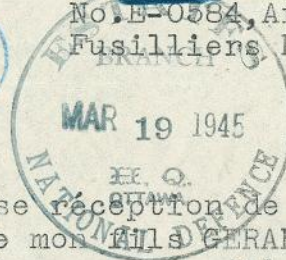
*de*

Major,  
le Directeur des Successions.

Roberval, 17 mars, 1945.

Département de la Défense Nationale,  
Division des Successions,  
Ottawa,  
Ont.

Re: Doré Gérard, Soldat. (décédé)  
No. E-0584, Armée canadienne.  
Fusilliers Mt-Royal



MAR 20 1945

Monsieur le Directeur,

J'accuse réception de la vôtre du 13 mars, et je dois vous dire que mon fils GERARD m'a écrit au commencement de mai pour m'annoncer qu'il avait acheté une obligation de la Victoire. C'est la seule dont il a fait mention.

Comme il est tombé au champ de bataille le 23 juillet 1944, il a dû payer de mai 1944 à cette date, vous en jugerez d'après son dossier.

J'en reviens de nouveau à ses effets personnels, son décès date de près de huit mois et il a été impossible d'obtenir quoique ce soit jusqu'à date. Je comprends que les relations avec les pays d'Europe soient très difficiles en ces temps troublés, mais vous nous obligeriez beaucoup en essayant de régler cette question dans un avenir rapproché.

Espérant que cette demande aura un résultat satisfaisant, je vous prie de me croire, Monsieur,

Votre dévoué

*Isidore Doré*

Isidore Doré  
Boite postale 123  
Roberval

P-S. Je me permets de vous demander un petit renseignement: pouvez-vous me dire si le Brigadier J. Guy Gauvreau qui était le commandant des Fusiliers Mont-Royal à IFS/Verrières, France, où mon fils est tombé, est encore au Canada? De toute façon, si vous pouvez me donner son adresse, je vous en serais très reconnaissant.

— Mercis anticipés. —

C/O

HD/ID

DIVISION DES SUCCESSIONS

13 mars 1945.

Monsieur Isidore Doré,  
Boite Postale 123,  
Roberval,  
P. Q.



DORE, Gérard, Soldat, (décédé)  
No. E-0584, Armée Canadienne

Cher Monsieur Doré,

Nous accusons réception de votre lettre du 9 mars, et notons que votre fils avait acheté une Obligation de la Victoire alors qu'il était à Debert, Nouvelle Ecosse.

Si vous voulez bien nous dire la date approximative de l'achat de cette Obligation de la Victoire, nous écrirons immédiatement au Ministère des Finances afin de savoir ce qui en est advenu.

Parmi les documents que nous avons au dossier, il apparait que votre fils avait acheté une Obligation de la Victoire du Sixième Emprunt, soit au mois de mai 1944. Au moment de son décès, il n'y avait qu'une couple de paiements de fait sur ce Bon, et ceux-ci ont été crédités à son compte de solde. Si vous avez raison de croire que c'est là la seule Obligation achetée par votre fils, vous voudrez bien nous en faire part.

Une réponse par retour du courrier sera grandement appréciée.

Votre dévoué,

A handwritten signature in dark ink, appearing to be "J. J. J." or similar.

OG/TD

Major,  
le Directeur des Successions.

Roberval, 9 mars, 1945.

No-405-D-16,914 FD-34

Département de la Défense Nationale,  
Division des Successions,  
O t t a w a,  
Ont.



Re: DORE, Gérard, Soldat (décédé)  
No. E-0584, Armée Canadienne.



Monsieur le Directeur,

En réponse à la vôtre du 5 courant je dois vous dire que mon fils Gérard nous a écrit au moment de son départ ou quelques temps auparavant qu'il avait une Obligation de la Victoire mais nous ignorons ce qu'il en a fait.

De toute façon si vous pouvez localiser cette obligation je vous serais reconnaissant de bien vouloir l'adresser à la bénéficiaire, madame Isidore Doré, que cette obligation soit entièrement acquittée ou non.-

Nous serons heureux de vous lire sous peu à ce sujet. Veuillez me croire, Monsieur le Directeur,

Votre dévoué,

*Isidore Doré*

Isidore Doré, Boite postale 123,  
Roberval  
P. Q.

*P.S. — Cette obligation a été achetée à Lebert,  
et il n'est pas revenu avant de traverser notre mer.*

## DIVISION DES SUCCESSIONS

5 mars 1945.

Monsieur Isidore Doré,  
Rue Auger,  
Notre-Dame-de-Roberval,  
Cté Roberval,  
P. Q.



DORE, Gérard, Soldat, (décédé)  
No. E-0584, Armée Canadienne

Cher Monsieur Doré,

Nous venons de recevoir d'outre-mer le compte de solde de votre fils, mais avant de disposer du montant en notre possession en faveur de Madame Doré, la bénéficiaire de son testament, nous désirons savoir si vous aurez recours à notre Division concernant l'Obligation de la Victoire dont votre fils était le possesseur, si nous nous en rapportons à la formule que vous avez remplie dans le courant du mois de décembre. Si cette Obligation est en votre possession et que Madame Doré désire l'échanger contre valeur ou la faire enregistrer à son nom, vous voudrez bien nous la faire parvenir par retour du courrier avec vos instructions. Si l'Obligation en est une payable au porteur, Madame Doré pourra en disposer elle-même sans aucune difficulté. Nous vous prions cependant de nous faire savoir exactement ce qui en est.

Votre dévoué,

*Et.*

Major,  
le Directeur des Successions.

NAME E-0584 Pte DORE, Gerard

Casualty	Date	Authority	Date entered	Clerk
KILLED	23 Jul 44	"A" 475	AUG 23 1944	<i>ML</i>

CASUALTY REPORT checked by *RLW* 0  
 EST 3( ) to \_\_\_\_\_ 0.  
 Sent on \_\_\_\_\_ by \_\_\_\_\_ C. Returned and checked by \_\_\_\_\_ 0.  
 EST 3( ) to \_\_\_\_\_ 0.  
 Sent on \_\_\_\_\_ by \_\_\_\_\_ C. Returned and checked by \_\_\_\_\_ 0.



~~WILL~~ from \_\_\_\_\_ received on \_\_\_\_\_ and checked by \_\_\_\_\_ 0.  
 Date \_\_\_\_\_ Beneficiary \_\_\_\_\_

Photo indent dated \_\_\_\_\_ by \_\_\_\_\_ C Negative No. \_\_\_\_\_ filed by \_\_\_\_\_ C.  
 Forward to A. of E. \_\_\_\_\_ O. EST 10 No. \_\_\_\_\_ by \_\_\_\_\_ C.

EFFECTS at 1 CKSD YES/NO EST 2 No. 91 Inventory checked by \_\_\_\_\_ 0.  
 EST 4 to \_\_\_\_\_ 0.

Sent on \_\_\_\_\_ by \_\_\_\_\_ C.  
 EST 4(a) \_\_\_\_\_ O. Sent on \_\_\_\_\_ by \_\_\_\_\_ C. Inventory checked by \_\_\_\_\_ 0.

Inventory UNIT effects checked by *RLW* O. / ~~NO UNIT effects~~ 0.  
 Release from A. of E. to \_\_\_\_\_ 0.

RELEASE to Canada *RLW* O. EST 11 No. 307 EST 5 on 2/1/45 by *RLW* C.  
 Shipped in Box EST 122 on FEB 45 EST 5(a) rec'd and filed by \_\_\_\_\_ C.

C. of A. REPORT rec'd and dup. ch. on 24/1/45 by *RLW* C. Checked by *RLW* 0.

DEBTS

Particulars	Name	Amount	Paid	Receipt

MEM I Part II	Checked	MEM I Part I	
No. Ch bk chs	<u><i>RLW</i></u> o	Off Record of Service Bk	<u><i>RLW</i></u> 0.
GPO bank book	o		0.
	o		0.
	o		0.
	o		0.

EST 6/Recun/Dogs/Uplift-  
 Cash to P.M. So. Fvs. Mov. Report (REF) 65 francs ✓  
 Prepared by *RLW* C.

L.P.C. received and checked by *RLW* 0.

EST 7 *RLW* 0. Prepared by *RLW* C.

COMPLETE ( *RLW* ) *RLW* 0. Entered on FEB 12 1945 by *RLW* C.

NOTES

6th V.L 50<sup>00</sup> (A.P.) ✓

REMARKS to A. of E.  
MFM 10 believed to be at W.D.H.Q. (from MAM R.I.)

CANADIAN MILITARY HEADQUARTERS

2 Cockspur Street,  
(Trafalgar Square)

London, S.W.1.

8 Feb 45.

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

E-0584 Pte DORE, Gerard (dec'd)

1. Herewith the following:-



Original C. of A. report  
M.B.M. I Part I  
M.B.M. I Part II

~~XXXXXXXXXX~~

~~XX~~

L.P.C.

~~XXXXXXXXXXXXXXXXXX~~

C.F.A. 187

~~XXXXXXXXXXXX~~

~~XXXXXXXXXXXX~~

Cdn. Sec GHQ 2 Ech 21 A. Gp.

Receipted accounts as follows:-

NIL

Form Letters as follows:-

NIL

Bank Books as follows:-

NIL



2. ~~XXXXXXXXXXXX~~

Personal effects released to you in Box 122

~~XX~~

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

4. Nil Will here

~~XX~~

5. Remarks

1. MFM 10 believed to be at NDHQ (from MBM I PT I).

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

Copy to file

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

E.584. Gnr. Dore. G. (Deceased)

10/Dore. G/1 (Est 4)

In accordance with your letter dated 9th Jan:45.

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

1st February, 1945.

PR/495



A. J. [Signature]  
for Chief Treasury Officer.





CANADIAN ACTIVE SERVICE FORCE

District.....

OVERSEAS

Dispersal Area.....

LAST PAY CERTIFICATE

(All Ranks)

Regtl No. E.584 Rank and Name DORE. G. GNR.

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

~~XXXXXX~~ (Reason for Discharge)..... on 23rd July 1944

Reason Death Authority: C.C.L. "A" 475 d/3rd Aug; 44



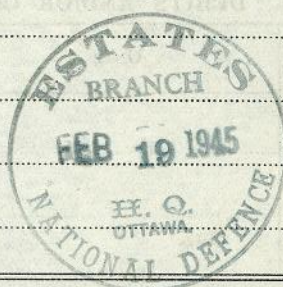
The following is a statement of the account of the above-named from 1st July to 31st July 1944 the inclusive date of transfer or discharge.

Dr		Cr	
Particulars	Amount	Particulars	Amount
Balance Dr from last account		Balance Cr from last account	22 30
First Monthly Payment <u>AR d/5.7.44</u>	4 47	Regimental Pay <u>31 days @ \$ 1.50</u>	46 50
Casual Payments <u>AR.23 d/17.7.44</u>	4 47	Technical Pay.....days at.....\$	
Payments on Transfer or Discharge		Additional Pay (Give particulars).....days at.....\$	
Assigned Pay	15 00	Allowances (Give particulars).....days at.....\$	
Regimental Charges			
Public Stoppages (Give particulars):		<u>Def: Pay Interest</u>	07
		<u>Cash Effects SOCR 14712.</u>	1 45
To Balance Cr { Free.....	31 38	By Balance Dr	
{ Deferred.....	15 00		
Total.....	46 38	Total.....	70 32
	70 32		

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

Remarks:

Assigned Pay of \$15.00 (S) stopped eff: Aug/44.  
 Assigned Pay of \$8.40 (6th V.Loan) cancelled eff: May/44.  
 The amount re-credited is included in the balance brought-forward at 1st July/44.



Compiled by F. Trenouth.

Certified correct A. Japnick for Chief Treasury Officer, Overseas

Checked by Abell

Date 1st February, 1945

DS.



DIVISION DES SUCCESSIONS

20 janvier 1945.

Monsieur Isidore Doré,  
Rue Auger,  
Notre-Dame-de-Roberval,  
Cté Roberval,  
P. Q.



DORE, Gérard, Soldat, (décédé)  
No. E.0584, Armée Canadienne

Cher Monsieur Doré,

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

Nous détenons dans notre dossier un testament  
en date du 3 décembre 1943 par lequel votre fils a légué tous ses  
biens à sa mère. Ce document est cependant sujet à révocation par  
tout testament subséquent que le défunt a pu faire outre-mer.

Vu les conditions actuelles en Europe, ce n'est  
pas avant quelques mois que nous recevrons d'outre-mer les effets per-  
sonnels ainsi que les détails définitifs ~~et~~ les documents concernant  
la succession militaire, tels que certificat de dernière solde, testament  
fait outre-mer, etc. Soyez assuré cependant que sur réception nous  
communiquerons immédiatement avec vous.

Votre dévoué,

OG/TD

Major,  
le Directeur des Successions.

DIVISION DES SUCCESSIONS

10 janvier 1945.

Monsieur Isidore Doré,  
Rue Fabrique,  
Roberval,  
Cté de Roberval, P.Q.



DORE, Gérard, Soldat, (décédé)  
No. E.0584, Armée Canadienne.

Cher Monsieur Doré,

Nous recevrons sous peu d'outremer  
les documents concernant la succession militaire  
de votre fils, et nous pourrons cependant en dis-  
poser avant que vous retourniez à notre Division  
dûment remplie la formule ci-incluse.

Votre dévoué,

*Og.*

Og/GC

Major  
le Directeur des Successions.

EST 6

Quote No. 10/Dore G/1 (Est. 4) . . . .

CANADIAN MILITARY HEADQUARTERS

2, Cockspur Street,

(Trafalgar Square) 9 Jan 45

London, S.W.1.

C.P.M. (Pay 2)

E 0594 Pte DORE Gerard (dec'd)



1. Herewith the following:-

- (i) MBM 1 Part II
- (ii) ~~Distribution of service estates form~~

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

**NIL**

3. Committee of Adjustment report shows the following:-

Cash to Paymaster Les Fus. Mont Royal (AEP) 65 francs  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C.D.V. NIL

4. Please forward:-

~~Cheques in payment of debts~~

**L.F.C.**

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

Copy to file

CANADIAN MILITARY HEADQUARTERS

**ESTATES BRANCH  
INVENTORY**

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

No., RANK and NAME ..... E-0584 Pte. Dore G. .... Dec'd .....

RECEIVED FROM ..... G.H.Q. Cdn. Section 2nd. Ech. 21 Army Grp. ....

M-16018 Pte. Murdoch W.J.

CHECKED BY ..... B-73775 Pte. Todd F.A. .... DATE ..... 4 Jan 45 .....

- |   |   |
|---|---|
| 1 | Snapshots   |
| 1 | Red Identity Disc.                                |
| 1 | Leather Wallet                                    |
| 2 | 6th V/L Receipts for \$50.00 To Offr. I/C Estates |
|   | Newspaper Clippings                               |



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

*F.A. Todd pte*

for OC 1 Cdn KSD

Monsieur Isidore Doré,  
Rue Fabrique, *Quebec*  
Roberval,  
Cté Roberval, 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:

Q.G. 405-D-16,914 FD. 34

MINISTÈRE DE LA DÉFENSE NATIONALE  
DIVISION DES SUCCESSIONS  
OTTAWA, ONTARIO

2 novembre 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

DORE, Gérard, Soldat,

E.0584, 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, commissaire instrumentaire, notaire public, ou officier de l'une quelconque des forces de Sa Majesté, que l'on priera de compléter et signer le certificat. Cette formule doit être ensuite renvoyée à l'adresse mentionnée ci-dessus.

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



OG/GC

*Jour* *Opelant*  
Le directeur des successions, *magn*

## RÉPONDRE AU LONG À TOUTES LES QUESTIONS APPLICABLES

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

Degrés de parenté	PARENTS à signaler	TÉMOIGNAGE DU DÉCLARANT		
		NOM ET PRÉNOMS de tout parent de chacun des degrés mentionnés	Age	ADRESSE AU LONG de chaque parent survivant, en regard de son nom, et date du décès de tout parent décédé
1	Veuve du défunt.....			
2	Enfants du défunt et dates de naissance.....			
3	Père du défunt.....	Doré Isidore	54	Rue Fuger Roberval
4	Mère du défunt.....	Doré Marie Anne	53	Rue Fuger Roberval
5	Frères du défunt	Frères germains	Doré Maurice Doré René Doré Jean-Joseph	26 Jonquièrre 14 Roberval 12 Roberval
		Demi-frères		
6	Sœurs du défunt	Sœurs germaines	Sr Marie de St. Joseph (M. Ange) Doré Irène Doré Hélène Doré Hermance Doré Rita Doré Thérèse	25 Hôpital Ste Anne Québec 23 Roberval 21 Roberval 20 Roberval 18 Roberval 15 Roberval
		Demi-sœurs		
7	Noms des frères ou sœurs (germains ou non) du défunt, qui sont décédés, et date de décès de chacun d'eux	Noms et âges de leurs enfants (le cas échéant)		Adresse de leurs enfants



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

8	Nom et prénoms du défunt.	José Gérard
9	Date de sa naissance.	29 août 1927
10	Lieu et date de son mariage.	St-Prime 15 mai 1916 ✓
11	Lieu et date du mariage de ses parents.	St-Prime 15 mai 1916

## DÉTAILS DE DOMICILE

12	Lieu où le défunt est né.	Val-Jalbert comté Roberval
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) Province Québec Co. Roberval (b) 17 ans. (c) (d)
14	Nature de son emploi avant son enrôlement.	Commis de Bureau
15	Indiquer s'il était propriétaire de la maison où il demeurait. Le cas échéant, à quel endroit?	non
16	Indiquer le lieu où le défunt entendait vivre d'une façon permanente.	?

## DÉTAILS DE LA SUCCESSION

17	A-t-il laissé un testament? Si vous en avez la garde, veuillez nous le transmettre.	non, pas à notre connaissance
18	Si le défunt était marié et domicilié dans la province de Québec ou dans un état des États-Unis d'Amérique ou dans un pays où il existe communauté de biens entre les époux, existait-il un contrat se rapportant à la propriété?	-
19	Avait-il un compte d'épargne dans une banque, un bureau de poste ou autre institution? Le cas échéant, donner le nom et l'adresse de la banque, etc., et le montant déposé. Désirez-vous qu'il soit administré avec le compte de solde?	-
20	Montant des certificats d'épargne de guerre que possédait le défunt. Indiquer l'endroit où ils se trouvent.	-
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.	une obligation de la victoire de \$50. payable en six mois, achetée avant de traverser outre-mer.
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.	Metropolitain, 1 police de \$1,000. mais annulée si tué à la guerre.
23	Décrire les autres valeurs, le cas échéant, et en donner le montant approximatif. Se servir de l'espace à la page 4, au besoin.	-

## AUTRES DÉTAILS

24	Après son engagement, le défunt avait-il contracté des dettes: (a) pour ses propres logement et pension pendant qu'il était dans les forces armées. (b) pour habits et équipement militaires. Un état détaillé de chacun de ces comptes doit être annexé à cette formule et, s'ils sont exacts, veuillez y inscrire "approuvé" et signer votre nom. Si vous les croyez inexacts, donnez des détails.	-
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.	payé entièrement par moi-même à un montant de \$75.00 (services funéraires)

(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.

DÉCLARATION

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

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

Isidore Dore



Signature du déclarant

Notre-Dame de Roberval Rue Huger Adresse

CERTIFICAT

Je, soussigné, certifie que, ~~autant que je sache~~

Isidore Dore

mon fiancé

Nom du déclarant

\*Voir plus haut

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

Daté à Notre-Dame de Roberval Trentième ce vingt-troisième jour de décembre 1944

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

J. A. B. Duroy Titre Curé

Adresse Notre-Dame de Roberval Comté de Roberval p. 9.

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

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

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

AUTRES DÉTAILS

Ottawa, October 30th, 4.

Claim Division,  
Metropolitan Life Insurance Co.,  
Canadian Head Office,  
Ottawa, Ontario.



Your DC 770067 A3

No. E.0584, Private Gerard DORE

Gentlemen:

As requested in your letters of September 7th and October 17th, enclosed herewith is an official certificate of death in respect of the marginally named Canadian soldier, whose date of birth is recorded as August 29th, 1924.

His first departure for service outside the home areas as defined in your item 2 was on the 29th of April, 1944.

Yours truly,


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

*msk.*  
FBR/JL


CERTIFICATE OF DEATH

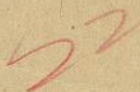


THIS IS TO CERTIFY that according to information received at the Department of National Defence from the overseas authorities, No. E.0584, Private Gerard DORE, of Les Fusiliers Mont-Royal, Canadian Army, was killed in action on the 23rd of July, 1944.

  
(C.L. Laurin) Colonel,  
Director of Records.

Officer authorized to sign certificates of death and/or presumption of death for the Canadian Army.

  
Department of National Defence,  
Ottawa, Canada.  
October 30th, 1944.



Director of Estates

Regimental No. E0584 Rank Private

DORE Gerard  
Surname Christian Names



Unit Les Fusiliers Mont-Royal (CA).

Date of death 23-7-44 Place of Death Overseas (France)!

Next-of-kin Mr. Issidore Dore Relationship MOTHER ✓

Address Rue Fabrique, Roberval, Roberval Co. P.Q.

M.F.M. 5 Copy of M.F.M. 5 herewith.

Will Will d/3-12-43 herewith.

Date 25-10-44

JEC/LH

*French 064*

*[Signature]*  
for (C.L. Laurin) Colonel,  
Director of Records,  
for Adjutant-General.



# FIELD SERVICE

405-D-16914  
Army Form B. 2090A.

MBR

A475

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

REGIMENT } Fus M R  
OR CORPS } Squadron, Troop, }  
Battery or Company }

Officer's Personal No. (if known) } E-0584  
Soldier's Army No. } Rank Pte

Surname Dore Christian Names G.

Died { Date 23 Jul 44 Place France  
Cause of Death\* K/A

Nature and Date of Report A.F.W.3014/74 d.2 Aug 44

By whom made Cdn Sec GHQ 2 Ech 21 A Gp

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

Burial { Place Sheet 7F/1 M.R.044015 Near Date 24 Jul 44  
By whom reported C.F. Fus M R.

State whether he leaves { (a) in Army Book 64 No  
a Will or not { (b) as a separate document Not Received.

