1. NO.	2. RANK OR RATING	3. SURNAME	4. CHRISTIAN NAMES
61331	Private	DESY	Eugene A.

5. UNIT OR SHIP	6. DATE OF CASUALTY	7. H.Q. FILE NO.	8. RELIGION
22nd Battalion	March 13th, 1933.	649-D-1667	Roman Catholic

9. CIRCUMSTANCES OF CASUALTY	10. NAME, RELATIONSHIP AND ADDRESS OF NEXT OF KIN
Died at Montreal, P.Q. Cause - Pulmonary Tuberculosis. Death was due to service, auth.BPC.d.30-6-33.	Miss Melvina Desy, (Sister) 1431 De Bullion Street, Montreal, P.Q.
11. LOCATION OF UNIT AT TIME OF CASUALTY	

CONTRACTOR'S ROLL FOR THIS SOLDIER'S GRAVE DESPATCHED 20 SEP 1933

NOTE:—Items 12, 13 and 14 are not to be completed until grave is permanently located.

12. CEMETERY	13. LOCATION OF CEMETERY	14. GRAVE LOCATION	15. REGISTERED NO. OF GRAVE
Cote des Neiges Cemetery	Montreal, P.Q.	Grave..... Plot..... Private 1887-M Row.....	

16. PHOTOGRAPH OF GRAVE TAKEN	17. EXPOSURE NO.	18. PHOTOGRAPH OF GRAVE AND CEMETERY SUPPLIED TO

19. FURTHER PARTICULARS ON REVERSE SIDE OF SHEET.

M. F. W. 2643
50m.—11-22
H. Q. 172-39-1453

6

ATTESTATION PAPER.

No. 6133

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

		(ANSWERS).
1.	What is your name?	Desy Eugene Adolphe
2.	In what Town, Township or Parish, and in what Country were you born?	Montreal
3.	What is the name of your next-of-kin?	E. A. Desy
4.	What is the address of your next-of-kin?	3213 St Andre
5.	What is the date of your birth?	15 July 1892
6.	What is your Trade or Calling?	Butcher
7.	Are you married?	No
8.	Are you willing to be vaccinated or re-vaccinated?	Yes
9.	Do you now belong to the Active Militia?	No
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	65 Regt. 4 years
11.	Do you understand the nature and terms of your engagement?	Yes
12.	Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?	Yes

Eugene Desy (Signature of Man).

L'E. de Tonnancour (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Desy Eugene Adolphe, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force,** and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Eugene Desy (Signature of Recruit)

Date 22 Octobre 1914. L'E. de Tonnancour (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Desy Eugene Adolphe, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth,** His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Eugene Desy (Signature of Recruit)

Date 22 Octobre 1914. L'E. de Tonnancour (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

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

The above questions 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 this 22 day of Oct. 1914.

IX (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

(Approving Officer)

Colonel

200 M.—8-14.
H.Q. 1772-1-13.

Description of E. C. Desy on Enlistment.

Apparent Age 32 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 4 1/2 ins.

Chest measurement: Girth when fully expanded ..... 32 ins.

Chest measurement: Range of expansion ..... 2 ins.

Complexion ..... fair

Eyes ..... blue

Hair ..... fair

Religious denominations:
- Church of England .....
- Presbyterian .....
- Wesleyan .....
- Baptist or Congregationalist .....
- Other Protestants (Denomination to be stated.) .....
- Roman Catholic ..... R. C.
- Jewish .....

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* ..... fit ..... for the Canadian Over-Seas Expeditionary Force.

Date ..... 22 October ..... 1914.

Place ..... Montreal .....

..... Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

..... having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

..... (Signature of Officer)
Colonel

NOV 27 1914

Date ..... 1914.

(S)

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
Attestation Papers..... 1
Declaration of change of name.....
Authority for special enlistments.....
Documents of re-enlisted men.....
Regimental Conduct Sheet..... 1
Compulsory Stoppages.....
Casualty Forms..... 2.
Proceedings on discharge..... 2.
Corps History Sheet.....
Date and No. of Deposit Receipt for Purchase Money and Amount.....
Parchment Certificate.....
Medical Report for Invalids..... 3
Medical History Sheet..... 1.
Proceedings of Regt. Court Martial .....
Copies of Convictions by Civil Power.....
Company Conduct Sheet..... 2.
Clothing Transfer Certificate..... 1.....
Inventory of Kit..... 1.
Last Pay Certificate.....

22

(M)

DISCHARGE DOCUMENTS

14200

R. O. No.....
H. Q. No.....

Name Desy. Eugene Adolphe
Regt. No. 61331 Rank Pte.
Corps 22 nd Bn.
Med Unfit.

V. to D 4/11/20
R 8-1-20

(H)

A. G. B. (122) – 2 R 149-1
1 Cas card
A.F.I. 1237 – 1
A.F.W. 3172 – 1
Pay card
R 172-1

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

(H)

7.23
17-23
26.1.23

NAME Desy A. Eugene Adolphe

REGT'L NO 61331

H. Q. FILE NO. 649-

RANK AND CORPS Pte 22 Bn. Ind Can Inf.

