

ORIGINAL  
DUPLICATE  
TRIPLICATE

M.F.M. 2  
A.F.B. 271  
500M-7-41 (1131)  
H.C. 1772-99-1645

OCCUPATIONAL HISTORY FORM COMPLETED

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

Unit 74th. Fld. A/T. (RCA) CA. Regimental Number D-14011

ACTIVE FORMATIONS AND UNITS OF THE CANADIAN ARMY  
ATTESTATION PAPER

*09*  
**FINGERPRINTED**  
**PHOTOGRAPHED**

- Surname PARKHILL
- Christian Names Douglas Campbell
- Present address Rock Island, P. Que.
- Date of birth 18th, December 1916
- Place of birth Canada Quebec Ayer's Cliff  
(Country) (County or Province) (Town or Township)
- Religion (state denomination) United Church
- Trade or Calling Shipping Clerk
- Married, Widower or Single Single Married
- Name of next of kin Mr. Amode Parkhill Mrs. Ruth Parkhill
- Relationship Father Wife
- Address of next of kin Ayer's Cliff, P. Que. Escoheque
- Do you belong to, or have you served in a Reserve Formation or Unit of The Canadian Army?  
74th, Field Battery, R.C.A., (R).  
(If Yes, Give Unit and Dates of Service)
- Have you served in (a) an Active Formation or Unit of The Canadian Army? NO  
(Yes or No)  
(b) Any other Naval, Military, or Air Force?  
(If Yes, Give Regimental No. and Unit)
- Did you serve during the Great War 1914-1918? NO  
(If Yes, specify Regimental No., Unit and Dates of Service)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

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

Date 17 April 1942. Douglas C Parkhill  
(Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

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

Douglas C Parkhill (Signature of Recruit)

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER

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

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

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath before me,

at Montreal South this 17th day of April; 1942 19    

A. Robey, Capt. (Signature of Magistrate, Justice or Attesting Officer.  
Officer or Rank and Unit or appointment.)

NO. 4-DISTRICT DEPOT A.F.

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

*at*

2306  
=

Record of Service of PARKHILL DOUGLAS CAMPBELL Regimental Number D-14011  
 (Surname) (Christian Names)

QUALIFICATIONS

EDUCATIONAL QUALIFICATIONS

Military..... NIL High School } 4 Years Graduation } NIL  
 or } (years completed) OR }  
 Business or Professional..... NIL Collegiate } Matriculation } (specify)  
 Trade or Civil..... SHIPPING CLERK \*College..... NIL  
 Technical..... NIL \*University..... NIL  
 Languages..... ENGLISH 7 years Public (A'yers' Cliff., P.Q)  
 \*(Name of institution, courses or years completed, and degrees obtained to be shown)

All enlisted personnel will be taken on as Private soldiers, appointments and promotions to higher rank to be shown as provided in the space below.

Date	Report From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Rank Shown	Effective Date	Unit	Place	Authority	
							Part II D.O. No. Cas. List, etc.	Dated
17-4-42	DRQ	Joined on appointment NO.4 DISTRICT DEPOT CA.	GNR	17-4-42	4DD.	MFL.STH.	4DD.PT11.No.91	17-4-42
23-4-42	4DD	PROMOTED TO THE RANK OD A/BDR ON THE AUTHORITY OF HIS C.O. TO COMPLETE UNIT ESTABLISHMENT	A/BDR	17-4-42	"	"	" " " " 95	22-4-42
24-4-42	"	SOS ON POSTING TO HIS UNIT 74th A/T BTY. R.C.A.C.A.C.A. (A) T.C.A-1 PETAWAWA ONT.	A/BDR	20-4-42	"	"	" " " " 96	23-4-42
		<i>Att'd. to C.A.T.C. (A-1)</i>	"	<i>21 3/4 42</i>	<i>CATC (A-1)</i>	<i>LEMINA</i>	<i>97</i>	<i>24 3/4 42</i>
		<i>Ceases to be att'd. to (A-1) CATC on return to his own Unit. 74th A/T Bty.</i>	"	<i>6 7/4 42</i>			<i>159</i>	<i>6 7/4 42</i>
		T.O.S. 6th A/T Regt. and posted to 74 A/T Bty.	"	21-4-42	6A/T Regt	Petawawa	D.O. No.1	18-6-42
		Attached to A-1, C.A.T.C. for all purposes	"	21-4-42	"	"	D.O. No.1	18-6-42
		Ceases to be attached to A-1, CATC, F.A.P.	"	7-7-42	"	"	D.O. No.11	7-7-42
		Promoted to the rank of A/L) Sgt.	A/L/Sgt	15-8-42	do	do	D.O.No. 399	29-8-42
		Having been granted week-end leave from 3-9-42 until 9-9-42 is authorized to receive 50¢ p.d. in lieu of rations.	"	3-9-42	do	do	D.O.No. 43	4-9-42

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

Name PARKHILL D.C.M.F.M. 1 & 2 (a)  
250M-7-41 (1151)  
H.Q. 1772-39-1646

REPORT		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		Granted furlough from 5-10-42 until 18-10-42 and receives 50¢ p.d. in lieu of rations.	A/L/Sgt	5-10-42	6A/TRegt	Petawawa	D.O. 60	5-10-42
		Returned from furlough 18-10-42	"	18-10-42	do	do	D.O. 70	23-10-42
		Promoted to rank of A/Sgt.	A/Sgt.	1-11-42	do	do	D.O. 76	5-11-42
		Granted Christmas Leave from 22-12-42 to 28-12-42	"		do	do	D.O. 100	15-12-42
		Issued Special Leave and Furlough Warrant	"	21-12-42	do	do	D.O. 1	1-1-43
		<i>Change of address - m.p. of h.c. to: Mrs. Ruth A. Parkhill (wife) c/o Mr. A. J. Soutere, Beebe, Que.</i>	"	19-1-43	"	"	" 8	19-1-43
		<i>Granted W.L. Leave from 12 Mar 43 to 15 Mar 43 (4 days) plus 50¢ per diem R.A.</i>	"	12-3-43	"	"	" 34	<del>12-9-3-43</del>
		<i>Confirmed in rank of Bdr.</i>	"	1-4-43	"	"	61	21-4-43
		<i>Granted furlough &amp; W.L. Leave from 17-4-43 to 4-5-43 incl. (18 days) 50¢ per diem R.A.</i>	"	17-4-43	"	"	57	12-4-43
		<i>Issued Special Leave &amp; Furlough Warrant</i>	"		"	"		
		<i>Granted Embarkation leave from 17-5-43 to 20-5-43 incl. (4 days) 50¢ per diem R.A.</i>	"	17-5-43	"	"	77A	24-5-43
		<i>Issued Special Leave &amp; Furlough Warrant</i>	"		"	"		
		Confirmed in rank of Sergeant	Sgt.	21-6-43	"	Debert	89	23-6-43
		Qualified Driver i/c Class III	"	17-7-43	"	"	99	22-7-43

Statement of the Service of No. D-14011Rank Sgt.Sheet No. 2Name Parkhill, D.C.M.F.M. 1 & 2 (a)  
250M-7-41 (1151)  
H.Q. 1772-39-1646

REPORT		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		Wk.e.lv.29-7- to 1-8-43(4 dys) 50% R.A.	Sgt.	29-7-43	6 A/T	Debert	102	30-7-43
		S.O.S., C.A. Canada..... 24-8-43						
		T.O.S., C.A. Overseas..... 25-8-43						
		Disembarked..... 1-9-43	"		"	UK	1	3-9-43
		T.O.S.....						
		has on base 66 box. ho's!	Sgt.	show 15 Dec 43	6 A/TK	UK	25	3 Nov 43
		Dual Div. 1C (W)	Sgt.	4 Feb 44	6 A/T.	UK.	10	27 Feb 44
		AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
		Embarked at..... UK..... on... 5 Jul 44						
		Disembarked at. FRANCE on... 8 Jul 44	Sgt.		6 A/TX 21A	21A Sp.	31	16 July 44
		Killed	Sgt.	24 Jul 44		AEF	A474	30 July 44
m-147	S.O.S.	S.O.S. Killed in action	Sgt.	27 Jul 44	6 A/TX R.	21 A Sp.	43	7 Aug 44

CONFIDENTIAL

**CODED**

**D 14011**      **PARKHILL**      **DOUGLAS**

Regimental Number      Last Name (Block letters)      First Name

2 Citizenship **CANADIAN**      By Birth       By Naturalization      Country of Birth **CANADA**

3 Father **SCOTCH.**      4 Language spoken in home: French..... English    
 Racial Origin      Mother **BRITISH CAN.**      Other.....

5 Age **27**      6 Height **6** ft.      in      7 Weight **175**      8 Silhouette  1  2  3  4   
**18 DEC 1916**      Date of Birth

9 Eye Colour **Hazel**      10 Acuity  1  2  3      10 Glasses.....      11 Colour Vision  1  2  3  4

12 Hearing: Acuity  1  2  3      13 Speech Defects.....

14 Handedness  R       L       A      15 Med Category **A1 4-8-43**

Cause.....  
 Attitude to own health..... To Medical attention.....  
 Health History **NORMAL**

16 Education Level: Illiterate..... EL..... ( ) Sec. **11** ( **17** )  
 Conduct during school life.....

17 University or		Years			
18 Professional Institute	Course Taken	completed	Degree	Year	

19 Post Graduate	Course	From-To	Degree	Year

20 Specialized Training:

1. (Course).....  
 At..... From-To..... Completed ?.....

21 2. (Course).....  
 At..... From-To..... Completed ?.....

22 3. (Course).....  
 At..... From-To..... Completed ?.....

Other trades papers, Diplomas  
 Certificates or Qualifications.....

23 Languages: Spoken fluently **ENGLISH.**  
 Written well **ENGLISH.**

24 Main occupation: **SHIPPING CLERK.**  
 Estimate of skill.....  
 Duration (from-to) **1940-1943.**      Weekly Wage **30.00**  
 Employer's Name and Address **UNION TWIST DRILL CO.      ROCK ISLAND QUE.**

**CAMPBELL**

Middle Names

50 "M"	Test 9 Score
Test Score SM	
1 19	Sub-total 58
2 19	SM
3 20	
4 26	Sub-total
5 34	SM
6 19	Sub-total
7 27	SM
8 35	
Tot 199	SG 9.

English       French.....  
 Place **CANADA**      Date **28-10-42**

51 OTHER MENTAL

Test.....  
 Score..... Grade.....  
 Date.....

52a

Test.....  
 Score..... Grade.....  
 Date.....

52b

Test.....  
 Score..... Grade.....  
 Date.....

53

TRADE TESTS

Trade and Grading	Date

54 DARK ADAPTATION

Date Tested	Result

**6 CDN A-TK REGT RCA**

Unit **74 TBY**      **Released**

1 Corps **RCA**

25 Second Most Important Occupation: **FARMING.**      Estimate of skill.....  
 Duration (from-to) **UP TO 1940.**      Weekly Wage.....  
 Employer's Name and Address **AT HOME      QUE.**

26 Third Most Important Occupation      Estimate of skill.....  
 Duration (from-to).....      Weekly Wage.....  
 Employer's Name and Address.....

Trade Union or Professional Society.....

Vehicles: 27 Heavy Truck..... 28 Light Truck..... 29 Auto **D**..... 30 Motorcycle.....  
 31 Farm Tractor..... 32 Tracked Vehicle..... 33 Power Launch..... 34 Aeroplane.....

35 Animal Management.....

Farming Experience: Wide       Limited.....      None.....      Reared?   
 District **QUE.**      Type **MIXED.**

Job promised after discharge?..... By whom? Name.....  
 Job..... Address:.....  
 Other provision for Post-War occupation.....  
 Type of work or training desired **SHIPPER.**  
 Occupational history: Ambitious..... Stable       Accidental..... Erratic.....

36 Marital Status: S..... M **1942** W..... D.....      Sep.....  
 Marital Problems.....  
 Spouse's Age **21**      Attitude to Service **REASONABLE.**      Health **Good.**

37 No. of Children **-**      38 No. of Dependents **1**  
 Relationship of Dependents **WIFE.**  
 No. of Brothers **-**      No. of Sisters **2**      Position in family **2**  
 Status of home in childhood **SHELTERED.**  
 Religious Denomination **U.C.**

39 Hobbies: Photography M..... S.....      Radio.....      Engines.....  
 Mechanics..... Other.....

40 Sports: (1)..... (2) **NONE.** (3).....  
 Team Games and Position (1)..... (2)..... (3).....

41 Ability to Entertain: Music: String.....      Brass.....  
 Woodwind.....      Percussion.....      Piano.....      Vocal.....  
 Theatrical.....      Other.....

ARM or CORPS	Type (CEF, NP, etc)	Years	Highest Rank	Last Discharge (Yr)	Special Training Received
H.S. CADETS		1	Pfc.		
RCA.	NP.	1	Sgt.	1942.	

43 CURRENT SERVICE: Date Enlisted 16 APR. 1942 Place Enlisted MONTREAL.

Date From—to	Country	Corps	Unit and Sub-unit	44 Rank	Principal Duty	Performance
16/42-	CAN	RCA.	74 Bty.	Sgt.	Al. N.C.O course.	
7/42	"	"	6 ATK.	Bdr.	Adv. TRNG.	
1/43.	"	"	"	Sgt.	Trp Sgt.	

45 COURSES ATTENDED	PLACE	Date: From—to	Qualified as	Rating
ATK.	LARKMILL	10/43 (6 WKS)		

46 Courts Martial Convictions..... Summary Punishments..... Fines..... Hosp.....

47 Civil Court Convictions..... Reprimands..... Stoppages.....

Military Specialty or Trade	Degree of Proficiency	Date	Authority

48 Suggested Employment (1) R.C.A. (2)

Reason for Joining Army N.P. Bty sent ACTIVE.

55 Type of Service Desired (1) RCA. (2)

Attitude to Interview: Antagonistic Over-anxious Co-operative  Indifferent

49 Psychiatric       Casualties (1)

YOB	P	U	L	H	E	M	S	Date	Initials
16	1	1	1	1	1	1	1	4-8-43	

(2)  
(3)  
Honours and Awards:  
(1) C.V. S Medal relasp. 15-1-44  
(2)  
(3)

A fully trained N.C.O in ATK. Healthy, smart appearance. Relicent & stiff in manner. Serious minded. independent nature. Has considerable ability. Home life sheltered rural background. Swokes but does not drink. Has never taken an active part in any sport. Attitude fair - lacks enthusiasm - wants to see the war over.   
 1st Lt. 14 Apr. 44.  
 good Trp Sgt. ATK. Mtn. Mtn. O.C. Sgt.

(Army)

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

Personnel Selection Record

Trade (if Tradesman or Trade Trainee)

SERGEANT NO. I

Work in Arm (if Non-Tradesman)

I. D-14011 L/Sgt. PARKHILL, Douglas, Campbell "A" 26 A1  
 Regt. No. Rank Name (surname first) A or R Age Med. Cat.  
English None Petawawa Military Cp. 6A/T Regt 1-11-42  
 Main Language Other Language(s) Place (Unit) Interviewed Date Interviewed

II. Revised Examination "M"  
Petawawa, Ont. 28-10-42 Capt. J.D. Payne  
 Place Tested Date Tested By Whom  
199 I Subtests 19 19 20 26 34 19 27 35 Subtotals 58 60 81 English  
 Total Group 1 2 3 4 5 6 7 8 1-3 4-5 6-8 English or French

Other Tests

Y.O.B.	P	U	L	H	E	M	S	
/6	/	/	/	/	/	/	/	48.43.

III. Educational Background  
Schooling 6 yrs. to 17 yrs.  
Public School - Grade VIII.  
High School - 3 yrs. Quebec.  
*FATHER. SCOTCH.  
 MOTHER. BRITISH (CAN.)*

IV. Occupational Background  
Farming - 7 yrs. At home  
Shipping Clerk - 1 1/2 yrs. Union Twist Drill Co. Rock Island, Que. 30<sup>th</sup>.

V. Military Background  
Enlisted 16-4-42, Montreal, Que. Cadets - 1 yr. Pte.  
NPAM - Sherbrooke, Regt. 74th Fd. Bty. B.T. there. A.T. - Petawawa. A1  
N.C.O.'s course. - Gun Sgt. 4/42.  
7/7/42 6 A/TNK. Bdr. Overseas 2/9/43. Sgt. Troop Sgt.  
*1941-42.*

VI. Other Personal History and Appraisal  
*Anti TK. Larkhill. 10/43. 6 weeks.*  
*all faculties. eyes legal*  
 Health is sound. Smokes but does not drink. Height 6', weight 170 lbs. Smart appearance. Doesn't go in for games and has no hobbies. Likes the Army "all right", but is anxious to see the war over and get back to civil life. Married, no children. Drives a car and has a slight knowledge of auto mechanics. This N.C.O. has considerable capacity, but appears to seldom extend himself. Conveys the impression of 'coasting'. Would be highly valuable if inspired to enthusiasm.

Very superior intelligence. Good stability. Fully trained, in A.T.  
*Married 1942 wife 21 Good health. no children.  
 Wants similar job to shipping on discharge.  
 C.V.S. relasp. 15. 1. 44.  
 2 sisters Position. R.  
 Retent. manner. stiff. Independent nature. serious minded.*

VII. Recommendations

R.C.A. A/T

SERGEANT NO. I

(Signed) James D. Payne, Pt.  
 Capt. J. D. Payne Army Examiner

FURTHER INFORMATION AND FOLLOW-UP

Suitable for Overseas Service.

Debert Camp, N.S. 1-7-43

C. L. Hall, Capt.  
(C.L. Hall)-Captain  
Army Examiner



MILITIA BOOK M. 1

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

CANADIAN ARMY

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SOLDIER'S SERVICE

AND

PAY BOOK

## 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.

A 14011  
PARKHILL D.C.

## (I) SOLDIER'S NAME AND DESCRIPTION ON ATTESTATION

Regtl. No. D. 140 11  
 Surname (in capitals) PARKHILL  
 Christian Names (in full) DONALD CAMPBELL  
 Date of Birth 18 December 1916  
 Place of Birth Ayer's Cliff Que. Canada  
 Citizenship British  
 Trade on Enlistment Shipping Clerk  
 Nationality of Father at Birth Canadian  
 Nationality of Mother at Birth Canadian  
 Religion United Church of Canada  
 Enlisted at Montreal South Que. Canada  
 Date 17-4-42  
 Particulars of former service (if any) i.e. Regt. No., Corps or Regiment and period. 74<sup>th</sup> Fld. Coy. R.C.A. (C)  
 Signature of Soldier D. Parkhill  
 Signature of Officer P. Houston Capt.  
 Place Mont. South Que. Canada Date 17-4-42

## (IV) NEXT OF KIN

Any change becoming known is to be duly noted with date of  
NOTE.—No entry in these pages has any legal

Nearest degree of relationship		Names	Date
1st	Wife	Mrs Ruth Adelle Parkhill	
	Children		
2nd	Father	Amede Parkhill	17-4-42
	Mother		
3rd	<del>Brothers</del> and Sisters	Gordon Cass (Mrs.) RUTH WAITE	X
	Other Relations (stating relationship)		

\*State whether brothers are older or younger.

## NOW LIVING

such change and reported by O.C. Unit to the Officer i/c Records.  
effect as a WILL (see pages 20 to 23)

Latest known Address in full	
c/o A.J. Soutiere Belle, Quebec Canada.	
Syrie's Cliff Que. Canada.	
as above.	
as above.	

(V) RANK and APPOINTMENT

Date	Rank and Appointment	Substantive, Temporary, Acting or Local (with or without pay)	Authority of Part II Orders	Signature of Officer
17-4-42	A/Plt	A/Plt	D.O. 91	[Signature]
17-4-42	A/Plt	A/Plt	D.O. 95	[Signature]
15-8-42	L/Plt	A/Plt	D.O. 39	[Signature]
1-11-42	A/Plt	A/Plt	D.O. 76	[Signature]
1-9-43	A/8dgt	Substantive	D.O. 81	[Signature]
21-6-43	Sgt. Confd.	Bd. 1	D.O. 89	[Signature]

(VI) Certificate Applicable to all Arms, to be completed and signed by the C.O. Bn., etc., before a Soldier proceeds Overseas

TRAINED (passed Basic Training, and Advanced Training as laid down for his arm of the Service) *except that he requires further training in:—*

QUALIFIED IN BASIC TRAINING  
UNDER STANDARD SYLLABUS

~~1-7-42~~  
AT A-1 C.A.T.C. BEFORE  
JOINING UNIT 7-7-42.

Qualified in addition as under:—

QUALIFIED IN ADVANCED TRAINING  
UNDER STANDARD SYLLABUS

~~14/8/42~~  
AT A-1 C.A.T.C. BEFORE JOINING  
UNIT 7-7-42

Date 8<sup>6</sup>/<sub>73</sub> Commanding *C. Lewinson, Major*

\*If no further training required, strike out words in italics and initial



## (IX) EDUCATIONAL QUALIFICATIONS

Certificate,  
Specialist Qualifications, etc.,  
Certificate number or authority.  
(Two lines may be used for each  
entry)

Place

Date

Signature of Officer

7 yrs Pub. School  
4 , High

Ayers Bluff  
Sul.