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

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

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

Station and } Belgium  
Date } 13 Oct 44  
Signature of Officer in charge of Section } Eric G. Roberts, Capt.  
Adjutant-General's Office at the Base }  
for Officer i/c

Cdn Sec GHQ 2 Ech 21 A Gp

26

## Personal Effects Certificate.

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or  
Army No. E 0584Rank, Name & Initials Pte DORERegiment or Corps F M RNature of Casualty KIADate of Casualty 23 July 44

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

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

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

Signature [Signature]Rank 1st LtUnit Standard Battalion of ArtilleryDate 7 OCT 44Inventory No. :- 3881Registered Post Particulars :-Special Instructions.

Personal effects of :-

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

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

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



Personal or

Army Form W.3190.

Army No. E 0584 Rank Plt Name & Initials POPE E. Regt. 5th AR

USE AT THE BASE ONLY.

### INVENTORY OF EFFECTS.

List of Articles of Intrinsic or Sentimental Value.

SNAPSHOTS ✓  
IDENTITY DISC (RED) ✓  
WALLET (LEATHER) ✓  
2 \$5000 SIXTH VICTOR  
 Registered Post Particulars:  
LOAN RECEIPTS  
NEWSPAPER CLIPPINGS ✓  
Complete  
pa-4-48  
79 bdd

	£	s.	d.	Fres.	Ctms
Notes					
Postal Orders					
Gold					
Silver					
Copper					
<b>TOTAL</b>					

#### Special Notes.

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

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

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

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

Special Instructions:  
 Personal effects of -  
 (i) Officers and other ranks will always be despatched by registered post to O.C.'s G.H.Q. and Eshelton.  
 (ii) Sick or Wounded officers and other ranks will always be despatched by registered post to the hospital to which assigned, if known, otherwise to O.C.'s G.H.Q. and Eshelton.  
 Two copies of this Army Form will be enclosed in the parcel.  
 This Army Form will also be used when forwarding the personal effects of enemy dead or enemy prisoners of war.



le 5 octobre, 1944.

RE: E0584 le soldat Gerard DORE



Cher monsieur,

Relativement au décès de votre ~~fil~~ <sup>fil</sup>, le militaire susnommé, je suis chargé de vous envoyer sous ce pli, pour que vous les conserviez, un "Avis confidentiel" et des "Renseignements pour l'information et la gouverne des familles des militaires portés disparus, morts, internés ou prisonniers de guerre". Ces renseignements vous intéresseront sans doute et vous seront utiles.

Veillez agréer, ~~monsieur~~, l'expression de mes sentiments distingués.

Pour l'adjudant-général,  
le directeur des archives,

M. Isidore Dore,  
Boite 123, rue Auger,  
Roberval, Cte Roberval,  
Quebec.

*48 28*  
/ (C.L. Laurin) colonel.

*En.*

*18*

F.T.

Mr. Isadore Dore,  
Rue Fabrique,  
Roberval, Roberval Co., P.Q.



Dear Mr. Dore:

It was with deep regret that I learned of the death of your son, E0584 Private Gerard Dore, who gave his life in the Service of his Country in the Western European Theatre of War on the 23rd day of July, 1944.

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

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

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

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

SEP 30 1944

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

/EMA

*f.h.*

16



Cher monsieur,

C'est avec un profond regret que j'ai appris le décès de votre fils, le soldat Gérard DORÉ, matricule E-0584, qui a donné sa vie au service de sa patrie sur le théâtre de guerre de l'Europe occidentale le 23 juillet 1944.

D'après les renseignements officiels que nous avons reçus, votre fils a été tué au combat contre l'ennemi. Vous pouvez compter que sur réception de détails supplémentaires, nous vous en aviserons sans délai.

Le Ministre de la Défense nationale et les membres du Conseil de l'Armée me chargent de vous offrir, à vous-même et à votre famille, leurs sincères condoléances dans votre deuil.

Nous rendons hommage au soldat Doré pour son vaillant sacrifice.

Votre bien dévoué,

l'adjudant-général,

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

SEP 30 1944

(H. F. G. Letson),  
major-général.

*MR*

M. Isidore Doré,  
Rue Frabique,  
Roberval, Cté Roberval,  
Québec.

/RB

**KILLED IN ACTION (Continued)**  
\*\*\*\*\*

CENTRAL ONTARIO REGIMENT

15. FORSHAW, JOHN, SGT., B64324, MRS. VEDA FORSHAW (WIFE),  
20 CUMBERLAND AVE., ROSE GROVE,  
BURNLEY LANCS. ENGLAND.  
PERCY JOHN FORSHAW (FATHER),  
1688 QUEEN ST. E., TORONTO 8, ONT.

REGIMENT DE QUEBEC

16. DORE, GERARD, PTE., E0584, ISADORE DORE (FATHER),  
FABRIQUE ST., ROBERVAL, QUE.
17. DUNN, WILBROD, PTE., D58107, MRS. OVIDE DUNN (MOTHER),  
ST. LAMBERT ANNEX, QUE.
18. FOREST, LEO, PTE., D157665, HERVE FOREST (FATHER),  
ST. BONAVENTURE, QUE.
19. HACHE, JOSEPH, PTE., G23497, PIERRE HACHE (FATHER),  
HACHEVILLE, N.B.
20. LACHAPPELLE, LEO, L/Sgt., D166260, MRS. MARIE R. LACHAPPELLE (MOTHER),  
4837 PAPINEAU, MONTREAL, QUE.
21. PELLETIER, PHILIPPE, PTE., E100964, ALPHONSE PELLETIER (FATHER),  
STE. ANNE DE LA POCATIERE,  
QUE.
22. PROULX, HENRY SAMUEL, PTE., B126557, MRS. MARIE D. PROULX (WIFE),  
Box 205, COCHRANE, ONT.
23. CANCELLED

ALBERTA REGIMENT

24. WINTHERS, JACK RONALD, PTE., M105237, MRS. ELNA WINTHERS (MOTHER),  
424 12TH ST. N.W., CALGARY, ALTA.

**DIED OF WOUNDS**  
\*\*\*\*\*

CENTRAL ONTARIO REGIMENT

25. WILSON, CYRIL, SGT., B64705, JAMES WILSON (FATHER),  
108 BASTEDO AVE., TORONTO 6, ONT.

**DANGEROUSLY WOUNDED**  
\*\*\*\*\*

CANADIAN ARMoured CORPS

26. BAYKO, STEVE, TPR., H63985, MRS. PEARL BAYKO (MOTHER),  
GRANDVIEW, MAN.
27. GATE, STEPHEN, GDSM., B50071, MRS. MARGARET V. GATE (WIFE),  
MCCAMUS AVE., NEW LISKEARD, ONT.
28. HEWTON, ALLAN STUART, GDSM., B80033, MRS. LEONA D. HEWTON (MOTHER),  
LION'S HEAD, ONT.

le 18 septembre 1944.



Monsieur,

En réponse à votre lettre du 23 août 1944, relativement à votre fils le soldat Gérard DORE, matricule E-1584, et pour faire suite à votre lettre du 21 août 1944, nous regrettons de ne pouvoir vous donner le nom de l'aumônier de votre fils ou de ses amis. Vous comprendrez que dans les zones de combat il existe un transfert et un mouvement rapides du personnel d'une unité à l'autre et l'aumônier peut fort bien ne plus être avec la même unité. Ceci s'applique aussi aux amis de votre fils. Si toutefois, vous désirez écrire à l'aumônier de l'unité nous vous conseillons d'adresser votre lettre ainsi qu'il suit:

The Chaplain (R.C.)  
Les Fusiliers Mont-Royal,  
Canadian Army Overseas.

Veillez agréer, monsieur, mes sincères salutations.

Pour l'adjudant-général,

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

M. Isidore Doré,  
Boîte 123, rue Auger,  
Roberval, Cté Roberval,  
Québec.

/RB

15

F.T.

16 September 44

Mr. Isidore Dore,  
Box 123, Auger St.,  
Roberval, Roberval County,  
Quebec.



Dear Mr. Dore:

In answer to your letter dated 23 August 44, in reference to your son, E-1584 Private Gerard Dore, and further to our letter 21 August 44, we regret that we are unable to advise you as to the name of your son's Chaplain or your son's friends. You will appreciate that in the battle zone there is a rapid transfer and movements of personnel from one unit to another and the same Chaplain may not still be with the same unit. This would also apply to your son's friends. If however you should wish to write to the Chaplain of the unit, may we suggest that you address your letter as follows:

The Chaplain (R.C.),  
Les Fusiliers Mont~~ro~~<sup>ro</sup>,  
Canadian Army Overseas.

Yours truly,

*for*

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

JDM/MP.

14

CANADIAN MILITARY HEADQUARTERS

RECORDS OFFICE

CASUALTY REPORT

NAME (in full) ~~E-0584~~ DORE, Gerard

NO. E-0584 RANK PTE UNIT FUS MONT ROYAL

HOSPITAL (U.K. only) In which death took place, if applicable

R.U. (U.K. only) to which posted on admission to Hospital

CASUALTY KILLED DATE 23 JUL 44 LIST # A475 PLACE AEF

If P.O.W. or INTERNED, Number & Address

PREVIOUSLY REPORTED DATE



*L.S. Appleford*

(L.S. APPLEFORD) Major  
Officer i/c R.5 Wing CAS. SECT.

NEXT OF KIN

1. CANADA or U.S.A. - YES/NO (if NO, Complete No. 2)

2. NAME, (In Full)

RELATIONSHIP ADDRESS

3. ANY RELATIVES IN U.K. from M.F.M.5 or any other source, including children born overseas. If NONE so state

Date of Marriage, if known

WILL, EFFECTS, ETC.

1. NO WILL HERE (or) WILL HEREWITH DATED BENEFICIARY (Relationship)

(Name) (Address) EXECUTOR

2. BANK ACCOUNT - NAME OF BANK, etc. A/c No.

ADDRESS

3. KIT PRIVATELY STORED - NAME of Custodian

Address

4. Particulars of DEBTS, Remarks, etc.

Date SEP 9 1944

*B.E. Willan*

(B.E. WILLAN) Capt.

Officer i/c R.3 Wing Non-Effectives  
for Officer i/c Records  
CANADIAN MILITARY HEADQUARTERS

ORIGINAL - With WILL, if any to  
O. i/c ESTATES, C.M.H.Q.

DUPLICATE - To File.



405-D-16,914  
037/10

# METROPOLITAN LIFE INSURANCE COMPANY

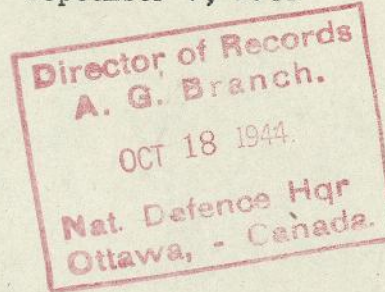
FREDERICK H. ECKER, *Chairman of the Board*  
LEROY A. LINCOLN, *President*

CANADIAN HEAD OFFICE  
OTTAWA, CANADA

CLAIM DIVISION  
ARTHUR S. BOURINOT  
*Manager*

September 7, 1944

The Director of Records  
Army  
Department of National Defence  
OTTAWA, Ontario



In re: DC 770067 A3

Dear Sir(s):

This Company has been requested to entertain claim under the above policy insuring the life of (Rank) Private

(Name) Gerard Dore (No.) E 0584

He has been reported Killed on active service on July 23, 1944  
~~Missing~~

The next of kin is Lisidore Dore Relationship Father

Address rue Fabrique, Roberval, Quebec.

We require the information in items No. 1 2 3 & 4

below to enable us to make payment:

- ..... 1. Official Death Certificate
- ..... 2. Date of First Departure for Service outside Home Areas which we define as Canada, United States, Alaska and Newfoundland
- ..... 3. Date of Enlistment
- ..... 4. Date of Birth
- ..... 5. ....

Your cooperation on these cases is greatly appreciated.

Yours truly,

ARTHUR S. BOURINOT

Manager

10-17-44

P.S. This is a copy of a letter previously addressed to you and to which no reply has been received. We are forwarding this copy in case the original letter has been lost or has escaped your attention.

29-4-44

21



MAIN FILE
CHARGED TO <i>Q3</i>
SINCE <i>7/10/44</i>
L. P. PASS <i>D</i>
OCT 19 1944
TO <i>ef.</i>
C.A.S.F. REGISTRY. <i>h</i>

АВИАКОРОЛІВНИ ЛІТ. ІНШУРАНСІС КОМПАНІ

Почта у Львові, 1944

АВІАКОРОЛІВНИ ЛІТ. ІНШУРАНСІС КОМПАНІ

405-D-16914

METROPOLITAN LIFE INSURANCE COMPANY

FREDERICK H. ECKER, Chairman of the Board  
LEROY A. LINCOLN, President

CLAIM DIVISION  
ARTHUR S. BOURINOT  
Manager

CANADIAN HEAD OFFICE  
OTTAWA, CANADA

Sept. 7, 1944

Director of Records  
Army  
Dept. of National Defence  
OTTAWA, Ont.

Director of Records  
A. G. Branch.  
SEP 8 1944  
Nat. Defense Hqr  
Ottawa, - Canada.



Case  
1-8-44

In re: DC 770 067 A3

405-D-16914

Dear Sir(s):

This Company has been requested to entertain claim under the above policy insuring the life of (Rank) Private

(Name) Gerard Dore (No.) E0584

He has been reported Killed on active service on July 23, 1944  
~~Missing~~

The next of kin is Isidore Dore Relationship Father

Address rue Fabrique, Roberval, Que.

We require the information in items No. 1, 2, 3 and 4

below to enable us to make payment:

- 1. Official Death Certificate
- 2. Date of First Departure for Service outside Home Areas which we define as Canada, United States, Alaska and Newfoundland
- 3. Date of Enlistment
- 4. Date of Birth
- 5. \_\_\_\_\_

Your cooperation on these cases is greatly appreciated.

Yours truly,  
ARTHUR S. BOURINOT  
Manager

20

METROPOLITAN LIFE INSURANCE COMPANY

100 WALL STREET, NEW YORK, N.Y.

ADVANCE  
POLICY

MAIN FILE
CHARGED TO <i>C</i>
SINCE <i>1-8-44</i>
L. P. PASSED
SEP 9 1944
TO <i>B</i>
C.A.S.T. REGISTER <i>W</i>

File Copy

Quote No. H.Q. 405-D-16914  
(Records-C)

DEPARTMENT OF NATIONAL DEFENCE

ARMY

Ottawa, Canada.

30th August 1944

Commissioner of Income Tax,  
Department of National Revenue,  
Ottawa, Ontario.



National Registration Division,  
Department of Labour,  
Ottawa, Ontario.

The undermentioned Canadian Army  
Casualty is forwarded for your information, please:

Regimental No.	<u>H-0584</u>	Rank	<u>Pte</u>
Surname			<u>DORE</u>
Christian Names			<u>Gerard</u>
Nature of Casualty			<u>Killed in action</u>
Date of Casualty			<u>23-7-44</u>
Address at time of enlistment			<u>Roberval, P.Q.</u>
	<u>Date enlisted:</u>		<u>7-4-43</u>
			<u>29-8-24</u>
Date of Birth			
Marital Status (On enlistment)			<u>Single</u>
Marital Status (Present)			<u>Single</u>
Occupation			<u>Clerk</u>
Name and address of Next-of-Kin			<u>Mr. Isadore Dore</u>
			<u>Rue Fabrique, Roberval, Roberval Co.</u>

MCL

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

P.Q.  
*18*

le 24 août 1944.



Monsieur,

En réponse à votre lettre datée du 5 août 1944, je dois vous informer que tous les renseignements concernant le décès de votre fils, le soldat Gérard DORE, matricule E-0584, que nous recevons des autorités outre-mer, vous sont immédiatement envoyés. Nous noterons que notre télégramme vous avisant de sa mort établissait qu'il a été tué par l'ennemi et non décédé à la suite de maladie ou d'un accident. Il est mort en France.

Il est malheureux qu'il n'y ait aucun indice d'erreur dans le rapport de cette mortalité. Vous pouvez être absolument certain que les autorités outre-mer n'auraient pas annoncé la mort de votre fils sans posséder au préalable des preuves évidentes. Ce rapport doit donc être considéré comme authentique.

Soyez assuré que si nous recevons des renseignements supplémentaires nous vous les transmettrons immédiatement.

Veillez agréer, monsieur, mes sincères salutations.

Pour l'adjudant-général,

M. Isidore Doré,  
Case 123,  
Roberval, Qué.

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

4105-D-56914

D

REC'D  
NAT. DEFENCE HQRS  
OTTAWA, CANADA

PRECIS  
JD:  
30/8/44

Director of Records  
A. G. Branch  
RECORDS  
SEP 5 1944 August 23, 1944.  
Nat. Defence Hqs.  
Ottawa, Canada  
Director of Records  
A. G. Branch.  
SEP 5 1944.

1-8-44  
SEP 11

Application for information concerning  
E-0584, Pte. DORE, Gérard,  
Les Fusiliers Mont-Royal.

From: Mr. Isidore Doré,  
Box 123,  
Auger St.,  
Roberval,  
Roberval Co., P.Q.

COPIED  
Archives  
COM 16

Mr. Doré has already applied to the Department of National Defence for information concerning his son, the above-named soldier, and received no answer. On August 4th, he received a telegram informing that his son was dead. However, he still hopes that his son may be missing only. Should he be dead, he would appreciate knowing if he was killed in an accident or in action. He requests that his personal belongings be sent him. He would also like to know the names of his son's chaplain and friends so that he may obtain information from them. He is very anxious to secure detailed information regarding his son's death.

Officer i/c Records  
A. G. Branch  
SEP 2 1944  
Nat. Defence Hqs.  
Ottawa - Canada.

13

Dore, Gerard

E 0584. ✓

#6C. 9. R. 11.

o/s 29/4/44

SL 3940

~~W.P.M.~~  
5-8-44

MAIN FILE
CHARGED TO <u>C</u>
SINCE 1-8-44
L. P. PASSED
SEP 9 1944
TO <u>C</u>
C.A.S.F. REGISTRY

RECEIVED  
SEP 10 1944  
C.A.S.F. REGISTRY

118  
1713

Roberval 23 août 1944

Le Directeur des Archives

Ministère de la Déf. Nat.  
Ottawa



Monsieur,

J'ai écrit dernièrement au sujet de mon fils, le soldat Gérard Doré 80584 Fusilier Mont Royal; je demandais des détails afin de savoir à quoi m'en tenir et je n'ai reçu aucune réponse.

Vous pourriez bien encore une fois nous dire: le lieu où il a été tué, si réellement cela est, car je voudrais être fixé sur cela; il arrive parfois des erreurs; de surcroît de quelle manière c'est arrivé; est-ce sur le champ de bataille en Normandie ou est-ce un accident quelconque?

S'il y avait possibilité aussi de savoir le nom de son <sup>1</sup>/<sub>2</sub> aumônier militaire et de quel





plus - une de ses amis, en fait  
une adresse pouvant nous  
renseigner.

N'a-t-il pas écrit une  
dernière lettre? Nous voudrions  
bien savoir ses objets personnels,  
nous serions alors plus fixés.

N'est-il pas seulement  
disparu? cela peut arriver,  
enfin renseignez-nous, nous  
avons toujours espoir qu'il  
n'est pas mort.

Nous ne nous en ten-  
drons certainement pas au  
simple télégramme reçu le  
4 août et qui nous a fort  
surpris, non, ce n'est pas  
assez.

Espérant que vous nous  
avertirez aussitôt que possi-  
ble par télégramme ou autre-  
ment.

Je demeure  
Isidore Doré  
B. P. 123  
Rue Anger Roberval  
Co Roberval



for French Translation, please

H.Q.405-D-16,914 (Records-C)

21st August, 1944.

Mr. Isidore Dore,  
Box 123,  
Roberval, P. Q.




Dear Mr. Dore:

In reply to your letter dated 5th August, 1944, please be advised that all information concerning the death of your son, E.0584 Private Gerard Dore, which is received from the Overseas Authorities, is immediately forwarded to you. It will be noted that our telegram advising you of his death stated that he had been officially reported killed in action. This implies that he was killed through enemy action and did not die as result of illness nor an accident. His death occurred in France.

It is <sup>unfortunate</sup> ~~sincerely regretted~~ that there is no indication of a mistake having been made in the reporting of this Casualty. You may be absolutely certain that the Overseas Authorities would not forward a report of your son's death without having definite evidence to that effect. This report must ~~unfortunately~~ <sup>therefore</sup> be considered authentic.

Please be assured that if further information is received you will be immediately informed.

Yours truly,

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

TGLC/LN

8

# UNIT COMMITTEE OF ADJUSTMENT REPORT

APPROVED AND FORWARDED

## INSTRUCTIONS

- To be completed in triplicate of which one copy will be retained by the unit.
- Parts marked \* which are not applicable will be ruled out and initialled.
- All blanks marked † will be filled in with "NIL" where appropriate.
- In the case of personnel reported MISSING, INTERNED, or PRISONERS OF WAR, NO PERSONAL EFFECTS WILL BE SOLD AND NO PREFERENTIAL CHARGES OR ORDINARY DEBTS WILL BE PAID by Unit Committee of Adjustment.
- In the case of DECEASED personnel, no personal effects of sentimental nature will be sold. Other personal effects may be sold to pay preferential charges and also when, in the opinion of the CO, the exigencies of the Service make it desirable to do so.
- Unit Committee of Adjustment may pay, in the case of deceased personnel,
  - preferential charges owing within the unit and the unit area, and
  - ordinary debts similarly owing ONLY if after making provision for all preferential charges of which it has notice there is sufficient cash on hand to pay all ordinary debts.
- The following will be forwarded in the manner shown,
 

In UK—to Officer i/c Estates, CMHQ.  
Ex UK—to Officer i/c Cdn Sec, GHQ, 2nd Echelon.

  - Personal effects not disposed of, original and duplicate copy of report, and Officers' Record of Service Book or Soldiers' Service and Pay Book MBM I, Pts I and II—by post, rail or road.
  - Any Will or testamentary document with a memorandum giving regimental particulars and, if undated, any available evidence indicating the probable date of its execution—by registered post AT ONCE.
  - Cheques, drafts, money orders, personal papers and documents, effects of sentimental value and an inventory of all personal effects forwarded—by registered post.

*Eric G. Roberts Capt.*  
Standing Committee of Adjust.  
Cdn. Sec. GHQ 2nd Ech 21 A.Gp.  
OCT 13 1944



## REPORT

No. E-0584..... Rank ...Pte..... Name in full ...Dore, G......