FOLLOWS NO.

FOLLOWS

CABLE

No.	Date

NATURE OF CASUALTY

22nd Bn

L. L. Job 90581—M. & D. 6314.

M F. W. 42—50M—1-16.
H. Q. 17?-39 853.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 233	No 3. Can. Gen. Hosp. Boulogne	22-5-16	S.W. Lt. Leg.

No. RANK Pte. NAME Désy, Eugene

T. O. S. UNIT 85th Regt

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC. PARTICULARS	AUTHORITY
1914 Aug. 22nd	1914 Aug. 27th	V		
28 Aug.	21 Sept.	V	This man now on 12th Bn. Paylist	Sept. Paylist.

UNIT SAILED
OCT 3 1914

No. 61331 RANK Cpl. (actg) NAME Désy Eugène

T. O. S. 22-10-14. UNIT 22nd Battalion. (French Canadian)
Nov paylist

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Nov 1	Nov 30	~		
	Dec	~	Prom. Cpl.	DO #56. 5-12-14.
1915	1915			
	Jan	~		
Feb 1	Feb 25	~		
" 26	" 28	~	Red. to ranks.	DO #94 26-2-15.
	Mar	~	Forfeits 2 days pay.	DO 112 19-3-15
	Apr	~		
	May	~		
	June	~	1 days pay	DO 186 June "

UNIT SAILED
MAY 20 1915

No. 61331. Rank Pte. Name Dery. E a.

T. O. S. Unit Discharge Depot. Tuebne

M. D. 5

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Oct. no	1916. dates	✓	69th.	

No. Rank Sergt Name Désy C.

T. O. S. Unit 22nd Battalion (French Canadian)

M. D. 1

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 Oct 22	1914 Oct 31	C		

UNIT SAILED
MAY 20 1915

R. 149.

Name Eugene Adolphe Desy *Rank* Pte. *Reg. No.* 61331

Unit 22nd.Batt.

Next of Kin Canada

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O. M	W.O. List
22-5	No.3 Can.G.H.	Boulogne	S.W.Lt.Leg	A233	7151	30-5
29-5	3rd.Nthn.G.H.	Sheffield	do	B.80		
2-8	Can.Conv.H.H.H.	Uxbridge	Do	B133		
18-8	C.C.H.	Woodcote Epsom	Do	B145		
4-9	Discharged		do	B188		

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

H. Q. FILE No. 649-

NAME Desy Eugene Adolphe

REGT'L. No. 61331

RANK AND CORPS Pte. 22nd. Bn.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
M.7151	29-5-16.	Adm. to No. 3 Gen. Hosp. Boulogne May 2 2nd. (wounded left leg).
9274.	10-10-16	Sailed for Canada Oct. 10/16. Injured leg.

L. L. Job 86907--M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
B80	3rd North. Gen. Sheffield	29-5-16.	SW. Lt. Leg.
B 133	Can. Conv. Hillingdon House, Uxbridge	2-8-16	" " " "
B 145	Can. Conv. Woodcot Pk. Epsom	18-8-16	" " "
B188	Discharged	4-9-16	" " "
16.	M.H.C.C. Montreal	15-1-17.	Inpatient - Class "A"
178.	M.H.C.C. Montreal	13-7-17.	G.H.C.15. to L.D.M.S.
186	M.H.C.C. Montreal	19-7-17.	G.H.C.15. to L.D.M.S. C2
243	" " " " "	25-9-17	SOL Out P. G.H.C.H to H.Q. A Unit. P.C.508
239	" " " " "	22-9-17	Trans L.D.M.S to H.Q. A Unit.
239	" " " "	11-9-17	Trans DCH to L D M S.
277	" " " " "	3-10-17	Disch. from H.M.S, HQ. "A" Unit

649-D-1667.

CARD NO.

SURNAME. Desy

CHRISTIAN NAMES Eugène Adolphe

S.O.S. Dis. 31-10-17.

REGL. No. 61331 RANK Pte.

UNIT 22nd Bn.

FORMER CORPS 65th. Regt.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Desy, E. A.

RELATIONSHIP TO SOLDIER Bro.

ADDRESS 3213 St. Andre St. Montreal P. Q. Can.

COUNTRY OF BIRTH Montreal, P. Q. Can. DATE

PLACE OF ATTESTATION Montreal DATE Oct. 22, 1914

Sailed from Halifax Per. S.S. Saxonia 20-5-15, 84/6.

R/C 18-10-16

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

DESY, Eugene Adolph 61331

Pte. 22nd Bn. 649-D-1667

medals desp.

cross nil

unmarried
mother dead

Death attributable to
Military Service

Mle
Ham

Number 61331 Rank Pte.

Surname DESY

Christian Name Eugene Adolphe

Units 22nd Bn. Con. Tr. Theatre of War France

Date of Service 15-9-15

Remarks

Latest Address 3213 St-Andrew Street
Montreal
P. Q.