J. J. Huston Capt

10

## (X) TRADE QUALIFICATIONS

(For men who have passed Trade Tests)

Trade	Group	Grade	Part II Order	Date	Signature of Officer

11







## (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
F.A.B.T 1	6-5-42	R Bell
" 2	20-5-42	R B
" 3	18-1-43	R B
T.A.B.T. ANN.	10-1-44	R B
TYPHUS 1/2 cc	10-1-44	R B
" 1/2 cc	13-1-44	R Bell
" 1 cc	22-1-44	R B
Booster	2-6-44	R B

## (XVII) VACCINATION

Date Vaccinated	Signature of Medical Officer
20-5-42	R Bell
29-2-44 vaccinated	R B

## (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- Pay 29328 N	15-4-42	R Bell
F. H. P.	12 Feb 43	J. H. Bell
2. Pl. + F. T. W.	29-12-43	J. H. Bell
CVS Ms Jacob WEF.	15 Jan 44	John H. Howard
<del>F.A.B.T. ANN. 42 cc</del>	<del>24-2-44</del>	
3. Pl. + F. T. W.	27 Mar 44	R Bell
TEST CREW COMPLETE	4-8-44	J. H. Bell
0 CARD COMPLETE	11/4/44	J. H. Bell
Qualified Driver's/w D.O.I.O.	4/2/44	John Howard



## (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	Signature of Officer.	
Date	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. 10 received and forwarded to the Officer i/c Records at	Signature of Officer.
	Rank or Appointment.

Signature of Officer.....  
Date Certificate or Will extracted 17-4-42

Unit or Dept. D.D. 4  
To whom sent H.Q.M.D. 4

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.

To whom sent.....  
Unit or Dept.....

Date Will extracted.....  
Signature of Officer.....

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, Regt'l Number.....

Date.....

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. D-14011

Surname (Capitals) PARK HILL

Christian Names in full DOUGLAS, CAMPBELL

# SERVICE AND CASUALTY FORM

PART I (For all ranks)

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

Unit 74th. Fld. A/T (RCA.) CA.

Regimental Number D-14011

<p>1. Surname..... <u>PARKHILL</u></p> <p>2. Christian Names..... <u>Douglas Campbell</u></p> <p>3. *Substantive Rank and Appointment.....</p> <p>    *Acting Temporary or Local Rank..... <u>Sgt</u></p> <p>        giving date..... <u>Conf. 21-6-43</u></p> <p>    *To be entered in pencil to facilitate alteration.</p> <p>4. Place of birth..... <u>Ayer's Cliff Quebec Canada</u></p> <p>5. Date of birth as declared on attestation..... <u>18 December 1916</u></p> <p>    (A).....</p> <p>6. Date of enlistment..... <u>17 April 1942</u></p> <p>7. Place of enlistment..... <u>Montreal South</u></p> <p>8. Residence at time of enlistment..... <u>Rock Island, Quebec</u></p> <p>9. (B) Special conditions (if any) of enlistment or rate of pay.....</p> <p>10. (C) Any subsequent variations of conditions of service.....</p> <p>11. Religion..... <u>United Church</u></p> <p>12. If married, state date..... <u>Single</u> <del>Married</del></p> <p>13. Trade on enlistment..... <u>Shipping Clerk</u></p> <p>14. Corps, trade and grade.....</p> <p>15. (D) Qualifications.....</p> <p>16. (E) Miscellaneous entries..... <u>OK - M.C. Class III 17.7.43-0099</u></p>	<p>(17) Regiment or Corps..... <u>6917th Regt</u></p> <p>Unit (Battn., etc)..... <u>74th Bty</u></p> <p>(18) Medical.....</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Category</th> <th style="width: 20%;">Date</th> <th style="width: 50%;">Authority</th> </tr> </thead> <tbody> <tr> <td><u>A</u></td> <td><u>22-5-43</u></td> <td><u>M.F.M. - 2</u></td> </tr> <tr> <td><u>A.1</u></td> <td><u>4-8-43</u></td> <td><u>" (Disp.)</u></td> </tr> </tbody> </table> <p>(19) Next of kin (entries to be made in pencil).....</p> <p><u>Mrs. Ruth Parkhill - (Wife)</u></p> <p><u>c/o Mr. A. J. Sauter</u></p> <p><u>Becker, Que</u></p> <p>(20) E.....</p> <p>(21) E.....</p> <p>(22) E.....</p>	Category	Date	Authority	<u>A</u>	<u>22-5-43</u>	<u>M.F.M. - 2</u>	<u>A.1</u>	<u>4-8-43</u>	<u>" (Disp.)</u>
Category	Date	Authority								
<u>A</u>	<u>22-5-43</u>	<u>M.F.M. - 2</u>								
<u>A.1</u>	<u>4-8-43</u>	<u>" (Disp.)</u>								

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
			S. O. S., C. A. Canada... 24-8-43				
			T. O. S., C. A. Overseas... 25-8-43				
			Disembarked... 1-9-43	26th		Sgt	D.O.I 3-9-43
			T. O. S.				
3 Nov 43	No. 4167	6 A.T.K. In Coy "66 S. of Arty. 3 Nov 15 Dec 43	Awarded Canadian Volunteer Service Medal and Clasp	"	3 Nov 43	"	PT 25-3 Nov 43
		"	Inspected '10 (P)	"	15 Jan 44	"	7/8 Feb 44
				"	17 Feb 44	"	10/27 Mar 44
			<b>EMBARKED U.K.</b>				
			<b>DISSEMBARKED FRANCE</b>				
1 Aug 44	O. Re.	6 P.M. 505	Decided (Killed in Action)	"	24 Jul 44	"	31-16 Jul 44 43/7 Aug 44

(74TH)

No. 0-14011 RANK E/Sgt. NAME PARKHILL Douglas Campbell \*Married  
\*Widower  
\*Single

Place of  Appointment  
 Enlistment Montreal South, Que. Date of  Appointment  
 Enlistment 17-4-42

RATE OF PAY

D.O. No.	Date	Rank	Group	P.F. or A.S.	Daily Rate	Effective Date	If liable Pen. Ded.	REMARKS
39	29-8-42	L/Sgt.		A.S.	1.90			
76	5-11-42	Sgt.		A.S.	2.20			eff. 1-11-42

ASSIGNMENTS

DEPENDENTS' ALLCES.

No. Deps. ....

Name and Address of Assignees	Effective Date	Amount	Date Application Forwarded	Relationship	Amount Awarded	Effective Date
PARKHILL (Mrs)	1-10-42	30.00	11-9-42	Wife.		
Ruth Adele <sup>with next of kin</sup>	<del>1-10-42</del>	<del>8.40</del>				
c/o Mr. A.J. SOUTHERE						
X BEEBE, Que.						
M.F.M. 14	EFF. 1-12-42	35.00				
Total .....		49.40				

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

**M. F. M. 14**  
 200M-5-42 (4676)  
 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		
76	5-11-42	Prom to 4/597. eff. 1-11-42	
86	23/11/42	Granted 4 days leave with R/A	
34	9/3/43	Granted weekend leave 4 days with R/A	
57	12-4-43	Furl. W/E. RVE. eff. 17-4-43	
61	21-4-43	Confirmed in rank of Bdr. eff. 1-4-43	
77A	24-5-43	Granted 4 days Embark. LVE.	
89	23-6-43	Confirmed in rank of sergeant. eff. 21-6-43	
102	30-7-43	Granted W/E leave 4 days with R.A.	
1	3-9-42	S. O. S., C. A. Canada..... 21-8-42	
		T. O. S., C. A. Overseas..... 25-8-42	
		Disembarked..... 1-9-42	
		T. O. S.....	
25	3-11-43	Proceeded on course #66 W.E. of 3 Nov 43.	
1	11-1-43	Grd. 7 days PL - R.A. 29 Dec to 5 Jan 44.	
		<b>CVS. MEDAL DO 4 &amp; CLASP</b> 15 JAN 1944	
	25-4-44	Std. 9 days PL - R.A. 27. MAR to 5 Apr. 44	

A/Bdr  
GUR

No. **D-14011** RANK

NAME **PARKHILL**

**Douglas Camp-**  
**Bell.** \*M \*W \*Single

Place of \* Appointment  
\* Enlistment **Montreal South, Que...**

Date of \* Appointment  
\* Enlistment **17-4-42**

RATE OF PAY

D. O. No.	Date	Rank	Group	P. F. or A. S.	Daily Rate	If Liable Pen. Ded.	REMARKS
					<b>\$1.30</b>		
<b>95</b>	<b>22/4/42</b>	<b>A/Bdr.</b>			<b>1.70</b>		<b>eff. 17/4/42.</b>

ASSIGNMENTS

Name & Address of Assignee	Effective Date	Amount
<b>Mr. Amede PARKHILL, Ayer's Cliff, Stanstead County, Que.</b>	<b>1-5-42</b>	<del>KIXXX</del>
<b>(Father)</b>	Total.....	

DEPENDENTS' ALLCES.

No. Deps.....

Date Application Forwarded	Relationship	Amount Awarded	Effective Date
<b>M.F.M.</b>	<b>18,</b>	<b>Eff.</b>	<b>1-10-42</b>

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

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

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

LL

## CASUALTIES, ETC.

Part II D.O.

No.	Date	
91	17-4-42	TOS DD4 posted to "E" Wing. Eff 17-4-42 <sup>3/4</sup>
95	22-4-42	Promoted to A/Bdr. Eff 17-4-42.
96	23-4-42	SOS on posting to 74th A/T Bty RCA A-1 Petawawa. Eff, 20-4-42 <sup>3/4</sup>
97	24-4-42	T.O.S. CATC (A-1) eff 21-4-42
159	6-7-42	S.O.S. A-1, CATC - <del>Eff</del> 6-7-42
11	7-7-42	TOS 6th Anti-Sub regt eff 7-7-42
23	29-7-42	Granted permission to marry eff 22-7-42
39	29/8/42	Promoted to A/L/sgt eff. 15/8/42
43	4/9/42	Granted week end leave from 2200 hrs 3/9/42 to 0600 hrs 9/9/42 and is authorized to receive 50¢ per diem for that period
49	14/9/42	Married to Miss Ruth Loutiere eff 5/9/42
60	5/10/42	Granted furlough from 0600 hrs 5/10/42 to 2200 hrs 18/10/42 and authorized to receive 50¢ per diem for that period
70	23-10-42	Ret. from furl. 2200 hrs 18-10-42

## CONTINUATION CARD · M.F.M. 14

Regimental No. *D14011*Name *Parkhill W. E.*

Part II D.O.

## PARTICULARS OF CASUALTY

No.

Date

*31**16-7-44**Emb. U.K. 5 Jul 44. Disemb France 9 Jul 44  
S.O.S. - Killed in action W.E.F. 7th Jul 44.**C.R. 70*



No D.14011 Rank Sergeant Name PARKHILL, Douglas Campbell,

Unit R.C.A. Date of death 24th July, 1944.

Died at France

Cause Killed in Action.

Death occurred on strength of Forces.H.Q. 405-P-15541

N/K Mrs. Ruth Parkhill, Relationship Wife.

Address c/o A. J. Soutiere, Beebe, P. Q.

Remains buried in \_\_\_\_\_ Cemetery

Beny-Sur-Mere MR 987813. France.

Grave location ✓

OVER-



BURIAL REPORT TO N.K. FEB 9 1946

RETURN TO BUR. OF STAT. NOV 24 1944

ROYAL MESSAGE DESP'D.

AUG 13 1944

CAN. MESSAGE DESP'D. 22-8-44

REBURIAL

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

Grave 1, row F, plot 15.

HI & CR Form Despd. JAN 3 1947

Photographs  
Despatched  
JUL 22 1947

**CERTIFICATE OF MEDICAL EXAMINATION**

Name in full PARKHILL Douglas C. *Campbell* Place Sherbrooke Que.  
 Place Rock Island Que. Date 15th april 1942

**Part 1. Information obtained from the recruit.**

1. Age 25 2. Have you ever suffered from any of the following diseases?
- a. Rheumatism no k. Ear disease no
  - b. Tuberculosis or pleurisy no l. Eye disease no
  - c. Bronchitis or asthma no m. Fits no
  - d. Heart disease no n. Nervous or mental disease no
  - e. Kidney or bladder disease no o. Syphilis no
  - f. Stomach or bowel trouble no p. Gonorrhoea no
  - g. Rupture no q. Have you ever worn glasses? no
  - h. Varicose veins no r. Are you now or have you in the past received disability pension or compensation? If so, give details no
  - i. Foot trouble no
  - j. Nasal trouble no

*Douglas C. Parkhill*  
 Signature of Applicant.

**Part 2. Information obtained by medical examination.**

**THE RECRUIT MUST BE STRIPPED**

1. Identification marks or scars. (If operative obtain history).  
1 vacc. left arm.
2. Height 5 feet 10 1/2 inches. 3. Weight 158 pounds.
4. Complexion fair Eyes brown 5. Development good Good Fair Poor
- Hair hazel
6. Chest measurement—Girth on full expansion 37 inches.  
 Range of expansion 2 1/2 inches. URINE N JEL
7. Vision, right 20/20 left 20/20  
 With Glasses— right \_\_\_\_\_ left \_\_\_\_\_ X-RAY 29328N
8. Hearing, right c.v. 20 left c.v. 20
9. Condition of mouth and teeth healthy Bars & nose neg;.
10. The abnormalities (congenital and pathological) found on examination are as follows.  
tip third right finger amputated; reflexes normal.

**Part 3.** We, the examiners, find no evidence of the diseases mentioned in Question 2, Part 1, except as reported in the remarks. We have examined the Recruit in accordance with the pamphlet "Physical Standards and Instructions for the medical examination of recruits" and he is found fit for Category A  
 Special remarks when category lower than A \_\_\_\_\_

*H. R. Bowie Capt* President *H. D. Bowie m.d.* Member *E. A. Tompkins m.d.* Member  
 VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
6.5.42	TAPT 1		
20.5.42	TAPT 2 UHCC	22-5-43	CATEGORY A CONFIRMED PETAWAWA, ONT. <i>M. J. Kelly</i>
18-1-43	TAPT 3 ARB CONF. CAT. <u>A</u>	4/8/43	Y.O.B. P U L H E M S. 16   1   1   1   1   1   1   1 Cat A, Confirmed <i>Tom Studecki</i>
	MAY 15 1942 PETAWAWA-ONT. <i>A. Skelley</i>		
19.1.43	CAT <u>A</u> CONFIRMED PETAWAWA <i>A. Skelley</i>		

Regtl. No. D-14011

Rank GNR

Surname PARKHILL

Christian Name DOUGLAS CAMPBELL

STATION	Date of Arrival at the Station	DATES OF						DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied.	Signature of Medical Officer
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				

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

# OCCUPATIONAL HISTORY FORM

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

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

## Section A—GENERAL INFORMATION

D-14011

PLEASE LEAVE BLANK

1. (a) Print name in full PARKHILL Douglas Campbell (b) Reg'l. No. QMR  
 2. (a) Arm of service ARMY (b) Unit 74th. Bty. A/T (ACA) CA (c) Rank Private  
 3. (a) Date of birth Dec. 18/16 (b) Have you any dependents? NO (c) Place of residence at time of enlistment BRIDGE PLAZA P.O. CAN.  
 4. (a) Place of enlistment MONTREAL SOUTH QUE. (b) Date of enlistment 17-4-42

## Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 16 (b) Were you attending school or college up to the time of enlistment? NO  
 6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) 4 Yrs. High School  
 7. If you attended a university, give name of university and standing or degree secured.....  
 8. (a) Did you ever enter upon a trade apprenticeship? - (b) If so, for what occupation? - (c) Did you finish it? - (d) If you did not finish it, how long did you serve at it? -  
 9. (a) What languages do you speak fluently? ENGLISH (b) What languages do you read well? ENGLISH

## Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

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

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

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

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

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

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

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

18. Name of employer BOTTLEFIELD CO. Address TOOE MAKERS  
 19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) 16 Yrs.  
 20. (a) Your specific occupation..... (b) Number of years' experience at this occupation with any employer.....  
 21. (a) Did your employer promise definitely to give you employment on discharge? YES (b) Did your employer refuse to promise you employment on discharge?..... (c) Do you wish to return to your former employment? YES

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

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

## Section F—PARTICULARS OF FARMING EXPERIENCE

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

## Section G—MISCELLANEOUS

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

DATE

APR. 17th.

194

2

SIGNATURE X

Douglas C. Parkhill

24-7-44

FB

AWARDS—CANADIAN ARMY (ACTIVE) **1664**500M—1-44 (3407)  
H.Q. 1772-45-B

PARKHILL, Douglas Campbell		D-14011	Sgt.	FILE No. 405-P-15541
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICEBADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	22/10/49 4184
France & Germany Star	
Defence Medal	
War Medal	
CVSM & Clasp	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

(1) MEDALS  
PERSON Mrs. Ruth A. Parkhill (Widow)  
ENTITLED TO

ADDRESS: c/o A. J. Soutiere, Beebe, Que. May 45

(2) MEMORIAL CROSS

WIDOW Mrs. Ruth PARKHILL, (ENGLISH)

(1664)  
ADDRESS: c/o A.J. Soutiere, BEEBE, Que.

(3) MEMORIAL CROSS

MOTHER (DECEASED) MEM5

ADDRESS:

REGISTRATION NO. DATE OF DESPATCH

MEMORIAL BAR  
DATE DESP

(1)  
REGN. NO 87

DESP. OCT 13 1944  
REGN No. 3071

(2)

(3)

P.A.

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. D-14011. Name PAARHILL DOUGLAS CAMPBELL  
Rank on Discharge Sgt. Date of Discharge 24-7-44  
Authority for Discharge or Retirement Deceased

<u>Served in:</u>		<u>Non-qualifying service</u>
Canada	from <u>17-4-42</u> to <u>24-8-43</u>	
	from _____ to _____	
United Kingdom	from <u>25-8-43</u> to <u>5-7-44</u>	
	from _____ to _____	
Italy	from _____ to _____	
Northwest Europe	from <u>8-7-44</u> to <u>24-7-44</u> <u>K/A.</u>	
	from _____ to _____	
	from _____ to _____	

Eligible for award of:

1939 - 45 Star OK

~~Italy Star~~

France-Germany Star OK

Defence Medal OK

War Medal OK

Canadian Volunteer Service Medal OK  
with clasp OK



**NO RIBBON DESPATCH**

Verified by G. Menaid  
Date 31-7-44  
Carded JUL 31 1946

Register No. \_\_\_\_\_

Nominal Roll No. \_\_\_\_\_

TO: P.M.G.