\*Deceased, \*Missing, \*Prisoner of War, \*Interned Date of Casualty..... 23 Jul 44

Unit Les Fusiliers Mont-Royal,

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

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

Name of Officer furnishing report ..... C.J.R. Langlois Capt  
(BLOCK CAPITALS)

### A. PERSONAL EFFECTS

- ~~Separate inventories are attached, as applicable, showing:~~
  - ~~Articles personally owned, suitable for service requirements, turned into QM Stores—Exhibit "A1"~~
  - ~~Articles sold to pay preferential charges, showing the purchaser of and the price paid for each article—Exhibit "A2"~~
  - ~~Articles sold under CO's authority showing the purchaser of, and the price paid for each article, and the written authority of CO for each sale—Exhibit "A3"~~
  - ~~Articles disposed of under authority of Officer i/c Estates, CMHQ, showing the disposition and, if sold, the purchaser of and the price paid for each article—Exhibit "A4"~~
  - Personal Effects, forwarded to (\*Officer i/c Estates), (\*Officer i/c 2nd Echelon),—Exhibit "A5".
- ~~No personal effects were found or received. A memorandum as to the circumstances and any action taken is attached as Exhibit "A6"~~

### B. WILL

- Original Will or testamentary document was forwarded on ..... nil ..... (date) by registered post to (\*Officer i/c Estates), (\*Officer i/c 2nd Echelon). Copy thereof and of the memorandum forwarded therewith is attached as Exhibit "B1".
- No Will or testamentary document was found on the person or among the effects of the deceased.

### C. CLOTHING AND EQUIPMENT (PUBLIC)

- Was turned in to QM Stores. yes
- There were no deficiencies. nil
- There were deficiencies amounting to £nil and cash debit voucher duly certified by the DADOS, or Senior Ordnance Representative of the formation is attached as Exhibit "C1".

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

D. PREFERENTIAL CHARGES

(a) Name and Address of Creditor

†	Nature of Claim	Amount	Paid or Unpaid
nil			

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

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

E. ORDINARY DEBTS

(a) Name and Address of Creditor

†	Nature of Claim	Amount	Paid or Unpaid
nil			

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

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

F. CREDITS

(a) Public Claims owing to the Casualty.

†	Nature of Claim	Amount
nil		



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

(ii) \*Statement of valuation of, and receipt for, articles suitable for service requirements turned into QM Stores (para A1 (a) above) attached as Exhibit "F2".

(b) Private Claims Owing to the Casualty.

†	Name and Address of Debtor	Particulars of Claim	Amount	Paid or Unpaid
nil				

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

G. CASH RECEIVED AND PAID

	Paid	Received
Cr. {	Cash found on person or in effects	† 65 frcs
	Cash realized from sale of effects as per para A.	†
	Cash collected re private claims as per para F.	†
Dr. {	Paid re preferential charges as per para D.	†
	Paid re ordinary debts as per para E.	†
	Paid (*balance) to unit Paymaster	† 65 frcs
	† 65 frcs	† 65 frcs

H. SERVICE AND PAY BOOK

Officers' Record of Service Book (\*Soldiers' Service and Pay Book MBM I, Parts I and II) is (\*forwarded with this report)

(\*not forwarded by reason that ..... already forwarded .....

..... [Signature] .....  
Signature of Committee or President

..... Les Fus M R - CA (0) .....  
Unit

...15 Aug 44...  
Date



Personal Effects Certificate

This portion for use at the Base ONLY

Army No. **R-0584**  
 Rank and Name **Pte Dore, G.**  
 Regiment or Corps **C.I.C. Fus. M.R.**  
 Nature of Casualty **Killed**  
 Date of Casualty **23 Jul 44**

INVENTORY NO :-



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

REGISTERED POST PARTICULARS :-

WITHIN SERVING UNDER MY COMMAND  
 WITH A DETERMINED INTEREST.

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

Signature **Geo Balcer**  
 Rank **Capt**  
 Unit **C.I.C. Fus M.R.**  
 Date **15 Aug 44**

SPECIAL INSTRUCTIONS

Regarding the forwarding of personal effects

- (I) THESE SHOULD ALWAYS BE DESPATCHED BY REGISTERED POST.
- (II) DECEASED OR MISSING MEN:- Package to be addressed by Registered post to:- Officer IC 2nd Echelon
- (III) WOUNDED OR SICK MEN:- Package to be addressed by Registered Post to:- Officer i/c 2nd Echelon.

**CANADIAN ARMY OVERSEAS**

**FINANCIAL RECEIPT**

RECEIPT No. .... 9 Aug 1944

RECEIVED FROM CAPT J. LANGLOIS FMR

THE SUM OF Sixty five francs

(French)

being

Amount of money found on or in the Personal effects of -

E-0584 PTE DORE G.



*R.M. Gendron Capt*  
.....  
Command Paymaster or Field Cashier. FMR

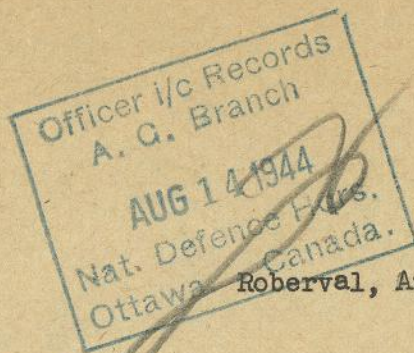
9 Aug 1944 In the field Place



TRANSLATION

L.P.

11/8/44



RECORDS

Roberval, August 5, 1944.

Officer i/c Records,  
Department of National Defence,  
OTTAWA.



Sir;

RE: NO. E-0584, Pte DORE, Gérard,  
Fusiliers Mont-Royal,  
D Coy., Field Unit,  
Cdn. Army Overseas.

We have received yesterday morning a Message informing us that the m/n had been reported killed in action, on July 23rd, 1944.

Well, is there any means of getting further details concerning this matter? We would be very much obliged to you. It is almost unbelievable that this would have happened for again on July 10th, we received a letter from our son, Gérard, and he never mentioned expecting to go to the battle-front. He merely stated that he was proud to belong to the Fusiliers Mont-Royal Regiment.

Under what given circumstances has he met death? Accident? Illness or while in action on the battle-field? Was he in Normandy or in Italy and since when? We never heard of anything. Was there an Army Chaplain at his side when he died?... if this was so...

Would not a mistake be possible either in the Name or the Regimental Number? We would greatly appreciate information.

(Sgd) Isidore Doré,  
Box 123, Roberval, P.Q.

Notreval. 5 août 1944

Le Secrétaire des Archives  
Ministère de la Défense Nationale  
Ottawa



Monsieur,

Nous avons reçu hier matin un message disant que le soldat Gerard Doré E 0584 est porté tué au combat, officiellement, le 23 juillet dernier.

Eh bien, Monsieur, s'il y avait moyen d'avoir d'autres détails à ce sujet, nous vous obligerions beaucoup; il est presque impossible que la chose soit arrivée, car notre fils Gerard a écrit encore le 10 juillet et il ne parlait pas du tout qu'il irait au front.

Il disait tout simplement qu'il appartenait au Rég. des Fus. M. D. et qu'il en était fier.  
Dans quelles circonstances serait-il mort. Accident? Maladie?

ou bien sur le champ de ba-  
taille ? Était-il en Normandie  
ou en Italie et depuis quand ?  
Nous n'avons rien su de cela.  
Est-ce qu'il avait un numé-  
riser militaire là où il succom-  
ba ? ... si cela est -

N'y aurait-il pas eu erreur  
de personnes ? ou de numéros ma-  
tricule.

S. G. P. ne regardez pas  
à nous fournir d'autres in-  
formations.

La dernière adresse de  
notre enfant était

E 5584 Pt. Grand Bois  
Reg. des Trus. M. R. Army  
Field Unit  
Ceylonian Army  
Perseus



Je vous en prie et comment est-il mort  
Une réponse prompte sera  
vivement appréciée.

Isidore Dore  
B. G. P.  
Retenue. P. L.

**CANADIAN PACIFIC  
TELEGRAPHS**

DAY LETTER

NIGHT LETTER

CASUALTY (REPORT DELIVERY)

OTTAWA

3 AOUT 1944



TO:- M ISADORE DORE  
RUE FABRIQUE  
ROBERVAL  
CTE ROBERVAL QUE

3909 MINISTRE DE LA DEFENSE NATIONALE REGRETTE PROFONDEMENT VOUS  
INFORMER SOLDAT GERARD DORE E0584 OFFICIELLEMENT PORTE TUE AU  
COMBAT VINGT TROIS JUILLET 1944 STOP SI NOUS RECEVONS DES  
RENSEIGNEMENTS SUPPLEMENTAIRES NOUS VOUS LES TRANSMETTRONS AUSSITOT

le directeur des archives militaires

PREPAID

**CANADIAN PACIFIC  
TELEGRAPHS**

DRS

DAY LETTER

NIGHT LETTER

CASUALTY (REPORT DELIVERY)

*FT*  
OTTAWA 2ND ~~JULY~~ <sup>AUG.</sup> 1944



TO:- MR ISADORE DORE  
RUE FABRIQUE  
ROBERVAL ROBERVAL CO QUE

3909 MINISTER OF NATIONAL DEFENCE DEEPLY REGRETS TO INFORM  
YOU THAT E0584 PRIVATE GERARD DORE HAS BEEN OFFICIALLY REPORTED  
KILLED IN ACTION TWENTYTHIRD JULY 1944 STOP IF ANY FURTHER  
INFORMATION BECOMES AVAILABLE IT WILL BE FORWARDED AS SOON AS  
RECEIVED

DIRECTOR OF RECORDS

*W*  
PREPAID

OFFICER I/C RECORDS *4*

## OVERSEAS CASUALTY RESEARCH

CABLE NUMBER 8658 PAGE 1 DATE 1-8-44  
 REG'T'L NU E 0584 RANK PTE  
 NAME DORE Gerard  
 (SURNAME) (CHRISTIAN NAMES)  
 SERVICE UNIT 187 FUS M R  
 NATURE OF CASUALTY DATE

Killed 23 July



(BC AEF)

DATE OF BIRTH  
29 DAY Aug MONTH 1924 YEAR Que

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

MR. ISADORE DORE

(FATHER)

ADDRESS

Rue. FABRIQUE.

ROBERVAL, ROBERVAL Coi, Que.

(Dpl tin. 1341.22-4-44, 1. INF Tce Bvt)

ADDITIONAL PERSON TO BE NOTIFIED

ADDRESS

PARENT'S NAMES

ADDRESS

(IF SOLDIER MARRIED OVERSEAS)

RELIGION

TRADE OR CALLING

LANGUAGES

Roman Catholic

clerk

French, English

MARITAL STATUS ON ENLISTMENT

PRESENT MARITAL STATUS

Single

Single

SOLDIERS ADDRESS ON ENLISTMENT

Roberval Que

Quebec Que

7 April 43

RR 97 CABLE CHECK

One - 2 - Slip attached -  
 N. OF K. CHECK 5/6

TELEGRAM CHECK 3

COPY FOR RESEARCH SECTION

3940

6 CIRU

#8658 LONDON 010100/AUG/44

BATTLE CASUALTIES A E F

D.135980	L/CPL BALL CA	186	INJURED 21 JULY
D.82192	PTE ROBERTSON LC	186	WOUNDED 25 JULY NEXT KIN MRS ESTHER ROBERTSON MOTHER 552 MADELINE STREET MONTREAL PQ
D.134034	PTE BARKLEY LG	186	WOUNDED 27 JULY
E.0584	PTE DORE G	187	KILLED 23 JULY
D.59222	PTE BLAIS E	187	KILLED 23 JULY
D.63635	PTE BONNEAU G	187	NEXT KIN MR AUGUSTE BONNEAU FATHER 2109 JOLIETTE STREET MONTREAL PQ CAN KILLED 23 JULY
D.124761	SGT RODRIQUE C	187	WOUNDED 25 JULY
D.62689	SGT BELISLE F	187	WOUNDED 25 JULY
C.102919	PTE LAVIGNE OT	187	WOUNDED 25 JULY
B.144237	PTE LEBLANC EA	187	WOUNDED 24 JULY
E.100430	PTE CYR C	187	WOUNDED 26 JULY
E.10580	PTE ADAM O	187	INJURED 21 JULY CELLULITIS MIDDLE TOE LEFT FOOT
D.66097	PTE LACROIX V	187	INJURED 25 JULY COMPD FR LEFT ELBOW
H.103413	PTE PENSTON AD	192	INJURED DNK
M.12049	PTE LEMAIRE WJ	192	INJURED 21 JULY SHELL BLAST
M.105305	PTE ZIEGLER R	192	WOUNDED 25 JULY
B.116692	PTE BOWBRICK GH	192	NEXT KIN MRS HAZEL ISABELLA BOWBRICK WIFE 101 COLBOURNE STREET LINDSAY ONT CAN WOUNDED 25 JULY



3 KILLED 9 WOUNDED

5 INJURED

TOTAL 17 NAMES.....

CANMILITARY

30008/DF/011415Q/AUG/44

8579

- CASUALTY SECTION EXTRACT FORM -

A 475

Message Received from.....21/CAS/1812.....

Date Message Received.....31 JUL 44

AEF



REGIMENTAL NO. RANK NAME FULL CHRISTIAN NAMES  
E0584 PTE DORE G. ERARD  
UNIT... FUS. MONT ROYAL

UNIT SERIAL #  
187

CATEGORY AND DIAGNOSIS

KILLED 23 JUL 44

Hospital Admitted to..... Date.....  
Hospital Transferred to..... Date.....  
Hospital Discharged from..... Date.....

NEXT OF KIN ISIDORE DORE RELATIONSHIP FATHER

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

Address. ROBERVAL RUE FABRIQUE  
CO. ROBERVAL P.O. CAN

HOME TOWN... ROBERVAL P.O. CAN 27

Cable # 8658 Inland Tel. #

REMARKS:-

M 30 M-12  
Verification Clerk's Signature

Handwritten initials



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.

E 0584 Gnr DORE Gerard A 18 A 1  
Regtl. No. Rank Surname First Name A or R Age Cat.  
"M" Test: 129 A French 8 14 11 15 18 13 21 29 33 33 63  
Total Form Eng. or Fr. 1 2 3 4 5 6 7 8 1-3 4-5 6-8

ADDITIONAL FOLLOW-UP: Due to his lack of knowledge of English this man is unsuitable for C.A.C. However, would make a good soldier and is potential N.C.O. in French speaking Inf..

RECOMMENDATION:- Re-Allocate to Inf. (R) M.T. Transfer to A 13 I.A.T.C. Valcartier for Adv. Trng. and movement overseas. Good potential N.C.O. material.

CAMP BORDEN ONT. 27 Oct. /43.

*J. E. Lacerite*  
(J.E.LACERTE) Capt. COPIED  
Archives  
C-11418

E-0584, Pte. DORE, Gerard. (5th Inf) A.(I).T.C. A\_13, Valcartier Camp.

N.C.O. MATERIAL. Instructor's Course. Suitable for Service Overseas.

*CIC operational N/T.*

*L.P. Rousseau*  
(L.P. ROUSSEAU) Capt.  
Army Examiner A-13.

Personnel Selection  
Examination of Documents  
Completed  
OK APR 21 1944.  
A E *Robert Lyett*  
1st Trg Bde DEBERT

10 May, 1944  
6 C.I.R.U.  
Potential clerk; promising; potential NCO. *Exhaherre*  
Capt 810

6 C.I.R.U. *505 to X-4 List Fus M.R.*

DECEASED

CAC(0) 7134  
INFANTRY (R)  
Arm or Corps  
Driver / C N.T  
Trade (if Tradesman or Trade Trainee)  
NON-TRADESMAN  
Work in Arm (if Non-Tradesman)

DEPARTMENT OF NATIONAL DEFENCE  
(Army)

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

Personnel Selection Record

I. E-0584 GNR DORE, Gerard, A 18 AI  
Regt. No. Rank Name (surname first) A or R Age Med. Cat.  
French English D.R.O. #5 Quebec 7-4-43  
Main Language Other Language(s) Place (Unit) Interviewed Date Interviewed

II. Revised Examination "M" B.F. 22398 Quebec 7-4-43 L.LaRochelle Lt.  
Place Tested Date Tested By Whom  
129 III Subtests 8 14 11 15 18 13 21 29 Subtotals 33 33 63 French  
Total Group 1 2 3 4 5 6 7 8 1-3 4-5 6-8 English or French  
Other Tests P UL HE MS  
24 1 11 11 11

III. Educational Background Completed grade IX, in 9 years at Roberval Academy" P.Q. Holds a certificate. Typewriting: 70 words per minute. Preferred subjects were arithmetic and language. Left school aged 17 to go to work.

IV. Occupational Background General clerk in a Bank during 7 months. Office clerk for 2 months. Left a week ago, in order to join.

V. Military Background Nil.

VI. Other Personal History and Appraisal SPORTS: baseball, hockey, tennis  
Parents living. Father is a labourer. The 6th. amongst 10 children. Healthy family. Lives at home.  
Favourable impression. Alert looking young man.  
Average natural intelligence.  
Ambitious. Almost bilingual. Wishes to serve with R.C.A.  
Does not want to serve as clerk.  
Energetic. Likes action.

VII. Recommendations R.C.A. A/A/ Light. Non-tradesman. N.C.O. Material.

(Signed) L.LaRochelle Lt. Army Examiner

French

FURTHER INFORMATION AND FOLLOW-UP

E-0584 Pte DORE, Gerard -- DRO/No. 5 Quebec, PQ. on 7-4-43.

According to instructions received in letter Q:8/029 Vol.20 d/16-6-43. this man is to be re-allocated to INFANTRY (R) Non-Tradesman. N.C.O. Material.

CABTC No. 53 - Lauzon, PQ. on 23-6-43.

(Langevin CIMON) Capt. A.E.

E-0584 Pte. DORE, G. (5th Inf.) A.I.T.C. A-13 August 5th, 1943

N.C.O. Material.

(M.K.MORRISON) LIEUT  
for (P.A.FOURNIER) Capt.

E-0584, Pte DORE, G. (5th Inf) A-13. August 27,43

Suitable for overseas Service.

(P.A.FOURNIER) Capt. A.E.

A.I.T.C.A-13 Valcartier

Suitable for Overseas Service.



(G. LAMERE) Capt.  
Army Examiner

28-8-43

T.C. 43 Sherbrooke, P.Q. 24 Sept 1943.

Enlisted 3-4-43. Had basic at Lauzon. Qualified. No advanced. Was employed 2 months as clerk at Valcartier. Presently at TC 43 undergoing refresher before proceeding overseas. Has a clean conduct sheet. The subject creates a favourable impression. Seems to be of fair average intelligence. Well adaptable. Good mixer, Willing, young, 19 yrs old. Speaks a fair english. Likes baseball and hockey. Likes reading literature. Coy Commander's report:- "Efficiency average. Willing. Good conduct. Complains of stomach trouble". -- Single. Healthy looking has no complaints he says. Has had some driving experience and would be interested in becoming a driver in the army. - Eager to go overseas, to seen action he says. - Suitable for o/s with C.A.C.

C.A.C. (Other) Driver i/c non/Tradesman

(L. Constantineau), Lieut. & A.F.

18 October 1943. No.1 C.A.C. T.R., Camp Borden, Ontario.

Age 19.

Enlisted April 1943.

Basic Training at Lauzon,

Was 2 months in A-13 Valcartier employed as Orderly Room Clerk.

To Sherbrooke B.T.C. for refresher.

To No.1 C.A.C. T.R. 7th October 1943.

DORE says that he would like to take training with C.A.C. in spite of the fact that he speaks and understands English only with difficulty. He seems to be so well-motivated and genuinely anxious to be in Tanks and is so ready to accept the difficulties of being separated from other French-speaking friends that it is considered worth giving him a trial. (He had not previously been allocated when classified as French-speaking at intake)

RECOMMENDATION: C.A.C.

D & M

(M.F.M.196 A) created.

*Handwritten signature: H. Carney*

MILITIA BOOK M. 1

PART I

250M—10-42 (5040-2 & 5232)  
H.Q.1772-39-1672

CANADIAN ARMY



# SOLDIER'S SERVICE BOOK

(For use on Active Service)

Reg. No. Q 0584

Surname (Capitals) DORE

Christian Names in full CERARD

## SOLDIER'S SERVICE BOOK

(Soldier's Pay Book, Militia Book M. 1 (Part II)  
will be issued for active service.)

Every entry in this book (other than those on page 24 of this part of Militia Book M. 1, connected with the making of a Soldier's short form of Will) is to be made under the superintendence of the Officer Commanding the squadron, battery or company to which the man belongs or is attached.

Alterations in any of the entries will be initialled by an officer.

---

### INSTRUCTIONS TO SOLDIER

1. You will be held **personally responsible** for the safe custody of this book.
2. You will **always carry this book** on your person when on duty, and on active service.
3. You must produce the book whenever called upon to do so by a competent military authority, viz.: Officer, Warrant Officer, N.C.O. or Military Policeman.
4. You must not alter or make any entry in this book (except as regards short form of Will on page 24; see instructions on pages 20 to 23), and disobedience of this order will be treated as a serious offence.
5. Should you consider that any entry is lacking or incorrect, or should you lose the book, you will report the matter to your immediate military superior.
6. You will be permitted to retain this book after discharge as a record of your services, but should you lose the book after discharge it cannot be replaced.

505 Sherbrooke - DO 2/215

(1) SOLDIER'S NAME AND DESCRIPTION ON ATTESTATION



Regtl. No. E/0564

Surname (in capitals) DORE

Christian Names (in full) Yves

Date of Birth 26/5/1927

Place of Birth St. Albert + 0

Citizenship Canadian French

Trade on Enlistment Commis de Bureau

Nationality of Father at Birth Canadian + 0

Nationality of Mother at Birth " "

Religion Catho. Roman

Enlisted at Quebec + 0

Date 17/4/43

Particulars of former service (if any) i.e. Regtl. No., Corps or Regiment and period. Nil

Signature of Soldier Yves Dore

Signature of Officer [Signature]

Place Quebec + 0 Date 17/4/43









## (VII) PARTICULARS OF TRAINING

Courses and Schools.  
Specialist Qualifications.  
Swimming, etc., showing result,  
Certificate number or authority.  
(Two lines may be used for each entry)

Date

Signature of Officer



## (VIII) SMALL ARMS RANGE COURSES

Year	Classification	Type of Weapon	If Table not completed, state parts fired	Signature of Officer
43	II	Revol.		<i>[Signature]</i>
43	II	S.M.C.		<i>[Signature]</i>
44	II	2" M.		<i>[Signature]</i>
44	II	Pist.		<i>[Signature]</i>
44	II	Re.		<i>[Signature]</i>

(VII) PARTICULARS OF TRAINING

Courses and Schools.  
Specialist Qualifications.  
Swimming, etc., showing result,  
Certificate number or authority.  
(Two lines may be used for each entry)

Date

Signature of Officer



(VIII) SMALL ARMS RANGE COURSES

Year	Classification	Type of Weapon	If Table not completed, state parts fired	Signature of Officer
43	II	3 rifle		P. Paragelita
43	II	2 M. G.		P. Paragelita
44	H	S. M. C.		
44	II	2 M.		
44	II	P. et		
44	II	2.		