Roll No. Blag/18593

200m.-2-21.M.

(This form to be filled in by all ranks on voyage to Canada.)

o.....

R	RANK	SURNAME	INITIALS	UNIT
.....	.....	.....	.....	.....

al address..... .....
(Street) (City or Town) (Province)

one person to be notified of arrival.....

.....

Station in Military District to which a furlough warrant is required.....

..... Railway.....

d, is your wife on board.....Number of children on board..... .....

tination.....

(Sgd.).....

D.M.S. 1300.

Surname	Christian Name or Names	Reg. No.
Desy.	a.	61331.

Rank	Unit	Co.	Troop	Batty
Pte.	22 Bat.			

Hospital — Date of Admission

Transferred 3 Can Gen. Boulogne Hosp. 22.5.16
3rd North. Gen. Sheffield Hosp. 29.5.16.
Hillingdon Ho. Cowes. Hosp. 2.8.16.
To Epsom " Hosp. 18.8.16.

Diagnosis S.W.L. leg.

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date Dec. 4.9.16.

REMARKS

C.L. 30.5.16. A233.
" 2.6.16. B.80.
5.8.16. B133.
22.8.16 B146.
18.10.16 B188.

A.M.D. 2 Dept.
Bch. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Rank Name DESY Eugene Adolphe. Reg'l No. 61331.

Unit 22nd Bn. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Montreal. Que. 22nd Oct. 191 Place of Birth Montreal.

Name and Address, Next-of-Kin E.A. Desy. 3213. St Andre. Mtl.

Relationship Father.

CCAC

N/E. R.B. No. 3433

File R.L.

Category. Mtl. Can

R133 B454

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
		Arrived in England per S.S. Saxonia.		29.5.15.	Mtl. Can. R.
12.6.15	O.C. 22nd.	Fined 1 days pay. Abs. p. Parade.	East Sandling	12.6.15.	Pt. II O. # 186.
9.4.15	do	Forfeit 2 days' Pay. To draw 45¢ a day. } ed. W. h.	do	9.4.15	do # 210.
2.9.15	do.	Fined $6.00 + 15 draw 50¢ daily "Drunk"	do.	22.8.15	do # 254
10.8.15.	do.	Full Pay Re-instated for good Conduct.	do	10.8.15.	do # 242.
9 SEP 1915		Embarked for France	Folkestone	15.9.15	Emb. Memo. # 288
21.2.16	O/C 22nd	3 days ex. fatigue a.w.l. 6 P.M. 19/1/16 to 12 P.M. 19.1.16 + 1 days pay	Field	20.1.16	Pt. II - 9.
30.4.16	22nd Bn.	Granted 8 days leave	"	13.4.16	" 18 Cancelled Pt. II - 21
21.5.16	"	" 8 " "	"	26.4.16	" 21

R139·31W

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
30·5·16	6R22nd	No 3 Can Gen Hospl	Boulogne	22·5·16	S/W Lt leg Cas Rep A233 01
2.6.16	22nd Bn.	Adm. 3rd Northn Gen. Hosp.	Sheffield	29.5.16	C.L.B. 80 "S.W Lt leg"
7.6.16	"	Invalid Transfd to CCAC. hq.	In the Field	28·5·16	Pt. II-23
6.6.16.	CCAC	Taken on strength.		29.5.16	Pt II O. 202.
5-8-16	22nd " Bn	Trans Can con Hosp.	Uxbridge	2-8-16	C L B 133
22-8-16	" "	Trans Can Div con Hosp	Epsom	18-8-16	C L B 145
5-9-16	CCAC	Reported ex Epsom		4-9-16	Pt 20 377
6-9-16	do	On com to 69th Bn PBD		5-9-16	Pt #0 381
8.9.16	69th	Attached from CCAC.	Dibgate	5.9.16	" 214
20.9.16	"	Ceases to be attached, on return to CCAC for disch in Canada Med unfit	"	19.9.16	" 228
18-10-16.	22nd Bn.	Dis. Can. Div. Convl. Hosp.	Epsom	4-9-16.	C. L. B. 188.
20-9-16	CCAC	Having Rept will ceases to be shown on Comt at 69th RB		19-9-16	Pt II O 407
22-9-16	"	Proceeded on com to CDD Bath for Spical discharge PBD in Canada		21-9-16	Pt II O 413
11-10-16	CDD	Discharged to Canada M.L.	Bath	10-10-16	Pt — 205
26-10-16	CCAC	S.O.S to Can for Dis	S'Ham	10-10-16	— " — 440

CHECKED. 5th Dec, 1916.

	Dis Depot	To Convalescent Home	MD No 4. Montreal	18-10-16	Rv 63.

M. F. W. 41.
10m.—4-16.
1772-39-889.

373

Name Deey, Pte. Ed

Regimental No. 61331

Unit 69th Batt.