H.Q. File No. 405-P-15341 ✓

CANADIAN ARMY (ACTIVE)  
COMPUTATION OF SERVICE  
WAR SERVICE GRANT

Regt. No.	Rank When	Surname	Christian Name in Full
<u>D-14011</u> ✓	<u>S.O.S. SGT</u> ✓	<u>PARKHILL</u> ✓	<u>DOUGLAS CAMPBELL</u> ✓

Reason for Termination of Service:

1st Enlistment	<u>KILLED IN ACTION</u> ✓	CARO	( )
2nd Enlistment		CARO	( )
3rd Enlistment		CARO	( )

TOTAL SERVICE

<u>1st Enlistment</u>	<u>2nd Enlistment</u>	<u>3rd Enlistment</u>
T.O.S. <u>17 APR 42</u> ✓	T.O.S. _____	T.O.S. _____
S.O.S. <u>24 JUL 44 MD 0/5</u> ✓	S.O.S. _____ MD _____	S.O.S. _____ MD _____
Total Days <u>830</u> ✓	Total Days _____	Total Days _____
<u>TOTAL SERVICE</u>		<u>830</u> DAYS ✓

	<u>Total Service</u>	<u>Less Non-qualifying Service</u>	<u>Net Service</u>
<u>WESTERN HEMISPHERE</u>	<u>495</u> ✓	✓	<u>495</u> ✓
<u>OVERSEAS SERVICE</u>	<u>335</u> ✓	✓	<u>335</u> ✓
<u>Totals</u>	<u>830</u> ✓	✓	<u>830</u> ✓
<u>Add Non-qualifying Service</u>			✓
<u>TOTAL SERVICE</u>			<u>830</u> ✓

EMBARKATION DETAILS:

1. <u>TOS 0/5 25 AUG 43</u> ✓	2. _____
Date S.O.S. Overseas <u>24 JUL 44</u> ✓	Date S.O.S. Overseas _____

REMARKS:

**KILLED IN ACTION**

24 JUL 44 ✓

Computer's Signature \_\_\_\_\_  
 Checker's Signature H. E. Davis, Sgt.  
 Date Computed 3 apr 45

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

W. Cheng, Capt.  
 (C.L. Laurin) Colonel,  
 Director of Records.





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

**4**  
ARMY

CEASED MEMBER'S NAME: **Douglas Campbell** (CHRISTIAN NAMES) **PARKHILL** (SURNAME)  
REGISTER NO. **D-2240**  
FILE NO. **405-P-15541**  
DATE **9-4-45**  
ADDRESS: **Mrs. Ruth A. PARKHILL,**  
**c/o A.J. SOUTIERE,**  
**Beebe, P.Q.** SERVICE NO. **D-14011**  
FINAL RANK OR RATING **Sgt.**  
DATE OF TERMINATION OF OVERSEAS SERVICE **24-7-44** DATE OF DISCHARGE **24-7-44**

**A. TOTAL QUALIFYING SERVICE** \$ **202.50**  
NO. OF DAYS **830** EQUAL TO **27** COMPLETE PERIODS AT \$7.50  
**B. QUALIFYING OVERSEAS SERVICE** \$ **78.75**  
NO. OF DAYS **335** LESS **20** INELIGIBLE DAYS, EQUAL TO **315** DAYS @ 25c. PER DAY  
**SEE PAR. 2 OVERLEAF FOR EXPLANATION**

**C. SUPPLEMENT FOR OVERSEAS SERVICE** \$ **281.25**  
DAILY RATES AT DISCHARGE  
PAY \$ **2.20**  
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE \$ **1.25**  
ADDITIONAL PAY \$  
DEPENDENTS' ALLOWANCE 1/30 OF \$ **37.20** \$ **1.24**  
TOTAL \$ **4.69** X7 = \$ **32.83**  
NO. OF DAYS **183** X \$ **32.83** \$ **60.10**

**RECEIVED**  
**APR 13 1945**  
**WAR SERVICE GRATUITY DIVISION, ARMY TREASURY**

**D. WAR SERVICE GRATUITY** \$ **341.35**  
**E. DEDUCTIONS**  
OVERPAYMENT OF PAY AND ALLOWANCES \$  
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$  
OTHER DEDUCTIONS \$

**F. TOTAL AMOUNT PAYABLE** \$ **341.35**

**G. YOUR PORTION OF GRATUITY IS—** **100%**  
DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ \_\_\_\_\_ OF \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ \_\_\_\_\_

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

PREPARED BY \_\_\_\_\_ CHECKED BY \_\_\_\_\_

TREASURY  
CHECKED BY *[Signature]* DATE **12/4/45**

*[Signature]*  
SERVICE REPRESENTATIVE

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER **D.14011** RANK **Sergeant** SERVICE UNIT **6th Anti-Tank Regiment R.C.A. (C.A.)**  
 NAME **PARKHILL, Douglas Campbell**

DATE OF BIRTH **18th December, 1916** DATE OF ENLISTMENT **17-4-42**  
 MARITAL STATUS **Married** RELIGION **United Church**

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP **wife** NAME **Mrs. Ruth Parkhill,**  
 ADDRESS **c/o A.J. Soutiere, Beebe, P.Q.** ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME

ADDRESS  
 ( IF SOLDIER MARRIED OVERSEAS )

AUTHORITY CAS. SIG. NO. **Canrecords 8495** **H.Q.405-P-15,541** DATE **24-7-44**  
 CASUALTY DETAILS **Killed in action**

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

YES/NO

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

YES/NO

DATE

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

MA

**11-8-44**  
 DIRECTOR OF RECORDS

**5**

**COPY FOR C. R. FILE**

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

405-P-15541  
(Records G)

CERTIFICATE OF DEATH

THIS IS TO CERTIFY that according to information received at the Department of National Defence from the overseas authorities, No. D.14011, Sergeant Douglas Campbell PARKHILL, of the Royal Canadian Artillery, Canadian Army, was killed in action on the 24th of July, 1944.

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

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

*R.A.H.*  
Department of National Defence,  
Ottawa, Canada.  
October 31st, 1944.

RECORDS OFFICE OVERSEAS.

405-P-15541

CANADIAN MILITARY HEADQUARTERS.

GRAVES REGISTRATION CARD.

NAME PARKHILL Douglas Campbell PLACE & DATE OF BIRTH Ayer's Cliff Quebec 18 Dec 1916  
RANK Sgt REGTL NO. D14011  
UNIT 6 A/TK REGT NEXT OF KIN & ADDRESS WIFE  
Ruth a Parkhill,  
c/o Mr. A.J. Soutiere  
Beebe, Quebec, Canada

PARTICULARS OF HOSPITALISATION

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

PARTICULARS OF DEATH.

DATE OF DEATH 24 Jul 44 PLACE OF DEATH \_\_\_\_\_  
HRS \_\_\_\_\_  
CAUSE OF DEATH KILLED

PARTICULARS OF BURIAL.

DATE OF BURIAL 25 Jul 44 CEMETERY Beny-sur-Mer, France  
MR.987813  
PLOT NO 38 ROW 2 GRAVE 3  
DEATH CERT NO. \_\_\_\_\_  
DATE OF REGN OF DEATH CERT \_\_\_\_\_  
RELIGION UNITED CHURCH

DATE 24 Sep 45  
M. Bluteau Capt.  
For COLONEL  
O i/c RECORDS,  
CANADIAN MILITARY HEADQUARTERS

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

9th February, 1946.

Mrs. Ruth Parkhill,  
c/o A.J. Soutiere,  
Beebe, Quebec.

Dear Madam:

Information has just been received from overseas that the remains of your husband, D14011 Sergeant Douglas Campbell Parkhill, have been carefully exhumed from the original place of interment and reverently reburied in grave 1, row F, plot 15, of Beny-sur-Mer Canadian Military Cemetery, Beny-sur-Mer, France. Marked map is enclosed. This is a recognized military burial ground and will receive care and maintenance in perpetuity.

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

Yours faithfully,

*R.*

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

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..... PARKHILL.....  
(Surname first—Christian names in full—Block capitals)

Douglas Campbell

(2) Regimental or Official Number and Rank D-14011..... Gnr......

(3) Unit..... 74th Bty. A/T RCA. CA......

(4) Are you married?..... No.....

(5) If married, state,

(a) Full name of your wife.....

(b) Present postal address of wife.....

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

(7) Are you a widower?..... No.....

(8) Have you any children?..... No..... Number of boys..... Girls.....

Names and ages.....

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

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

Name.....

Postal Address.....

[SEE OTHER SIDE]

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

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

(11) Is your father alive?..... **Yes**

If so, state name and address, occupation..... **Mr. Amede Parkhill Farmer**

**Ayer's Cliff P.Q. Canada**

(12) If your father is a widower and is totally incapacitated from earning a living—are you his sole or partial support?..... **No**

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

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

(14) Is your mother alive?..... **No**

If so, state name and address.....

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

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

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

(17) Are you contributing to the support of any dependents, other than those shown above? **No**..... 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?..... **Yes**

If so, in what Company?..... **North American Life Co.**

(Give number of policy)

Have you made arrangements for payment of your Insurance Premium?..... **Yes**

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

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

**(Sgd.) Douglas C. Parkhill**

(Signature of officer or man)

Date **17-4-42**.....

?

Officer Commanding **#4 DD A.F.**

Date **17-4-42**.....

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.)



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

Mrs. Ruth Parkhill,

c/o A.J. Soutiere,

Beebe, Que.

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

and the following number quoted:—

H.Q. 405-P-15.541. FD 353.

DEPARTMENT OF NATIONAL DEFENCE  
ESTATES BRANCH  
OTTAWA, ONT.

September 2nd, 1944

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

PARKHILL, Douglas Campbell, Sgt.

No. D.14011, Canadian Army.

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

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



CA.

*G. H. Fort*  
Director of Estates.

## ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....	Ruth Adele Soutière	21	widow
2	Children of the Deceased and dates of their Births.....	nil		
3	Father of the Deceased.....	Amede C. Parkhill	56	father
4	Mother of the Deceased.....	Winnie E.M. Hunt	53	mother-deceased
5	Brothers of the Deceased	Full Blood	nil	
		Half Blood	nil	
6	Sisters of the Deceased	Full Blood	Muriel Irene Cass (Mrs Gordon H. Cass)	30
		Full Blood	Ruth A. Waite (Mrs Harold Waite)	25
		Half Blood	nil	
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, who are dead, and date of death of each.	Names and ages of their children (if any)	Address of their children	
		nil		

ANSWER FULLY EACH QUESTION ON THIS PAGE  
PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Douglas Campbell Parkhill
9	Date of his birth.	18 <sup>th</sup> December, 1916
10	Place and date of his marriage.	Marlington, Que, the 5th Sept., '42
11	Place and date of his parents' marriage.	Boynton, Que, Dec 12th., '11

## PARTICULARS OF DOMICILE

12	Place where deceased was born.	Boynton, Que (Tp Stanstead)
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Quebec, Stanstead Co., (b) Worked at Rock Island, Que. (c) Stanstead Co., about two years (d) previous to enlistment.
14	Nature of employment before enlistment.	Shipper
15	State whether he owned the premises in which he lived, and, if so, where situated.	No
16	Name place where deceased stated he intended to make his permanent home.	Stanstead Co., Que.

## PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	Will in archives at Ottawa.
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	No marriage contract;
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	Yes, Rock Island branch, Royal Bank of Canada, Que. \$429.69 in name of surviving widow.
20	Amount of War Savings Certificates held by deceased. Indicate where located.	certificate War Savings, \$100.00 in name of deceased.
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	one bearer D of Canada bond, \$50.00
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	North-American Life, \$1000.00, beneficiary, widow surviving.
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	accumulated interest = \$465 nil

## OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	nil
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	died on French soil

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

DECLARATION

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

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

\*widow of the deceased.

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

Mrs Ruth A Parkhill

Signature of Informant

Bebe, Que Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief Ruth Adele Soutiere

\*See above. { Name of informant } is the\* widow of the Deceased

above described. The above Declaration was made by the Informant and signed in my presence.

Dated at Ayer's Cliff, Que this 12 th day of September 19 44.

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

W. McNeil

Qualification Notary

Ayer's Cliff, Que Address

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

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

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

OTHER PARTICULARS

1. Did the deceased after settlement incur any debts for— (a) his own separate debts and lodging while on service (b) service clothing and equipment (c) service account for each week left should be attached hereto, and if same in correct you should mark the bill "correct" and sign same. If believed incorrect give particulars. 2. Have you or any other relative paid the funeral expenses of any part thereof? If so attach itemized accounts showing amount paid, and by whom.

(Note)—The Government pays funeral expenses within the amounts authorized in the regulations, when such expenses are paid in full as well as when death occurs and burial is made in Canada or elsewhere in the British Empire. You and a relative have already paid the expenses. The Government will reimburse such relative in the event of the amount authorized in the regulations. Any amount of such expenses in excess of that authorized in the regulations is not payable by the Government nor is it a charge against the estate of the deceased.)

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

WILL

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

(1) I, Douglas Campbell Parkhill, of the Beebe, Que.  
(Name in Full) (City, Town, Village, Township)

Address in  
civil life.

of Beebe, Que., in the ~~District~~ County of Stanstead

Province of Quebec, Shipping Clerk  
(Civil Occupation)

Regimental No. D-14011, Unit 74 Battery 6 A/Tk Reg't., RCA, do hereby revoke  
all former Wills by me made and declare this to be my LAST WILL.

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

(2) I GIVE, DEVISE AND BEQUEATH unto  
My wife, Ruth Adele Parkhill, Beebe, Que., all my real and  
personal estate whatsoever and wherever situate for her own  
sole use and benefit.

Relationship,  
names and  
address of  
residuary  
beneficiaries.

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

(4) I appoint Amede Campbell Parkhill Ayers Cliff, Que.,  
(Name) (Address)

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

IN WITNESS WHEREOF I have hereunto set my hand this 23 day of June  
1943.

Signed and acknowledged by the Tes-  
tator, in the presence of us present at  
the same time who in his presence, at  
his request, and in the presence of  
each other have hereunto subscribed  
our names as witnesses.

Douglas C. Parkhill  
(Signature of soldier)

First witness  
sign here.

(5) Signature Ablogg  
Civil Address 1 Murray Ave., Westmount, Que.  
Civil Occupation Bank Clerk

Second witness  
sign here.

Signature gbea  
Civil Address 311 Manning Ave., Verdun, Que.  
Civil Occupation Office Clerk

(Witnesses are not to be beneficiaries.)

[OVER]

E

NOTE

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

- (1) Example: I, John Charles Jones, of the City of Marlowe, in the County of Carleton, Province of Ontario, Mechanic, Regimental No. 1234, Royal Blankshire Regiment.
- (2) If only *one* beneficiary for all your estate, complete as example: "my wife, Mary Jones of 26 Cherry Ave., Ottawa, Ont., all my estate," in which event, strike out clause (3) entirely.  
 If *more than one* beneficiary, set out in clause (2) what each is to receive, such as  
 "my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont., \$.....00, and my household goods and effects,"  
 "my brother, Thomas Jones, 80 Yonge St., Toronto, Ont., \$.....00,"  
 "my sister, Margaret Jones, 80 Yonge St., Toronto, Ont., \$.....00,"  
 "my friend, John Smith, 60 LaSalle St., Winnipeg, Man., \$.....00,"  
 and any personal gift, if desired. Then complete clause (3) as to the balance of your estate.
- (3) If balance of estate is to one person, complete as example: "my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont." Another example: "my father, Jack Jones, and mother, Jessie Jones, 80 Yonge St., Toronto, Ont., equally," or as desired.
- (4) Fill in name of Executor or Executrix, example: "John Doe, 24 Smith Street, Blankville, Ontario, Salesman," or, if Executrix, "Jane Doe" and address. A beneficiary under the Will may be appointed Executor or Executrix. It is preferable that the person appointed as Executor should not be on, or likely to be on, Active Service.
- (5) The soldier will date the Will and sign same. Two witnesses must sign in the presence of the soldier, and each witness should fill in his or her full civil address and occupation. No one who is a beneficiary shall act as a witness. It is preferable, though not essential, that the witnesses be persons not on Active Service.  
 When completed, leave Will with Commanding Officer for transmission to the Records Office for safe custody.

GENERAL

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

22

**DISTRIBUTION OF SERVICE ESTATES**

Estates Form "P. 4"

**ARMY**

Name: PARKHILL, Douglas G. No.: D.14011  
 Surname Christian Names

Rank Sgt. Unit C.A. O/S Date of Death 24-7-44

AMOUNT

L.P.C. .... \$ **30.38**

Date: 12-4-45

Other Credits .....

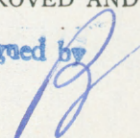
Total ..... **30.38**

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Widow	Mrs. Ruth A. Parkhill, c/o A.J. Soutiere, BEEBE, Que.,  (Sole beneficiary under will)	<span style="color: red; font-size: 2em;">R</span> 30.38

**P4. TO TREAS. 7-5-45 DW**  
**TO BE FORWARDED BY REG. MAIL DIRECT**

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	731	00	00	001	\$30.38
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

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH  
INVENTORY

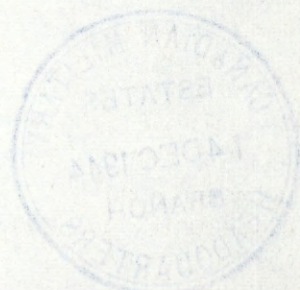
of personal effects received by  
Casualty Section, No. 1 CKSD

No., RANK and NAME D-14011 Sgt Parkhill D.C. (Deceased)

RECEIVED FROM 2nd Echelon 21 Army Group

G-52743 Pte McDonald S.J.  
CHECKED BY 005591 Pte Patterson L.K. DATE 12 Dec 44

- |   |                                    |
|---|------------------------------------|
| 1 | Folding Camera (Marvel Achromatic) |
| 1 | Leather Case                       |
| 1 | Red Identity Disc                  |
| 1 | Signet Ring Engraved               |
| 1 | Pen & Pencil Parker                |
| 1 | Wrist Watch Bulovax                |
| 1 | Comb                               |
| 2 | Leather Folder                     |
|   | Snapshots                          |
| 1 | Nail File                          |



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

L.K. Patterson Pte  
for OC 1 Cdn KSD



ESTATES BRANCH  
INVENTORY

Inventory Form No. 1 (Rev. 1-1-43)

PROPERTY OF THE CROWN (Indicate by check in column 1)

PROPERTY OF THE CROWN (Indicate by check in column 1)

PROPERTY OF THE CROWN (Indicate by check in column 1)

DATE

1  
2  
3  
4  
5  
6  
7  
8  
9



CANADIAN ACTIVE SERVICE FORCE

District.....

OVERSEAS

Dispersal Area.....

**LAST PAY CERTIFICATE**

(All Ranks)

Regtl No. D.14011 Rank and Name Parkhill, D.C. Sgt.

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

(Transfer or Discharge)..... to..... on 24th July 19 44.

Reason..... Death. Authority: C.C.L. "A" 474. d/30th July 44.

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

		Dr				Cr	
Particulars	Amount	Particulars	Amount	Particulars	Amount	Particulars	Amount
Balance Dr from last account.....		Balance Cr from last account.....	1	65			
First Monthly Payment <u>AR23 d/16.7.44</u>	4	47	Regimental Pay <u>31 days @ \$ 2.20</u>	68	20		
Casual Payments.....			Technical Pay.....days at.....\$.....				
Payments on Transfer or Discharge.....			Additional Pay (Give particulars).....days at.....\$.....				
Assigned Pay.....	35	00	Allowances (Give particulars).....days at.....\$.....				
Regimental Charges.....							
Public Stoppages (Give particulars):							
To Balance Cr	30	38	By Balance Dr				
{ Free.....							
{ Deferred.....							
Total.....	69	85	Total.....	69	85		

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

Remarks :

Assigned Pay \$35.00 (W) Stopped off. August, 44.

Compiled by R. Reynolds,

Certified correct [Signature]  
for Chief Treasury Officer, Overseas

Checked by B.M. Liddsworth

Date 2nd. February, 19 45.

# ENDORSEMENTS

DEBITS AND/OR CREDITS SUBSEQUENT TO ISSUE OF LPC  
Prior to compilation of statement below

DATE	UNIT	PAYMENTS	AMOUNT		PAYMASTER'S SIGNATURE
			DR	CR	
		Balance from LPC .....			

Explanation of Debit Balance :-

## STATEMENT OF ACCOUNT

DATE	PARTICULARS	DR	CR
	Balance as shown above.....		
	Pay and Allowances from..... to.....		
	Assigned Pay months of.....		
	Civilian Clothing Allowance.....		
	Boat Expense Money.....		
	Train Expense Money.....		
	Miscellaneous Debits (give details).....		
	Miscellaneous Credits (give details).....		
	TOTAL ....		

## DEBITS AND/OR CREDITS SUBSEQUENT TO COMPILATION OF ABOVE STATEMENT

DATE	UNIT	PARTICULARS	DR	CR	SIGNATURE OF PAYING OFFICER

Place of Embarkation.....  
 Date of Embarkation.....  
 Place of Disembarkation.....  
 Date of Disembarkation.....

HM Transport.....

# CANADIAN PACIFIC TELEGRAPHS

DAY LETTER

NIGHT LETTER

CASUALTY (REPORT DELIVERY)

OTTAWA 29TH JULY 1944

TO:- MRS RUTH PARKHILL  
C O A J SOUTIERE  
BEEBE QUEBEC

18893 MINISTER OF NATIONAL DEFENCE DREPLY REGRETS TO INFORM YOU  
THAT D14011 SERGEANT DOUGLAS CAMPBELL PARKHILL HAS BEEN OFFICIALLY  
REPORTED KILLED IN ACTION TWENTYFOURTH JULY 1944 STOP IF ANY FURTHER  
INFORMATION BECOMES AVAILABLE IT WILL BE FORWARDED AS SOON AS RECEIVED

DIRECTOR OF RECORDS

  
PREPAID

OFFICER I/C RECORDS

DEPARTMENT OF NATIONAL DEFENCE—(ARMY)

CROSS REFERENCE

PARKHILL, DOUGLAS CAMPBELL

D. 14011

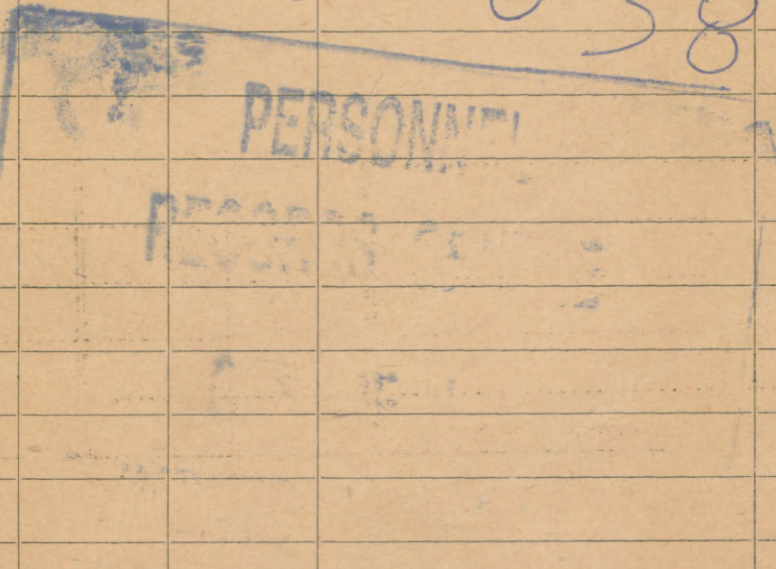
A.F.