## (XV) PARTICULARS OF SURGICAL APPLIANCES ISSUED

Particulars	Date	Signature of Medical Officer

## (XVI) PROTECTIVE INOCULATIONS

Nature of Vaccine, "T.A.B.T." Cholera, Plague, etc.	Date	Signature of Medical Officer
T A B T. 1	12-4-43	<i>[Signature]</i>
2	8-5-43	<i>[Signature]</i>
3	27-5-43	<i>[Signature]</i>
Re-Innoculation	30-9-43	<i>[Signature]</i>
1cc Typhus	15-3-44	<i>[Signature]</i>
1cc Typhus	25-3-44	<i>[Signature]</i>
1cc typhus	31-3-44	<i>[Signature]</i>
T.A.B.T. / Y <sub>2</sub> cc	9-6-44	<i>[Signature]</i>

## (XVII) VACCINATION

Date Vaccinated	Signature of Medical Officer
12-4-43	<i>[Signature]</i> REAME

## (XVIII) MISCELLANEOUS ENTRIES

(For entries for which space is not otherwise provided)  
NOTE.—No entry on this page has any legal effect as a WILL

Particulars	Date	Signature of Officer
X-Ray 199 Q M H	7-4-43	<i>[Signature]</i>
M. Test from 129 F	7-4-43	<i>[Signature]</i>
Embarkation		<i>[Signature]</i>
Leave Granted		<i>[Signature]</i>
P.M. GAS	10-11-43	<i>[Signature]</i>
"M" TEST (REV.) COMPLETE		<i>[Signature]</i>
M + M 196 inoculated	10-5-44	<i>[Signature]</i>
T.B.T. Part II completed	10-5-44	<i>[Signature]</i>
Fingerprinted		<i>[Signature]</i>
not available		<i>[Signature]</i>
FINGERPRINTED—CAIB		<i>[Signature]</i>
Entitled to 1 Red	7-4-44	<i>[Signature]</i>
serv. chevron. O.P.O. 461.3		<i>[Signature]</i>

## (XIX) SOLDIERS' WILLS

1. The particulars of the next-of-kin should always be carefully inserted in the Form on pages 4 and 5 of this Book, but the Soldier must understand that the entries made there have no legal effect in respect to the disposition of his estate in the event of his death and therefore do not relieve him from the necessity of making a Will. Unless a Soldier duly makes a Will, his estate is dealt with in the same manner as that of any other person who dies without leaving a Will, and not only may the relative or person desired or intended to be benefited receive little or no share of the estate but the distribution thereof is delayed until such of the next-of-kin as may be legally entitled can be located. Therefore, though his estate may consist of no assets other than the amount of pay and allowances at credit and the belongings he has on his person or in camp, it is urgent that he make a Will which, when completed, is left with his Commanding Officer for transmission to the Record Office for safe custody and in the event of his death is forwarded firstly, to the Estates Branch, Department of National Defence, Ottawa, for administration and distribution of the Service estate, and secondly, if other assets (including real estate) make it necessary, to the Executor named in the Will.

2. The Soldier's Will should preferably be made out on the Will Form,—M.F.M. 10 (English) or M.F.M. 10a (French)—provided for that purpose and on which are also printed a number of helpful instructions. These forms are obtained through the Commanding Officer of each Unit. A separate sheet of paper may be used but in such case the general form of the Will as shown in the Form M.F.M. 10 or 10a should be carefully followed. The Soldier will date the Will and at the bottom of it sign his name in the presence of two witnesses who at the same time in the presence of each other and of the Soldier will also sign their respective names. If the Soldier cannot write, he will make his mark in the place

in the Will where his signature would ordinarily appear, and immediately above their signatures on the Will the witnesses will write a memorandum as follows:—  
“The above Will has been first duly and audibly read over to this Soldier when he appeared to understand it and made his mark hereto in our presence as aforesaid”. In such cases, however, it is recommended that the guidance of the Soldier's immediate superior Officer be obtained.

3. The Short Form of Will (see pages 23 and 24 of this Book) may be used by a Soldier on Active Service but it must be entirely in his own handwriting. It is pointed out, however, that under the laws of some of the Provinces of Canada, such a Will is ineffective as to real estate. Therefore a Soldier having a Canadian domicile and owning real estate should use the Will Form M.F.M. 10 or 10a and appoint therein a responsible executor. A Soldier having a domicile out of Canada should not use the Short Form on page 24 because it may not comply with the law of such domicile.

4. No person who receives any benefit under a Will can be a witness. If a person to whom a Soldier intends to give any part of his estate is a witness of the Will, he will not be allowed to receive the intended gift. He may, however, be appointed an executor.

5. When making a Will it is not desirable that alterations be made in it. If, however, alterations are made by the Soldier in his Will, he and the two witnesses must write their initials in the margin opposite the alterations. Any changes in the provisions of a previously made Will can always be made by a new document called a Codicil which should refer to the previously made Will and then state the changes desired, and be dated and signed and witnessed in the same manner as the Will itself.

6. A completely new Will can at any time be made and in such case it revokes, or cancels, any Will of earlier date. The laws of all the Provinces of Canada, except one, and of most English speaking countries provide that



marriage after the date of a Will revokes that Will. Therefore, a Soldier, immediately upon his marriage, should make a new Will in order that, in the event of his death, his estate may be distributed in accordance with his wishes as shown in his Will.

7. The Will of a Soldier on Active Service is not invalid by reason that at the date it was made he was under the age of 21 years.

A Soldier who has made a Will before his enlistment, is recommended to inform his Commanding Officer where such Will has been deposited and the Commanding Officer shall upon receipt of such information forthwith complete the following certificate and despatch the same to the Officer i/c Records.

No. Rank Name  
states that he has executed a Will and that the same has been deposited with

at  
Date Signature of Officer.  
Rank or Appointment.

Before embarkation, each Soldier is recommended, particularly those who have real estate, to consider the necessity for executing a document appointing some person or Trust Company his Attorney to manage or otherwise deal with real estate during his absence from Canada; also to review his affairs in the light of any changes that may have occurred since the date of his last Will and, if desirable, make a formal Will and inform his Commanding Officer thereof as indicated at the top of this page, or make a Will on M.F.M. 10 or M.F.M. 10a (French) and hand it duly completed to his Commanding Officer for transmission to the Record Officer concerned for safe custody.

The Officer receiving such Will shall complete the following certificate:—

Certificate M.F.M. received and forwarded to the Officer i/c Records at

Signature of Officer  
Rank or Appointment

Signature of Officer

Date Certificate or Will extracted

Unit or Dept.

To whom sent

Solely for use on Active Service. The Will, on page 24, must NOT be used until you have been placed under orders for Active Service.

### SHORT FORM OF WILL

(Write Will on next page)

If a Soldier on active service, or under orders for active service, wishes to make a short Will, he may do so on next page. It must be entirely in his own handwriting and must be signed by him and dated. The full names and addresses of the persons whom he desires to benefit, and the sum of money or the articles of property which he desires to leave to them, must be clearly stated. The mere entry of the name of an intended legatee on the next page without any mention of what the legatee is to receive is of no legal value.

The following is a specimen of a Will leaving all to one person:—

In the event of my death I give all my estate to my mother, Mrs. Mary Bull, 999 High Street, Toronto.

(Signature) GEORGE BULL,  
Private No. 30000,

Date 5th August, 1936. Cameron Highlanders.

The following is a specimen of a Will leaving legacies to more than one person:—

In the event of my death, I give \$10.00 to my friend, Miss Rose Smith, of No. 1, High Street, London, and I give \$5.00 to my sister, Miss Maud Bull, 999 High Street, Toronto, and I give the remainder of my estate to my mother, Mrs. Mary Bull, 999 High Street, Toronto.

(Signature) GEORGE BULL,  
Private No. 30000,

Date 5th August, 1936. Cameron Highlanders.

Date Will extracted

Signature of Officer

To whom sent

Unit or Dept.

Solely for use on Active Service. This Will page must NOT be used until you have been placed under orders for Active Service.

### WILL

(For use if the Soldier has not already made a Will or wishes to alter one already made. See instructions on page 23).

Signature.....

Rank, Reg't Number.....

Date.....

PERIOD

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



MILITIA BOOK M. 1

PART II

100M—3-43 (9189-90)  
H.Q. 1772-39-1672

CANADIAN ARMY

# Soldier's Pay Book

(For use on Active Service)

Reg. No. E 058 A

Surname (Capitals) DORE

Christian Names in full GERARD

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

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

ABROAD: To the  
Chief Paymaster,  
Canadian Army Overseas.

IN THE FIELD: To the  
Paymaster,  
Canadian Troops.

## SOLDIER'S PAY BOOK—INSTRUCTIONS

1. This Book will be produced whenever an advance of pay is required.
2. The Soldier will give a receipt on an Acquittance Roll for all cash advances. The Officer making the payment will sign the corresponding entry in this book on the page for Cash Payments.
3. This Book is the property of the Canadian Government, and a Soldier who loses it by neglect, or alters any official entry in same, or makes unauthorized entries therein, **may be charged with a serious offence under the Army Act.**
4. If this Pay Book is lost, the Soldier will report the loss immediately to his Paymaster. A new book will be issued by the Paymaster, after inquiry has been made and a statement of the account has been received from the Chief Paymaster.
5. If a Soldier desires any information in connection with his pay or particulars of any entry shown in his Pay Book, he should make reference in all cases to his Paymaster.
6. If the address of next-of-kin, i.e., wife, father, mother, etc., has been changed, since he enlisted, the Soldier should immediately notify such change to his Paymaster, and have the new particulars noted by that Officer on page 2 of this Book. In the same way any change of assignment should be noted on page 3 of this Book.
7. This Pay Book must be in possession of the Soldier when reporting on sick parade, admitted to hospital, and on all other occasions when leaving unit.

## PARTICULARS OF SOLDIER

Regimental Number *E-0584*Name in full (surname first) *Dore**Squad*Date of Attestation *7-4-43*State whether married, widower or single *S*

If married after enlistment, state date of marriage:

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

*Dore Mrs. Sophie  
Avenue St. Robert  
St. Jean Cu P.Q.*



## PARTICULARS OF ASSIGNED PAY, ETC.

Assignment of pay:

Effective date:

- |     |                 |                |
|-----|-----------------|----------------|
| (a) | \$ <i>15.00</i> | <i>May 1st</i> |
| (b) | \$ <i>8.00</i>  | <i>May 1st</i> |
| (c) | \$ .....        | .....          |
| (d) | \$ .....        | .....          |

Name, address and relationship of assignee:

- |     |  |
|-----|--|
| (a) | <i>Lita Dore (Sister)</i>                        |
| (b) | <i>Robertal Dore</i><br><i>14th U. S. Rec Bn</i> |
| (c) | .....  |
| (d) | .....  |

Dependents allowance, payable to: (state relationship)



Soldier's Signature.....

*S. Shaw*  
6  
MAY 1 1944

Book opens on.....

Balance ~~Cr.~~ or Dr. \$ 2.65



Paymaster's Signature:

7  
*J. Bruchberg*

Date	Particulars	Credits	Cash Payments and Other Charges		As- signed Pay
			Local Cur- rency	Canad'n Cur- rency	
	Bals. Br't Forward	2.65			
	May Pay	46.50			23.40
11-5-44	G.R.-18		2/-	894	
30-5-44	A.R.-38 m.f.m		1/10/-	671	
	5/13/24			46	
JUN 44	PAY	45.00			23.40
12/6/44	A.R.-18		2/10	11.18	
26/6/44	A.R.-20		1/-	4.47	
	Totals	88.85		31.76	46.80

Balances only will be carried forward.

Deferred Pay and/or Restricted Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	
	2.65		J.R. Caldwell Cap
	*	15.45	Wenderson
		6.57	Wenderson
	20		R. L. Anderson
	66		R. L. Anderson
		20.94	R. M. Gendron
		9.76	R. M. Gendron
		5.29	R. M. Gendron
	*	10.29	



Date	Particulars	Credits	Cash Payments and Other Charges		As- signed Pay
			Local Cur- rency	Canad'n Cur- rency	
	Bals. Br't Forward	10 29			
26/6/44	AR. 21		0/1/5	32	
July 44	Pay	46 50			23 40
29/6/44	A.R. 22		1/	4 47	
4/7/44	Sp. fr.		200 fr	4 47	
16/7/44	AR. 23		200 fr	4 47	
	SO C.R. cash eff. 14712.	1 45			
	adv 6 VL.				(25 20)
	Def Pay chnt	07			
	Totals				

Balances only will be carried forward

Deferred Pay and/or Restricted Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	
		10 29	
		9 97	M Gendron
		33 07	M Gendron
		28 60	M Gendron
		24 13	M Gendron
		19 66	M Gendron
		21 11	Adjusted after Treasury Audit
15 00	31 31		Adjusted after Treasury Audit
	31 38		Adjusted after Treasury Audit
15 00			Adjusted after Treasury Audit

2/20  
1/15



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

FEB. 15..... AUG. 15.....

FEB. 28..... AUG. 31.....

MAR. 15..... SEP. 15.....

MAR. 31..... SEP. 30.....

APR. 15..... OCT. 15.....

APR. 30..... OCT. 31.....

MAY 15..... NOV. 15.....

MAY 31..... NOV. 30.....

JUNE 15..... DEC. 15.....

JUNE 30..... DEC. 31.....

JULY 15..... JAN. 15.....

JULY 31..... JAN. 31.....







5606  
10  
8 MAY 44  
111111

État de service de DORE Gerard  
(Nom) (Prénoms)

N° matricule E-0584



APTITUDES

DEGRÉ D'INSTRUCTION

Militaires..... NON.  
 Professionnelles ou commerciales..... COMMIS DE BUREAU.  
 Civiles ou de métier..... NON.  
 Techniques..... NON.  
 Langues..... BILINGUE. Français, Anglais

École supérieure } Graduation }  
 ou } ou } NON.  
 Académie 9 ANNEES. } Immatriculation }  
 (années achevées) } (Spécifier)  
 \*Collège COLLEGE NOTRE DAME. ROBERVAL. CO. ROBERVAL. P.Q.  
(COURS COMMERCIAL).  
 \*Université NON.

(\*Mentionnez le nom de l'institution, les années ou cours achevés et les diplômes obtenus)

Toutes les recrues enrôlées le seront comme simples soldats, les nominations et les promotions à un grade supérieur devant être indiquées dans l'espace réservé ci-dessous à cette fin.

RAPPORT		État des promotions, abaissements de grade, mutations, maladies ou blessures, rapports, etc. à compter de la date de son enrôlement dans l'armée active	Grade indiqué	Prenant date le	Unité	Endroit	Autorisation	
Date	Reçu de						N° Partie II, Ordres du jour. Liste des morts et blessés, etc.	Daté le
		Affecté lors de son enrôlement A/A. B.I.Y. R.C.A. REINF. C.A. (A). & att. to this depot for all purposes. Leave with ration allow. wef. 1700-16-4-43 to 1700-21-4-43	Gunner	7-4-43	5 D.D.	Quebec	D.C. 87	13-4-43
		Ceased to be attached to this depot on proceedint to CABTC. 53 - Lauzon P.Q. - Auth: Q:S/ 062 D/ 26-4-43-	"	16-4-43	"	"	" 95	22-4-43
		Est attaché au CABTC 53 C/A pour toutes fins.	do	30-4-43	T.C.53	Lauzon.	D.O. 103	29-4-43
		Bénéficie d'un congé avec allocation de \$0.50 par jour du 18 au 23 juin 43. (4 jrs.)	do	18-6-43	do	do	147	18-6-43
		Cess.e d'être attaché au CABTC No. 53 (C/A) SUR muta- tion pour tous fins au centre avance A-13 (INF R) Valcartier P.Q. à compter de	do	30-6-43	do	do	155	28-6-43

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

Nom DORE, G.

État des promotions, rétrogradations, mutations, maladies ou blessures, rapports, etc.



ATTACHED TO A.I.T.C. A-13  
ON TRANSFER FROM:

*S.O.S. A-13 on proceeding to BTC US*

TOS AND ATTACHED FOR ALL PURPOSES

27-9-43 TC.43 Having completed (4) months service ~~in~~, is entitled to draw regimental pay of ~~XXX~~ \$1.40 per diem.

4-10-43 TC.43 Having been previously allocated to R.C.A. CA is reallocated to C.A.C. (OTHERS) CA.

6-10-43 TC.43 SOS ON POSTING TO C.A.C. A-8, Camp Borden, Ont.

TOS ON TRANSFER FROM NO 43 CABTC SHERBROOKE, QUE

S.O.S. on Transfer to A-13 C.I.T.C. Valcartier, Quebec

ATTACHED FOR ALL PURPOSES TO A(I)TC A-13

Admitted to Camp, Hosp. Sec. "B" Valcartier c

Admitted to Camp Hosp. Sec. "B" Valcartier

Discharged from Camp Hosp. Sec "B" Valcartier

8-2-44 AITC A-13 Granted Furl. with R.A. 5-2-44 till 18-2-44

" " Issued with Transportation Warrant No. A-615373

*Granted Substantial leave & Transport Warrant # A 678 816  
Will receive Action allowance under P.O. 2261*

A.A. Sec. 40 Neglect to the prejudice: neglected to take his dressing having been ordered to do so. 2 days C.B.

Grade indiqué	Prenant date le	Unité	Endroit	Droit	
				N° de l'O. du J.	Daté le
	JUL 1 1943	A.I.T.C. A-13	VALCARTIER CAMP, P.Q.	20159	2-2-43
	6-9-43			205	6-9-43
Gnr.	7-9-43	TC 43	SHERB	213-A	7-9-43
	7-9-43	TC.43	Sherbrooke	231-A	27-9-43
"	4-10-43	TC.43	Sherbrooke	237-A	4-10-43
"	5-10-43	TC.43	Sherb.	239-A	6-10-43
Top	6-10-43	#1 CACTR	BORDEN	113	7-10-43
do	9 Nov 43	do	do	141	8 Nov 43
"	10-11-43	A-B	Valcartier	275	15-11-43
"	23-1-243	"	"	3	4-1-44
	23-1-2-43	A-13	Valcartier	179	22-1-44
	27-1-44	"	Valcartier	179	22-1-44
"	5-2-44	"	"	DO 29	3-2-44
"	"	"	"	" 30	4-2-44
"	20 Mars 44	"	"	68	20 Mars 44
"	6. Apr 44	"	"	DO 85	10-4-44

N° matricule..... Grade.....

Feuille N°.....

M.F.M. 1 & 2 (a) Fr.  
20M-5-42 (4723)  
H.Q. 1772-39-1046

Nom..... *Dore, Gerard* .....

État des promotions, rétrogradations, mutations, maladies ou blessures, rapports, etc.

Grade indiqué

Prenant date le

Unité

Endroit

Autorité  
N° de l'O. du J.      Daté le

SOS AITC A-13 to No.1. Trng. Brigade Debort N.S.

TOS TRG BDE

DUPLICATE  
DUPLICATA

PTE 11 Apr. 44 A-13 VALCARTIER 85 10 Apr. 44

12 4.44 BDE GP DEBERT 117 APR 14 1944

Granted increase to \$1.50 per diem

" 7 Nov 43 Trg Bde Debort 124 22 Apr 44

SOS TRG BDE GP TO SER 294E

27 APR 44 TR BD GP DEBERT 181 27 APR

SOS Can wef. 30 Apr 44 TOS C.A.(o) wef. 1 May 44

Disembarked in U.K. wef. 7 May 44

Reported for duty at 6 CIRU wef. 5 May 44

Pte 6 CIRU U.K. 118 44

Nom... DORE, G.

État des promotions, rétrogradations, mutations, maladies ou blessures, rapports, etc.

Grade indiqué

Prenant date le

Unité

Endroit

Autorité  
N° de l'O. du J. | Daté le

ATTACHED TO A.I.T.C. A-13  
ON TRANSFER FROM: *Laurier*

JUL 1 1943

A.I.T.C. A-13 VALCARTIER  
CAMP, P.Q.

*2-159 2-8-43*

TOS AND ATTACHED FOR ALL PURPOSES

27-9-43 TC.43 Having completed (4) months service ~~XX~~, is entitled to draw regimental pay of ~~XXX~~ \$1.40 per diem.

Gnr.

7-9-43  
7-9-43

TC 43  
TC 43

SHERB  
Sherbrooke

213-A  
231-A

7-9-43  
27-9-43

4-10-43 TC.43 Having been previously allocated to R.C.A. CA is reallocated to C.A.C. (OTHERS) CA.

"

4-10-43

TC.43

Sherbrooke

237-A

4-10-43

6-10-43 TC 43 SOS ON POSTING TO C.A.C. A-8, Camp Borden, Ont.

"

5-10-43

TC 43

Sherb.

239-A

6-10-43

TOS ON TRANSFER FROM NO 43 GABTC SHERBROOKE, QUE

S.O.S. on Transfer to A-13 C.I.T.C. Valcartier, Quebec

Top

6-10-43

#1 CACTR

BORDEN

113

7-10-43

do

8 Nov 43

do

do

141

8 Nov 43

ATTACHED FOR ALL PURPOSES TO A(I)TC A-13

Admitted to Camp, Hosp. Sec. "B" Valcartier c

"

23-1-243

"

"

3

4-1-44

Admitted to Camp Hosp. Sec. "B" Valcartier

23-12-43

A-13

Valcartier

119

22-1-44

Discharged from Camp Hosp. Sec "B" Valcartier

27-1-44

"

Valcartier

119

22-1-44

8-2-44 AITC A-13 Granted Furl. with R.A. 5-2-44 till 18-2-44

"

5-2-44

"

"

DO 29

3-2-44

" " Issued with Transportation Warrant No. A-615373

"

"

"

"

" 30

4-2-44

*Accepted Transportation Warrant & Transport Warrant # 12678816  
will receive Motion Allowance under A.O. 2261.*

"

6 Apr 44

"

"

DO 85

4-4-44

A. A. Sec. 40 Neglect to the prejudice: neglected to take his dressing having been ordered to do so. 2 days C.B.

DUPLICATE  
DUPLICATE



N° matricule.....

Grade.....