Date of enlistment 20/10/14

Place of "

Married (yes or no) No.

Amount of pay assigned monthly $ Nil

To whom payable

Name and address ~~of next of kin~~

3213 St. Andre St, Montreal

Red Bd rec. Conv. Home.

Date and place discharged

Reason for discharge

Character on discharge

Mauretania 18/1/16 Class F 6492-D-1667

L. L. Job 502 M. & D. 6578.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	30/9/16							13056						x 243		x L.L. x A.R. 4092
												x 100		o 973		x Bundee o Boat
												Cr. Bal.		5250		Fld to Mtl 4 1/10/16
									16466						16466	
														x 607		x Sup. F.P.C. 3/9/17
																x Def. Pay Lt.,
Trans. to Suspense a/c folio D.2	31/10/17							x 222 A 385	607						607	List 704 15/10/17
																fr. 1-11-17 List
																R.D. Pliot
																A Rcvd W.S.G. 13/3/19
																x Recovered from W.S.G. 25-3-19

Pensioned.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

Rank Pte Name DESY Eugene Adolphe. X Reg'l No. 61331.

Unit C.C.A.C. ~~22nd Bn.~~ If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Montreal. Que. 22nd Oct. 1914 Place of Birth Montreal.

Name and Address, Next-of-Kin E.A. Desy. 3213. St Andre. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

PAY OFFICE, N.F. BRANCH, OCT 24 1916 CANADIAN CONTINGENT

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
1915																	
June 1-30		30	1.	30.	30	.10	3.		33.			27 50		1 10	28 60	4 40	1.10 - 1 - D.F. 186
1-7-15	31-7-15	31	1.	31.	31	.10	3 10		34 10			27 50		2 20	29 70	8 80	2.20 - 2 days' pay for 1 B.O. 210.
				Adjt of Exchange				147	147							10 27	
																10 27	6. 7 in 8 B.O. 254
1-8-15	31-8-15	31	1.	31	31	.10	3 10		34 10			24 34		6 30	34 14	03	
1-9-15	30-9-15	30	1.	30	30	.10	3		33			13 38			13 38	33 65	
1-10-15	31-10-15	31	1.	31	31	.10	3 10		34 10			5 24			5 24	62 51	
1/11/15	30/11/15	30	1.	30	30	.10	3 -		33 -			5 36			5 36	90 15	
1/12/15	31/12/15	31	1.	31	31	.10	3 10		34 10			13 95			13 95	110 30	
1/1/16	31/1/16	31	1.	31	31	.10	3 10		34 10			2 62			2 62	141 78	
1/2/16	29/2/16	29	1.	29	29	.10	2 90		31 90			7 85		1 10	8 95	164 73	1.10 = 1 N.F. 20/16 B09
1/3/16	31/3/16	31	1.	31	31	.10	3 10		34 10			5 22			5 22	193 61	
		305			305		30 50	147	336 97			132 96		10 40	143 36	193 61	

Checked L.L. Sherrer.

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

26446-527

45-5-3-E-3

Name Desy, Eugene Adolphe
(Surname, Christian Name)

Regimental Number 61331 Rank Pte. Address (in full) 3213 St.Andre St.,
Montreal, P.Q.

Unit 22nd Bn.

Original Unit

District where paid M.D. 4.

Date of Discharge 31-10-17.

P. D. P. Filing Number 14-46-4.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT Cheque No. A	Date	Amount 30 days	SECOND PAYMENT Cheque No. B	Date	Amount 30 days	FINAL PAYMENT Cheque No. C	Date	Amount 31 days	Balance Over-payments to be Recovered	Total Amount Paid
100 10	918	30-12-17	33 00	904	17-1-18	33 00	913	21-2-18	28 03	607	94 03
~~2408 1st~~	~~G402304~~	~~26/3/19~~	~~70.00~~				Quop Lidy D.2.			385	
~~2091 2nd~~	~~G402745~~	~~31-3-19~~	~~70.00~~								

M. F. W. 127.
50M—6 17.
1772-39-1140.

Remarks: Debit from C.P.M. Ottawa.

3213 St André St.
Montreal
Que.

Dec'n No 26446/527 W. S. G. File No 4553-E.16

Award ..... days at $ 70 per ~~day~~ mo $ 420.00

S. A. ..... months at $ .. per mo. $ .....

Less P. D. P. Credited $ 100.10

Less further debit balance $ 385

Net due paid as below 316.05

TO SOLDIER OR DEPENDENT

	O	Ag. No	Ch	ou		No	Amount
26-3-19	1	2408	402304	70	1		
31-3-19	2	2091A	402745	70			
19-4-19	3	1544B	431629	70			
22.5.19.	4	1586 C	470597	70			
	5		465003	3605			
	6						

GEN'L AUDITOR
Posting checked by
Date. 25-10-19

Army Form W. 3172.
(In pads of 50.)

3rd h G. Hospital.