405-P-15,541

H.Q.

CENTRAL REGISTRY	DATE	P. A. OR B. F.	INITIALS	REFERRED TO	FOR REMARKS	INITIALS	DATE
					NPRC		
					(If purpose for which referred cannot be expressed on one line, add minutes to file and enter here "With Minute")		
					... JUL 28 1944		
				AG.	For signature & return to Cas. Sec. please.	P.L.	14-8-44
					has been returned.	W	15/8/44
				Q. 3.	Q 8 Passed, please.	P.L.	19-8-44
				James	Passed Pb.	W	30-8-44
SEP 13 1944				HA	" "	W	1-9-44
NOV -4 1944	11-9-44	P.A.	Jm.	HA	" "		
	31 10/44	HA	W		WITH PAPERS OCT 30 1944		
				WSJ	PER REQUISITION - DEC 13 1944		
				DR.	With papers		DEC 18 1944
DR 2- 1945	29 8 45	P A	FIL	PAY	WITH PAPERS JAN 11 1945		
FEB 11 1946	9-2-46	pa	W	2C	PER REQUISITION JAN 31 1946		
JUL 22 1947	21 7/47	pa	W	HB	PER REQUISITION JUL 17 1947		

41-30038



D 14011

CASUALTY SECTION

FILE ACTION

ITEM	CHECKED BY	DATE	CHECKED BY	DATE	CHECKED BY	DATE
1. Cable Abstract Attached						
2. Telegram Despatched to N/K						
3. Delivery of N/K Telegram Confirmed	P. Ho	31/7/44				
4. Confidential Notice (Miss. POW. Fatals)						
5. Dependents Allowance Board Notified						
6. P. & N.H. Notified (Blindness Amps. Fatals)						
7. Nat. War Services Notified (POW's Only)						
8. Red Cross Notified (POW's Only)						
9. SAAG Notified (POW's Only)						
10. Income Tax & Dept. of Labour Notified						
11. Chaplain Services Notified						
12. Released to press						
13. O's Letter to Next of Kin (Fatals)						
14. File Passed to Q3 (Fatals)						
15. Q3 Action Taken						
16. File passed to "G"						
17. Minister's Condolence Card Desp't.	M. G.	22/3/44				
18. File Passed to Honours & Awards						
19. Memorial Cross Action Taken	J.B.	8/9/44				
20.						
22.						
23.						
24.						
25.						
26.						
27.						
28.						
29.						
30.						
31.						
32.						
33.						
34.						
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 of using it.

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.

10/PARKHILL D.C/1

CANADIAN MILITARY HEADQUARTERS  
(CANADIAN ARMY OVERSEAS)

CROSS REFERENCE

COMPLETE  
DECEASED

RETURN TO  
ESTATES  
C.R.

PARKHILL D.C. SGT D 14011

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")

<i>24 Dec 44</i>	<i>PA</i>	<i>Est 4</i>
<i>24 Feb 45</i>	<i>PA</i>	<i>Est 4</i>
<i>7 Feb 45</i>	<i>PA</i>	<i>Est 4</i>

WITH PAPERS EST. C.R. 1 NOV 1944

WITH PAPERS EST. C.R. 15 DEC 1944

WITH PAPERS EST. C.R. 5 FEB 1945

41-30038

84  
13-3-41  
405-P

D 14011 10/PARKHILL D.C/1



# 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.



# NOTICE

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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.

NAME D 14011 Sgt PARKHILL, Douglas C. (Campbell)

Casualty	Date	Authority	Date entered	Clerk
KILLED	24 July 44	"A" 474	AUG 14 1944	<i>[Signature]</i>

CASUALTY REPORT checked by *[Signature]* 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.

*No* 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. 84 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 *[Signature]* 0. / ~~NO UNIT effects~~ 0.

Release from A. of E. to \_\_\_\_\_ 0.

RELEASE to *Canada* *[Signature]* O. EST 11(2) No. 248 EST 5 on 15 Dec 44 by *[Signature]* C.

Shipped in Box EST 107 on Jan 45 EST 5(a) rec'd and filed by \_\_\_\_\_ C.

C. of A. REPORT rec'd and dup. ch. on 16 Nov 44 by *[Signature]* C. Checked by *[Signature]* 0.

DEBTS

Particulars	Name	Amount	Paid	Receipt

MEM I Part II	Checked	MEM I Part I
No. Ch bk chs	<i>[Signature]</i> 0	<i>[Signature]</i> 0.
GPO bank book	0	Off Record of Service Bk 0.
	0	
	0	
	0	

EST 6/Requn/Docs/Upfit \_\_\_\_\_ *[Signature]* 0.

Cash to P.M. \_\_\_\_\_ *[Signature]* Prepared by *[Signature]* C.

L.P.C. received and checked by *[Signature]* 0.

EST 7 *[Signature]* O. Prepared by *[Signature]* C.

COMPLETE ( *[Signature]* ) *[Signature]* O. Entered on FEB 8 1945 by *[Signature]* C.

NOTES

REMARKS to A. of E.

MEM 70 at WONA (MEM RT 2)

CANADIAN MILITARY HEADQUARTERS

2 Cockspur Street,  
(Trafalgar Square)  
London, S.W.1.

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

6 Feb 45.

D-14011 Sgt PARKHILL, Douglas Campbell (dec'd)

1. Herewith the following:-

Original C. of A. report  
M.B.M. I Part I  
M.B.M. I Part II (2)

~~XXXXXXXXXX~~  
~~XXXXXXXXXX~~  
Officers Record of Service Book  
L.P.C.  
~~XXXXXXXXXX~~  
C.F.A. 187  
~~XXXXXXXXXX~~  
~~XXXXXXXXXX~~

Cdn. Sec GHQ 2 Ech 21 A. Gp.

Received accounts as follows:-

NIL

Form letters as follows:-

NIL

Bank Books as follows:-

NIL

2. ~~XXXXXXXXXX~~  
Personal effects released to you in Box 107

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

4. Nil Will here  
will be forwarded to you with EST 10 serial No \_\_\_\_\_

5. Remarks

1. MFM 10 at NDHQ (MBM I PT I).

(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.

D.14011. Sgt. Parkhill, D.C. (Deceased).  
10/Parkhill, D.C/1. (EST.4).

In accordance with your letter dated 15th Dec 44.

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



PR/495

2nd. Feb 45.

*R. W. Hodgman*  
for Chief Treasury Officer.

CANADIAN MILITARY HEADQUARTERS

2, Cockspur Street,  
(Trafalgar Square)

London, S.W.1.

15 Dec 44

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

D.14011 Sgt. PARKHILL, Douglas Campbell (dec'd)

1. Herewith the following:-

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

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

NIL

3. Committee of Adjustment Report shows the following:-

Cash to Paymaster NIL

.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....
.....	.....

C.D.V. Nil

4. Please forward:-

~~Cheques in payment of debts~~

L.P.C.

Copy for file

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

**Personal Effects Certificate.**

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. 014001 SGT.  
 Rank, Name & Initials BRAXHILL DC  
 Regiment or Corps RCA  
 Nature of Casualty KILLED  
 Date of Casualty 24 JUL 44

Inventory No. :-

2954

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.

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 W/FCPT  
 Unit CONSEC 91102 FEN 21 AS  
 Date 19 SEP 44

Personal effects of :-

- (i) Deceased, Missing or Prisoner of War officers and other ranks will always be despatched by registered post to O. i/c G.H.Q., 2nd Echelon.
- (ii) Sick or wounded officers and other ranks will always be despatched by registered post to the hospital to which admitted, if known, otherwise to the Reinforcement Holding Unit (or G.H.Q., 2nd Echelon, if specially instructed).

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

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



Personal or  
Army No.

14011

Rank

Sgt.

Name & Initials

Bartholomew

Regt.

Army Form W.3190

Regt. RCO

## INVENTORY OF EFFECTS.

List of Articles of Intrinsic or Sentimental Value.

FOLDING CAMERA IN  
LEATHER CASE  
RED IDENTITY DISC  
SIGNET RING ENGRAVED  
DENT PENCIL - BARBER  
WRIST WATCH ISLUBOVA  
COMBS.  
LEATHER FOLDER  
SNAP SHOTS  
NAIL FILE

Notes

Postal Orders

Gold

Silver

Copper

TOTAL

£

s.

d.

Frcs.

Cms.

### 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.

Complete by  
J. P. Bartholomew  
R. J. P. Bartholomew

**Personal Effects Certificate.**

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. 014001 SGT.  
 Rank, Name & Initials BRAXHILL DC  
 Regiment or Corps RCA  
 Nature of Casualty KILLED  
 Date of Casualty 24 JUL 44

Inventory No. :-

2954

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 :-

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. Rame  
 Rank LIEUT.  
 Unit CONSEC PHOTO FEH 21 AS  
 Date 19 SEPT 44

Personal effects of :-

- (i) Deceased, Missing or Prisoner of War officers and other ranks will always be despatched by registered post to O. i/c G.H.Q., 2nd Echelon.
- (ii) Sick or wounded officers and other ranks will always be despatched by registered post to the hospital to which admitted, if known, otherwise to the Reinforcement Holding Unit (or G.H.Q., 2nd Echelon, if specially instructed).

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

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

Personal or  
Army No.

214011

Rank

SGT.

Name & Initials

PARKHILL D.

Army Form W.3190

Regt.

R.C.A.

INVENTORY OF EFFECTS.

List of Articles of Intrinsic or Sentimental Value.

FOLDING CAMERA IN ✓  
LEATHER CASE ✓  
RED IDENTITY DISC ✓  
SICRET KING ENGRAVED ✓  
DENTAL PENCIL MARKER ✓  
WAIST WATCH SULOVA ✓  
COINS ✓  
LEATHER FOLDER ✓  
SNIP SHOTS ✓  
MAIL FILE ✓  
Complot 12 Dec 44  
M. Walker P.B.  
A. J. ... Donnell

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

# UNIT COMMITTEE OF ADJUSTMENT REPORT

APPROVED AND FORWARDED

## INSTRUCTIONS

Standing Committee of Adjust-  
Cdn. Sec GHQ 2nd Ech 21 A.Gp.

1. To be completed in triplicate of which one copy will be retained by the unit.
2. Parts marked \* which are not applicable will be ruled out and initialled.
3. All blanks marked † will be filled in with "NIL" where appropriate.
4. In the case of personnel reported MISSING, INTERNED, or PRISONERS OF WAR, NO PERSONAL EFFECTS WILL BE SOLD AND NO PREFERENTIAL CHARGES OR ORDINARY DEBTS WILL BE PAID by Unit Committee of Adjustment.
5. In the case of DECEASED personnel, no personal effects of sentimental nature will be sold. Other personal effects may be sold to pay preferential charges and also when, in the opinion of the CO, the exigencies of the Service make it desirable to do so.
6. Unit Committee of Adjustment may pay, in the case of deceased personnel,
  - (a) preferential charges owing within the unit and the unit area, and
  - (b) ordinary debts similarly owing ONLY if after making provision for all preferential charges of which it has notice there is sufficient cash on hand to pay all ordinary debts.
7. The following will be forwarded in the manner shown,
  - In UK—to Officer i/c Estates, CMHQ.
  - Ex UK—to Officer i/c Cdn Sec, GHQ, 2nd Echelon.
  - (a) Personal effects not disposed of, original and duplicate copy of report, and Officers' Record of Service Book or Soldiers' Service and Pay Book MBM 1, Pts I and II—by post, rail or road.
  - (b) Any Will or testamentary document with a memorandum giving regimental particulars and, if undated, any available evidence indicating the probable date of its execution—by registered post AT ONCE.
  - (c) Cheques, drafts, money orders, personal papers and documents, effects of sentimental value and an inventory of all personal effects forwarded—by registered post.

OCT 24 1944

## REPORT

No. D 14011 Rank Sgt. Name in full PARKHILL, D.C.

\*Deceased, \*Missing, \*Prisoner of War, \*Interned. Date of Casualty 24 Jul 44.

Unit 6th Cdn A. Tk. Regt RCA.

Medical installation in which death took place (if applicable) ---

Reinforcement Unit to which posted at time of death (if applicable) ---

Name of Officer furnishing report CAPT. G. L. RICHTER  
(BLOCK CAPITALS)

### A. PERSONAL EFFECTS

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

### B. WILL

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

### C. CLOTHING AND EQUIPMENT (PUBLIC)

- (a)\*Was turned in to QM Stores.
- (b)\*There were no deficiencies.
- (c)\*There were deficiencies amounting to £ \_\_\_\_\_ 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 receipted, and those recommended for payment by the Officer i/c Estates being so certified.

(b) \*Memorandum as to any disputed accounts, with full particulars of dispute attached as Exhibit "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 receipted, and those recommended for payment by the Officer i/c Estates being so certified.

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

F. CREDITS

(a) Public Claims owing to the Casualty.

Nature of Claim	Amount
† Pay only	

(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	† Nil
	Cash realized from sale of effects as per para A.	† Nil
	Cash collected re private claims as per para F.	† Nil
Dr. {	Paid re preferential charges as per para D.	† Nil
	Paid re ordinary debts as per para E.	† Nil
	Paid (*balance) to unit Paymaster	† Nil
	† ---	† ---

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 .....

.....  
Signature of Committee or President

6th Cdn. A. Tk. Regt. RCA.  
Unit

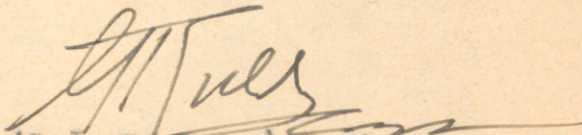
2 Aug 44

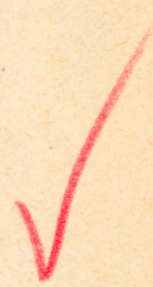
Date

Schedule "A5"

Personel affects of D 14011 Sgt. PARKHILL, D.C.

Pay and Service Books in case  
Leather folder containing snapshots  
Identification disc  
Bulova wrist watch  
Signet ring  
Parker pen and pencil  
Pencil  
Fingernail file  
Pocket comb  
Folding camera in case

  
(G. L. Richter) Capt.  
6th Cdn A. Tk. Regt RCA.



Army Form W. 3190  
(Books of 50)  
40/P & S/2456 (5155)

**Personal Effects Certificate.**

A-5

Army Form W.3190.  
(Books of 50)  
40/P & S/2456 (5155)

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. D 14011  
Sgt. PARKHILL, D.C.  
Rank, Name & Initials.  
6th Can A.Tk. Regt RCA.  
Regiment or Corps. 74 Bty.  
Killed  
Nature of Casualty.  
24 Jul 44  
Date of Casualty.

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

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 Capt. (S.L. Richter)

Unit 6th Can A.Tk. Regt RCA.

Date 2 Aug 44

Registered Post Particulars:—

Special Instructions.

Personal effects of:—

- (i) Deceased or Missing officers and other ranks will always be despatched by registered post to O. i/e 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/e 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 **D 14011****PARKHILL, D.C.**

Army Form W-3190

Army No.

Rank

**Sgt.**

Name &amp; Initials

Regt.

**INVENTORY OF EFFECTS.**

List of Articles of Intrinsic or Sentimental Value.

Leather folder ✓  
 containing snapshots ✓  
 Identification disc ✓  
 Bulova wrist watch ✓  
 Signet ring ✓  
 Parker pen and pencil  
 Pencil  
 Fingernail file  
 Pocket comb ✓  
 folding camera in case ✓

	£	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.



**Personal Effects Certificate.**

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. 014001 SAT.

Rank, Name & Initials BRANKILL DC

Regiment or Corps RCA

Nature of Casualty KILLED

Date of Casualty 24 JUL 44

Inventory No. :-

2954

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 :-

WHILE SERVING UNDER MY COMMAND.

WHEN ADMITTED HERE.

WHEN FOUND.

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

Signature W. Raine

Rank LIEUT

Unit CONF SEC 5102 Bn 21 AF

Date 19 SEP 44

Personal effects of :-

- (i) Deceased, Missing or Prisoner of War officers and other ranks will always be despatched by registered post to O. i/c G.H.Q., 2nd Echelon.
- (ii) Sick or wounded officers and other ranks will always be despatched by registered post to the hospital to which admitted, if known, otherwise to the Reinforcement Holding Unit (or G.H.Q., 2nd Echelon, if specially instructed).

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

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

Personal or  
Army No.

D14011

Rank

S/LT

Name & Initials

PAWELL D

Regt.

A.A

Army Form

# INVENTORY OF EFFECTS.

List of Articles of Intrinsic or Sentimental Value.

FOLDING CAMERA IN  
LEATHER CASE  
RED IDENTITY DISC  
SIGNET RING ENGRAVED  
PEN + PENCIL BARBER  
WRIST WATCH 'BULOVA'  
COMPS.  
LEATHER FOLDER  
SNAPSHOTS  
NAIL FILE  
PENCIL

	£	s.	d	Frcs.	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 necessities) 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.

## RECORDS OFFICE

## CASUALTY REPORT

NAME (in full) PARKHILL, Douglas Campbell  
 NO. D-14011 RANK SGT UNIT 6 A/TK REGT RCA  
 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 24 JUL 44 LIST # "A"474 PLACE AEF  
 If P.O.W. or INTERNED, Number & Address \_\_\_\_\_  
 PREVIOUSLY REPORTED \_\_\_\_\_ DATE \_\_\_\_\_  
 (L.S. APPLEFORD) Major  
 Officer i/c R.5 Wing CAS. SECT.

## NEXT OF KIN

- CANADA or U.S.A. - YES/NO (if NO, Complete No. 2)
- NAME, (In Full) \_\_\_\_\_  
 RELATIONSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_
- 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..

- NO WILL HERE (or) ~~WILL HEREWITH DATED~~ \_\_\_\_\_ BENEFICIARY \_\_\_\_\_  
 (Relationship) \_\_\_\_\_  
 EXECUTOR \_\_\_\_\_  
 (Name) (Address)
- BANK ACCOUNT - NAME OF BANK, etc. \_\_\_\_\_ A/c No. \_\_\_\_\_  
 ADDRESS \_\_\_\_\_
- KIT PRIVATELY STORED - NAME of Custodian \_\_\_\_\_  
 Address \_\_\_\_\_
- Particulars of DEBTS, Remarks, etc. \_\_\_\_\_

Date SEP 6 - 1944ORIGINAL - With WILL, if any to  
O. i/c ESTATES, C.M.H.Q.

DUPLICATE - To File.

B.E. Willan  
 (B.E. WILLAN) Capt.  
 Officer i/c R.3 Wing Non-Effectives  
 for Officer i/c Records  
 CANADIAN MILITARY HEADQUARTERS

no file

SUBJECT

D-14011

PARKHILL, D.C.

CHARGED TO	PER	DATE	CHARGED TO	PER	DATE
<b>C</b>		WITH PAPERS JUL 28 1944			
<i>PS</i>		<i>19-8-44</i>	<i>105</i>		
<i>James</i>		<i>30-8-44</i>	<i>PS</i>		
<i>g</i>		WITH PAPERS OCT 30 1944			
<i>WJG</i>		PER REQUISITION -	DEC 13 1944		
<i>W.A.P.A.P.</i>		<i>23-12-44</i>	<i>PS</i>		
<i>Z.C.</i>		PER REQUISITION -	FEB 1 1946		
<i>H/B</i>		PER REQUISITION	JUL 17-1947		

THIS CHARGE-OUT AND ABSENT CARD MUST NOT LEAVE THE REGISTRY



22nd July, 1947.

Mr. Amede Parkhill,  
Ayers Cliff, Quebec.

Dear Mr. Parkhill:

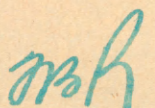
I am forwarding herewith a photograph of the grave and marker over the burial place of your late son, D14011 Sergeant Douglas Campbell Parkhill, the location of which is grave 1, row F, plot 15, Beny-sur-Mer Canadian Military Cemetery, Beny-sur-Mer, France.

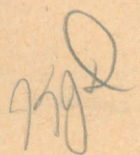
Any errors appearing in the inscription will be corrected when the permanent headstone is placed.

Yours faithfully,

Encl.

/EMA

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



H.Q. 405-P-15541  
R. 4 (B).

23rd July, 1947.

Mrs. Ruth Parkhill,  
c/o A.J. Soutiere, Esq.,  
Beebe, Quebec.

Dear Mrs. Parkhill:

I am forwarding herewith a photograph of the grave and marker over the burial place of your late husband, D14011 Sergeant Douglas Campbell Parkhill, the location of which is grave 1, row F, plot 15, Beny-sur-Mer Canadian Military Cemetery, Beny-sur-Mer, France.

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

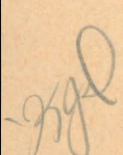
Yours faithfully,



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

Encl.

/EMA







# COMPUTATION OF WAR SERVICE GRATUITY

MEMBER'S NAME DOUGLAS CAMPBELL PARKHILL Register No. D 2240  
(Christian Names) (Surname)

PAYEE'S NAME MRS. RUTH A. PARKHILL File No. 405-P-15541  
(Christian Names) (Surname)

ADDRESS % A.D. SOUTIERE Service No. D 14011  
BEEBE - P.Q. Final Rank SGT.