Feuille N°.....

M.F.M. 1 & 2 (a) Fr.  
5-42 (4723)  
1772-39-1646

Nom.....

*Dore Gerard*



État des promotions, rétrogradations, mutations, maladies ou blessures, rapports, etc.

	Grade indiqué	Prenant date le	Unité	Endroit	Autorité	
					N° de l'O. du J.	Daté le
SOS AITC A-13 to No.1. Trng. Brigade Debort N.S. <b>SOS TRG BDE</b>	PTE	11 Apr. 44	A-13	VALCARTIER	85	10 Apr. 44
	"	12 4.44	<b>BDE GP</b>	<b>DEBERT</b>	117	<b>APR 14 1944</b>
Granted increase to \$1.50 per diem	"	7 Nov 43	Trg Bde	Debort	124	22 Apr 44
<b>SOS TRG BDE GP TO SER 294E</b>	"	27 APR 44	<b>TR BDE GP</b>	<b>DEBERT</b>	131	<b>27 APR</b>
SOS Can wef..... <i>30 Apr 44</i> TOS CA.(o) wef..... <i>1 May 44</i>						
Disembarked in U.K. wef..... <i>7 May 44</i>						
Reported for duty at 6 CIRU wef..... <i>8 May 44</i>	<i>Pte</i>		6 CIRU	UK	118	44
<i>SOS</i> <i>Sos</i> <i>X 4 list</i> <i>Fus MK</i>	<i>Pte</i>	<i>1 June 44</i>	6 CIRU	UK	130	<i>1 June 44</i>
<i>637</i> <i>TOS</i> <i>Tos</i> <i>from X 4 list</i> <i>11 Br.</i>	<i>Pte</i>	<i>4 June 44</i>	<i>FMR</i>	UK	39	<i>9 June 44</i>
<i>Killed</i>	<i>Pte</i>	<i>23 Jul 44</i>		AET	<i>4275</i>	<i>3 Aug 44</i>
<i>Embarked UK</i> <i>6 Jul 44</i>	<i>Pte</i>		<i>FMR</i>	<i>21 a GP</i>	<i>48</i>	<i>13 Jul 44</i>
<i>Disembarked France</i> <i>8</i>						
<i>M144</i> <i>SOS</i> <i>SOS killed in action</i>	<i>Pte</i>	<i>23 Jul 44</i>	<i>FMR</i>	<i>21 a GP</i>	<i>59</i>	<i>11 Aug 44</i>

Killed  
23 Jul  
66A

# SERVICE AND CASUALTY FORM

M.F.M. 4 (Part I)  
A.F.B. 103 (Part I)  
200M-8-4  
H.Q. 1772

~~CANADIAN ARMOURD CORPS (OTHERS) CA~~  
PART I (For all ranks)

Unit A/BTY/R/C/A/REIN/C/A/VA

Regimental Number E-0584

1. Surname <u>DORE</u>	(17) Regiment or Corps <u>Infantry</u>	Unit (Battn., etc.) <u>General List</u>																				
2. Christian Names <u>Gerard</u>	<u>Gen. List</u>																					
3. *Substantive Rank and Appointment *Acting Temporary or Local Rank giving date	<u>CIC</u>																					
*To be entered in pencil to facilitate alteration.																						
4. Place of birth <u>VAL JALBERT P.Q.</u>	(18) Medical <u>Board</u>																					
5. Date of birth as declared on attestation <u>29-8-1924</u>	Category	Date																				
(A)	<u>A-1</u>	<u>7-4-43</u>																				
6. Date of enlistment <u>7-4-43</u>	<u>Area off.</u>	<u>25-8-43</u>																				
7. Place of enlistment <u>QUEBEC P.Q.</u>	<u>1111111</u>	<u>7-10-43</u>																				
8. Residence at time of enlistment <u>Roberval Co Roberval PQ</u>	Authority <u>D.M.O. M.D. 5</u>																					
9. (B) Special conditions (if any) of enlistment or rate of pay	<u>M.F.M. 2</u>																					
	<u>M.F.M. - 2</u>																					
10. (C) Any subsequent variations of conditions of service	<table border="1"> <tr> <th>Y.</th> <th>O.</th> <th>B.</th> <th>P.</th> <th>U.</th> <th>L.</th> <th>H.</th> <th>E.</th> <th>M.</th> <th>S.</th> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		Y.	O.	B.	P.	U.	L.	H.	E.	M.	S.										
Y.	O.	B.	P.	U.	L.	H.	E.	M.	S.													
11. Religion <u>Catholique Romaine</u>																						
12. If married, state date	(19) Next of kin (entries to be made in pencil)																					
13. Trade on enlistment <u>commis de bureau</u>	<u>Marie Dore</u>																					
14. Corps, trade and grade	<u>me Fabricul</u>																					
15. (D) Qualifications	<u>Roberval Co Roberval P.Q. Canada</u>																					
16. (E) Miscellaneous entries																						
	(20) E																					
	(21) E																					
	(22) E																					



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

(a) Report		(b)	(c)	(d)	(e)	(f)	(g)
Date	From whom received	Unit	Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	Place of Casualty	Date of Casualty	Army rank as at (e)	Army Form or other authority for entry to be shown
		Canada	<i>Sen. Duty</i> Granted <i>Rif. P. 81.50</i> SOS Can wef. <i>30 Apr 44</i> TOS <i>C.A.(e)</i> wef. <i>1 May 44</i> Disembarked in U.K. wef. <i>7 May 44</i> Reported for duty at 6 CIRU wef. <i>4 May 44</i>		<i>Debut 7 Nov 43</i> <i>1 May 44</i>	<i>Pte</i>	<i>124/44</i>
		<i>LC/190</i>	<i>6 Oct 44</i> <i>Ad. to 7-4-44 (Jan 44) Dem 345/2000/44</i> TOS from 6 CIRU SOS to FMR	<i>2/8</i> <i>1 Jan 44</i> <i>2 Jan 44</i> <i>3 Jan 44</i>	<i>1 Jan 44</i> <i>2 Jan 44</i> <i>3 Jan 44</i>	<i>Pte</i> <i>Pte</i> <i>Pte</i>	<i>110/44</i> <i>130/44</i> <i>20-Jan 44</i> <i>20-Jan 44</i>
5 JUN 44	CR	FusMR	TOS from X-4 List 11 BN Auth - Demand No 8291 a/28 MAY 44	Fd	4 JUN 44	Pte	39a/9 JUN 44
		<i>FusMR</i>	Embarked U.K. <i>6 Jul 44</i> Disembarked France	France	<i>8 Jul 44</i>	<i>Pte</i>	<i>48 a/13 Jul 44</i>
		FusMR	SOS wef 23 JUL 44 KILLED IN ACTION	FD	23 JUL 44	Pte	59a/11 AUG 44



E-0584

PTE

DORE

GERARD

REGTL NO (OTHER RANKS) RANK (OFFICERS)

SURNAME

CHRISTIAN NAMES

NEXT-OF-KIN

MR. ISA DORE DORE

(AUTH. M.F.M. 1 or 2) or PART II ORDERS

RELATIONSHIP

FATHER



ADDRESS

Rue. FABRIQUE ROBERVAL, ROBERVAL - G., Que.

AUTHORITY

Sp 1 list 1341 22-4-44 1. INF TRG. BN.

AMOUNT OF D.A.

15.00

15.00

AMOUNT OF A.P.

TOTAL

NAME OF ASSIGNEE

MISS RITA DORE

RELATIONSHIP

Sister

ALTERNATIVE INFORMATION

ADDRESS

Rue ANGER, ROBERVAL - G., Que

DAB. 20-5-44

AUTHORITY FOR ABOVE INFORMATION

EXPLANATION:

2

**IMPORTANT**—Keep this acknowledgment.

DOMINION OF CANADA  
SIXTH VICTORY LOAN

This is to certify that T 0584 Pte. DORT Gerard No. 1 Inf. Trg. Bn. CIC Debert N.S.  
(Number) (Rank) (Name) (Unit)

has purchased \$ 50.00 Sixth Victory Loan 3% Bonds to be paid by six monthly pay assignments of \$ 8.40 each for the months of May, 1944, to October, 1944, inclusive, and has directed that the bonds be delivered to

Miss DORT Rita P.O. Box 123 Roberval Roberval Co. Que.  
(Enter either Department of Finance OR name and address of person or Bank to whom bonds are to be delivered)

after payment has been completed.

Date 19 April 1944.

*H.A. Staple*  
(Departmental Canvasser)

Communicate by letter with Chief Clerk, Employee Instalment Purchase Plan, Department of Finance, Ottawa, if it is necessary to alter the delivery instructions or to make inquiries regarding your bonds. The Department of Finance will hold bonds in safekeeping during term of service, or they may be delivered to another person or Bank, as the applicant shall direct.

In the event of the purchaser being discharged from the Service before payment is completed, he can make the balance of his payments direct to the Department of Finance, Ottawa, Canada.

If the purchaser dies before payment is completed, the amount standing to his credit in the Purchase Account will be transferred to the credit of his Service pay account.

In the event of death, bonds held for the account of any member of the Services will be delivered to the Administrator of Estates.



**FORMULE DE TESTAMENT**

(1) Je, GERARD DORE. (Nom au long), de la VILLE  
 de ROBERVAL, dans le Comté de ROBERVAL  
 District de ROBERVAL  
 Province de QUEBEC, CANADA, COMMIS DE BUREAU  
 (Occupation civile)  
 N° matricule E-0584, Unité R.C.A. (CA), révoque par  
 les présentes tous testaments que j'ai pu faire antérieurement et déclare que ceci est mon  
 testament.

Noms et  
adresse des  
bénéficiaires

(2) JE LÈGUE à "MA MERE, MADE. ANNE MARIE DORE, DOMICILIEE  
 ET DEMEURANT A NOTRE DAME DE ROBERVAL, QUEBEC, CANADA.  
 TOUS MES BIENS TANT REELS QUE PERSONNELS".



Noms et  
adresse des  
bénéficiaires  
résiduaire

(3) JE LÈGUE tout le reste de mes biens, quels qu'ils soient et où qu'ils soient, à

(4) JE NOMME MADE ANNE MARIE DORE  
 (Nom)

NOTRE DAME DE ROBERVAL, QUEBEC, CANADA exécuteur de mon présent  
 (adresse) exécutrice testament.

Signé et reconnu par le testateur, en présence  
 de nous, présents en même temps, qui en sa  
 présence et à sa demande, et en présence  
 l'un de l'autre, avons immédiatement signé  
 comme témoins.

EN FOI DE QUOI j'ai signé ce 3 ème  
 jour de Decembre A.D. 19 43

Signature du  
premier témoin

(5) Gerard Dore  
4 rue St-Paul, Kenogami P.Q.  
 (Adresse)

Gerard Dore  
 (Signature du soldat)

(Les bénéficiaires ne peuvent être témoins)

Signature du  
second témoin

Bernard Lafleche  
44 rue Laval, Hull, P.Q.  
 (Adresse)

INSTRUCTIONS

Si vous avez déjà fait votre testament, ne remplissez pas cette formule, mais dites seulement où votre testament pourra être trouvé à qui il a été confié.

- (1) (Exemple) Je, Jean-Baptiste Duval, de la cité de Québec, dans le comté de Québec-Centre, Province de Québec, mécanicien, N° matricule 1234, Royal 22ème Régiment, par les présentes.....
- (2) Si vous ne désirez nommer qu'un seul bénéficiaire, remplissez la formule comme suit: Je lègue à "mon épouse, Marie Duval: tous mes biens",— et dans ce cas, retranchez la clause (3).—Si vous désirez nommer plus d'un bénéficiaire, dites ce que vous voulez donner à chacun, ainsi par exemple

"mon épouse, Marie Duval: \$.....00, et mon ménage";  
 "mon frère, Thomas Duval: \$.....00";  
 "ma sœur, Marguerite Duval: \$.....00";  
 "mon ami, Jean Côté: \$.....00";

et tout cadeau personnel que vous désirez faire.

- (3) Si vous voulez léguer le reste de vos biens à une seule personne, nommez cette personne, comme "mon épouse, Marie Duval". Si vous voulez léguer le reste de vos biens à plusieurs personnes, nommez ces personnes, comme "ma mère et mon père, en parts égales". (Vous pouvez répartir les parts inégalement et de la façon que vous désirez.)
- (4) Inscrivez le nom de l'exécuteur ou de l'exécutrice, comme "Jean Caron, 24 rue St-Jean, Québec, Province de Québec", ou, si c'est une femme, comme "Jeanne Caron", et donnez son adresse. (Le bénéficiaire ou le légataire peut être valablement nommé exécuteur testamentaire.) Il n'est pas nécessaire de nommer un exécuteur ou une exécutrice si vos biens ne comprennent que votre solde (salaire), vos allocations ("allocances"), votre équipement et vos effets personnels.
- (5) Deux témoins doivent signer en présence du soldat, et chaque témoin doit donner son adresse au long.—Voyez à ce que le soldat inscrive la date et signe de sa signature ordinaire.
- (6) Ne nommez pas un soldat comme votre exécuteur testamentaire.

Receipt is Acknowledged

DEC 9 1943

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

WILL RECEIVED IN  
 DOCUMENT SECTION  
 DEC 10 1943  
 RECORD OFFICE  
 NAT. DEF. H. Q.

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 the 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..... DORE Gerard.....  
(Surname first—Christian names in full—Block capitals)
- (2) Regimental or Official Number and Rank..... E0584 Gunner.....
- (3) Unit..... A/A-BTY RCA Reinf. C.A. (CA).....
- (4) Are you married?..... NIL..... (5) If married, state,  
(a) Full name of your wife..... NIL.....  
(b) Present postal address of wife.....
- (6) If married, have you been regularly supporting your wife? If not—state reasons:.....  
.....
- (7) Are you a widower?.....
- (8) Have you any children?..... Number of boys..... Girls.....  
Names and ages.....  
.....
- (9) If Dependents' Allowance is claimed in respect of children—state whether you have been regularly supporting them.....  
.....  
Give particulars of Guardians to whom Dependents' Allowance should be paid—if authorized.....  
Name.....  
Postal Address.....
- (10) Have you a common-law wife whom you have been regularly supporting and publicly representing as your wife for at least two years immediately prior to appointment or enlistment?.....  
If so, state her full name and postal address.....  
.....





(11) Is your father alive? OUI.....If so state name and address, occupation. M Isidore Dore Journalier

Roberval Co. Roberval P.Q.

(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?

(14) Is your mother alive?.....OUI.....If so, state name and address.....Mde Anne Marie Dore

Roberval Co. Roberval P.Q.

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

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

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

(17) Are you contributing to the support of any dependents, other than those shown above?.....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.....

Full Name.....

Postal Address.....

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

(18) Are you insured?.....OUI.....If so, in what company? Metropolitan Life Insurance Co.

(Give number of policy)

Have you made arrangements for payment of your Insurance Premium?.....OUI

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

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

Date.....10-4-43

(Sgd). Gerard D ore,  
(Signature of officer or man)

Date.....10-4-43

(Sgd). ? Lieut.  
No. 5 D istrict Depot.  
for Officer Commanding (F.C.Magee) Lt.-Col.

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.)

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..... DORE Gérard Pte ~~Gunnies~~  
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Official Number and Rank E-0584 Pte Gunnies

(3) Unit..... A/A BTY R.C.A. /REINF. C.A. (A)

(4) Are you married? nil

(5) If married, state,  
(a) Full name of your wife..... nil

(b) Present postal address of wife..... nil

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

(7) Are you a widower?..... nil

(8) Have you any children?..... nil..... Number of boys..... Girls.....  
Names and ages..... nil

(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..... nil

[SEE OTHER SIDE]

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

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

(11) Is your father alive?..... **oui**

If so, state name and address, occupation **M Isidore Dore** **Journalier**

**Roberval Co Roberval P.Q.**

(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?..... **oui**

If so, state name and address..... **Mde Anne Marie Dore**

**Roberval Co Roberval P.Q.**

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

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

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

(17) Are you contributing to the support of any dependents, other than those shown above?..... **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..... **nil**

Postal Address..... **nil**

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

(18) Are you insured?..... **oui**

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

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

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

Date..... **10-4-43**

*Serail Dore*  
(Signature of officer or man)

Date..... **10-4-43**

For Officer Commanding..... **(F.C. Magee) Lt. Col.**

Commanding No 5 District Depot.

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.)

# FORMULE D'ANTÉCÉDENTS PROFESSIONNELS

LA PRÉSENTE FORMULE DOIT ÊTRE REMPLIE POUR CHAQUE MEMBRE DES FORCES ARMÉES. LES RENSEIGNEMENTS DEMANDÉS SONT DESTINÉS À L'USAGE DU COMITÉ CONSULTATIF GÉNÉRAL DE DÉMOBILISATION ET DE RÉTABLISSMENT, INSTITUÉ PAR LE GOUVERNEMENT CANADIEN POUR ÉTUDIER DES PLANS DE RÉTABLISSMENT DANS LA VIE INDUSTRIELLE DES MEMBRES DES FORCES ARMÉES APRÈS LEUR LICENCIEMENT. L'EXACTITUDE ET L'INTÉGRALITÉ DES RÉPONSES SERONT TRÈS UTILES AU COMITÉ.

**PRIÈRE DE LIRE ATTENTIVEMENT LES INSTRUCTIONS AU VERSO  
DE LA COUVERTURE DU FORMULAIRE AVANT DE REMPLIR LA FORMULE**

## Partie A—RENSEIGNEMENTS GÉNÉRAUX

LAISSEZ  
EN BLANC

1. (a) Nom et prénoms (lettres moulées)..... (b) N° matricule..... 5-0394
2. (a) Arme..... (b) Unité..... (c) Rang..... Gunner
3. (a) Date de naissance..... (b) Avez-vous des personnes à votre charge?..... (c) Domicile au moment de l'enrôlement..... Roberval P.Q.
4. (a) Lieu d'enrôlement..... (b) Date d'enrôlement..... 7-1-45

## Partie B—INSTRUCTION ET FORMATION

5. (a) Âge à la sortie définitive de l'école..... (b) Fréquentiez-vous l'école ou le collège au moment de l'enrôlement?..... nil
6. Indiquez exactement où vous étiez dans vos études à l'école publique, technique ou secondaire (par exemple—"école publique, 4 ans," "école secondaire, 2 ans;" "immatriculation junior" ou "cours technique en imprimerie, 4 ans", etc.)..... 9e année
7. Si vous avez fréquenté une université, indiquez-en le nom ainsi que la classe atteinte ou le grade obtenu.....
8. (a) Êtes-vous déjà entré en apprentissage?..... (b) Si oui, dans quel métier?..... (c) Avez-vous complété votre apprentissage?..... (d) Si vous ne l'avez pas complété, combien de temps y avez-vous passé?..... nil
9. (a) Quelles langues parlez-vous couramment?..... français anglais..... (b) Quelles langues lisez-vous facilement?..... français anglais

## Partie C—SITUATION AU MOMENT DE L'ENRÔLEMENT

10. (a) Indiquez si vous étiez EN EMPLOI ou EN CHÔMAGE au moment de l'enrôlement. (Inscrivez simplement "En emploi" ou "En chômage", selon le cas; les détails sont demandés plus bas)..... en emploi..... (b) Au moment de l'enrôlement de quel syndicat ouvrier ou société professionnelle étiez-vous membre?..... Syndicat National de l'Aluminium

## Partie D—DÉTAILS CONCERNANT CEUX QUI CHÔMAIENT AU MOMENT DE L'ENRÔLEMENT

LES QUESTIONS 11 À 17 NE S'APPLIQUENT QU'À CEUX DONT LA RÉPONSE À LA QUESTION 10 (a) INDIQUE QU'ILS ÉTAIENT EN CHÔMAGE

11. Aviez-vous déjà été employé assez régulièrement depuis votre sortie de l'école?..... nil
12. (a) Si la réponse à (11) est "oui", indiquez exactement l'occupation ou le métier effectivement exercé..... (b) Durée d'emploi dans cette occupation ou métier?..... nil
13. Si la réponse à (11) est "non", indiquez exactement l'occupation ou le métier pour lequel vous vous estimez compétent..... nil
14. Si vous avez été employé après votre sortie de l'école, indiquez quand vous avez travaillé assez régulièrement pour la dernière fois avant l'enrôlement..... nil
15. Donnez des détails concernant votre dernier patron, le cas échéant: Nom..... Adresse..... nil
16. Genre d'affaires du patron (par exemple, "culture" ou "construction de bâtiments" ou "fabrique de chaussures" ou "fonderie de fonte" ou "magasin de détail", etc.)..... nil
17. (a) Si vous travailliez à votre propre compte lors de votre dernier emploi, indiquez la nature et l'adresse de votre entreprise..... (b) Quand l'avez-vous abandonnée?..... nil

## Partie E—DÉTAILS CONCERNANT CEUX QUI TRAVAILLAIENT AU MOMENT DE L'ENRÔLEMENT

LES QUESTIONS 18 À 23 NE S'APPLIQUENT QU'À CEUX DONT LA RÉPONSE À LA QUESTION 10 (a) INDIQUE QU'ILS ÉTAIENT EN EMPLOI. VOUS ÊTES PRIÉ DE LIRE EN ENTIER CES QUESTIONS ET DE NE RÉPONDRE QU'À CELLES QUI S'APPLIQUENT À VOTRE CAS AU MOMENT DE L'ENRÔLEMENT

SI VOUS ÉTIEZ À L'EMPLOI D'UN PATRON AU MOMENT DE L'ENRÔLEMENT, PRIÈRE DE RÉPONDRE AUX QUESTIONS 18 À 21

18. Nom du patron..... Adresse..... Arvida P.Q.
19. Genre d'affaires du patron (par exemple, "culture" ou "construction de bâtiments" ou "fabrique de chaussures" ou "fonderies de fonte" ou "magasin de détail", etc.)..... Aluminium Usines
20. (a) Genre précis de votre occupation..... (b) Nombre d'années d'expérience dans ce travail pour le compte de tout patron..... 1 an
21. (a) Votre patron vous a-t-il formellement promis de vous reprendre à son service à votre licenciement?..... (b) votre patron a-t-il refusé de promettre de vous reprendre à son service à votre licenciement?..... (c) Désirez-vous retourner à votre ancien emploi?..... non nil non

SI VOUS TRAVAILLIEZ À VOTRE PROPRE COMPTE AU MOMENT DE L'ENRÔLEMENT, C'EST-À-DIRE, SI VOUS EXPLOITIEZ UNE FERME, UN MAGASIN, UNE AGENCE, OU SI VOUS EXERCIEZ UNE PROFESSION, OU SI VOUS ÉTIEZ ASSOCIÉ DANS L'UNE DE CES ENTREPRISES, PRIÈRE DE RÉPONDRE AUX QUESTIONS 22 ET 23

22. (a) Indiquez la nature du commerce ou la profession..... (b) Où était-il situé?..... nil
23. (a) Nombre d'années dans ce commerce?..... (b) Avez-vous fait ou vous proposez-vous de faire des plans pour reprendre à votre licenciement votre commerce ou un commerce d'une nature semblable?..... nil

## Partie F—DÉTAILS DE L'EXPÉRIENCE EN AGRICULTURE

24. (a) Désirez-vous vous livrer à la culture de la terre après la guerre?..... (b) Vous croyez-vous apte à exploiter une ferme?..... (c) Si oui, dans quel genre de culture?..... nil
25. (a) Êtes-vous né sur une ferme?..... (b) Nombre d'années d'expérience effective dans la culture?..... (c) Dans quelles provinces avez-vous acquis votre expérience?..... nil nil

## Partie G—DIVERS

26. Avez-vous pris des arrangements autres que ceux indiqués ci-dessus au sujet de votre rétablissement dans la vie civile après votre licenciement?..... nil
27. Si oui, indiquez la nature de vos projets (par exemple, vous proposez-vous de reprendre vos études, ou vous a-t-on assuré une position, etc.)..... nil
28. Indiquez toute préférence pour un certain emploi ou toute ambition que vous pourriez avoir, autres que celles indiquées ailleurs sur la présente formule..... nil

DATE..... 10 avril 1945..... SIGNATURE.....