Ward 14 No. of Bed _____ Date 31.V.16

Regtl. No.	Rank and Name	Corps	Part to be X-Rayed
61331	Pte Desy. Eugene	22nd Canadians.	L leg.

SHORT HISTORY OF CASE.
(To be completed by M.O. i/c case)

Left leg
2. fracture of f. b.

Signature of M.O. J. H. Cobb

Date 31/V/16

REPORT ON RESULT OF X-RAY EXAMINATION.
(To be completed by Radiographer.)

No. of Plate _____

Plate I shows shadow suggestive of bone infection.
Plate II & III are negative.

Signature of Radiographer R15

Date Jun 3/16

(9 38 40) W 8290—3262 100,000 8/15 H W V(M 163) Forms/W. 3172/1
15134—116 300,000 1/16

Army Form B. 103.

Casualty Form—Active Service.

Regimental Number 61331

Jump

Regiment or Corps 22 Battalion C.E.F.

Rank Pte Surname Desy Christian Name E

Religion _____ Age on Enlistment _____ years _____ months.

Enlisted (*a*) _____ Terms of Service (*a*) _____ Service reckons from (*a*) _____

Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended { _____ / _____ } Re-engaged { _____ / _____ } Qualification (*b*) _____ or Corps Trade and Rate _____

_____ Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked ...			
5-9-16	C.C.A.C.	Transferred to 69 Battn	Dibgate.	8-9-16	Part II-orders 217

DISCHARGED.
under
Para 392, Sec. 16, K.R. & O. 1912.
Being no longer physically
fit for war service.

R. M. Lovell Lieut
for Commandant.
Canadian Casualty
Discharge Depôt,
BATH.

(*a*) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(*b*) Signaller, Shoeing-Smith, &c.

[P.T.O.

(938). Wt. 15012/5156. 1,000,000. 1/16. P. P. Ltd. Forms/B.103/3.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

Gen 14142

Army Form B. 103.

CERTIFIED CORRECT.
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 22nd (F. C.) Battalion

Regimental No. 61331 Rank Private Name Dery Eugene Adolphe

Enlisted (*a*) 22.10.14 Terms of Service (*a*) forward Service reckons from (*a*) 22.10.14

Date of promotion to present rank ____ Date of appointment to lance rank ____ Numerical position on roll of N.C.Os. ____

Extended ____ Re-engaged ____ Qualification (*b*) ____

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Disembarked	Boulogne	15 9/15	
14:4:16	O.C.BN	GRANTED 8 DAYS LEAVE		13 4/16	B213
21 4/16	"	Back from leave		15 4/16	B213
15-5-16	"	Above leave cancelled			116 Inf.22/17 Part 11 ord.21 d/21-5-16
28 4/16	"	GRANTED 8 DAYS LEAVE		26 4/16	B213
12 5/16	"	Back from leave		5 5/16	B213
28 5/16	HS. New Haven	Sw left lower leg		28 5/16	w3083
		Transf to England			
29 5/16	"	" "		"	a36
27 5/16	3rd CS	Sw'd leg gunsh.	Field	21 5/16	" 178-3 6/16
"	"	Transf to 25 at		22 5/16	" "
22 5/16	3 Can Gen	Sw'd l'leg sch		"	w3034
					Part 2 ord.23 d/7-6-16

M. L. Coe Rshott
Lieutenant
for Lt.Col.A.A.G.

(*a*) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
(*b*) *e.g.*, Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
6-9-16		Taken on strength C.C.A.C. Pt. II D.O. No. 391-4.			
19-9-16		ATTACHED ~~TRANSFERRED~~ FROM C.C.A.C. TO c/d Bath PART II D.O. No.			

DISCHARGED.
under
Para 392, Sec. 16, K.R. & O. 1912.

Being no longer physically
fit for war service.

P. M. Harellson Lieut
for Commandant.
Canadian Casualty
Discharge Depôt,
BATH.

J. C. Eudge.

(A) 12/9/16

61331 14

MEDICAL HISTORY SHEET.

ORIGINAL

3 JUN 1916

Surname Desey Christian Name Eugene adolphe

Examined { on 23 day of October 1914
at Montreal

Birthplace { City or Town Montreal
County

Apparent age 32 yrs

Trade or occupation Butcher

Height 5 Feet 4½ Inches.

Weight Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 35 inches

Physical development Good

Small-Pox Marks

Vaccination Marks { Arm Right. Left.
Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by
Arthur Migneault
Rank Lt. Col. A.M.S. M.O

Date	Fit or Unfit	Examined for Re-engagement,
		M.O
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
MAY 5 '15		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
FEB 28 '16		M.O.
		M.O.
		M.O.

Enlisted on 22 *day of* Octobre *1914 at* Montreal

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	12nd Fb. Bn	61331		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Epsom	30/8/16	G.S.W. Left Leg	S.D. H.S. Cross capt.
C.C.H.C.	left 19/16 Appdecat D.J.McArthur	G.S.W. Left Leg	Permanent Discharge R.M.O. Exmouth Lect

The Casualty Form—Active Service, and Medical History Sheets of all men proceeding overseas, must be retained by the Officer commanding their unit to the Record Office when they leave England.