DATE OF TERMINATION OF OVERSEAS SERVICE 24-7-44 Date of Discharge 24-7-44

		AMOUNT	
		\$	c
<b>A. TOTAL QUALIFYING SERVICE</b> No. of days <u>830</u> = <u>27</u> <sup>(20)</sup> Periods @ \$7.50		202	50
<b>B. QUALIFYING OVERSEAS SERVICE</b> No. of days <u>335</u> less <u>20</u> Ineligible days, equal <u>315</u> Days @ 25c per day		78	75
<b>C. SUPPLEMENT FOR OVERSEAS SERVICE</b> Daily Rate of Pay \$ <u>2.20</u> Subsistence Allowance \$ <u>1.25</u> Additional Pay \$ ..... Dependents' Allowance 1/30 \$ <u>37.20</u> \$ <u>1.24</u> TOTAL \$ <u>4.69</u> × 7 = \$ <u>32.83</u> No. of Days <u>335</u> × \$ <u>22.83</u> 183		281	25
<b>D. WAR SERVICE GRATUITY</b> Computed By <u>Gates</u> <input checked="" type="checkbox"/>		341	35
<b>E. DEDUCTIONS</b> Overpayment of (1) Pay & Allowance \$ ..... (2) D.A. & A.P. \$ ..... Other Deductions \$ ..... Entered By <u>WRB</u> <input checked="" type="checkbox"/>			✓
<b>F. AMOUNT PAYABLE</b> (This amount is payable in <u>1</u> monthly instalments of \$ <u>341.35</u> each)		341	35
<b>G. Monthly instalment not to exceed daily rate of Pay &amp; Allowances per (C)</b> \$ ..... × 30 = \$ .....			

REMARKS

Navy  
 Army  
 Air Force  
 (Mark X opposite Force in which you last served.)

DEPARTMENT OF NATIONAL DEFENCE

D 2240  
 M.F.M. 441  
 1 Mil. 9-44 (5449)  
 H.Q. 1772-39-2326

**Application for War Service Gratuity**  
 (Canadian Armed Forces)

A complete reply must be given to every question in this application. If any question is not applicable, "N.A." is to be inserted.

1. Surname on termination of service..... PARKHILL  
 (Print)
2. Christian Names ..... DOUGLAS CAMPBELL  
 (Print)
3. Service No. D 14011 4. Paid rank or rating at date of termination of Service Sgt
5. Address, in full, to which payments of gratuity are to be forwarded.....  
Mrs Ruth A. Parkhill  
c/o A. J. Soutiere  
Beebe, Quebec Canada.

6. State below your period or periods of service in the Armed Forces of Canada during the present war.

Service (Navy, Army or Air Force)	Service No.	Final Rank or Rating	Date of Commencement of Service	Date of Termination of Service
<u>ARMY</u>	<u>D 14011</u>	<u>Sgt</u>	<u>April 16<sup>th</sup></u> <u>1942</u>	<u>July 24<sup>th</sup></u> <u>1944</u>
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

7. Have you during the present War, while a member of the Canadian Forces, been attached, loaned or seconded to any of the Naval, Military, or Air Forces of His Majesty or of any power allied or associated with His Majesty?..... "N.A." If so, state name of Force or Forces.....
8. Have you during the present War, while *not* a member of the Canadian Armed Forces, been appointed to or enlisted in any of the Naval, Military or Air Forces of His Majesty (other than the Canadian Armed Forces)?..... "N.A." If so, state the Force or Forces, with dates of commencement and termination of service.....

Having now ceased to serve on Active Service, I hereby apply for payment of the War Service Gratuity.

Nov 20<sup>th</sup> 1944 (Date)
 
Mrs Ruth A. Parkhill  
 (Signature of Applicant)

If name signed in space above represents a change from name given in question 1, insert here the name at termination of service. As cheques will be prepared in the name given in question 1, a specific address in question 5 is particularly essential.

NOTE: When completed this form is to be mailed to the Headquarters of the Service in which you last served. Viz:  
 Navy—The Secretary, Naval Board, Naval Service Headquarters, Ottawa. (To be accompanied by Certificate of Service in the case of ratings.)  
 Army—The Secretary, Department of National Defence (Army), Ottawa. Attention: Paymaster-General.  
 Air Force—The Secretary, Department of National Defence for Air, Ottawa. Attention: Records Officer.

CASUALTIES ONLY

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

Register No. D2240

File No. H.Q. 405-P-15541

WAR SERVICE GRANTS ACT 1944

OTTAWA December 16th 1944

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

Service No. D14011

Name D.C. PARKHILL  
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.

Names of persons in receipt of D.A. and amount of monthly award	Name	Amount
	<i>Mrs. Ruth A. Parkhill</i>	\$ <u>37.20</u>
	<i>wife.</i>	

If no D.A. in issue, list names of persons in receipt of A.P., who may be classed as dependents under W.S.G. Act, 1944 and amount of monthly assignment.		

Names of persons to whom assigned pay was continued by supplementary award after death.		

Amount of overpayment of dependents allowance and/or assigned pay deductible from the War Service Gratuity and name of person to whom paid		

**JAN 9 - 1945** 194

*Lothe Blue*  
For Chief Treasury Officer,  
D.A. & A.P. Branch

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

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

194

for C.T.O.

CASUALTIES ACT

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

Register No. D2240

File No. H.O. 405-P-15541

WAR SERVICE GRANTS ACT 1944

OTTAWA December 16th 1944

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

Service No. D14011

Name D.C. PARKHILL  
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.

Names of persons in receipt of D.A.  
and amount of monthly award

Name	Amount
<i>Mrs. Ruth A. Parkhill</i> <i>wife</i>	\$ <u>27.20</u>
_____	_____
_____	_____

If no D.A. in issue, list names of  
persons in receipt of A.P., who  
may be classed as dependents under  
W.S.G. Act, 1944 and amount of  
monthly assignment.

_____	_____
_____	_____

Names of persons to whom assigned  
pay was continued by supplementary  
award after death.

_____	_____
_____	_____

Amount of overpayment of dependents  
allowance and/or assigned pay  
deductible from the War Service  
Gratuity and name of person to  
whom paid

_____	_____
_____	_____

**JAN 9 - 1945**

\_\_\_\_\_ 194

*C. McBlane*  
For Chief Treasury Officer,  
D.A. & A.P. Branch

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

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

\_\_\_\_\_ 194

\_\_\_\_\_ for C.T.O.

FALSE DOCKET  
ARMY No. 353

ESTATES

DEPARTMENT OF NATIONAL DEFENCE, CANADA

CROSS REFERENCE

PARKHILL, D.C.

D.14011

E

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")		
	AUG 31 1944			OS	PER REQUISITION AUG 21 1944		
				OS	PER REQUISITION FEB 26 1945		
	22/3/45	B.F.	E.	E	L.P. Ent	QP	27/2
	22/4	B.F.	E.	E	F. MAR 22 1945		
				Qv	v. + P4	E.	28/3
				Q4	PH	QV	6-4
	7/6	Chase	E.	E	Dis H	A	27-4
		PA-QC		Q6	Closed	E.	9/5
	30/6	Chase	E.	E	With Pap MAR 23 1945		
				E	With Papers JUN 4 1945		
	8/10/45	PA	Eff	eff.	fund + PA	E.	8/6
				E	With Papers JUN 17 1945		
	C.R. 26/6/45	PA	SMT				
	3-7-45	Pa	2/2		2c PER REQUISITION JUN 28 1945		

CLOSED  
2-15-45

H.Q. No. 405-P-15,541

Parkhill, D.C.

CANADA .....

OVERSEAS FRANCE

DIED July - 24 - 1944

		Date Received	Date Despatched	
Casualty Report—		31-8-44		
Will	Service { Canada <u>23-6-43</u> O/Seas.....			Beneficiary <u>MRS. RUTH ADELE PARKHILL (WIFE)</u>
	Civil.....			Residing { Canada <input checked="" type="checkbox"/> Elsewhere.....
	None.....			
	Probate (or L of A).....			
Particulars of Family				Single <input checked="" type="checkbox"/> Married.....
Form dated <u>17-4-42</u>				Parents <u>FATHER</u> Children..... (Minors.....)
None.....				Life Insurance <u>NORTH AMERICAN LIFE CO.</u>
A.P. to other than Dependents				
Form P.64				By <u>Widow</u> Single.....
Dated <u>14.9.</u>		<u>14.9.</u>	<u>16.9.</u>	Other N/K.....
				Will <u>nil.</u> Other Estate <u>V.L.B. W.S.C.</u>
				Debts <u>nil.</u>
				↓                      ↓ Bearer:                  Form out.
Form to Unit				
C. of A. Report.....		<u>14.2.</u>	Approved <u>SMT</u>	Service debts..... <u>NIL</u>
				<u>NIL WILL</u>
L.P.C. \$ <u>30 38</u>		<u>14/2/45</u>	<u>27/2/45</u>	<u>VERIFIED 5/3</u>
Amended.....				
Bank Credits.....				
Other Credits.....				
Domicile				<u>P.Q.</u>
DISTRIBUTION—				To <u>widow</u>
Effects	{ Canada.....			Bulk via <u>pel.</u>
	{ Overseas.....			Valuables via.....
				Letter as to, dated <u>7/6/45</u>

Total Cash \$ 30 38

Date of Despatch 2/4/45

To SMT  
R Widow: Ruth Adele Parkhill (per Will)  
cancel a WSC  
ALD 27/4/45  
NR 277

AL VICE  
 RECEIVED  
 APR 20 1945  
 NO WILL  
 IN REG. OFF.

Will to Photo  
 18.9.44.

107

VVVV  
77  
200



Department of National Defence

Estates Branch

Ottawa,

Canada

Date June 12<sup>th</sup> 1945

Received this date from the Director of Estates

One (1) Small Parcel by Registered Mail

containing personal effects of my deceased husband.

H.Q. 405-P-15,541 FD 353

PARKHILL, Douglas Campbell, Sgt. (Deceased)  
No. D.14011, C.A.



Mrs. Ruth H. Parkhill  
Signature



ESTATES BRANCH

OTTAWA, 7 June.

5

Mrs. Ruth A. Parkhill,  
c/o A.J. Soutiere,  
Beebe, Que.

PARKHILL, Douglas Campbell, Sgt. (Deceased)  
No. D.14011, C.A.

Dear Mrs. Parkhill:

We wish to advise that we have now received your husband's personal effects and these will be going forward to you in the course of the next few days in a small parcel by registered mail. As soon as you receive them, would you please sign and return the enclosed acknowledgement.

Yours faithfully,

Capt.,  
DIRECTOR OF ESTATES.

GHF/GE  
Encl.

1599

# EFFECTS SECTION

107

(O/S Case No.)

41

(Section Case No.)

**PARKHILL D.C.**  
(Name)

**Sgt.**  
(Rank) (Initials)

**D-14011**  
(Reg.No.)

Date rec'd **23-4-45**

From **O/S**

V - Valuables

M - Missing

*1 Pcl as Vals  
E. Stamps*

D - Destroyed (reasons why destroyed)

Surpluses

R - Retained (reasons why retained)

Diaries,

Letters,

Etc.

Remarks

Containers received

Containers re-packed

*1 Sack*

*1 Pcl as Vals.  
8-6-45-1597*

*1-6-45*  
Date checked

By

*B J Kitchell* (Clerk)  
*E. Stamps* (Clerk)

*1 sheet Inventory dated 12-12-44.  
From 1 Folding camera.*

*Jo 1 Nail File.*

Officer or N.C.O. i/c

*R. J. D. report.*

# Department of National Defence

Ottawa, Canada

Date MAY 18<sup>th</sup> 1945

Received this day from the Treasury Branch cheque for the sum of  
-----Thirty-----38 Dollars (\$ 30.38)  
-----100-----

being in connection with my late husband's Service Estate.

H.Q. 405-P-15,541 FD 353

PARKHILL, Douglas Campbell, Sgt. (Deceased)

No. D.14011, C.A.



*Mrs Ruth A Parkhill*  
Signature

ESTATES BRANCH

1 May 45

PARKHILL, Douglas Campbell, Sgt. (Deceased)  
No. D.14011, C.A.

All

Widow

Mrs. Ruth A. Parkhill,  
c/o A.J. Soutiere,  
Beebe, Que.

GHF/GE  
7.15

ESTATES BRANCH

2 May 45

Mrs. Ruth A. Parkhill,  
c/o A.J. Soutiere,  
Beebe, Que.

PARKHILL, Douglas Campbell, Sgt. (Deceased)  
No. D.14011, C.A.

Dear Mrs. Parkhill:

We are pleased to advise that we have now received the final statement of your husband's Service estate.

We have on hand available for distribution the sum of \$30.38, made up entirely of the balance of Pay and Allowances.

This sum will be paid to you as sole beneficiary named in the Will of your late husband.

A cheque has been requisitioned from the Treasury Department and will be going forward to you in the course of the next few days. As soon as you receive it, would you please sign and return the enclosed acknowledgement.

We enclose a copy of our form letter addressed to the Registrar of War Savings Certificates and, if you will forward the War Savings Certificates to him at 350 King Edward Avenue, Ottawa, together with this form letter, he will be pleased to cash or transfer them as you desire.

Yours faithfully,

Capt.,  
DIRECTOR OF ESTATES.

GHF/GE  
Encl.

CANADIAN MILITARY HEADQUARTERS

2 Cockspur Street,  
(Trafalgar Square)  
London, S.W.1.

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

6 Feb 45.



D-14011 Sgt BARKHILL, Douglas Campbell (dec'd)

1. Herewith the following:-

Original C. of A. report  
M.B.M. I Part I  
M.B.M. I Part II (2)

XXXXXXXXXXXX  
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

L.P.C.  
XXXXXXXXXXXXXXXXXXXX

C.F.A. 187 Cdn. Sec GHQ 2 Ech 21 A. Gp.  
XXXXXXXXXXXXXXXX  
XXXXXXXXXXXXXXXX

Receipted accounts as follows:-

NIL

Form letters as follows:-

NIL

Bank Books as follows:-

NIL

2. XXXXXXXXXXXX  
Personal effects released to you in Box 107  
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

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

4. Nil Will here  
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

5. Remarks

1. MFM 10 at NDHQ (MBM I PT I).

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

Copy to file

UNIT COMMITTEE OF ADJUSTMENT REPORT

APPROVED AND FORWARDED

Per 84

INSTRUCTIONS

Eric R. ...  
Standing Committee of Adjust.  
Cdn. Sec. GHQ 2nd Ech 21 A.Gp.

OCT 24 1944

- 1. To be completed in triplicate of which one copy will be retained by the unit.
2. Parts marked \* which are not applicable will be ruled out and initialled.
3. All blanks marked † will be filled in with "NIL" where appropriate.
4. In the case of personnel reported MISSING, INTERNED, or PRISONERS OF WAR, NO PERSONAL EFFECTS WILL BE SOLD AND NO PREFERENTIAL CHARGES OR ORDINARY DEBTS WILL BE PAID by Unit Committee of Adjustment.
5. In the case of DECEASED personnel, no personal effects of sentimental nature will be sold.
6. Unit Committee of Adjustment may pay, in the case of deceased personnel, (a) preferential charges owing within the unit and the unit area, and (b) ordinary debts similarly owing ONLY if after making provision for all preferential charges of which it has notice there is sufficient cash on hand to pay all ordinary debts.
7. The following will be forwarded in the manner shown, In UK—to Officer i/c Estates, CMHQ. Ex UK—to Officer i/c Cdn Sec, GHQ, 2nd Echelon. (a) Personal effects not disposed of, original and duplicate copy of report, and Officers' Record of Service Book or Soldiers' Service and Pay Book MBM 1, Pts I and II—by post, rail or road. (b) Any Will or testamentary document with a memorandum giving regimental particulars and, if undated, any available evidence indicating the probable date of its execution—by registered post AT ONCE. (c) Cheques, drafts, money orders, personal papers and documents, effects of sentimental value and an inventory of all personal effects forwarded—by registered post.

REPORT

No. D 14011 Rank Sgt. Name in full PARKHILL, D.C.

\*Deceased, \*Missing, \*Prisoner of War, \*Interned. Date of Casualty 24 Jul 44.

Unit 6th Cdn A. Tk. Regt RCA.

Medical installation in which death took place (if applicable) ---

Reinforcement Unit to which posted at time of death (if applicable) ---

Name of Officer furnishing report CAPT. G. L. RICHTER (BLOCK CAPITALS)

A. PERSONAL EFFECTS

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

B. WILL

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

C. CLOTHING AND EQUIPMENT (PUBLIC)

- (a)\*Was turned in to QM Stores.
(b)\*There were no deficiencies.
(c)\*There were deficiencies amounting to £ ..... 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 receipted, and those recommended for payment by the Officer i/c Estates being so certified.~~

(b) ~~\*Memorandum as to any disputed accounts, with full particulars of dispute attached as Exhibit "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 receipted, and those recommended for payment by the Officer i/c Estates being so certified.~~

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

F. CREDITS

(a) Public Claims owing to the Casualty.

Nature of Claim	Amount
† Pay only	

(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	† Nil
	Cash realized from sale of effects as per para A.	† Nil
	Cash collected re private claims as per para F.	† Nil
Dr. {	Paid re preferential charges as per para D.	† Nil
	Paid re ordinary debts as per para E.	† Nil
	Paid (*balance) to unit Paymaster	† Nil
	† ---	† ---

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 .....~~

Signature of Committee or President

6th. Cdn. Ar. Tr. Regt. RCA. Unit

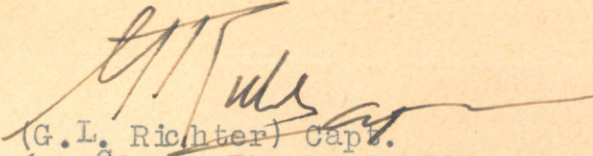
2 Aug 44  
Date



Schedule "A5"

Personel affects of D 14011 Sgt. PARKHILL, D.C.

Pay and Service Books in case  
Leather folder containing snapshots  
Identification disc  
Bulova wrist watch  
Signet ring  
Parker pen and pencil  
Pencil  
Fingernail file  
Pocket comb  
Folding camera in case

  
(G.L. Richter) Capt.  
6th Cdn A. Tk. Regt RCA.

A-5

Personal Effects Certificate.

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. D 14011  
Rank, Name & Initials Sgt. PARKHILL, D.C.  
6th Cdn A.Tk. Regt RCA.  
Regiment or Corps 7th Bty.  
Nature of Casualty Killed  
Date of Casualty 24 Jul 44

Inventory No. :-

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 personal effects

~~WHILE SERVING UNDER MY COMMAND~~

~~WHEN ADMITTED HERE~~ X

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 G.L. Richter (Capt)

Rank Capt. (G.L. Richter)

Unit 6th Cdn A.Tk. Regt RCA

Date 2 Aug 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.

Personal or  
Army No. D 14011

Rank Sgt.

PARKHILL, D.C.

Name & Initials

Army Form W.3190

Regt. 6 Cdn

## INVENTORY OF EFFECTS.

List of Articles of Intrinsic or Sentimental Value.

Leather folder ✓  
 containing snapshots ✓  
 Identification disc ✓  
 Bulova wrist watch ✓  
 Signet ring ✓  
 Parker pen and pencil ✓  
 Pencil ✓  
 Fingernail file ✓  
 Pocket comb ✓  
 folding camera ✓ in case

Notes

Postal Orders

Gold

Silver

Copper

TOTAL

£	s.	d.	Frcs.	Ctms

### 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.

Checked  
 H. J. ...  
 ...

**Personal Effects Certificate.**

THIS PORTION FOR USE AT THE BASE ONLY.

Personal or Army No. 014001 SAT.  
 Rank, Name & Initials MAJOR W. R. B.  
 Regiment or Corps RCA  
 Nature of Casualty KILLED  
 Date of Casualty 24 JUL 44

Inventory No. :-

2954

**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.

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

Signature W. R. B.

Rank MAJOR

Unit COMBAT SQD 2 BN 21 AF

Date 19 SEP 44

Personal effects of :-

- (i) Deceased, Missing or Prisoner of War officers and other ranks will always be despatched by registered post to O. i/c G.H.Q., 2nd Echelon.
- (ii) Sick or wounded officers and other ranks will always be despatched by registered post to the hospital to which admitted, if known, otherwise to the Reinforcement Holding Unit (or G.H.Q., 2nd Echelon, if specially instructed).

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

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

Personal or  
Army No.

D 14011

Rank

S/LT

Name & Initials

ARMHILL P.C.

Army Form W.

Reg. RCA

INVENTORY OF EFFECTS.

List of Articles of Intrinsic or Sentimental Value.

FOLDING CAMERA IN  
LEATHER CASE  
RED IDENTITY DISC  
SIGNET RING ENGRAVED  
PEN + PENCIL 'FARBER'  
WRIST WATCH 'BULAVA'  
COMB.  
LEATHER FOLDER  
SNAPSHOTS  
NAIL FILE  
PEN

Notes

Postal Orders

Gold

Silver

Copper

TOTAL

£ s. d. Frcs. C.