# Medical / Dental Records

No E.0584 Rank Private Name DORE, Gerard

Unit Fusi. Gers Mont-Royal Date of death 23rd July, 1944.

Died at France.

Cause Killed in action.

Death occurred on strength of Forces.H.Q. 405-D-16914

N/K Mr. Isadore Dore, Relationship Father

Address Rue <sup>AUGER</sup> Fabrique, Roberval, Roberval Co., P.Q.

Remains buried in \_\_\_\_\_ Cemetery

MR 044015 Sheet 7F/1 Near Barres, France

Grave Location \_\_\_\_\_

CHK ✓

OVER-



SEP 15 1945

BURLAY REPORT TO N.K.

MAY 4 1945

RETURN TO BUR. OF STAT

ROYAL MESSAGE DESP'D.

AUG 24 1944

SEP 26 1944

CAN. MESSAGE DESP'D.



AUG 30 19

Photographs  
Despatched

HI & CR Form Despd. NOV 18 1946

REBURIAL

Bretteville-sur-Laize Military  
Cemetery,

Bretteville-sur-Laize, France.

Grave 11, row G, plot XVI



P

241199

Bretteville  
RSD KIA

**Note on Term**

(Summarize amount of treatment  
terminat

St

E-6584

Ste. Dore G.

**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.

### MEDICAL HISTORY

 Regimental Number E-0584

 Rank Pte.

 Name Dore G.

 Age 19 ans

 Date of Diagnosis 17-12-43

 Signature of Medical Officer } [Signature]

 Unit or Hospital M.O. A-13

### Laboratory Confirmation of Diagnosis

Test	Date	Result
Derkfield Examination		
Serologic Kahn Test		
Serologic W.R. Test	<u>31.1.43</u> <del>18.12.43</del>	<u>None: neg</u>
Smear for Gram-negative Diplococcus	<u>17.12.43</u>	<u>Pos.</u>
Culture for Gram-negative Diplococcus		

(Enter result as Pos., Doubtful, Neg.)

## Laboratory Tests during Treatment Period

Smear		Culture	
Date	Result	Date	Result
23-12-43	Pos		
3-1-44	pus XXXX		
21-1-44	P.M. neg		

Serologic Kahn Test		Serologic W.R. Test	
Date	Result	Date	Result

## OTHER LABORATORY TESTS

## Spinal Fluid Examination

Date Examined.....

Cells per mm<sup>3</sup>.....

Protein.....

Kahn or W.R. Reaction.....

Colloidal Test.....

24-12-43 Urine. alb: neg. Glucose: neg  
sang: neg. Other Tests Pus XXXX

6-1-44 Urine. Alb. neg. Glucose: neg  
Sang: neg. Pus XXXX.

7-1-44 W. B. C. 8650

17-1-44 Urine. Alb. neg. Glucose: neg. Sang.  
neg. pus XXX

20-1-44 Urine. Alb. neg. Glucose: neg. sang. neg. pus. neg

Garrison capt



(6)

## Record of Urethritis Treatment



Date	Type	Dose	Progress Notes
18-12-43	Subj <sup>o</sup>	60grs	écoulement sur
19-12-43	Subj <sup>o</sup>	60grs	écoulement phase
20-12-43	Subj <sup>o</sup>	60grs	écoulement phase
21-12-43	Subj <sup>o</sup>	60grs	" " 1
22-12-43	Subj <sup>o</sup>	60grs	écoulement
23-12-43	<del>Subj<sup>o</sup></del>		écoulement abondant
23-12-43			écoulement abondant
24-			urinalysis "
25-			
26-			
27-	Subj <sup>o</sup>	120grs	W.B. 6.9.60p écoulement abondant
28-	"	75"	sanctus furulent

M.O. to sign entries

(7)

## Record of Urethritis Treatment

Date	Type	Dose	Progress Notes
29-12-43	Subj <sup>o</sup>	75grs	écoulement
30-	"	75"	
31-	"	75"	
1-1-44	"	75"	
2-	"	75"	
3-	"	75"	Frottes " jus x+x+x
4-	"	75"	
5-	Subj <sup>o</sup>	59p	Bien sec
6-	"		urinalysis
7-	"		Souffle bouillon sale
8-	"		
9-	"		
10-	Subj <sup>o</sup>	135grs	Sero-pus

M.O. to sign entries





PROGRESS NOTES—Notes on Reactions—Notes on any Hospitalization  
(M.O. to date and sign entries)

12-1-44 Apparentment sec

14-1-44

1



19-1-44 Bien sec

*Swain* capt  
R.G.A.M.C. M.O.  
Section.  
MILITARY HOSPITAL  
VALCARTIER, P.O.

PROGRESS NOTES—Notes on Reactions—Notes on any Hospitalization  
(M.O. to date and sign entries)

**CERTIFICAT DE L'EXAMEN MÉDICAL**

**DORE Gerard**

Nom en entier  
rue **Roberval, Co. Roberval, P. Q.**  
Lieu

Lieu **Quebec**

Date **7-4-43**

**PARTIE 1. Renseignements obtenus de la recrue.**

- |  |  |   |
|--|--|---|
| 1. Âge..... <b>18</b>                      | 2. Avez-vous déjà souffert de l'une quelconque des maladies suivantes? |   |
| a. Rhumatisme.....                         | non  | k. Maladie des oreilles.....  |
| b. Tuberculeuse ou pleurésie.....          | non  | l. Maladie des yeux.....  |
| c. Bronchite ou asthme.....                | non  | m. Convulsions.....   |
| d. Affection cardiaque.....                | non  | n. Maladie nerveuse ou mentale.....   |
| e. Maladie du rein ou de la vessie.....    | non  | o. Syphilis.....  |
| f. Affection stomacale ou intestinale..... | non  | p. Gonorrhée.....   |
| g. Hernie.....                             | non  | q. Avez-vous déjà porté des lunettes?.....  |
| h. Varices.....                            | non  | r. Touchez-vous actuellement ou avez-vous touché antérieurement une pension ou autre indemnité d'invalidité?— Si oui, donnez des détails..... |
| i. Mal aux pieds.....                      | non  |   |
| j. Affection nasale.....                   | non  |   |

(Signature de la recrue)

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

1. Marques particulières ou cicatrices (si celles-ci sont opératoires, obtenir les détails).....

**Scar on left index finger and palm.**

2. Taille **5** pieds **9** pouces. 3. Poids **140** livres



4. Teint **foncé brun** Cheveux **bruns** 5. Développement.....

**Bon**  
**ossements**  
**proéminents**  
**2 1/2**

6. Tour de poitrine—Circonférence, pleine expansion **34 1/2** pouces Degré d'expansion **C.V. 20** pouces

7. Vue, droite **20/20** gauche **20/20** 8. Oïe, droite..... gauche **C.V. 20**

Avec lunettes, droite..... gauche.....

9. État de la bouche et des dents..... **Good**

10. Les anomalies (congénitales et pathologiques) constatées lors de l'examen sont les suivantes:

**Urines, oreilles, reflexes; normaux**

**X-RAY SHIRT - NEGATIVE**

**MAJOR ROYAL CANADIAN CAVALRY**

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

Observations spéciales lorsque la catégorie est inférieure à A.....

**CAPTAIN ROGER MAJOR ROAMC R. BELCOURT LIENT. ROAMC E. J. K. RIDD MAJOR ROAMC**

Date Détails succincts et signature

Date

Détails succincts et signature

Date	Détails succincts et signature	Date	YEARS OF					
			BIRTH	P	C	L	A	S
18-4-43	MACC. <b>Robert ROAMC.</b>	7/10/43	24	1	1	1	1	1
12-4-43	T.A.B.T. <b>Robert ROAMC.</b>							
8-5-43	<b>Robert ROAMC.</b>							
<b>MAY 29 1943</b>	<b>3</b> <b>ROAMC.</b>	9/1/43						
29-6-43	<b>ROAMC.</b>							
30-2-43	<b>ROAMC.</b>							

Y	P	U	L	H	E	M	S
24	1	1	1	1	1	1	1

*Handwritten signature and notes*





URINE COMPLETE

DATE 20-1-44

NOM. . . . . *Dare* . . . . .

NUMERO . . . . .

DIAGNOSTIQUE . . . . . *V.D.L* . . . . .

COULEUR . . . . . *citrin* . . . . .

TRANSPARENTE . . . . . *clair* . . . . .

DEPOT . . . . . *aucun* . . . . .

REACTION . . . . . *acid* . . . . .

ALBUMINE . . . . . *neg* . . . . .

GLUCOSE . . . . . *neg* . . . . .

SELS BILIAIRE . . . . . *neg* . . . . .

SANG . . . . . *neg* . . . . .

EX: MICROSCOPIQUE . . . . . *neg* . . . . .



SIGNE

*Mauernant*

..... R. G. A. M. C. M. O.  
MILITARY HOSPITAL Section.  
VALCARTIER, P. Q.

URINE COMPLETE

DATE 11-1-44

NOM . . . . . Dore

NUMERO . . . . .

DIAGNOSTIQUE . . . . . V.D.G.

COULEUR . . . . . citrin

TRANSPARENTE . . . . . clair

DEPOT . . . . . aucun

REACTION . . . . . acide

ALBUMINE . . . . . neg

GLUCOSE . . . . . neg

SELS BILIAIRE . . . . . neg

SANG . . . . . neg

EX: MICROSCOPIQUE . . . . . Pus XXX



SIGNÉ: *Maunier*

MILITARY HOSPITAL VALCARTIER, P. Q. Section. R.C.A.M.C. M.O.

URINE COMPLETE

DATE 6-1-44

NOM P. te. Joré

NUMERO E-0584

DIAGNOSTIQUE V. D. G.



COULEUR citrou

TRANSPARENTE Troubles

DEPOT Gros dépôt

REACTION Neutre

ALBUMINE Négatif

GLUCOSE Négatif

SELS BILIAIRE Négatif

SANG Négatif

EX: MICROSCOPIQUE Pus: xxx

*Maurice Cart*

MILITARY HOSPITAL N.C.M.C. M.O.

Section.

Densité VALCARTIER, P. Q.

MINISTÈRE DE LA SANTÉ  
DIVISION DES LABORATOIRES

89 est, rue Notre-Dame,  
MONTREAL



MINISTRY OF HEALTH  
DIVISION OF LABORATORIES

89 Notre Dame Street East,  
MONTREAL

LABORATOIRE DE SÉROLOGIE

Sérodiagnostic de la syphilis

LABORATORY OF SEROLOGY

Serodiagnosis of Syphilis

*Handwritten signature and initials*

Capt. Samson,  
Section B,  
Hop. Valcartier, P.Q.



Examen gratuit  
Examination free of charge

Date **DEC 31 1943**

Echantillon de sang Blood sample	Kline*	Wassermann		Kahn
		Extrait Alc. Alc. Extract	Extrait Chol. Chol. Extract	
Dore G E 584	Negative			

Remarques:  
Remarks:

Wassermann			Kahn	
Ext. alc.	Ext. chol.			
++++	++++	} fortement positif } strongly positive	++++	} positif } positive
+++	+++		+++	
++	++++	} positif } positive	++	} faiblement positif } weakly positive
+	++++		+	
—	++++		+	
—	+++	} faiblement positif } weakly positive	+	} douteux—doubtful
—	++		—	
—	+	douteux—doubtful	—	négatif—negative
—	—	négatif—negative		

*Charles F. Chamberlain*  
Sérologiste — Serologist

\*Réaction d'élimination de Kline: Voir au verso  
Kline Exclusion test: See other side.

## INTERPRETATION DU RAPPORT

Tous les échantillons de sang reçus au laboratoire sont d'abord soumis à la réaction d'élimination de Kline. Les résultats négatifs sont envoyés immédiatement parce que, en principe, un sérum trouvé négatif à la réaction ultra-sensible le serait également aux réactions de diagnostic de Wassermann et de Kahn. Les sérums retenus sont ensuite examinés au moyen de ces deux dernières réactions.

Lorsque la sérologie positive est le seul symptôme de syphilis, il est nécessaire de répéter les examens sur de nouveaux échantillons.

Les réactions de Wassermann et de Kahn peuvent ne pas être d'accord à l'examen d'un même sérum sans que le résultat positif de l'une ne soit infirmé par le résultat négatif de l'autre. Cette divergence se rencontre chez les malades traités, on la contrôlera si elle se présente dans une réaction de diagnostic.

Une sérologie positive est considérée comme un symptôme de la syphilis. Cependant, au cours d'un accès fébrile marqué, une réaction faussement positive s'observe quelquefois, mais elle est toujours passagère.

Une sérologie douteuse qui persiste dans plusieurs examens, fait soupçonner la syphilis mais ne suffit pas pour en établir le diagnostic. Au cours du traitement on doit l'interpréter comme positive.

Une sérologie négative n'exclut pas nécessairement la syphilis, sauf en présence d'éruptions simulant celles de la syphilis secondaire. Durant les 10 à 15 premiers jours du chancre initial la sérologie est négative, elle l'est aussi dans quelques syphilis tertiaires et, plus fréquemment, dans la syphilis latente.

On peut observer quelques cas de syphilis nerveuse évoluant avec un sang négatif et un liquide céphalo-rachidien positif.

Chez un syphilitique traité, la persistance d'une réaction positive ou douteuse est une indication probable que l'infection est encore active. Lorsque la réaction est négativée, il faut encore continuer le traitement durant plus d'une année.

Pratiquement, le patient peut être considéré guéri lorsque, après un traitement intensif continu et prolongé, il n'a présenté pendant deux ans aucun symptôme clinique ni sérologique. Le Wassermann du sang répété tous les quatre mois durant cette période, et un examen du liquide céphalo-rachidien, doivent être franchement négatifs.

## INTERPRETATION OF THE REPORT

All specimens of blood received at the laboratory are first submitted to the Kline exclusion test. Negative results are reported immediately, because a serum found negative to this supersensitive test is practically always likewise negative to the Wassermann and Kahn diagnostic tests. The remaining sera are examined by means of the latter two tests.

When a positive serum is the only indication of syphilis, it is necessary to repeat the test on new specimens. The Wassermann and Kahn results may disagree, but this divergence does not signify that the positive result of the one is invalidated by the negative result of the other. Such results are encountered in sera from treated patients; if found in a serum submitted for aid in diagnosis, the examination is to be repeated.

A positive serum is considered a symptom of syphilis. A false positive result may occasionally be observed in the course of a pronounced fever, but such a positive is always transitory.

A doubtful positive result, persistently repeated in several specimens, suggests syphilis, but is not sufficient to establish the diagnosis. If found in a treated patient, it should be interpreted as positive.

A negative result does not necessarily exclude syphilis, save in the presence of eruptions simulating those of secondary syphilis. During the first 10 to 15 days of the initial chancre, the serological result is negative; it is also negative in a few cases of tertiary syphilis, and more frequently in latent syphilis.

An occasional case of neurosyphilis may have a negative blood and a positive spinal fluid.

In a treated case, persistence of a positive or doubtful reaction is a probable indication that the infection is still active. When the reaction has become negative, treatment must be continued for over a year.

Practically, the patient may be considered cured when, after intensive, continuous and prolonged treatment, he remains free of clinical and serological symptoms for a period of two years. Blood Wassermann, repeated every four months throughout this period, and a final examination of the spinal fluid, should all yield frankly negative results.

## TELEPHONES

Demandes de nécessaires, formules, etc.  
pour envoi d'échantillons.

PLateau 6181  
Local 325

Requests for outfits, forms, etc., for  
sending specimens and samples.

### Renseignements:

Laboratoire de Sérologie,  
Laboratoire de Diagnostic bactériolo-  
gique,  
Laboratoire de Chimie et de Contrôle  
sanitaire.

Local 300  
Local 116  
Local 114

### Information:

Laboratory of Serology,  
Laboratory of Bact. Diagnosis,  
Laboratory of Chemistry and Sanitation.

URINE COMPLETE

DATE 24-12-43

NOM. PTE. Doré G

NUMERO F. 0584

DIAGNOSTIQUE V D G



COULEUR. citrin

TRANSPARENTE. Troubles

DEPOT. Gros depot

REACTION. Neutre

ALBUMINE. Negatif

GLUCOSE. Negatif

SELS BILIAIRE. Negatif

SANG. Negatif

EX: MICROSCOPIQUE Pus XXXX

STICNE  
MILITARY HOSPITAL VALCARTIER, P. Q.  
R. Y. A. M. G. M. O. Section.

L A B O R A T O R Y      R E Q U I S I T I O N

NAME:      D O R E      G.

DATE:      23-12-43

REGIMENTAL NO:      E-0584

WARD: V.M.H.      B SECTION

UNIT:      A. I. T. C.      A-13      (5e Inf. )

Clinical diagnosis or Prov. diagnosis: URETHRITE.

Type of Speciman: Frottis de l'urethre.

Examination required: (if urgent, please add Rush )

LABORATORY REPORT: (please do not write on this section)

*Suzanne de G. C.*

*Maunon Capt*  
O. C. Military Hospital, "B" Section.

DATE:      23-12-43





MINISTÈRE DE LA SANTÉ  
DIVISION DES LABORATOIRES

89 est, rue Notre-Dame,  
MONTREAL

LABORATOIRE DE SÉROLOGIE

Sérodiagnostic de la syphilis



MINISTRY OF HEALTH  
DIVISION OF LABORATORIES

89 Notre Dame Street East,  
MONTREAL

LABORATORY OF SEROLOGY

Serodiagnosis of Syphilis

Capt. P. G. Morin,  
M. O. A. I. T. C. A 13,  
Camp de Valcartier,  
P. Q.



Examen gratuit  
Examination free of charge

Date..... **DEC 21 1943**

Echantillon de sang Blood sample	Kline*	Wassermann		Kahn
		Extrait Alc. Alc. Extract	Extrait Chol. Chol. Extract	
E. 0584 Pte. Doré, G	Negative			

Remarques:  
Remarks:

Wassermann		
Ext. alc.	Ext. chol.	
++++	++++	} fortement positif } strongly positive
+++	++++	
++	++++	} positif } positive
+	++++	
-	++++	
-	+++	} faiblement positif } weakly positive
-	++	
-	+	douteux—doubtful
-	-	négatif—negative

Kahn		
++++	} positif } positive	
+++		
++	} faiblement positif } weakly positive	
+		
±	douteux—doubtful	
-	négatif—negative	

*Jules F. Chabreault*

\*Réaction d'élimination de Kline: Voir au verso  
Kline Exclusion test: See other side.

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<b>Renseignements:</b> Laboratoire de Sérologie, Laboratoire de Diagnostic bactériologique, Laboratoire de Chimie et de Contrôle sanitaire.	Local 300 Local 116 Local 114	<b>Information:</b> Laboratory of Serology, Laboratory of Bact. Diagnosis, Laboratory of Chemistry and Sanitation.



name 20-12

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. F 0594

Rank plte Name Dare G. Date of Birth 29 aug 1924  
day mo. yr.

Date of Enlistment 7 april 1943 Date of Appearance of First Symptom 16 dec 43

DIAGNOSIS Gonorrhoea  
(Use code name as given below)

Canadian Army (A.F.)

C.W.A.C.

N.R.M.A. Recruit and Home Defence



Indefinite (with red checkmark)

Date of Diagnosis 17 dec 43

Unit A.I.T.C. A 13 5th Inf

M.D. No. 5 Division or Command

Signature of Medical Officer  
George H. ...

Unit, Medical Unit or Hospital M.O. A 13

Date 18/12/43

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—Neurosyphilis
Syphilis—Acquired—Tertiary—Other
Syphilis—type undetermined



## CASE RECORD

Rank..... Name **DORE** (surname) G. (Christian names) Reg. No. **E-0584**

Unit..... **A.I.T.C. A-13** Canadian Army (A.F.)

Date of Enlistment..... **7-4-43** C.W.A.C.

N.R.M.A. Recruit

Enlisted in M.D. No..... **5**

Date of Birth..... **29-8-24** Marital Status..... **CELIBATAIRE** Racial Origin..... **Canadien Francais**

DIAGNOSIS..... **GONORRHEE**

Date of Diagnosis..... **17-12-43**

Signature of Medical Officer

*G. Dupuis Lt.*

Medical Services, Canadian Army

### 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 Examination *16 Dec 43*

History of Condition *E. contactant medical Blanchette*

RECORDED  
INDEXED  
DEC 19 1943

Early Preventive Treatment	
<input type="checkbox"/>	states E.P.T. taken.
	Type.....
	Time elapsed after exposure.
<input checked="" type="checkbox"/>	states no E.P.T. taken.
<input type="checkbox"/>	drunk at time of exposure.
<input type="checkbox"/>	had been drinking.