In Charge of Records, Canadian Contingent.

Lieut.-Col.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

APPROVED
CAPTAIN C.A.M.C. FOR D. OF R. & O. FOR
BRIGADIER GENERAL
COMMANDING
CANADIAN TRAINING DIVISION.

M. F. B. 313.

100M.—1-15.
H. Q. 1772-39-439.

Surname Desay Christian Name Eugene Adolphe

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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. Particulars of prophylactic inoculations.	Signature of Medical Officer.
3rd: NORTHERN GENERAL		29	5	16	1	8	16	G.S.W. Left leg	65	Transferred to Uxbridge	A.M. Connell Lt. Colonel, R.A.M.C. (T) O.C. 3rd Northern General Hospital
Canadian Convalescent Hospital, Hillingdon House, Uxbridge.		1	8	16.	17	8	16	G.S.W. L. Leg.	17	May 21/16. St Eloi 1 W.S. 2 hrs. #3 G.H. Boulogne 8 days. Removed Shrapnel. Then Sheffield 2 months. Transferred to Epsom.	W Worden Capt C.A.M.C
Can. Conv. Hosp Epsom.		17	8	16				Do.		Boarded. Perm. Base.	C. Howard Capt CAMC

DISCHARGED.
under
Para 392, Sec. 16, K.R. & O. 19[illegible].
Being no longer physically fit for war service.
R. McHamilton Lieut.
for Commandant
Canadian Casualty
Discharge Depot,
BATH.

R. & O. 6064

UNDER DIRECT SUPERVISION OF THE DIRECTOR OF RECRUITING AND ORGANISATION, C.E.F.

REFER TO FILE.

In reply please quote No. 2373
and date of letter.

THE CANADIAN CASUALTY DISCHARGE AND EXERCISE DEPOT,
PRIOR PARK,
COMBE DOWN,
BATH.

STATEMENT ON DISCHARGE.

STATEMENT OF ...Name Pte. E. [illegible]

Reg. No. 61331 Rank Pte

Unit 22nd Batt

Place Bath Date 4/10/16

To OFFICER i/c EMBARKATION, at .....

I hereby request my Discharge in Canada

I desire to make the following remarks, on the understanding that this statement may be produced as evidence in any subsequent inquiry, in regard to the following matters:—

Complaints, if any, will be noted hereon, opposite the corresponding headings.

CLOTHING— —

FOOD, AND TREATMENT AT DISCHARGE DEPOT— —

PAY— —

I understand that it is my privilege to make these remarks, and with the exception of the points raised, I hereby affirm that I have no complaints to make regarding my treatment at the Canadian Casualty Discharge and Exercise Depot, Bath.

I also certify that any delay in the carrying out of my Discharge has been explained to my satisfaction.

Signature E. Pte

Rank .....

Witnesses { F. C. Charlton Lt
(*Adjutant, C.C.D. & E.D., Bath*).
[illegible] Capt
(*O.C., C.C.D. & E.D., Bath*).

N.B.—This statement will be prepared in duplicate, and disposed of as follows:—
ORIGINAL—To be forwarded with Discharge Documents.
DUPLICATE—To be filed, for reference, by the O.C., Canadian Casualty Discharge and Exercise Depot, Bath.

Forms
I. 1237
10

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
9194	61331.	Pte	Desp.	Eugene.
Year: 1916	Unit.		Age.	Service.
	22nd Canadian D.		34.	1 7/12.

Station and Date. — Disease: Gsw L. leg Fx-1.

3rd W.G.H. Sheffield 29.V.16. — Wounded May 20th with shrapnel in left leg. Operation in France, he thinks shrapnel was removed. Two wounds on inner side of leg, tube through. To be Xrayed.

X. ray negative re no frac. J.H. Cooke Capt.

3-VI-16. — Improving.

10-VI-16. — Better: tube removed.

19-VI-16. — School

23 VI 16 — doing well

1.8.16 — To Uxbridge.

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

(J 3521.) Wt. W 5606—2621. 2,000,000. 7/15. D & S.

P.T.O.

Station and Date.	

11

DEPT. MILITIA & DEFENCE
NOV 15 1916
H.Q. 649-B-1667
CANADA

Form to be used instead of blank space on Army Form 179

Proceedings of Medical Board at Discharge Depot.

Number 61331, Rank Pte, Name and Corps of disabled Soldier. Hesy Eugene, 22nd Bn 69th Bn.

Previous Civilian Occupation. Butcher.

Cause of disability:-
Injury to muscles of leg. (left.) — G.S.W.

Condition in detail which prevent the Soldier earning a Full livelihood:-

Complains of pain & stiffness in calf muscles & along lower portion of tibia when walking. Puts his heel to the ground. bearing his weight with difficulty. Was wounded in leg by shrapnel. wound subsequently became infected. very little destruction of muscle tissue

P.T.O.