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.

MILITIA BOOK M. 1

PART III

40/P&S/1894(3620)

CANADIAN ARMY

# Clothing and Equipment Statement

Regt No.....

*D-14011*

Rank.....

*Sgt.*

Name.....

*Parkhill, D. C.*

## INSTRUCTIONS TO SOLDIER

1. You will always *carry this book* on your person and are responsible for its safe custody. (Officers need not carry this book on their person but will be responsible for its safe custody.)
2. You will initial at the bottom of each page to signify that you understand its contents and have received the quantities entered.
3. Do not alter or make entries in this book. Disobedience of this order will be treated as a serious offence and disciplinary action will be taken.
4. You will at once report the loss of this book to your Commanding Officer.

## INSTRUCTIONS TO QUARTERMASTERS

1. This statement will be used to record articles of personal clothing and equipment issued to each soldier.
2. Unit equipment (e.g., compasses, binoculars, special clothing for cooks, m/cyclists etc) will *not* be recorded on this statement.
3. All entries will be made in ink. Blank spaces in columns will be ruled through. All columns used will be initialled in the space provided by soldier and by the QM, or his representative.
4. Items withdrawn from soldier will be marked off by an "X" in ink, over the entry and initialled by the QM, or his representative.
5. New issues will be recorded in the next open column. The remaining entries in old column on page affected will be carried forward into new column. Old column will be ruled out in ink.
6. No entry will be made on this statement when unserviceable articles are exchanged for serviceable ones or when issues are made on repayment.
7. See instructions re kit inspections on inside of back cover.

ARTICLE	QUANTITY			
Anklets, web, prs.....	1			
Blouses, Battle-dress.....	2			
Bonnet, tam-o'shanter.....	1			
Boots, ankle, prs.....	2			
Boots, rubber, high, prs.....	1			
Boots, leather, high, prs.....	1			
Bonnet, drab, Irish.....	1			
Cap, field service.....	1			
Cap, mechanic.....	1			
Cap, tank battalion.....	1			
Drawers, Cellular short, prs.....	2			
Drawers, Woollen, prs.....	2			
Gloves, knitted, drab, prs.....	1			
Greatcoat, drab.....	1			
Initials of Soldier.....	123			
Initials of QM or Rep.....	987			

ARTICLE	QUANTITY				
Jacket sweater, or jersey pullover.....	1				
Overalls, combination.....	1				
Overalls, blouses, denim.....	1				
Overalls, trousers, denim.....	1				
Shirts, Angola, drab.....	1				
Shoes, canvas, prs.....	4				
Socks, prs.....	2				
Trousers, battle-dress, prs.....	2				
Vests, woollen.....	1				
Badges, cap.....	1				
Badges, arm, drab, crowns.....	1				
Badges, arm, drab, crown in wreath.....	1				
Badges, arm, Tank Bn.....	1				
Badges, shoulder, "CANADA", prs.....	3				
Initials of Soldier.....	OP				
Initials of QM or Rep.....	PT				

ARTICLE	QUANTITY				
Badges, arm, drab, Royal Arms.....	1				
Badges, arm, drab, Royal Arms in Wreath.....	1				
Bags, kit, universal.....	1				
Braces.....	1				
Brass, cleaning.....	1				
Brush, button, brass.....	1				
Brush, clothes.....	1				
Brush, hair.....	1				
Brush, shaving.....	1				
Brush, shoe, blacking.....	1				
Brush, shoe, polishing.....	1				
Brush, tooth.....	1				
Cap, comforter.....	1				
Chevrons..... 3 Bn	6				
Initials of Soldier.....	PT				
Initials of QM or Rep.....	PT				



ARTICLE	QUANTITY				
Combs, hair.....	/				
Discs, identity, sets, with cord.....	/				
Dressing, field.....	/				
Fork, NS Table.....	/				
Holdall.....	/				
Housewife, complete.....	/				
Knife, clasp.....	/				
Knife, table.....	/				
Lanyard, knife.....	<del>1</del>				
Razor, safety, with blade.....	/				
Patches, distinguishing, prs.....	3				
Shorts, gymnasium.....	1				
Spoon, NS dessert.....	1				
Vest, cotton, gym.....	1				
Initials of Soldier.....	100				
Initials of QM or Rep.....	97				

ARTICLE	QUANTITY				
Towels, hand.....	1				
Unit or Corps titles, prs.....	2				
Attachments, brace.....	1				
Bag, ration.....	/				
Belts, waist.....	/				
Bottles, water.....	/				
Braces, WE Right.....	/				
Left.....	/				
Carriers, cartridge.....	1				
Carriers, waterbottle.....	/				
Cases, binocular.....	1				
Cases, pistol.....	1				
Covers, breech, rifle.....	1				
Initials of Soldier.....	100				
Initials of QM or Rep.....	97				

ARTICLE	QUANTITY
Cover, mess tin .....	
Frogs, web, layonet.....	
Haversack.....	1
Helmet, steel.....	1
Net camouflage helmet.....	1
Packs.....	1
Pockets Compass .....	
Pouches, amm, pistol.....	
Pouches, basic.....	2
Pouches, utility { Front Rear .....	2
Slings, rifle, web.....	
Straps, shoulder, haversack { left right.....	2
Straps, web, supporting.....	2
Tins, mess, TP.....	1
Initials of Soldier.....	DA
Initials of QM or Rep.....	97

ARTICLE	QUANTITY
Veil, face, camouflage.....	
Yoke.....	
Capes, A/G.....	1
Respirators, A/G, complete with haversack.....	1
Outfits, A/D.....	1
Ointment, A/G.....	2
Eyeshields, A/G, pk of 6.....	1
Detectors, <sup>SLEEVE</sup> individual, prs.....	1
Wallet, A/G.....	1
Blanket.....	1
Mug, drinking.....	1
Sheet, ground.....	1
Initials of Soldier.....	DA
Initials of QM or Rep.....	97



# CLOTHING SIZES RECORD

ARTICLE	SIZES
Anklets.....	2
Battle Dress, blouse.....	11
..... Dress, trousers.....	11
Cap bonnet.....	
Boots, ankle.....	9 1/2
Gloves.....	
Facepiece, respirator.....	
Greatcoat.....	
Helmet steel, lining.....	
Overalls, combination.....	
Jersey, pullover.....	
Shirts, Angola, drab.....	
Vest, woollen.....	
Drawers, cellular.....	
Drawers, woollen.....	

6

VERIFIED  
31 JAN 1944  
DATE 28-1-44 BY K

PERIOD  
From SEP 1 1943 19

To 19

MILITIA BOOK M. 1

PART II

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

CANADIAN ARMY

# Soldier's Pay Book

(For use on Active Service)

8 CDN A TK REGT RCA

Reg. No. *D-14011*

Surname (Capitals) *Parkhill*

Christian Names in full *Douglas*

*Campbell*

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.







Soldier's Signature: *W. R. Parkhill*

Book opens SEP 1 1943 Balance Cr. or Dr. \$ 759

Date	Particulars	Credits	Cash Payments and Other Charges		As- signed Pay
			Local Cur- rency	Canad'n Cur- rency	
	Bals. Br't Forward	759			4240
SEP 6 1943	Aug 81		£1/10/-	671	
SEP 9 1943		6600			4340
SEP 15 1943	a.R. 99		£2/10/-	1118	
SEP 28 1943	a.R. 118		£1/10/-	671	
OCT 1 1943		6820			4340
15 OCT 1943	a.R. 3. OCT.		1/10/-	671	
24 Oct 1943	77a 513				08
	Totals	14179			313986.80

Balances only will be carried forward.

Paymaster's Signature:

*Segu Capt*

Deferred Pay and/or Restricted Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	
		759	<i>Segu Capt</i>
		88	<i>Segu Capt</i>
		2348	<i>Segu Capt</i>
		1230	<i>Segu Capt</i>
		559	<i>Segu Capt</i>
		3039	<i>Segu</i>
		2368	<i>Segu</i>
		2360	<i>Segu</i>

Date	Particulars	Credits	Cash Payments and Other Charges		As- signed Pay
			Local Cur- rency	Canad'n Cur- rency	
1943					
	Bals. Br't Forward				
Oct 24		2360			
SEPT 29 1943	a.r. 9		\$110/-	67	
OCT 29 1943	a.r. 9		\$1-1-	2235	
Nov 6	British		£1-10/2	67	
" 18	"		£1-10/2	67	
25			1-12-9	732	
Dec 2	-		£1.10.-	67	
9	"		£1-10-	67	
Nov pay		6600			3500
	Totals	8960		5651	3500

Balances only will be carried forward

Deferred Pay and/or Restricted Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	
		2360	<i>[Signature]</i> Capt.
		1689	<i>[Signature]</i>
		125	<i>[Signature]</i>
	546	-	<i>[Signature]</i>
	1217	-	<i>[Signature]</i> when given.
	1949	-	<i>[Signature]</i>
	2620	-	<i>[Signature]</i>
	3291	-	<i>[Signature]</i> M/LRA
	191	-	<i>[Signature]</i>

Date	Particulars	Credits	Cash Payments and Other Charges		Assigned Pay
			Local Currency	Canad'n Currency	
	Bals. Br't Forward	191			
	elec. Pay	68 20			35 00
29	elec. A.R. 21		57-1-	31 29	
29	elec. A.R. 20		31-1-	13 41	
-	JAN 1944	68 20			35 00
	7 day RA				
10	Jan Do. 1	4 69			
15	JAN 1944 A.R. 23		6d	11	
	ESTAB 2 DAYS RA				
21	Jan Do.	1 34			
	Totals	<del>140 59</del> 140 59			4481 70 00

Balances only will be carried forward

Deferred Pay and/or Restricted Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	
	191	—	<i>[Signature]</i>
	—	31 29	<i>[Signature]</i>
		—	<i>[Signature]</i>
	13 41	—	<i>[Signature]</i>
		19 79	<i>[Signature]</i>
		24 48	<i>[Signature]</i>
		24 37	<i>[Signature]</i>
		25 71	<i>[Signature]</i>





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. <i>nil</i>
MAR. 15.....	SEP. 15.....
MAR. 31.....	SEP. 30. <del>12/10</del> <sup>11/10</sup>
APR. 15.....	OCT. 15. <del>11/10</del>
APR. 30.....	OCT. 31. <del>11/10</del>
MAY 15.....	NOV. 15.....
MAY 31.....	NOV. 30.....
JUNE 15.....	DEC. 15.....
JUNE 30.....	DEC. 31.....
JULY 15.....	JAN. 15. <i>nil</i>
JULY 31.....	JAN. 31. <i>nil</i>

19 APR 1944

1944

PERIOD

From 1 FEB 1944 19 To 19

VERIFIED  
11/1/45 ac  
DATE

MILITIA BOOK M. 1

- PART II  
40/P & S/279 (3306)

74

CANADIAN ARMY

# Soldier's Pay Book

(For use on Active Service)

Reg't Number..... D.14011

Surname (Capitals)..... PARKHILL

Christian Names in full..... DOUGLAS

CAMPBELL

## SOLDIER'S PAY BOOK—INSTRUCTIONS

If this book is found NOT in possession of the soldier 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.

UNDER NO CIRCUMSTANCES WILL REFERENCE BE  
MADE IN THIS PAY BOOK TO THE SOLDIER'S UNIT

1. This book will be produced whenever an advance of pay 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 who will issue a new pay book in accordance with the provisions of CMHQ Pay Instruction 138 (4).
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 notified on page 3 of this book.
7. This pay book must be in possession of the soldier when reporting on sick parade, on admission to hospital and on all other occasions when leaving unit.



## PARTICULARS OF SOLDIER

Regimental Number D.14011Name in full (Surname first) Parkhill  
Douglas CampbellDate of Attestation 17-4-42State whether married, widower or single Married.

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).

Mrs. Ruth Adele Parkhill, Wife,  
Beebe, Que.

## PARTICULARS OF ASSIGNED PAY, ETC

Assignment of pay:

Effective date:

(a) \$ 35<sup>00</sup> 1-12-42

(b) \$

(c) \$

(d) \$

Name, address and relationship of assignee

(a) Ruth Adele Parkhill (wife)  
% Mr. A. J. Soutiere, Beebe, Que.

(b)

(c)

(d)

Dependents allowance, payable to: (state relationship)

Wife



Soldier's Signature *R. Parkhill*

Book opens on **1 FEB 1944** Balance Cr or Dr \$ *a. below*

Paymaster's Signature *Sign capt.*

Date	Particulars	Credits	Cash Payments and Other Charges		Assigned Pay
			Local Currency	Canad'n Currency	
1 FEB 1944	Bals Br't Forward	2571			
1 FEB 1944	PAY	63 60			35 00
15 FEB 1944	AR 31		6 d.	11	
29 FEB 1944	AR 33		11-1-	4 47	
1 - MAR 1944		68 20			35 00
15 MAR 1944	AR 35		11-1-	4 47	
15 MAR 1944	AR 36		6 d.	11	
25 ..	AR 40		171-1-	75 99	
Apr	PAY	66 00			35 00
APR 30 - AR 6			71-1-	31 29	
11 May	RA (41) D.O. 14	6 53			
May	PAY	68 20			35 00
Totals		297 90	116 44	140 -	

Balances only will be carried forward

Deferred Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	
		2571	<i>Sign capt.</i>
		54 51	<i>Sign</i>
		54 40	<i>Sign</i>
		49 93	<i>Sign</i>
		83 13	<i>W. Hand</i>
		78 60	<i>Sign</i>
		78 55	<i>Sign</i>
		256	<i>Sign</i>
		33 56	<i>Sign</i>
		327	<i>Sign</i>
		530	<i>Sign</i>
		41 50	<i>Sign</i>

Date	Particulars	Credits	Cash Payments and Other Charges		Assigned Pay
			Local Currency	Canad'n Currency	
	Bals Br't Forward	41 50			
15 May	AR 9		4/10/-	20 12	
29 "	200 P.A. Do. 14	68			
31 "	AR 15		5/-/-	22 35	
June	to	66 00			35 00
15 "	AR 18		3/10/-	15 65	
26 "	AR 21		3/-/-	13 41	
July	to	68 20			35 00
13 July	AR 23		200 p.c.	4 97	
	Totals				

Balances only will be carried forward

Deferred Pay	BALANCE		Signature of Paymaster or Officer Making Award
	Debit	Credit	
		41 50	<i>[Signature]</i>
		21 38	<i>[Signature]</i>
		22 06	<i>[Signature]</i>
	29	-	<i>[Signature]</i>
		30 71	<i>[Signature]</i>
		15 06	<i>[Signature]</i>
		1 65	<i>[Signature]</i>
		34 <sup>85</sup> <del>85</del>	<i>[Signature]</i>
		30 38	<i>[Signature]</i>
		✓ Add	<i>[Signature]</i>







If you do not wish to draw all pay due

PLACE THE AMOUNT DESIRED

opposite date of pay day.

Feb 15 *Nil*.....

Feb 29 *1*.....

Mar 15 *71*.....

Mar 31 *all*.....

Apr 15 *Nil*.....

Apr 30.....

May 15.....

May 31.....

Jun 15.....

Jun 30.....

Jul 15.....

Jul 31.....

Aug 15.....

Aug 31.....

Sep 15.....

Sep 30.....

Oct 15.....

Oct 31.....

Nov 15.....

Nov 30.....

Dec 15.....

Dec 31.....

Jan 15.....

Jan 31.....



CANADIAN ACTIVE SERVICE FORCE

District.....

OVERSEAS

Dispersal Area.....

LAST PAY CERTIFICATE

(All Ranks)

Regtl No. D.14011 Rank and Name Parkhill, D.C. Sgt.

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

(~~Transfer or~~ Discharge)..... to..... on 24th July 19 44.

Reason..... Death. Authority: C.C.L. "A"474. d/30th July 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.....		1	65
First Monthly Payment <u>AR23 d/16.7.44</u> .....		4	47	Regimental Pay <u>31 days @ \$ 2.20</u> .....		68	20
Casual Payments.....				Technical Pay.....days at.....\$.....			
Payments on Transfer or Discharge.....				Additional Pay (Give particulars).....			
Assigned Pay.....		35	00	.....days at.....\$.....			
Regimental Charges.....				Allowances (Give particulars).....days			
Public Stoppages (Give particulars):				at.....\$.....			
.....				.....			
.....				.....			
.....				.....			
.....				.....			
To Balance Cr { Free.....		30	38	By Balance Dr			
{ Deferred.....				.....			
Total.....		69	85	Total.....		69	85

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

Remarks :

Assigned Pay \$35.00 (W) Stopped eff. August, 44.



Compiled by R. Reynolds,

Certified correct [Signature]  
for Chief Treasury Officer, Overseas

Checked by B.M. Madsworth

Date 2nd. February, 19 45.



CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH  
INVENTORY

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

No., RANK and NAME D-14011 Sgt Parkhill D.C. (Deceased)

RECEIVED FROM 2nd Echelon 21 Army Group

CHECKED BY G-52743 Pte McDonald S.J.  
005591 Pte Patterson L.K. DATE 12 Dec 44

- |   |                                    |
|---|------------------------------------|
| 1 | Folding Camera (Marvel Achromatic) |
| 1 | Leather Case                       |
| 1 | Red Identity Disc                  |
| 1 | Signet Ring Engraved               |
| 1 | Pen & Pencil Parker                |
| 1 | Wrist Watch Bulovar                |
| 1 | Comb                               |
| 2 | Leather Folder                     |
|   | Snapshots                          |
| 1 | Nail File                          |

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

*L.K. Patterson Pte*  
.....  
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 D-14011 Sgt Parkhill D.C. (Deceased)

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1	Pen & Pencil Parker
1	Wrist Watch Bulovax
1	Comb
2	Leather Folder
	Snapshots
1	Nail File

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

*L.K. Patterson Pte*  
.....  
for OC 1 Cdn KSD

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA CANADA

North American Life Assurance Co.,  
4 Wellington Street, East,  
Sherbrooke, P.Q.

Reference your letter of August 23rd, 1944.

The reverse side of this paper is hereby  
certified to be a true photostat copy of a Will on file in  
this Branch of Douglas Campbell Parkhill, named therein,  
who died on the 24th day of July, 1944, while serving in  
the Armed Forces of Canada on Active Service.

Dated at Ottawa aforesaid  
this 24th day of October, 1944.

.....  
(R.G. Phelan) Captain

A Notary Public in and for  
the Province of Ontario.

BF 20/9/44

K

Your policy 279648

ESTATES BRANCH

Ottawa, Ontario, Sept. 5, 4.

North American Life Assurance Company,  
4 Wellington Street, East,  
Sherbrooke, P. Q.

PARKHILL, Douglas Campbell,  
No. D. 14011, C. A.

HQ. 405-P 15.541 FD 353

Dear Sirs:

Your letter of August 23rd, 1944, has been received. The report of death for this soldier has not yet reached us from Records Office and accordingly we are unable to advise whether there is a Will on file there.

A further letter will be written to you in due course when we are in receipt of full particulars from the Director of Records.

Yours faithfully,

CWP/WH

Director of Estates.

*A Mutual Company*

*W. H. H.*  
NORTH AMERICAN LIFE



ASSURANCE COMPANY

HEAD OFFICE

TORONTO, CANADA

C. ROSS HEALY, B.S.A.  
Branch Manager

Phone 2570

4 Wellington St. S.  
SHERBROOKE, P.Q.

August 23rd, 1944,

Department of National Defense,  
Estates Branch,  
Ottawa, Ont.



Dear Sirs:

Re: Douglas Campbell Parkhill  
Regimental No. D-14011

We understand that the above named was killed in action in France on July 24th last, and as he was insured with us under Policy 279648, we would ask you to let us have the Official Certificate of Death, together with a copy of the Will, if one were filed with your Department.

We trust that you will let us have the above mentioned requirements at an early date.

Yours very truly,

*E. Breagher*  
Cashier.

/EB

ESTATES BRANCH

September 22nd, 1944.

Mr. George W. Philbrick,  
Notary Public,  
Ayer's Cliff, P. Q.

PARKHILL, D.C., Sgt. (Deceased)  
D.14011, C.A.

Dear Sir:

We wish to acknowledge your letter of the 20th  
September.

A letter and a Notarially certified copy of her  
husband's Will were forwarded to Mrs. Parkhill on the 21st  
September, which should explain the situation.

Yours faithfully,

Director of Estates.

GHP/HH



15,92

Geo. W. Philbrick

NOTARY PUBLIC

Ayer's Cliff, Que.

September 20 th., 1944.



The Director of Estates  
Dept of National Defence,  
Ottawa.

Douglas C. Parkhill  
D-14011.

Sir:

Mrs Douglas C. Parkhill of Beebe, Que was in my office with reference to the settlement of the estate of her husband the late Douglas C. Parkhill

This letter was written on the 12 th and to date the widow (Ruth Sdele Soutier) Mrs Parkhill has had no word from you good people;

I am anxious to ascertain whether the whole estate is settled from the Ottawa angle or whether it is left locally; the insurance company is harassing Mrs Parkhill to get her releases and Mrs Parkhill is looking to me to do something;

In my humble opinion if the whole estate could be settled from Ottawa without doing it locally it would be much better for the heirs of the deceased;

Yours truly,

*Geo. W. Philbrick*

ESTATES BRANCH

September 21, 1944.