(NOTE.—If suspicious lesions are present obtain date of onset)

(4)  
**LABORATORY CONFIRMATION OF DIAGNOSIS**

Darkfield Examination		Serologic Kahn Test		Serologic Wassermann Test		Smear for Gonococcus		Culture for Gonococcus	
Date	Result	Date	Result	Date	Result	Date	Result	Date	Result
		<i>Kline</i>							
		31-12-43	<i>neg</i>	18-12-43		17-12-43	<i>Pos.</i>		
				21-12-43	<i>neg</i>				



**RESULTS OF LABORATORY EXAMINATIONS AFTER COMMENCEMENT OF TREATMENT**

Smear for Gonococcus		Culture for Gonococcus		Serologic Kahn Test		Serologic Wassermann Test		Spinal Fluid Examination	
Date	Result	Date	Result	Date	Result	Date	Result	Date	Result
23-12-43	<i>Pos</i>								
3-1-44	<i>Pos</i>								
21-1-44	<i>neg</i>								



(6)  
NOTES ON PHYSICAL EXAMINATION

Date	Entry—date and sign all entries	M.O.
7-3-12-43	<p>Cou de l'admission, ecoulement verdâtre très abondant. Légère tumeur du pénis. Le meut est rouge et ténébreux. Aucun signe visible d'ulcération.</p> <p style="text-align: right; font-size: 2em;">J. J. J. Collet</p>	



TREATMENT RECORD—GONORRHOEA

Date	Type	Dosage	Progress Notes	M.O.
18-12-43	Sulfathiazol	60 grs	Écoulement blanchâtre	J. J. J.
19-12-43	Sulfathiazol	60 grs	Écoulement blanchâtre	P. A. 10
20-12-43	Sulfathiazol	60 grs	Écoulement blanchâtre	P. A. 10
21-12-43	Sulfathiazol	60 grs	Écoulement	P. A. 10
22-12-43	Sulfathiazol	60 grs	Écoulement	P. A. 10
23-12-43	Sulfathiazol	60 grs	Écoulement abondant	P. A. 10
27-12-43			Écoulement abondant	J. J. J.
28			urinalysis	J. J. J.
29			"	J. J. J.
30			"	J. J. J.
31	Sulfathiazol	120 grs	Écoulement abondant très purulent	J. J. J.
1-1-44	"	75 "	Écoulement	J. J. J.
2	"	75 "	"	J. J. J.
3	"	75 "	"	J. J. J.
4	"	75 "	"	J. J. J.
5	"	75 "	Prothé: sus 2222. Bien sec	J. J. J.



## PROGRESS NOTES—NOTES ON HOSPITALIZATION

Give notes on any clinical relapse, recurrence of symptoms and signs, dates and details of hospitalization, etc.

Date	Entry—date and sign all entries	M.O.
23-12-42	Admis a l'hopital Militaire de Valcartier (Section "B")	Maurin
" " "	Ecoulement abondant	Maurin
24-12-42	Urine: Alb. neg. Glucose: neg. Sang: neg. Pus XXXX	Maurin
27-12-42	Ecoulement abondant. Pus purulent	Maurin
29-12-42	Ecoulement JM	Maurin
4-1-44	Bien sec JM	Maurin
8-1-44	Urine: Albumine: neg. Glucose: neg. Sang: neg. Pus: XXXX	JM
7-1-44	Souffle bouillor sale JM	Maurin
10-1-44	Sero-pus JM	Maurin
13-1-44	Apparemment sec JM	Maurin
14-1-44	Apparemment sec JM	Maurin

## PROGRESS NOTES—NOTES ON HOSPITALIZATION

Date	Entry—date and sign all entries	M.O.
17-1-44	Urine: Alb. neg. Glucose: neg. sang: neg. Pus XXX	JM
19-1-44	Bien sec JM	Maurin
20-1-44	Urine. Alb. neg. Glucose: neg. sang: neg. pus: neg JM	Maurin
21-1-44	P. M. negative. Libéré de l'hopital	Maurin

## FINAL DISPOSITION AND SUMMARY OF THE CASE

Date Treatment Commenced.....

18-12-43

Date Treatment Completed.....

20-1-44

Summary of Syphilis Treatment: Number of Arsenical Injections.....

N. A.

Number of Bismuth Injections.....

N. A.

Date Serologic Check Due.....

31-3-44

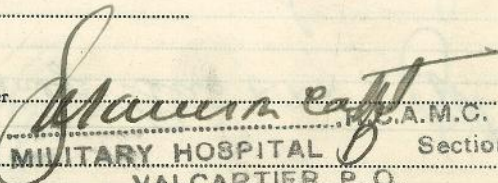
NOTE: For Gonorrhoea Cases—serology to be checked 3 months after date of diagnosis.

Discharged for Other Reason (state reason)

N. A.

NOTE: For Syphilis Cases—serology to be checked 6 months after completion of standard treatment.

N. A.

Signature of  
Medical Officer.....


Date.....

MILITARY HOSPITAL  
VALCARTIER, P. Q.

Unit or Hospital.....

23. 1. 44



Confidential

# CASE RECORD

# DUPLICATE

Rank Private Name DARE. G. Reg. No. E-0584  
(Surname) (Christian names)

Unit A.I.T.C. 1A-13 5th Inf. Canadian Army (A.F.)

C.W.A.C.

N.R.M.A. Recruit

Date of Enlistment 7 avril 1943 Enlisted in M.D. No. 5



Date of Birth 29 aout 1924 Marital Status SEL. Racial Origin C F

DIAGNOSIS Gonorrhée

Date of Diagnosis 17 dec. 1943 Signature of Medical Officer

G. DUPRE. Lt. RCAMC

Medical Services, Canadian Army

M.F.M. 295  
 12M-8-43 (1484)  
 H.Q. 1772-39-2022  
 .F.M. 293  
 294

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5. Upon diagnosis of every venereal infection the Medical Officer will complete Form M.F.M. 293 Notification of a New Venereal Infection.

6. All entries are to be made in ink or by typewriter.

### MEDICAL HISTORY

Date of First Symptom.....

16-12-43

History of Infection.....

Condom use, urethral discharge



#### 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)









## FINAL DISPOSITION AND SUMMARY OF THE CASE

Date Treatment Commenced..... 18-12-43

Date Treatment Completed..... 20-1-44

Summary of Syphilis Treatment: Number of Arsenical Injections.....

Number of Bismuth Injections.....

Date Serologic Check Due..... 31-3-44

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.....

L. A. SAMSON, CAPT

Date.....

23-1-44

Unit or Hospital.....

H. M. VALCARTIER





# Personal Effects Certificate.

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. AE 0584

Rank, Name & Initials Pta DORE G.

Regiment or Corps F.M.R.

Nature of Casualty K.I.A.

Date of Casualty 23 July 44

Inventory No. :-

3881

Registered Post Particulars :-

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

WHILE SERVING UNDER MY COMMAND.

WHEN ADMITTED HERE.

WHEN FOUND.

**DUPLICATE  
DUPLICATA**

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

Signature W. Racine

Rank LIEUT.

Unit Standard Company

Date 23 July 44

### Special Instructions.

Personal effects of :-

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

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

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

# MEMORANDUM

M.F.B. 465B

CANADIAN DENTAL CORPS

No 2 Coy

Date 13 JUNE 44

Reg. No. E0584 Rank

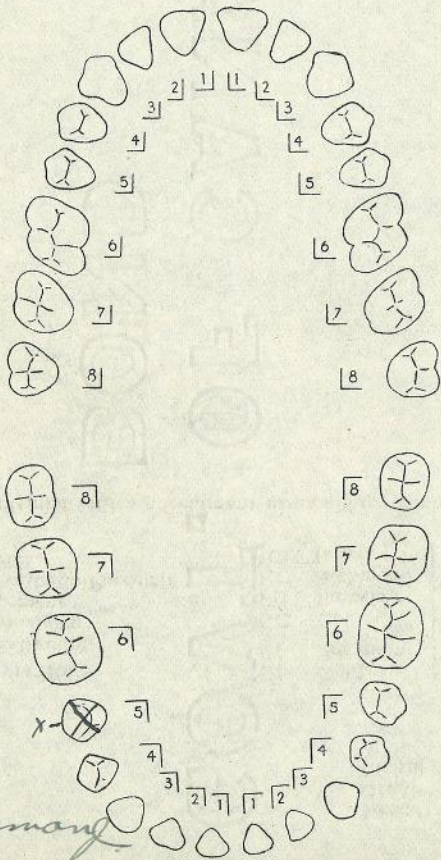
PTE

Name DORE

FUSILIERS  
G. Unit MONT-ROYAL

Detail work completed during this appointment. Refer to abbreviations on reverse side. Specify laboratory instructions and enter remarks in the space provided below.

13 JUNE 44 57 Local Anest. & E.H.



*Processed*



*H. Murray Capt.*  
Signature of Operator

*Sgt. Caseman*

Mesial — M  
Distal — D  
Incisal — I

Labial — La  
Buccal — B  
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

R Root Canal  
VA Vincent's Angina  
Pu Pulpitis  
PO Post Operative  
Pe Periodontia

Br Bridge  
PD Partial Denture  
CU Complete upper  
CL Complete lower  
Ra X-ray

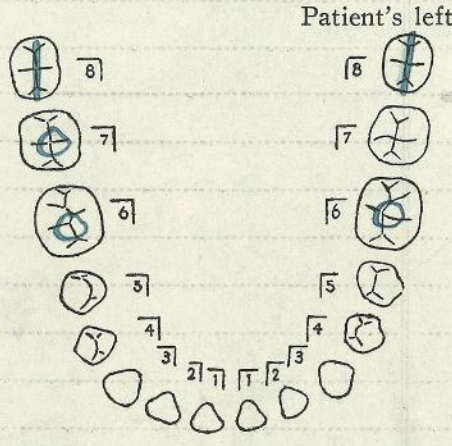
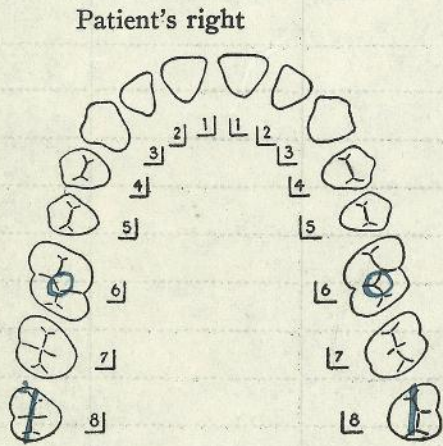
} Describe  
with  
sketch  
} Denture

Write plainly, indicate treatment using abbreviations as above, and sketch the outline of all restorations.

NAME D O R E Gerard RANK ,, Gunner AGE 18 ans REG. No. E-0584

UNIT A/A BTY R.C.A. REINF C.A. (A) DATE April 12-43 1943

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)

- Abbreviations:—
- |                                |              |         |                     |                   |
|--------------------------------|--------------|---------|---------------------|-------------------|
| X Irreparable teeth—extraction | GI Gold      | } Inlay | RC Root Canal       | Br Bridge         |
| A Amalgam                      | PI Porcelain |         | V's Vincent's       | PD Partial        |
| Ce Cement                      | GC Gold      | } Crown | Pe Periodontia      | CU Complete Upper |
| S Synthetic Porcelain          | PC Porcelain |         | Misc. Miscellaneous | CL Complete lower |
| F Foil                         | RC Richmond  |         | Ra X-Ray            | A Adjustment      |
|                                | JC Jacket    |         |                     |                   |

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.



*A. Strickland*  
 Signature and unit of examining officer  
 No. 25 Coy., C. D. C.





3+6

Chart existing dental conditions.

2

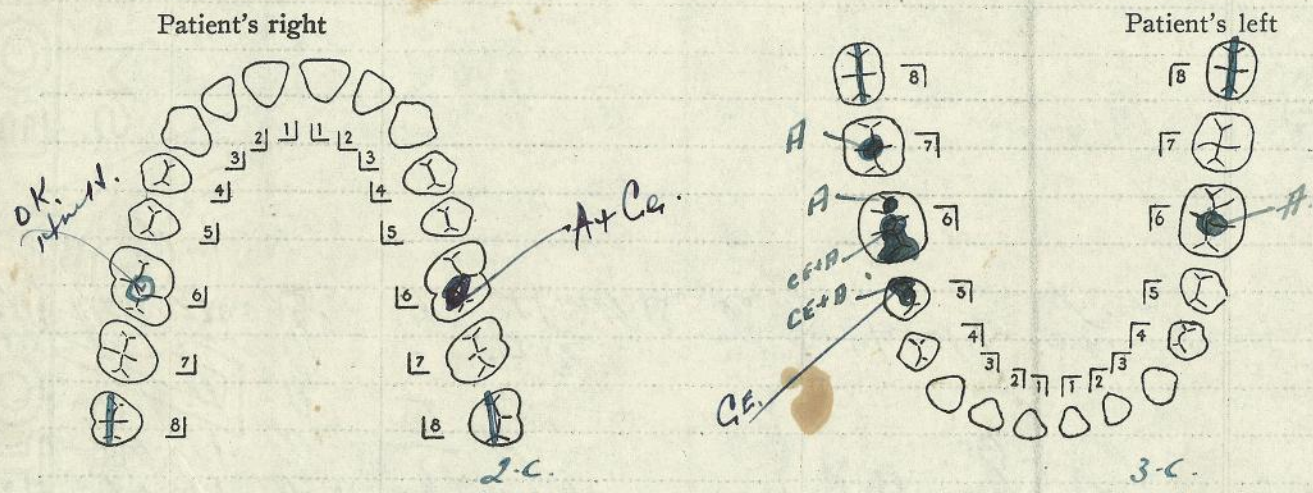
Detail only necessary treatment.

NAME D O R E Gerard RANK ,, Gunner AGE 28 ans REG. No. E-0584

UNIT A/A BTY R.C.A. REINF C.A. (A)

DATE April 12<sup>th</sup> 1943

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)

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 }

- Treatment
- RC Root Canal
- V's Vincent's
- Pe Periodontia
- Misc. Miscellaneous
- Ra X-Ray

- Br Bridge
- PD Partial } Denture
- 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.



*J. Strick Case*  
Signature and unit of examining officer  
No. 25 Coy., C. D. C.

Indicate surfaces of teeth as follows:

Mesial — M  
 Distal — D  
 Incisal — I

Labial — La  
 Buccal — Bu  
 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
1-2-44	16 O	- A	<i>W. H. Hutchins. Capt.</i>				
2-2-44	57 D-O	- CE+A	<i>W. H. Hutchins. Capt.</i>				
2-2-44	61 M-O	- CE+A					
2-2-44	61 O	- A-					
2-2-44	71 O	- A-					
16/3/44	16 O 57 D-O	- A+Ce. Refill with Cu. Ce.	<i>W. H. Hutchins. Capt.</i>				







FALSE DOCKET  
ARMY

No. 34

ESTATES

DEPARTMENT OF NATIONAL DEFENCE, CANADA

CROSS REFERENCE

DORE, G.

E-0584

G

CENTRAL REGISTRY	DATE	P. A. OR B. F.	INITIALS	REFERRED TO	FOR REMARKS	INITIALS	DATE
					(If purpose for which referred cannot be expressed on one line, add minute to file and enter here "With Minute")		
	OCT 26 1944			03	PER REQUISITION OCT 10 1944		
	7/45	B.F.	G	G	Per B.F. SIGNATURE	DM	26/10/44
	11/45	B.F.	G	G	With Papers JAN 17 1945		2-11-44
	29/1/45	P.A.	G	G	Per B.F. FEB 15 1945		
	7/45	P.A.	G	G	Per B.F. FEB 15 1945		
	5/3/45	P.A.	G	G	L.P.C. Emtd.	Q.P.	28-2-45
	30/4/45	B.F.	G	G	With Papers MAR 20 1945		
	15-4	B.F.	Q-4	Q-4	Verify P 4	G	26/3
	8/4/45	P.A.	G	G	Per B.F. APR 7 1945	Q.V.	28-3-45
	7-6	B.F.	SA	SA	Per B.F. APR 16 1945		
	7-7	B.F.	G	G	With Papers JUN 4 1945	Q.Y.	28/4
	7-8	B.F.	G	G	Per B.F.	G	8/6
					Dist #	A	15-6
					With Papers JUN 26 1945		
					Effects sent off to Q.C.	G	4/7
					Effects Shipped	Eff	6/7/45
		PA	QC	Q.C.	Co. per instructions	Eff	6/7/45
					2c PER REQUISITION JUL 9 1945		
	JUL 11 1945				Estates Returned	CB	11/7/45
	19/7	P.A.	G	G	With Papers JUL 16 1945		
					Per B.F. AUG 7 1945		

405-D-16,914

FILE H.Q. No.

DIED July - 23 - 1944 CANADA FORM TO UNIT

PRESUMED DEAD 194 OVERSEAS FRANCE

	Date Received	Date Despatched	
Casualty Report—	27-10-44		
Service { Canada <u>3-12-43</u> O/Seas			Beneficiary <u>Mrs. ANNE MARIE DORE (MOTHER)</u>
Will { Civil None Probate (or L of A)			Residing { Canada <input checked="" type="checkbox"/> Elsewhere
Particulars of Family Form dated <u>10-4-43</u> None			Single <input checked="" type="checkbox"/> Married Parents <u>Both</u> Children (Minors) Life Insurance <u>METROPOLITAN LIFE INS. CO.</u>
Form P. 64 Dated <u>13-1</u> Domicile <u>Swiss</u>	2-11 11-1		By <u>Focher</u> Single <input checked="" type="checkbox"/> M Other N/K <u>mother - 3 mother - 6 sisters</u> Debts <u>paid</u> Will <u>nil</u> Civil Estate <u>V. G. B.</u> <i>(see also 17/2/45 - mother's father)</i>
	Action Required	Action Taken	Date App'd
Bank a/c			
W.S.C.			
Bonds <u>assignment cancelled</u>			
C. of A. Report	19-2	2-3	Service Debts <u>nil</u> Service Will <u>nil</u>
L.P.C. \$ <u>46.38</u>	19/6/45	26/2/45	<b>VERIFIED 5/3</b>
Amended			
Bank Credits			
	<u>121.34</u>	<u>26-3-46</u>	<u>War Service Gratuities V. 804-10479</u>
	<u>23.54</u>	<u>7/1/45</u>	<u>Intest. Robert <u>1649 R.Y. #4935</u></u>
	<u>69.92</u>		
DISTRIBUTION—			To <u>mother</u>
Effects { Canada	<u>5-7-45</u>		Bulk via <u>1 Rel reg 2522</u> ✓ 122
Overseas			Valuables via Letter as to, dated <u>4/7/45</u>

Total Cash \$ 69.92 To

Date of Despatch 18/6/45 \$ mother - Marie-Anne Dore per incl  
 \$ 29/2/45  
 \$ 15/6/45  
 \$ **ADVICE RECEIVED**  
 \$ JUN. 1 1945  
 \$ NO WILL IN REG. OFF.  
 \$ Ditto 121.34 also  
 \$ 17/6/45  
 \$ 26/2/46









# UNIT COMMITTEE OF ADJUSTMENT REPORT

APPROVED AND FORWARDED

## INSTRUCTIONS

- To be completed in triplicate of which one copy will be retained by the unit.
- Parts marked \* which are not applicable will be ruled out and initialled.
- All blanks marked † will be filled in with "NIL" where appropriate.
- In the case of personnel reported MISSING, INTERNED, or PRISONERS OF WAR, NO PERSONAL EFFECTS WILL BE SOLD AND NO PREFERENTIAL CHARGES OR ORDINARY DEBTS WILL BE PAID by Unit Committee of Adjustment.
- In the case of DECEASED personnel, no personal effects of sentimental nature will be sold. Other personal effects may be sold to pay preferential charges and also when, in the opinion of the CO, the exigencies of the Service make it desirable to do so.
- Unit Committee of Adjustment may pay, in the case of deceased personnel,
  - preferential charges owing within the unit and the unit area, and
  - ordinary debts similarly owing ONLY if after making provision for all preferential charges of which it has notice there is sufficient cash on hand to pay all ordinary debts.
- The following will be forwarded in the manner shown,
  - In UK—to Officer i/c Estates, CMHQ.
  - Ex UK—to Officer i/c Cdn Sec, GHQ, 2nd Echelon.
  - Personal effects not disposed of, original and duplicate copy of report, and Officers' Record of Service Book or Soldiers' Service and Pay Book MBM 1, Pts I and II—by post, rail or road.
  - Any Will or testamentary document with a memorandum giving regimental particulars and, if undated, any available evidence indicating the probable date of its execution—by registered post AT ONCE.
  - Cheques, drafts, money orders, personal papers and documents, effects of sentimental value and an inventory of all personal effects forwarded—by registered post.

*C. J. R. Langlois Capt*  
Standing Committee of Adjus  
Cdn. Sec. GHQ 2nd Ech 21 A.G  
OCT 13 1944

## REPORT

No. E-0584..... Rank Pte..... Name in full Dore, G......

\*Deceased, \*Missing, \*Prisoner of War, \*Interned Date of Casualty 23 Jul 44

Unit Les Fusiliers Mont-Royal.....

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

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

Name of Officer furnishing report C.J.R. Langlois Capt  
(BLOCK CAPITALS)

### A. PERSONAL EFFECTS

- \*Separate inventories are attached, as applicable, showing:
  - \*Articles privately owned, suitable for service requirements, turned into QM Stores—Exhibit "A1"
  - \*Articles sold to pay preferential charges, showing the purchaser of and the price paid for each article—Exhibit "A2".
  - \*Articles additionally sold under CO's authority showing the purchaser of, and the price paid for each article, and the written authority of CO for such sale—Exhibit "A3".
  - \*Bulky articles disposed of under authority of Officer i/c Estates CMHQ, showing the disposition and, if sold, the purchaser of, and the price paid for each article—Exhibit "A4".
  - \*Personal Effects, forwarded to (\*Officer i/c Estates), (\*Officer i/c 2nd Echelon)—Exhibit "A5".
- \*No personal effects were found or received. A memorandum as to the circumstances and any action taken is attached as Exhibit "A6".

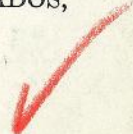
### B. WILL

- \*Original Will or testamentary document was forwarded on nil..... (date) by registered post to (\*Officer i/c Estates), (\*Officer i/c 2nd Echelon). Copy thereof and of the memorandum forwarded therewith is attached as Exhibit "B1".
- \*No Will or testamentary document was found on the person or among the effects of the deceased.

### C. CLOTHING AND EQUIPMENT (PUBLIC)

- \*Was turned in to QM Stores. yes
- \*There were no deficiencies. nil
- \*There were deficiencies amounting to £nil and cash debit voucher duly certified by the DADOS, or Senior Ordnance Representative of the formation is attached as Exhibit "C1".