Opinion of the Board

Degree of incapacity (Please state in fractions)
1/5 or less. will diminish.

Probable duration of incapacity:-
3 mos dim. to less than 1/5 Permanent.

Does it render him permanently unfit for Military Service? yes.

Would operation, special treatment or the use of appliances etc., lessen incapacity? Convalescent Home.

Signature.
W. M. Carruth Major — President
E. A. Loverton Capt — Member
M. A. Coglon Capt. — Member

Station. Quebec: Que

Date. Oct. 27/16

Approved.

Date. Oct 27/16

Date. 21/11/16

W. M. Carruth Major
Assistant Director Medical Service

Director General Medical Service.

MARRIED OR SINGLE S.

PLACE OF BIRTH Montreal P.Q.

NAME AND ADDRESS OF NEXT OF KIN E.A. Desy
3213 St Andre Montreal P.Q.

RELATIONSHIP OF NEXT OF KIN Father

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
20-9-16	134.00	2.22	

REG'L NO. 61331 RANK Pte NAME Desy E. Adolphe

IF IN PERMT. CORPS } WHAT UNIT UNIT 22nd Bn.

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Montreal P.Q.

DATE OF ATTESTATION 22-10-14

TRANSFERRED TO C.G.A.C. DATE 1.7.16 AUTHORITY G.O. 6 List

TRANSFERRED TO N.S. DATE 30/9/16 AUTHORITY P.C. 256

TRANSFERRED TO DATE AUTHORITY

TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE 29/9/16 Canada REASON AND AUTHORITY G.O. 1. d. 256 dy. 27/9/16

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 30/9/16

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE 1916	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	30½														336 97									132 96						143 36	193 61		44		
1-31/4	30	1.	30		30	10	3								33	855	4/4	874	20/4					261 X						87 X	317 89				
																903	20/4							349 X											
1-31/5	31	1.	31		31	10	3	10							34 10	940	15/5	F.C. 3 440	25/5 Cash	1/5/16				256 X		97 33 X	58 40 X			158 29	93 70				
1-30/6	30	1.	30		30	10	3								22																126 70				
July 1-31	31	1	31		31	10	3	10							31 10 07 / 34 10																160 80				
Aug 31	31	1	31		31	10	3	10							34 10.																194 90				
Sept. 1-29	29	1	29		29	10	2	90							31 90					11-9-16						48 67				48 67	178 13				
Sept 30	1	1	1		1			10						Bkas $10.00.	1 10									48 67		XX XX				48 67	129 46				
																															130 56				
																															130 56				
																4092								2 43						2 43	128 13				
1-11-16																																			
Feb 1917															128 13														128 13	128 13				
W.E. March 1917																29/12	29/12	Lepson	19/14	19/8/16	Shon. Mus. Hon.	14	86 19	21								607			

Checked A.L.G. Sherrer.

Checked

Bal on Sept to N.E. Beck

Carry Forward

* from C.A.S.C. Mon. Roll Issuance. Pm CCAC Sept.
Dr to Canada 29/9/16
Cr to CCAC d. 256 dy. 27/9/16
Cr to Rem. 29/9/16
2.43 adv. P.M.C.D.D. Bank-Dft L-10-on/1916

Remd to "Canada Disb'ge a/c"
ak PC. 4.5.17 Cr. 122 06

61331 Pte Desy E. A.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
NE. March 1917																4/70	15/9/16	Grav Bn.						4 87								6 07			Ottwa. ACR 24/7/17
NE. August 1917														6 07	6 07																	Trans[d] to "Canada Disc'ge a/c"	Nil	P.C. 875 - 48 - 1/7
August 1917														2 22	2 22														2 22	2 22.		Trans[d] to "Canada Disc'ge a/c"		Interest on Defd Pay List H

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS			BALANCE	DEFD. SER. PAY	SER. ALLCE	ETC.
Feb 1918				AR 1847 Ulmdays 9-8-16 H8-3 NE 8/27	✓	121 ✓	121 ✓			
June	Balance transferred to Pay II O[1]						121	Pte W. Clark		
Aug 15	Trfd to List 1.		121				Nil	Cashier		
			121							

R. & O. 6045 (*Revised*).

100574

OFFICE OF THE
STANDING MEDICAL BOARD
SHORNCLIFFE

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Aug 30th 1916.

No. 61331 Rank Pte Name Leary E.

Local Unit 6th Overseas Unit 22nd Bn Age 34

Examination held at Epsom

DISABILITY.
Overseas—Local.
(scratch one out) X

G.S.W. left leg 21/5/16
& rec'd in France

PRESENT CONDITION.

Large shrapnel wound left leg
Multiple incisions for drainage
Leg painful
Cannot stand much

BOARD RECOMMENDS:—

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty.....weeks.
4. Fit for Permanent Base Duty.....
5. Discharge.....