Mrs. Ruth A. Parkhill,  
Beebe, Quebec.

PARKHILL, Douglas C., Sgt. (Deceased)  
No. D.14011, C.A.

Dear Mrs. Parkhill:

We thank you for completing our Form P.64.  
As requested we are enclosing a copy of the Will of your  
husband, dated the 23rd of June 1943, in which you are named  
sole beneficiary.

Until we receive the Overseas report and pay  
account we will not be in a position to distribute the assets of  
your husband's estate but at that time we will be pleased to assist  
in transferring or redeeming the War Savings Certificates that you  
hold. The bank account, since it is in your name, can be withdrawn  
by you and you can also deal with the bearer bond.

The personal effects will not be received for some  
months to come but as soon as they arrive we will forward them to  
you. In the meantime if there is anything with which we can assist  
you please advise.

Yours faithfully,

Director of Estates.

GHF/BW  
Encl.1

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

# WILL

M.F.M. 10  
200M-6-41 (692)  
H.Q. 1772-89-1856

(1) I, Douglas Campbell Parkhill of the Beebe, Que.  
(Name in Full) (City, Town, Village, Township)

Address in  
civil life.

of Beebe, Que. in the County of Stanstead  
District

Province of Quebec Shipping Clerk  
(Civil Occupation)

Regimental No. D-14011 Unit 74 Battery 6 A/Tk Reg't., RCA do hereby revoke  
all former Wills by me made and declare this to be my LAST WILL.

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

(2) I GIVE, DEVISE AND BEQUEATH unto  
My wife, Ruth Adele Parkhill, Beebe, Que., all my real and  
personal estate whatsoever and wherever situate for her own  
sole use and benefit.

Relationship,  
names and  
address of  
residuary  
beneficiaries.

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

(4) I appoint Amede Campbell Parkhill Ayers Cliff, Que.,  
(Name) (Address)

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

IN WITNESS WHEREOF I have hereunto set my hand this 23 day of June  
1943.

Signed and acknowledged by the Tes-  
tator, in the presence of us present at  
the same time who in his presence, at  
his request, and in the presence of  
each other have hereunto subscribed  
our names as witnesses.

Douglas C. Parkhill  
(Signature of soldier)

First witness  
sign here.

(5) Signature ablogg  
Civil Address 1 Murray Ave., Westmount, Que.  
Civil Occupation Bank Clerk

Second witness  
sign here.

Signature gbea  
Civil Address 311 Manning Ave., Verdun, Que.  
Civil Occupation Office Clerk

(Witnesses are not to be beneficiaries.)

[OVER]

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA CANADA

North American Life Assurance Co.,  
4 Wellington Street, East,  
Sherbrooke, P.Q.

Reference your letter of August 23rd, 1944,

The reverse side of this paper is hereby certified to be a true photostat copy of a Will on file in this Branch of Douglas Campbell Parkhill, named therein, who died on the 24th day of July, 1944, while serving in the Armed Forces of Canada on Active Service.

dated at Ottawa aforesaid  
this 24th day of October, 1944.

• • • • •  
(R.G. Phelan) Captain

A Notary Public in and for  
~~the Armed Forces of Canada.~~  
the Province of Ontario.



Beabe, Que.

September 12th, 1944.

Estates Branch  
Dept of National Defence  
Ottawa.

D-14011, D.C. Parkhill

Dear sir:

In filling out the necessary form required by Quebec, I find that the Collector of Succession Duties at Quebec require a copy of the will;

My husband late Douglas C. Parkhill a sergeant in His Majesty's armies Overseas D-14011, died at the front the 24 th July, 1944.

Apparently this would apply for Ottawa in order to obtain releases.

I await an early reply.

Yours truly,

(Ruth Adele Parkhill)

*Ruth Adele Parkhill*

Director of Estates

Regimental No. D.14011 Rank Sergeant

PARKHILL

Douglas Campbell

Surname

Christian Names

Unit 6th Anti-Tank Regiment R.C.A. (CA)

Date of Death 24-7-44 Place of Death Overseas (France)

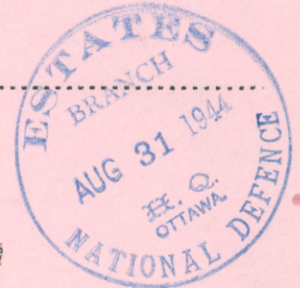
Next-of-kin Mrs. Ruth Parkhill Relationship Wife

Address C/O A.J. Soutiere, Beebe, Quebec.

M.F.M. 5 Copy Herewith.

Will Wills d/17-4-42, & d/23-6-43 Herewith.

Date 28-8-44



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

JEC/GSM

(1) I, Douglas Campbell Parkhill, of the Village  
(Name in Full) (City, Town, Village, Township)

Address in civil life.

of Rock Island, in the County of Stanstead  
District

Province of Quebec, Canada Shipping Clerk  
(Civil Occupation)

Regimental No. D-14011, Unit 74th Bty. A/T. RCA, dCA hereby revoke all former Wills by me made and declare this to be my LAST WILL.

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

(2) I GIVE, DEVISE AND BEQUEATH unto "My Father" Mr Amede Parkhill.

Residing at;- Ayer's Cliffz P.Q. Canada

All my estate both real and personal

Relationship, names and address of residuary beneficiaries.

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

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

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

IN WITNESS WHEREOF I have hereunto set my hand this 17 day of April 1942.

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

Douglas C. Parkhill  
(Signature of soldier)

First witness sign here.

(5) Signature G. Boucher & D. Bruyere.  
Civil Address St. Eulais. Co. Quebec.  
Civil Occupation Clerk.

Second witness sign here.

Signature Louis N. Hebert & St. Monist P 2  
Civil Address 4300 Chouinard St. Montreal P 2  
Civil Occupation Salesman

(Witnesses are not to be beneficiaries.)

#### NOTE

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

- (1) Example: I, John Charles Jones, of the City of Marlowe, in the County of Carleton, Province of Ontario, Mechanic, Regimental No. 1234, Royal Blankshire Regiment.
- (2) If only *one* beneficiary for all your estate, complete as example: "my wife, Mary Jones of 26 Cherry Ave., Ottawa, Ont., all my estate," in which event, strike out clause (3) entirely.  
If *more than one* beneficiary, set out in clause (2) what each is to receive, such as  
"my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont., \$.....00, and my household goods and effects,"  
"my brother, Thomas Jones, 80 Yonge St., Toronto, Ont., \$.....00,"  
"my sister, Margaret Jones, 80 Yonge St., Toronto, Ont., \$.....00,"  
"my friend, John Smith, 60 LaSalle St., Winnipeg, Man., \$.....00,"  
and any personal gift, if desired. Then complete clause (3) as to the balance of your estate.
- (3) If balance of estate is to one person, complete as example: "my wife, Mary Jones, 26 Cherry Ave., Ottawa, Ont." Another example: "my father, Jack Jones, and mother, Jessie Jones, 80 Yonge St., Toronto, Ont., equally," or as desired.
- (4) Fill in name of Executor or Executrix, example: "John Doe, 24 Smith Street, Blankville, Ontario, Salesman," or, if Executrix, "Jane Doe" and address. A beneficiary under the Will may be appointed Executor or Executrix. It is preferable that the person appointed as Executor should not be on, or likely to be on, Active Service.
- (5) The soldier will date the Will and sign same. Two witnesses must sign in the presence of the soldier, and each witness should fill in his or her full civil address and occupation. No one who is a beneficiary shall act as a witness. It is preferable, though not essential, that the witnesses be persons not on Active Service.  
When completed, leave Will with Commanding Officer for transmission to the Records Office for safe custody.

#### GENERAL

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



DISCHARGE DOCUMENTS HAVE BEEN DETACHED  
AND PLACED IN DOCUMENT ENVELOPE IN  
RECORD OFFICE, N.D.H.Q.

Director of Records  
A. Branch.  
JUL 26 1945  
Nat. Defence Hq.  
Ottawa - Canada.

Receipt is Acknowledged

DATE JUL 25 1945

C.A.S.F. A. 28

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

Original on H.Q. File

405-P-15726



- CASUALTY SECTION EXTRACT FORM -

Message Received from.....21/CAS/1570.....

Date Message Received.....28 JUL 44

A  
474

AEF

REGIMENTAL NO. RANK NAME FULL CHRISTIAN NAMES  
. D14011 SGT PARKHILL DOUGLAS CAMPBELL  
UNIT.....6. A/TK REGT.....

UNIT SERIAL #  
814

CATEGORY AND DIAGNOSIS

KILLED 24 JUL 44

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

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

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

NEXT OF KIN RUTH A. PARKHILL RELATIONSHIP WIFE

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

Address... 90 MR. A. J. SOUTIERE  
BEEBE QUE CAN

HOME TOWN... ROCK ISLAND P.O. CAN

Cable # 8495 Inland Tel. #

REMARKS:-

M100  
Verification Clerk's Signature

File No 405-P-15541

REBURIAL

NO DI4011

RANK Sgt

NAME PARKHILL, D.C.

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

LOCATION OF CEMETERY Beny-Sur-Mer, France.

GRAVE LOCATION Plot 15, Row F. Grave 1

AUTHORITY 54-27-88-2 Vol. 19

Reburial list.

PAPERS RELATING TO WAR SERVICE GRATUITY REMOVED AND PLACED ON W.S.G. FALSE

E.R. 1(C)

D. R. 9

From Section

701

Date

20 DEC 44

Computer

A. B. Loggins

Auxiliary Nominal Roll No. 144

TO: SPECIAL SECTION

Regt'l No.

Rank

Name

Reason

D 14011

SGT

PARKHILL

DOUGLAS ~~CAMP~~

CAMPBELL

TOS <sup>0</sup>/<sub>5</sub>

25943

B. e (e) and

# FIELD SERVICE

MER

403-P-13541  
9/31B Army Form B. 2090A.  
40/P & S/2551 (5504)

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 } 6 Cdn A/T  
OR CORPS }  
Squadron, Troop }  
Officer's Personal No. (if known) } D-14011 Battery or Company } Sgt  
Soldier's Army No. } Rank

Surname PARKHILL Christian Names D.C.

Died { Date 24 Jul 44 Place France  
Cause of Death\* K/A

Nature and Date of Report A.F.W. 3014/70 d. 29 Jul 44

By whom made Cdn Sec HQ, 2 Ech 21 A Gp

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

Burial { Place Beny-sur-Mere 987815 Date 25 Jul 44  
By whom reported C.F.

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 } England Signature of Officer in charge of Section } M. Racine, Lieut  
Date } 10 Aug 44 Adjutant-General's Office at the Base } for Officer i/c

Cdn Sec HQ, 2 Ech 21 A Gp

## DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

1. PLACE OF DEATH	Municipal or county	<b>IN THE FIELD (FRANCE)</b>						Official name of civil municipality or township	Place an X over the word which applies to this municipality or this territory City   Town   Village   Parish   Township							
	Street							No.	Hospital or Institution							
2. LENGTH OF STAY	(a) In hospital or institution	Years	Months	Days	(b) In municipality where death occurred	Years	Months	Days	(c) In Province	Years	Months	Days	(d) In Canada (if immigrant)	Years	Months	Days
3. NAME OF DECEASED	Surname	<b>PARKHILL</b>						Do not write in this space	CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH							
	Given names	<b>Douglas Campbell</b>							22. Date of death	<b>July</b>	<b>24th</b>	<b>19 44</b>				
4. RESIDENCE	Street							No.								
	Official name of civil municipality or township	<b>Rock Island</b>														
Municipal county		<b>Quebec</b>														
5. SEX	6. NATIONALITY (Citizenship)	7. RACIAL ORIGIN	8. Single, Married, Widowed or Divorced (Write the word)													
<b>M</b>			<b>Married</b>													
9. If married give name of wife or husband of deceased																
10. BIRTHPLACE (Province or Country)		<b>Quebec</b>														
11. DATE OF BIRTH		<b>December</b>	<b>18th</b>	<b>1916</b>												
		(Month)	(Day)	(Year)												
12. AGE OF DECEASED		Years	Months	Days	If less than one day old											
		<b>27</b>			.....hrs. or.....min.											
OCCUPATION	13. Trade, profession or kind of work, as spinner, teamster, office clerk, etc.		<b>Shipping Clerk</b>													
	14. Kind of industry or business, as cotton-mill, lumbering, bank, etc.															
	15. Date deceased last worked at this occupation		16. Total years spent in this occupation													
17. NAME			18. BIRTHPLACE (Province or Country)													
FATHER		<b>PARKHILL, Amede</b>														
MOTHER (Maiden Name)																
19. Place of burial, cremation or removal		<b>France</b>														
20. Date of burial		.....19.....														
21. PLACE OF REGISTRATION OF THIS BURIAL	(a) Name of parish or church															
	(b) Civil municipality of															
	(c) Municipal county															
	(d) Date	.....19.....	(Month)	(Day)	(Year)											
23. I HEREBY CERTIFY that I attended deceased from		.....19..... to.....19.....														
and last saw him.....alive on.....		.....19.....														
24. CAUSE OF DEATH																
I Immediate cause (a) <b>Killed in action.</b>																
Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc. due to																
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause). (b)..... due to																
(c).....																
II Other morbid conditions (if important) contributing to death but not causally related to immediate cause. (c).....																
III If a communicable disease is mentioned on this certificate, (a) Date of appearance.....19..... give (d) Duration of disease.....days																
25. If a woman, was there a puerperal condition?.....																
26. Was there a surgical operation?.....Date of.....19.....																
State findings.....Was there an autopsy?.....																
27. If death was due to external causes (violence) fill in also the following:—																
Accident, suicide or homicide.....Date.....19..... (State which)																
Manner of injury..... (How sustained)																
Nature of injury.....																
Specify whether injury occurred in industry, in home, or in public place.....																
Signed.....M.D.																
Address.....Date.....19.....																
28. Signature of person who fills in the form (curate, coroner, hospital authority, etc.)																
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 the form as authentic.																

Director of Records Dept. of National Defence.

NOV 24 1944



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	N'écrivez pas dans cet espace
	Noms de baptême ou prénoms	

4. RÉSIDENCE	Rue	No.
	Nom officiel de la municipalité civile ou du canton	
Comté municipal		Province

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

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

10. LIEU DE NAISSANCE (Province ou pays)

11. DATE DE NAISSANCE

(jour) (mois) (année)

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

OCCUPATION	13. Métier, profession ou occupation, ex. tisserand, voiturier, employé de bureau, etc.
	14. Genre d'industrie ou d'entreprise, tel que filature de coton, industrie du bois, banque, etc.
	15. Dernière date à laquelle le défunt vaquait à ce travail
16. Nombre d'années occupées dans cette profession	

17. NOM	18. LIEU DE NAISSANCE (Province ou pays)
---------	--

PÈRE	
------	--

MÈRE (Nom de fille)	
---------------------	--

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

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

21. LIEU DE L'ENREGISTREMENT DE CETTE SÉPULTURE	(a) Nom de la paroisse ou église
	(b) Municipalité civile de
	(c) Comté municipal
	(d) Date.....19.....
(jour) (mois) (année)	

## CERTIFICAT MÉDICAL CONFIDENTIEL DE DÉCÈS

22. Date du décès.....19.....

(jour) (mois) (année)

23. JE CERTIFIE PRÉSENTEMENT que j'ai donné mes soins au défunt depuis le.....19..... jusqu'au.....19.....

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

24. CAUSE DU DÉCÈS

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

(a)..... dût à

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

(b)..... dût à

(c).....

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

(a).....

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

(a) Date d'écllosion.....19.....

(b) Durée de la maladie.....jours

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

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

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

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

Accident, suicide ou homicide..... Date.....19.....

(Spécifier)

Manière de la blessure.....

(Dans quelle circonstance)

Nature de la blessure.....

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

Signature..... M.D.

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

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

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

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

(For English see other side)



DEPARTMENT OF NATIONAL DEFENCE  
ARMY

In reply quote No. ~~YOUR~~ L. 54-1-5 (REC) of 18 Aug 44

TO: D.R.O.  
M.D.I

Canadian Bureau of Identification,  
#8 Temporary Building,  
OTTAWA, 28 Aug 44

RE: PTE. W.D.H.L. PERC C102090

A29 C.I.C.T.C.

405-P16-541

Identification Card, M.F.M. 182, herewith.

N.R. No.
3746
Film No.
1671

2. The m/n, in whose name the Identification Card is created, will acknowledge receipt of this M.F.M. 182, by signing in the space provided hereon.

3. This form is to be returned to C.B.I.

Identification Card Received

Pte. Perc, W.D.H.L. C-102090

M.F.A. 1826A  
1.000M-5-43 (9996)  
H.Q. 1772-39-2009

Signature Date

*W.E. Goodfellow* *sek*  
N.E. Goodfellow, Major,  
Officer i/c C.B.I.



405-P-15541  
(RecordsG)

Ottawa, October 31st, 4.

North American Life Assurance Co.,  
4 Wellington Street S.,  
Sherbrooke, P.Q.

No. D. 14011, Sergeant Douglas C. PARKHILL

Gentlemen:

As requested in your letter of October 26th, enclosed herewith is an official certificate of death in respect of the marginally named Canadian soldier.

Yours truly,

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

*H. G. P.*

405-P-15,541

*A Mutual Company*

NORTH AMERICAN LIFE



ASSURANCE COMPANY

HEAD OFFICE

TORONTO 1, CANADA

C. ROSS HEALY, B.S.A.  
Branch Manager

Phone 2570

4 Wellington St., S.  
SHERBROOKE, P.Q.

OCT 28 1944  
Nat. Defence Hqr  
Ottawa, Canada  
October 26th, 1944,

Director of Records,  
Department of National Defence,  
Army,  
Ottawa, Ont.

Dear Sir:

Re: PARKHILL, Douglas Campbell,  
Reg. No. D. 14011, C.A.

We are in receipt of a photostatic copy of the Will in this case from the Estates Branch, but we have not as yet received the official certificate of death. Kindly let us have this document at your earliest convenience.

Yours very truly,

*H. Heagler*  
Cashier.

GM/EB

*When referring to policies please quote their numbers*

PA

405-P-15541

29-8-44

WOUNDED (Continued)  
\*\*\*\*\*

ROYAL CANADIAN CORPS OF ENGINEERS

6. DICKSON, HENRY EWEN, MAJOR, MRS. EVELYN M. DICKSON (WIFE),  
Box 636 KENTVILLE, N.S.

CENTRAL ONTARIO REGIMENT

7. PICKUP, JOHN DOUGLAS, LIEUT., JOHN WELLINGTON PICKUP (FATHER),  
116 GLENAYR RD., TORONTO 10, ONT.

ROYAL CANADIAN ARMY SERVICE CORPS

8. LABRIE, ARTHUR JOSEPH, CAPT., MRS. REBECCA LABRIE (MOTHER),  
3677 JEANNE MANCE ST., MONTREAL, QUE.

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

KILLED IN ACTION  
\*\*\*\*\*

ROYAL CANADIAN ARTILLERY

9. JACKSON, HARLAN ELLIOTT, GNR., F6081, MRS. HILDA CAMERON (SISTER),  
SPRY HARBOUR, N.S.

10. PARKHILL, DOUGLAS CAMPBELL, SGT., D14011, MRS. RUTH PARKHILL (WIFE),  
c/o A.J. SOUTIERE, BEEBE, QUE.

11. RUSSELL, ERNEST GARDNER, GNR., D14109, MRS. BERNICE RUSSELL (MOTHER),  
SUTTON, QUE.

12. SHELDON, HOLLIS FRANCIS, L/BDR., D14041, RALPH RUBERT SHELDON (FATHER),  
BEEBE, QUE.

13. ZWICKER, WILLIAM RALPH, GNR., D76215, MRS. JOY C. ZWICKER (WIFE),  
MAHONE BAY, N.S.

ROYAL CANADIAN CORPS OF ENGINEERS

14. LANCASTER, GEORGE, SGT., B23030, GEORGE LANCASTER (FATHER),  
SANDWICH, WHITEHAVEN, CUMBERLAND,  
ENGLAND (W.C)

EASTERN ONTARIO REGIMENT

15. COONEY, RUSSELL HOWARD, PTE., C65009, MRS. MARGARET HUGHEY (FOSTER-  
MOTHER), R.R. #1, CHEMONG RD.,  
PETERBOROUGH, ONT.