DUPLICATE  
DUPLICATA



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

D. PREFERENTIAL CHARGES

(a) Name and Address of Creditor	Nature of Claim	Amount	Paid or Unpaid
†  nil			

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

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

E. ORDINARY DEBTS

(a) Name and Address of Creditor	Nature of Claim	Amount	Paid or Unpaid
†  nil			

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

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

F. CREDITS

(a) Public Claims owing to the Casualty.	Nature of Claim	Amount
†  nil		

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

(ii) \*Statement of valuation of, and receipt for, articles suitable for service requirements turned into QM Stores (para A1 (a) above) attached as Exhibit "F2".

(b) Private Claims Owing to the Casualty.

Name and Address of Debtor	Particulars of Claim	Amount	Paid or Unpaid
†  nil			

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

G. CASH RECEIVED AND PAID

	Paid	Received
Cr. {	Cash found on person or in effects	† 65 frcs
	Cash realized from sale of effects as per para A.	†
	Cash collected re private claims as per para F.	†
Dr. {	Paid re preferential charges as per para D.	†
	Paid re ordinary debts as per para E.	†
	Paid (*balance) to unit Paymaster	† 65 frcs
	† 65 frcs	† 65 frcs

H. SERVICE AND PAY BOOK

Officers' Record of Service Book (\*Soldiers' Service and Pay Book MBM I, Parts I and II) is (\*forwarded with this report)

(\*not forwarded by reason that already forwarded.....)

.....  
Signature of Committee or President  
.....  
Les. Fus. M. R. - CA (O)  
.....  
Unit

15 Aug 44  
Date

ESTATES BRANCH

April 26th, 1946.

D. R. 2 (C),  
Records Office,  
O T T A W A .

DORE, Gérard, Pte., (Deceased)  
No. E-0584, Canadian Army

A portion of a letter received here  
from the mother of the marginally noted as translated from  
the French reads as follows:

" I read in the newspaper that the  
Department sent pictures of the graves of soldiers  
killed in action in France. I would like very  
much to receive a photo of my son's grave."

2. Will you reply direct to the mother who  
is Mrs. Marie Anne Doré, P.O . Box 123, ROBERVAL, P.Q., in French.

OG/TD

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

DUPLICATE  
DUPLICATA

A-5

A my no E-0584 RAN Pte Dore, G. Regt Fus. M.R.

INVENTORY OF EFFECTS

List of articles of intrinsic or sentimental value

Envelope with photos ✓ 1 Identity Disc ✓  
 1 Burial Certificate <sup>To ADMN.</sup> 1 Service & Paybook <sup>To ADMN.</sup>  
 1 Wallet with photos ✓

	\$	S	D	Fcs	Other
Notes				65	
Postal Orders					
Gold					
Silver					
Copper					
Total				65	

*Checked.*  
*23 July 1919*  
*W. W. [Signature]*

**DUPLICATE  
 DUPLICATA**

SPECIAL NOTES

The pay books (A, B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z) of deceased or Missing Men will be dispatched by Registered Post, under separate cover, and not together with cash or articles of intrinsic or sentimental value. They will be accompanied by a covering memorandum and NO ENTRY IN RESPECT THEREOF WILL BE MADE UPON THIS FORM.

Articles of Government property (including clasp knives) should be forwarded with the effects of Deceased or MISSING Men.

Personal clothing of sick, Wounded, Missing or Deceased Soldiers must never be sent to the Base. THIS ARTICLE MUST BE STATED BY AN OFFICER, SHOULD BE ENCLOSED IN THE PARCEL WITH LABEL AND NOT SENT SEPARATELY.

Personal Effects Certificate

This portion for Use at the Base ONLY

B-0584.

Army No.....

Pte Dore, G.

Rank and Name.....

C.I.C. Fus. M.R.

Regiment or Corps.....

Killed

Nature of Casualty.....

25 Jul 44

Date of Casualty.....

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

WITNESSE MY HAND AND SEAL UNDER MY COMMAND THIS 15th AUGUST 1944.

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

Signature.....

Geo Balcer

Rank.....

Capt

Unit.....

C.I.C. Fus M.R.

Date.....

15 Aug 44

INVENTORY NO:-

REGISTERED POST PARTICULARS:-

SPECIAL INSTRUCTIONS

Regarding the forwarding of personal effects

(I) ~~WEIGHT SHOULD ALWAYS BE DESPATCHED BY REGISTERED POST.~~

(II) DECEASED OR MISSING MEN:- Packages to be addressed by Registered post to:- Officer IC 2nd Echelon

(III) WOUNDED OR SICK MEN:- Packages to be addressed by Registered Post to:- Officer i/c 2nd Echelon.

CANADIAN MILITARY HEADQUARTERS

**ESTATES BRANCH  
INVENTORY**

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

No., RANK and NAME ..... **E-0584 Pte. Dore G.** ..... **Dec'd** .....

RECEIVED FROM ..... **G.H.Q. Cdn. Section 2nd. Ech 21. Army Grp.** .....

**M-16018 Pte. Murdoch W.J.**

CHECKED BY ..... **B-73775 Pte. Todd F.A.** ..... DATE ..... **4 Jan 45** .....

- |   |   |
|---|---|
| 1 | Snapshots   |
| 1 | Red Identity Disc.                                |
| 1 | Leather Wallet                                    |
| 2 | 6th V/L Receipts for \$50.00 To Offr. I/C Estates |
|   | Newspaper Clippings                               |

**DUPLICATE  
DUPLICATA**

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

*Ta Todd F.A.*

for OC 1 Cdn KSD

CANADIAN MILITARY HEADQUARTERS

**ESTATES BRANCH  
INVENTORY**

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

No., RANK and NAME ..... **E-0584 Pte. Dore G.** ..... Dec'd

RECEIVED FROM ..... **G.H.Q. Cdn. Section 2nd. Ech 21 Army Grp.** .....

**M-16018 Pte. Murdoch W.J.**

CHECKED BY ..... **B-73775 Pte. Todd F.A.** ..... DATE ..... **4 Jan 45** .....

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|---|---|
| 1 | Snapshots   |
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| 1 | Leather Wallet                                    |
| 2 | 6th V/L Receipts for \$50.00 To Offr. I/C Estates |
|   | Newspaper Clippings                               |

**DUPLICATE  
DUPLICATA**

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

..... *Td. Todd* .....  
for OC 1 Cdn KSD



CANADIAN MILITARY ESTATES

ESTATES BRANCH

INVENTORY

Inventory of effects issued by  
Inventory of effects, No. 1 (RS)

No. 1 (RS) and 2 (RS)

APPLIED FROM

DATE

LINKED BY

DUPPLICATE  
DUPPLICATE



Inventory of effects issued by  
Inventory of effects, No. 1 (RS)  
Inventory of effects, No. 2 (RS)

**DEPARTMENT OF NATIONAL DEFENCE**  
NAVY ===== ARMY ===== AIR FORCE  
**STATEMENT OF WAR SERVICE GRATUITY**

**4**  
ARMY

DECEASED MEMBER'S NAME

**Gerard**  
(CHRISTIAN NAMES)

**DORE**  
(SURNAME)

REGISTER NO.

D-13246

FILE NO.

405-D-16914

DATE

19-2-46

PAYEE **Director of Estates**

SERVICE NO.

# E-0584

ADDRESS

FINAL RANK OR RATING

Pte.

DATE OF TERMINATION OF OVERSEAS SERVICE

23-7-44

DATE OF DISCHARGE

23-7-44

**A. TOTAL QUALIFYING SERVICE**

NO. OF DAYS 474 EQUAL TO 15 COMPLETE PERIODS AT \$7.50

\$ 112.50

**B. QUALIFYING OVERSEAS SERVICE**

NO. OF DAYS 84 LESS 24 INELIGIBLE DAYS, EQUAL TO 60 DAYS @ 25c. PER DAY  
*SEE PAR. 2 OVERLEAF FOR EXPLANATION*

15.00

**C. SUPPLEMENT FOR OVERSEAS SERVICE**

DAILY RATES AT DISCHARGE

PAY \$ 19.25  
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE \$ 11.25  
ADDITIONAL PAY \$

**DUPLICATE  
DUPLICATA**

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ 2.75 X 7 = \$ 19.25  
NO. OF DAYS 84 X \$ 19.25

8.84

**D. WAR SERVICE GRATUITY**

136.34

**E. DEDUCTIONS**

OVERPAYMENT OF

PAY AND ALLOWANCES \$  
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$ 15.00

15.00

OTHER DEDUCTIONS \$

**F. TOTAL AMOUNT PAYABLE**

121.34

**G. YOUR PORTION OF GRATUITY IS—**

100%

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ \_\_\_\_\_ OF \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ \_\_\_\_\_

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

PREPARED BY AB CHECKED BY AB

TREASURY  
CHECKED BY G. Pettelenc DATE 25/2/46

SERVICE REPRESENTATIVE

ESTATES BRANCH

July 18, 1945.

Director of Records,  
Temporary Building No.8  
O T T A W A, Ont.

DORE, Gerard Pte.(Deceased)  
No. E-0584, Canadian Army

DUPLICATE  
DUPLICATA

1. We are enclosing herewith copy of a letter received here from the mother of the above mentioned Deceased.
2. Will you please communicate direct with Mrs. Dore concerning the information requested.

OG/YC

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

Director of Estates

Regimental No. E0584 Rank Private

DORE Gerard  
Surname Christian Names

Unit Les Fusiliers Mont-Royal (CA).

Date of Death 23-7-44 Place of Death Overseas (France)!

Next-of-kin Mr. Isadore Dore Relationship MOTHER

Address Rue Fabrique, Roberval, Roberval Co. P.Q.

M.F.M. 5 Copy of M.F.M. 5 herewith,

Will Will d/3-12-43 herewith.

Date 25-10-44

JEC/LH

*Mem. A. Mather  
10. 11. 44*

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

DUPLICATE  
DUPLICATA

19

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER E-0584

RANK Private

SERVICE UNIT

Les Fusiliers  
Mont-Royal  
(CA)

NAME DORE, Gerard

DATE OF BIRTH 29-8-24

DATE OF ENLISTMENT 7-4-43

MARITAL STATUS Single

RELIGION Roman Catholic

DUPLICATE  
DUPLICATA

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

Father

NAME  
ADDRESS  
D.A.B.

Rue Fabrique,  
Roberval, Roberval Co. P.Q.

Mr. Isadore Dore

ADDRESS

ADDITIONAL PERSON  
TO BE NOTIFIED

ADDRESS

PARENTS NAME

ADDRESS  
( IF SOLDIER  
MARRIED OVERSEAS )

AUTHORITY CAS. SIG. NO. 8658

H.Q. 405-D-16914

CASUALTY DETAILS

Killed in action

DATE 23-7-44

FRANCE

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

NCL YES/NO

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

YES/NO

DATE 30-8-44

FORM NO. CAS. 6  
25M-4-44 (4194)  
H.Q. 1772-39-1989-1990

DIRECTOR OF RECORDS

6

COPY FOR DOCUMENT FILE

TRANSLATION  
(May-30-1945)

(May-28-45)

Re- Pte. Gérard Doré, N/0584.  
Deceased.

Sir:

A few months ago, the Dept. of N. Def. has officially announced that parents of deceased soldiers would receive an indemnity (overseas service). My son died at Falaise, July 23/44, and I was drawing \$15. per month's assigned pay. I have a large family, and his financial assistance was most useful to me.

As I have so far received no indemnity, I would ask you to let me have the following information:

- 1- What is the amount paid by the Govt. to parents of deceased soldiers who, during their lifetime, were helping their families? (Assigned Pay)
- 2- If that indemnity is payable to parents, how is it that I have not received same?
- 3- If I am entitled to anything, I would ask you to kindly send me the necessary forms to fill in.
- 4- <sup>Are the</sup> Expenses I have incurred for a funeral service (\$75.) according to your regulations, ~~not~~ supposed to be reimbursed? When may I expect to have a remittance?

Hoping that I shall receive my due, I ...

(SGD) Isidore Doré,  
P.O.Box 123,  
Roberval, QUE.

PAYMASTER-GENERAL  
(WSG, etc.)

TRANSLATION  
(May-30-1945)

(May-28-45)

Re- Pte. Gérard Doré, E/0584.  
Deceased.

Sir:

A few months ago, the Dept. of N. Def. has officially announced that parents of deceased soldiers would receive an indemnity (overseas service). My son died at Falaise, July 23/44, and I was drawing \$15. per month's assigned pay. I have a large family, and his financial assistance was most useful to me.

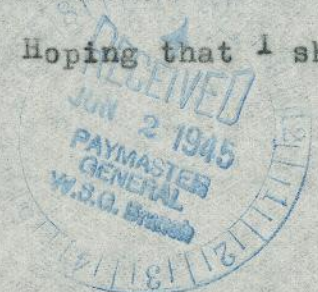
As I have so far received no indemnity, I would ask you to let me have the following information:

- 1- What is the amount paid by the Govt. to parents of deceased soldiers who, during their lifetime, were helping their families? (Assigned Pay)
- 2- If that indemnity is payable to parents, how is it that I have not received same?
- 3- If I am entitled to anything, I would ask you to kindly send me the necessary forms to fill in.
- 4- <sup>Are the</sup> Expenses I have incurred for a funeral service (\$75.) according to your regulations, ~~not~~ supposed to be reimbursed? When may I expect to have a remittance?

Hoping that I shall receive my due, I ...

(SGD) Isidore Doré,  
P.O.Box 123,  
Roberval, QUE.

CHJ



**IMPORTANT—Keep this acknowledgment.**

DOMINION OF CANADA  
SIXTH VICTORY LOAN

This is to certify that E 0584 Pte. DORÉ Gerard. No. 1 Inf. Trg. Bn. CIC Debart N.S.  
(Number) (Rank) (Name) (Unit)

has purchased \$ 50.00 Sixth Victory Loan 3% Bonds to be paid by six monthly pay assignments of \$ 8.40 each for the months of May, 1944, to October, 1944, inclusive, and has directed that the bonds be delivered to

Miss. DORÉ Rita. P.O. Box 123. Roberval. Roberval Co. Que.  
(Enter either Department of Finance OR name and address of person or Bank to whom bonds are to be delivered)

after payment has been completed.

Date 19 April 1944.

*D. A. Staps*  
Sent  
(Departmental Carvasser)

Communicate by letter with Chief Clerk, Employee Instalment Purchase Plan, Department of Finance, Ottawa, if it is necessary to alter the delivery instructions or to make inquiries regarding your bonds. The Department of Finance will hold bonds in safekeeping during term of service, or they may be delivered to another person or Bank, as the applicant shall direct.

In the event of the purchaser being discharged from the Service before payment is completed, he can make the balance of his payments direct to the Department of Finance, Ottawa, Canada.

If the purchaser dies before payment is completed, the amount standing to his credit in the Purchase Account will be transferred to the credit of his Service pay account.

In the event of death, bonds held for the account of any member of the Services will be delivered to the Administrator of Estates.



# CANADIAN ARMY OVERSEAS

## FINANCIAL RECEIPT

RECEIPT No. .... 9 Aug 1944

RECEIVED FROM ... CAPT J.S. LANGLOIS FMB

THE SUM OF ... Sixty five francs

..... (francs) ..... being

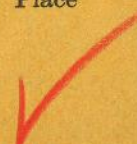
Amount of money found on  
or in the Personal effects of -

E-0584 PTE DORE G.

DUPLICATE  
DUPLICATA

.....  
Command Paymaster or Field Cashier.

9 Aug 1944 ..... Place



Personal or

Army Form W.3190.

Army No. E 0584 Rank PO Name & Initials DAVE G. F.M.R.

**INVENTORY OF EFFECTS.**

List of Articles of Intrinsic or Sentimental Value.

SNAPSHOTS  
 IDENTITY DISC (RED)  
 WALLET (LEATHER)  
 2 5000 SIXTH VICTOR  
 LOAN RECEIPTS  
 NEWSPAPER CLIPPINGS

	£	s.	d.	Frcs.	Ctms
Notes					
Postal Orders					
Gold					
Silver					
Copper					
<b>TOTAL</b>					

DUPLICATE  
DUPLICATE

**Special Notes.**

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

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

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

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

DUPLICATE  
DUPLICATE

Personal Effects Certificate.

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. F 0584  
Rank, Name & Initials PLA DORE G  
Regiment or Corps F M R  
Nature of Casualty KIA  
Date of Casualty 23 July 44

Inventory No. :—  
3881

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

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

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

Signature W. Pasine  
Rank LIEUT.  
Unit Training Command  
Date 21 Aug 44

Registered Post Particulars :—

DUPLICATE  
DUPLICATE

Special Instructions.

Personal effects of :—  
(i) Deceased or Missing officers and other ranks will always be despatched by registered post to O. i/c G.H.Q., 2nd Echelon.  
(ii) Sick or Wounded officers and other ranks will always be despatched by registered post to the hospital to which admitted, if known, otherwise to O. i/c G.H.Q., 2nd Echelon.  
Two copies of this Army Form will be enclosed in the parcel.  
This Army Form will also be used when forwarding the personal effects of enemy dead or enemy prisoners of war.

OCT 1944



H.O. 405 - ~~D - 16914~~

Original on H.Q. File

405-D - 1763L

DISCHARGE DOCUMENTS HAVE BEEN DETACHED  
AND PLACED IN DOCUMENT ENVELOPE IN  
RECORD OFFICE, N.D.H.Q.

DATE \_\_\_\_\_

C.A.S.F. A. 28

Receipt is Acknowledged

JUL 12 1945

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

29

Reg

Please cancel

B. F. of 21-9-45.

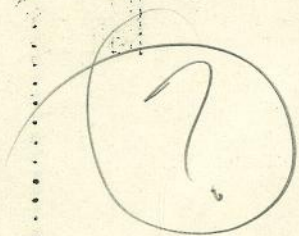
**CANCELLED**

P. B. Ludwig  
20

18 <sup>9</sup>/<sub>45</sub>



F.T.  
Please





DEPARTMENT OF NATIONAL DEFENCE (ARMY)

CROSS REFERENCE

DORE, G.

E.0584

A.F.

CENTRAL REGISTRY	DATE	P. A. OR B. F.	INITIALS	REFERRED TO	FOR REMARKS	INITIALS	DATE
					(If purpose for which referred cannot be expressed on one line, add minute to file, and enter here "With Minute")		
				C	WITH PAPERS AUG 1 1944		
				as leader	For signature & return to Cas. Sec. please.	W	29/9/44
				Q 8	Returned.	W	30/9/44
					Passed, please.	W	21/1/44
				S	Passed Please	DM	26/1/44
NOV 3 - 1944	10/1/44	PH	SEA	Ha	" "	W	30/10/44
JUL 14 1945	2/7/45	PA	SH	7a	PER REQUISITION JUL 5, 1945		
				2d	WITH PAPERS JUL 21 1945		
				OK(A)	For precis pls	W	23/7/45
				REC.	WITH TRANSL.		
AUG 7 - 1945	21/8/45	B.F.	W	D.R.2 (U)	With precis pls.	W	29/7/45
	6/7/45	PA	W	2B	Memo pls.	W	31/7/45
AUG 22 1945	21/9/45	B.F.	P.L.	W 2D	PER B.F. AUG 21 1945		
AUG 28 1945	<del>21/9/45</del>	<del>B.F.</del>	<del>W</del>	2d	WITH PAPERS AUG 23 1945		
				2d	WITH PAPERS SEP 12 1945		
				OK(A)	For trans. pls.	W	14/9/45
SEP 19 1945	18/9/45	pa.	W	W 2D	with Translation	W	17/9/45
				W 2D	PER REQUISITION OCT 6 1945		
DEC 28 1945				Trans	For translation, w	W	27/12/45
				W.S.G.	WITH TRANSL.	AM	
FEB 5 1946				Trans	for french transp	W	2/2/46
				W.S.G.	with transp	W	
MAR 7 - 1946	30/3/46	PA	W	W 2D	6 states with pls	W	5/3/46
				Estate	PER REQUISITION APR 23 1946		
				PM 6/10/46	for top folders	W	22/4/46
MAY 6 - 1946				Trans.	For translation, w.	W	3/5/46
MAY 10 1946	7/5/46	Pg.	W	W.S.G. G.	WITH TRANSL.	W	19/5/46
				4B	PER REQUISITION AUG 15 1947		

DO NOT WRITE BELOW THIS LINE

30/8/47 PA W IA for trans. pls. W 27-8-47

## CASUALTY SECTION

FILE ACTION

ITEM	CHECKED BY	DATE	CHECKED BY	DATE	CHECKED BY
1. Cable Abstract Attached	A.M.W.	2-8-44			
2. Telegram Despatched to N/K					
3. Delivery of N/K Telegram Confirmed					
4. Confidential Notice (Miss. POW. Fatals)					
5. Dependents Allowance Board Notified					
6. P. & M.H. Notified (Blindness Amps. Fatals)					
7. Nat. War Services Notified (POW's Only)					
8. Red Cross Notified (POW's Only)					
9. SAAG Notified (POW's Only)					
10. Income Tax & Dept. of Labour Notified					
11. Chaplain Services Notified					
12. Released to Press					
13. G's Letter to Next of Kin (Fatals)					
14. File Passed to Q3 (Fatals)					
15. Q3 Action Taken					
16. File Passed to "G"					
17. Minister's Condolence Card Despt.	A.P.	26-9-44			
18. File Passed to Honours & Awards					
19. Memorial Cross Action Taken	J.C.B.	12.11.44			
20.					
22.					
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35.					

FILE EXAMINED AND ACTION COMPLETED







# 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.

DORE G. / 1

CANADIAN MILITARY HEADQUARTERS  
(CANADIAN ARMY OVERSEAS)

CROSS REFERENCE


DORE G. PTE E-0584

COMPLETE  
RETURN  
ESTIMATED  
DECEASED  
C. R.

CENTRAL REGISTRY	DATE	PA OR BF	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")		
	24 Nov 44	B.F.	Est 4	Est 4	WITH PAPERS EST. C.R.		24 OCT 1944
	23 Nov 44	B.F.	Est 4	Est 4	PER B.F. EST. C.R.		24 NOV 1944
	23 Jan 45	B.F.	Est 4	Est 4	PER B.F. EST. C.R.		21 DEC 1944
	23 Jan 45	B.F.	Est 4	Est 4	WITH PAPERS EST. C.R.		9 - JAN 1945
	12 Feb 45	PA	Est 4	Est 4	WITH PAPERS EST. C.R.		3 FEB 1945

National Archives Nationales  
O.G.P.R.C. / C.D.G.P.O.

05-78256 M



W F

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