QUEBEC REGIMENT

16. MORRISON, BENJAMIN, CPL., D81043, MRS. BEATRICE MORRISON (MOTHER),  
82 ST. LOUIS ST., ST. LAMBERT, QUE.

MANITOBA REGIMENT

17. FRASER, FREDERICK WILLIAM, CPL., H59618, MRS. SARAH FRASER (MOTHER),  
5 PICADILLY ST., BROOKLANDS, MAN.

18. GOODWIN, MORRIS WESLEY, PTE., H10962, MRS. PEARL MARGARET GOODWIN  
(MOTHER), ATIKOKAN, ONT.

19. WAYTE, THOMAS LLOYD, PTE., H20501, MRS. LENA G. WAYTE (WIFE),  
Box 87 GLENBORO, MAN.

Director of Estates

Regimental No. D.14011 Rank Sergeant

PARKHILL

Douglas Campbell

Surname

Christian Names

Unit 6th Anti-Tank Regiment R.C.A. (CA)

Date of Death 24-7-44 Place of Death Overseas (France)

Next-of-kin Mrs. Ruth Parkhill Relationship Wife

Address C/O A.J. Soutiere, Beebe, Quebec.

M.F.M. 5 Copy Herewith.

Will Wills d/17-4-42, & d/23-6-43 Herewith.

Date 28-8-44

*Mem. X. Widow  
mother  
8/9/44  
dec'd  
H.A.Z  
for  
C.L. Laurin) Colonel,  
Director of Records,  
for Adjutant-General.*

JEC/GSM

Mrs. Ruth Parkhill,  
c/o A.J. Soutiere,  
Beebe, Que.

Ottawa, 18th August,

4


RE: D14011 Sergeant Douglas Campbell PARKHILL

Dear Mrs. Parkhill:

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

Yours truly

GR/MAS

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



18th August, 1944.

Mrs. Ruth Parkill,  
c/o A. J. Soutiere,  
Beebe, P.Q.

Dear Mrs. Parkill:

It was with deep regret that I learned of the death of your husband, D14011 Sergeant Douglas Campbell Parkill, who gave his life in the Service of his Country in France on the 24th day of July, 1944.

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

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

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

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

AUG 15 1944

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





DEPARTMENT OF NATIONAL DEFENCE  
ARMY

Ottawa, Canada,

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

11th August, 1944.

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

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

Regimental No. .. **D.14011** ..... Rank. **Sergeant** .....

Surname..... **PARKHILL** .....

Christian Names..... **Douglas Campbell** .....

Nature of Casualty..... **Killed in action** .....

Date of Casualty..... **24-7-44** .....

Address at time of enlistment..... **Rock Island, Que.** .....

**Date Enlisted: 17-4-42** .....

Date of Birth..... **18th December, 1916** .....

Marital Status (On enlistment)..... **Single** .....

Marital Status (Present)..... **Married** .....

Occupation..... **Shipping Clerk** .....

Name and address of Next-of-Kin..... **Mrs. Ruth Parkhill,**  
**c/o A.J. Soutiere, Beebe, Que.** .....

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



# CANADIAN PACIFIC TELEGRAPHS

*World Wide Communications*

W.D.NEIL, GENERAL MANAGER OF COMMUNICATIONS, MONTREAL

**RAB51 12 COLLECT**

**BEEBE JCT QUE 31 840A**

291 JUL 31 1919 3011

**DIRECTOR OF RECORDS**

**OTTAWA ONT 80**

**TELEGRAM FOR MRS RUTH PARKHILL JULY TWENTY NINTH DELIVERED THIS AM  
AGENT**

BRANCH  
JUL 31  
11:30

Message 18893 D14011 Sgt Douglas Campbell Parkhill

*PLA*

*gnc*

TRISA

MA SINT GOSVILDS NTRIN YTRWVT VJUL JJIMWAP NTRN SBN 803 HAKCJLST

TWO AWATTO

SENGON W BOYTRIS IC

ACAS H 210 701 2222

WHAT IS COLLECT

## OVERSEAS CASUALTY RESEARCH

CABLE NUMBER 8495 PAGE 1 DATE 28-7-44REG'TL NUMBER D14011 RANK SGTNAME PARK HILL DOUGLAS CAMPBELL  
(SURNAME) (CHRISTIAN NAMES)SERVICE UNIT 814 6 A TK REGT  
NATURE OF CASUALTYAEF Killed DATE 24-7-44DATE OF BIRTH  
18<sup>th</sup> DAY Dec. MONTH 1916 YEAR Que.NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 & RELATIONSHIP  
ADDRESS MRS RUTH PARKHILL (WIFE)  
C/O A. J. SOUTIERE, Rock Island, Que.  
BEEBE, P. Q. DAB 26-1-43

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENT'S NAMES  
ADDRESS  
(IF SOLDIER MARRIED OVERSEAS)RELIGION United Church TRADE OR CALLING Shipping Clerk LANGUAGES EnglishMARITAL STATUS ON ENLISTMENT Single PRESENT MARITAL STATUS MarriedSOLDIERS ADDRESS ON ENLISTMENT Rock Island, Que. Montreal South, Que.  
17<sup>th</sup> April 1942CABLE CHECK KRW N. OF K. CHECK OWH TELEGRAM CHECK Reg.

COPY FOR RESEARCH SECTION

S/L. 3044  
6<sup>th</sup> A/Tk Regt.

LS

COPY OF CABLES FROM CANRECORDS

#8495 LONDON 28/0715/JUL/44

BATTLE CASUALTIES ABF

RECEIVED: 14:19/28/7/44

C 65009 PTE COONEY RE	752	KILLED 22 JULY
D 81043 CPL MORRISON B	186	KILLED 24 JULY
D 14109 GNR RUSSELL EG	814	KILLED 24 JULY
D 14041 L/BDR SHELDON HF	814	KILLED 24 JULY
<u>D 14011 SGT PARKHILL DC</u>	814	<u>KILLED 24 JULY</u>
LIEUT MCROBERTS Bruce Herbert	753	KILLED 25 JULY
B 23030 SGT LANCASTER G	1557	KILLED 25 JULY
K 65964 TPR GAUTHIER OL	3	INJURED AND DIED OF INJURIES 26 JULY SECOND CASUALTY
OUR 8477 N 104654 MACAULAY		DIED OF WOUNDS 23 JULY
L 10361 GNR DUGUID WG	170	SW RIGHT CHEEK AND SKULL WOUNDED DNK SERIOUS 28 JULY
D 56012 PTE BENJAMIN H'	186	GSW HEAD SERIOUS 23 JULY WOUNDED DNK
D 57533 L/CPL BEAUDRY R	188	GSW MOUTH AND RIGHT SHOULDER WOUNDED DNK SERIOUS 28 JULY
D 15162 L/CPL MILLS HC	718	SW HEAD BOTH LEGS AND FEET WOUNDED DNK SERIOUS 28 JULY
L 36748 PTE MONKMAN JB	191	WOUNDED SLIGHT DNK
LIEUT PICKUP John Douglas	753	WOUNDED DNK
CAPT LABRIE Arthur Joseph	763	WOUNDED DNK
MAJOR DICKSON Henry Ewen	1557	WOUNDED DNK
L 36302 TPR BROSKI L	3	WOUNDED 25 JULY
B 83267 L/BDR MCGRAN C	142	WOUNDED 25 JULY
B 5970 PTE BLACK JJ	967	WOUNDED 25 JULY
B 44639 GNR RUSSELL JP	991	WOUNDED 25 JULY
F 12111 GNR MCKINNON HF	142	WOUNDED 24 JULY
G 19207 PTE MARTIN S	742	WOUNDED 24 JULY
B 136447 PTE MARCHAND G	743	WOUNDED 24 JULY
B 144594 PTE HARRISON L	946	WOUNDED 24 JULY
A 117199 PTE OBRIEN RD	946	WOUNDED 24 JULY

7 KILLED 17 WOUNDED 1 DIED OF WOUNDS 1 DIED OF INJURIES

TOTAL 26 NAMES

34364/FCG/28/13050/JUL/44

CANMILITARY

PARKHILL DOUGLAS CAMPBELL

REGIMENTAL DOCUMENTS

H.Q. FILE No. 405-R 15541

D 14011

WSG  
COMPLETED

WILL  
REQUIRED  
03

WILL  
REQUIRED  
03

NAME..... REGIMENTAL No.....

UNIT OF ENLISTMENT..... DIST DEPOT MD 4..... RANK..... GNR.....

CONTENTS	NON-EFFECTIVE BY
COMBINED DECLARATION FORM OR ATTESTATION AND MEDICAL HISTORY (M.F.M.1 & 1A) OR (M.F.M.2 & 2A)	DECEASED, DEATH
SERVICE AND CASUALTY FORM (M.F.M.4 & 4A) (A.F.B. 103)	DATE July 24/44
PARTICULARS OF FAMILY (M.F.M.5)	CAUSE
FIELD CONDUCT SHEET (M.F.M.6) (A.F.B.122)	AUTHORITY
CERTIFICATE OF SERVICE (M.F.M.8) COPY OF, OR DISCHARGE CERTIFICATE (M.F.M.7) COPY OF	M DISCHARGE
FORM OF WILL (M.F.M.10 OR M.F.M.10A)	
DENTAL RECORD (M.F.B. 465)	DATE
MEDICAL REPORT OR CASE HISTORY SHEET (M.F.B. 313) or (P. & N.H. 100)	REASON
MEDICAL BOARD PROCEEDINGS (M.F.B. 227)	AUTHORITY
TRANSFER CLOTHING STATEMENT (M.F.C. 644)	
LAST PAY CERTIFICATE (M.F.D.930A)	
PROCEEDINGS ON DISCHARGE (M.F.M. 23)	
PROCEEDINGS OF COURT MARTIAL (M.F.B. 271)	DESERTION
DECLARATION OF COURT OF ENQUIRY (Copy of Record from M.B. 68)	DATE
PAY SHEETS	AUTHORITY
CARDS	
SUNDRY	

PROCESSED

DOCUMENTS CENTER PERSONNEL  
1512  
DISCHARGE CENTER

RETURN THESE DOCUMENTS TO THE SERVICE RECORDS DEPT. OF VETERANS AFFAIRS

MICROFILMED  
FILM REF WSR 10461-2

X

VH

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION (DEATH)

NUMBER

D.14011

RANK

Sergeant

SERVICE UNIT

6th Anti-Tank Regiment R.C.A. (C.A.)

NAME

PARKHILL, Douglas Campbell

DATE OF BIRTH

18th December, 1916

DATE OF ENLISTMENT

17-4-42

MARITAL STATUS

Married

RELIGION

United Church

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

wife

NAME ADDRESS D.A.B.

Mrs. Ruth Parkhill,

ADDRESS

c/o A.J. Soutiere,

Beebe, P.Q.

ADDITIONAL PERSON TO BE NOTIFIED

ADDRESS

PARENTS NAME

ADDRESS

( IF SOLDIER MARRIED OVERSEAS )

AUTHORITY CAS. SIG. NO.

Canrecords 8495

CASUALTY DETAILS

Killed in action

H.Q.405-P-15,541

DATE

24-7-44

*Handwritten signature*

*Handwritten signature*

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

YES/NO

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

YES/NO

DATE

11-8-44

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

MA

DIRECTOR OF RECORDS

6

COPY FOR DOCUMENT FILE





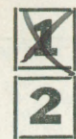




CANADIAN DENTAL CORPS  
COMPLETED. 16-6-42

Chart existing dental conditions.

Detail only necessary treatment.

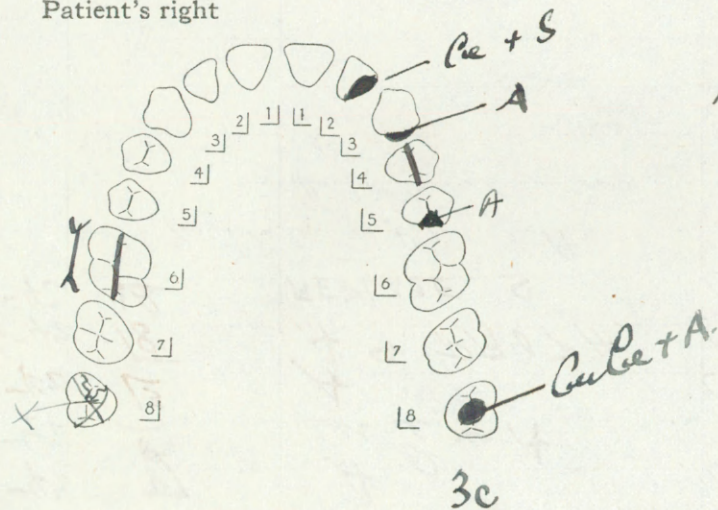


NAME PARKHILL Douglas Campbell RANK GNR SGT AGE 25 REG. No. D-14011

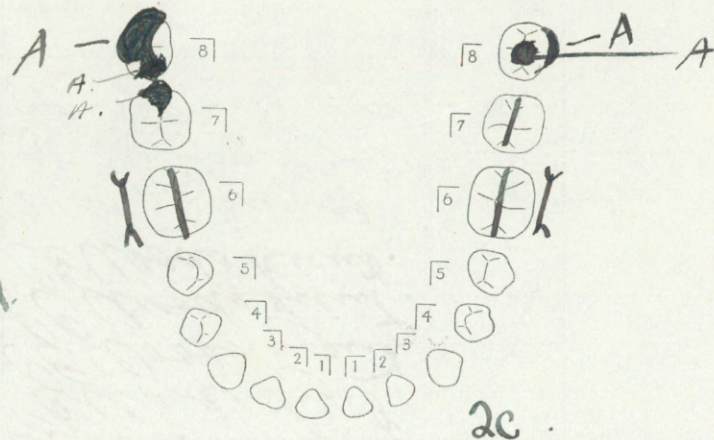
UNIT 74th. Fld. A/T (RCA) CA. 6417. DATE 17-4-42 19  

Use black, blue or blue black ink. Write plainly and abbreviate as indicated below.

Patient's right



Patient's left



ORAL HYGIENE

~~Good~~  
Fair  
~~Neglected~~

Strike out  
inapplicable

PROPHYLAXIS required

Yes  
~~No~~

words.

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.

*W. J. H. S. Y. Capt*  
Signature and unit of examining officer  
NO. 24 COY. C.D.C.

Indicate surfaces of teeth as follows:

Mesial — M                      Labial — La  
 Distal — D                      Buccal — Bu  
 Incisal — I                      Lingual — Li  
 Occlusal — O

Indicate tooth by the notation below.

8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8
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
29-5-42	12	Ce + S	C Woods Lieut.				
29-5-42	18	A	C Woods Lieut.				
3-6-42	87	A	C Woods Lieut.				
8-6-42	51	Curve + A	C Woods Lieut.				
12-6-42	13	A	C Woods Lieut.				
16-6-42	18	A 9 PROPH.	C Woods Lieut.				
24-6-42	12	REPLACE S	C Woods Lieut.				
19-1-43	15 D.O. 87 M.O. 77 D.O.	A.	By Stapleton Capt				
21-1-43		Propylaxis	By Stapleton Capt				
21-1-43	81	X	By Stapleton Capt				

To be made out in duplicate

M.F.M. 5  
150M-7-41 (1122)  
H.Q. 1772-39-1651

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

INSTRUCTIONS.

- (a) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the Canadian Army (AF) or R.C.A.F. ON ACTIVE SERVICE.
- (b) All questions, etc., must be completed.
- (c) Both copies of the form are to be forwarded by the Officer Commanding the unit for each officer and other rank, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District, Command, or Camp Paymaster, to the Officer i/c Records, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster of the unit, when transferred to another unit the copy retained by the Paymaster will be sent to the Paymaster of the individual's new unit.

(1) Name of Officer or Other Rank..... **PARKHILL**  
(Surname first—Christian names in full—Block capitals)

**Douglas Campbell**

(2) Regimental or Official Number and Rank..... **D-14011**..... **Gnr.**

(3) Unit..... **74th Bty. A/T RCA. CA.**

(4) Are you married?..... **NO**

(5) If married, state,

(a) Full name of your wife..... **NIL**

(b) Present postal address of wife..... **NIL**

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

**NIL**

(7) Are you a widower?..... **NO**

(8) Have you any children?..... **NO**..... 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.....

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?.....

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

NO

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

If so, state name and address, occupation Mr Amede Parkhill Farmer.

Ayer's Cliff P.Q. Canada

(12) If your father is a widower and is totally incapacitated from earning a living—are you his sole or partial support?..... NO

(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?..... NO

If so, state name and address..... N/A

NIL

(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?..... NO

(17) Are you contributing to the support of any dependents, other than those shown above?.. NO  
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment.

If so, state the following particulars:—

Relationship ..... NIL

Full Name .....

Postal Address .....

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

NIL

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

If so, in what Company?..... North American Life Co.

(Give number of policy)

Have you made arrangements for payment of your Insurance Premium?..... YES

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

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

*Douglas C. Parkhill*  
(Signature of officer or man)

Date..... 17-4-42

*B. J. Sprenckel*

Date..... 17-4-42

NO. 4-DISTRICT DEPOT A.F.

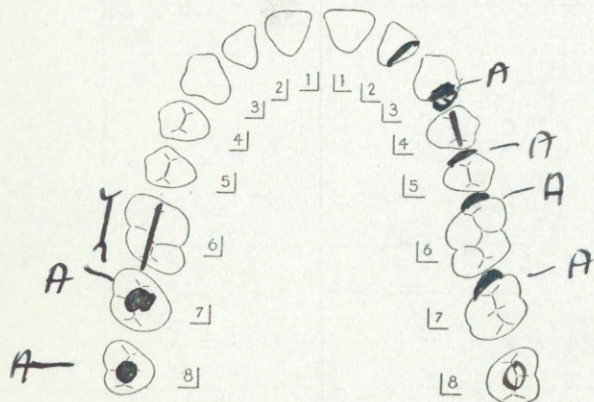
N.B. (If parent(s) of the officer or other rank concerned has (have) been replaced by foster parent(s), questions relating to fathers and/or mothers above should be altered and answered as applicable.

NAME PARKHILL Douglas Campbell RANK GNR AGE 25 REG. No. D-14011

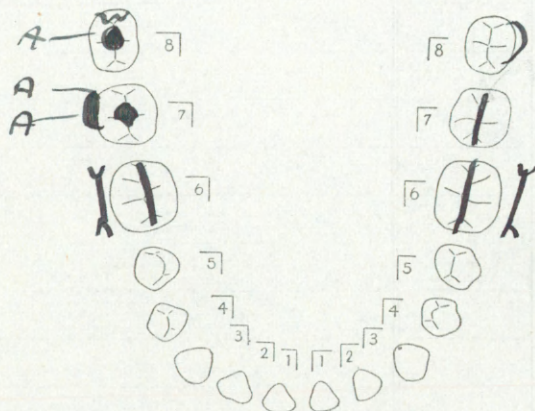
UNIT 74th. Flia. A/T (RCA) CA. DATE 17-4-42 19  

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Name PARKHILL D.C.**M.F.M. 1 & 2 (a)**  
250M-7-41 (1151)  
H.Q. 1772-39-1646

REPORT		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		Granted furlough from 5-10-42 until 18-10-42 and receives 50¢ p.d. in lieu of rations.	A/L/Sgt	5-10-42	6A/TRegt	Petawawa	D.O. 60	5-10-42
		Returned from furlough 18-10-42	"	18-10-42	do	do	D.O. 70	23-10-42
		Promoted to rank of A/Sgt.	A/Sgt.	1-11-42	do	do	D.O. 76	5-11-42
		Granted Christmas Leave from 22-12-42 to 28-12-42	"		do	do	D.O. 100	15-12-42
		Issued Special Leave and Furlough Warrant	"	21-12-42	do	do	D.O. 1	1-1-43
		<i>Change of address - met of kin to:</i> <i>Mrs. Ruth A. Parkhill (wife)</i> <i>c/o Mr. A. J. Sautiere, Beche, Que</i>	"	19-1-43	"	"	" 8	19-1-43
		<i>Granted W.E. Leave from 12 Mar 43 to 15 Mar 43</i> <i>(4 days) plus 50¢ per diem R.A.</i>	"	12-3-43	"	"	" 34	9-3-43
		Confirmed in rank of Bdr.	"	1-4-43	"	"	61	21-4-43
		Granted furlough & W.E. Leave from 17-4-43 to 4-5-43 incl. (18 days) 50¢ per diem R.A.	"	17-4-43	"	"	57	12-4-43
		Issued Special Leave & Furlough Warrant	"	17-5-43	"	"	77A	24-5-43
		Granted Embarkation leave from 17-5-43 to 20-5-43 incl. (4 days) 50¢ per diem R.A.	"	17-5-43	"	"	77A	24-5-43
		Issued Special Leave & Furlough Warrant	"	17-5-43	"	"	77A	24-5-43
		Confirmed in rank of Sergeant	Sgt.	21-6-43	"	Debert	89	23-6-43
		Qualified Driver i/c Class III	"	17-7-43	"	"	99	22-7-43

Statement of the Service of No. D-14011

Rank Sgt.

Sheet No. 2

Name Parkhill, D.C.

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

REPORT		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		Wk.e.lv.29-7- to 1-8-43(4 dys) 50¢ R.A.	Sgt.	29-7-43	6 A/T	Debert	102	30-7-43
		S.O.S., C.A. Canada ..... 24-8-43						
		T.O.S., C.A. Overseas ..... 25-8-43	"		"	Y.S.	1	3-9-43
		Disembarked ..... 1-9-43						
		T.O.S. ....						



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DATE OCTOBER 2012