APPROVED
CAPTAIN A.M.C. FOR D. OF R. & O. FOR
BRIGADIER GENERAL
COMMANDING
CANADIAN TRAINING DIVISION

Signatures:—

H. C. Craig Capt.
.....President.

Members { L. F. Anglin Capt
.....

.....

APPROVED

Dated at 22 SEP 1916 1916.

S. L. Woaden
For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

R. & O. Corps (Regiment)

Dated at ..... 19..

No. ..... Rank ..... Name ..... Age .....

Local Unit ..... Overseas Unit .....

Examination held at .....

PRESENT CONDITION

DISABILITY
Overseas—Local
(Strike out one out)

BOARD RECOMMENDS :—

2. Discharge .....

4. Fit for Permanent Base Duty .....

3. Fit for Temporary Base Duty ..... weeks

5. Fit for duty after ..... weeks, physical training

1. Fit for Duty .....

CANADIAN ARMY MEDICAL CORPS
OVERSEAS
APPROVED
D.A.D.M.S.

Dated at ..... 19..

APPROVED

For A.D.M.S. .....

Memphis .....

President .....

Class C.S.M.

This space to be for numbers.

MILITARY DISTRICT No. 4
NOV 15 1917
M.D.4

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No.	61331
Rank	Private
Name NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	Desy, Eugene Adolphe
Corps (Squadron, Battery or Company)	22nd Battalion
Date of Discharge	31/10/17.
Place of Discharge	Montreal.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	35 years 3 months.
Height	5 feet 4½ inches.
Complexion	Fair
Eyes	Blue
Hair	Fair
Trade	Butcher
Intended place of residence (To be given as fully as practicable.)	3213, St. Andre Street Montreal.

Descriptive Marks

Numerous scars on left leg.

2. The above-named man is discharged in consequence of

Medical Unfitness due to Pulmonary Tuberculosis.

Authority H.Q. 4D.22-D-281 Dated October 30th 1917.

Deceased March 13/33 649-D-1667

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

Good.

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Labourer

Star 14/11/19

Jas

M. F. B. 218.
100m.—6-16.
H. Q. 1772-39-113.

W.L.G. 15.3.19 M.G.

K.C.P. 8-1-20 2m

Dist. Section 22nd Bns

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. **Medals and Decorations**..... { } To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place)..... .....

(Date)..... *Commanding* .....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Montreal. C. Sleep .....*(Signature of Soldier.)*

(Date) 31/10/17 S. Lwellen .....*(Signature of Witness.)*

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....*(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total 3 years 9 days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) Montreal.

(Date) NOV 1 1917

MILITARY HOSPITALS COMMISSION COMMAND "A UNIT" HEADQUARTERS

(Signature) .....

MAJOR,

O. C. "A" Unit

Military Hospitals Commissions Command.

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263. Squadron / Battery / Company } Conduct Sheet, " B. 263a. Copies of Convictions, by C. P. in MS. Med. Hist. Sheet, Militia Form B. 313 Medical Report for Invalid* " B. 227. Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877. *Only if discharged "Medically unfit."	Attestation Paper, Militia Form B. 235. Proceedings on Discharge " B. 218. In the case of recruits who are rejected on final approval, the discharge documents will consist of *(a)* Proceedings on Discharge. *(b)* Attestation. *(c)* Medical History Sheet (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

None.

L Leary

St. C.P., Kingsway, W.C.
30,000—17/4/16—10533.

Army Form B. 179.
Canada.

Medical Report on an Invalid.

Station Doubjaleé

Date Sept 12/1916

1. Unit 22nd now 69th Batt. 5. Age last birthday 35

2. Regimental No. 61331

3. Rank Pte

4. Name Desy Eugene

6. Enlisted { on 20 Octob. 1914 / at Montreal

7. Former Trade or Occupation } Butcher

DEPT. MILITIA & DEFENCE
NOV 15 1916
H.Q. CANADA

8. Disability.

1. Injured leg.

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

9. Date of origin of disability. 21 May 1916

10. Place of origin of disability. France

11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case.

had his leg injured by Shrapnel in several places, causing fracture of tibia was in hospital 3 mos cannot put heel to ground owing to pain down the tibial region walking is very painful

12. (*a*) Give your opinion as to the causation of the disability.

(*b*) If you consider it to have been caused by wounds received or illness contracted (1) in the presence of the enemy (2) on active service, explain the specific conditions to which you attribute it. (*See notes on page 3.*)

Shrapnel wounds

not applicable

13. What is his present condition?
Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

a slender man, of good physical development

14. If the disability is an injury, was it caused

(*a*) In the presence of the enemy? yes

(*b*) On active service? yes

(*c*) On duty? yes

(*d*) Off duty? no

15. Was a Court of Inquiry held on the injury?

If so—(*a*) When?

(*b*) Where?

(*c*) Opinion?

16. Was an operation performed? If so, what?

17. If not, was an operation advised and declined?

18. *In case of loss or decay of teeth.* Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

19. Do you recommend

(*a*) Fit for duty?

(*b*) Fit for base duty?

(*c*) Invalided to Canada?

(*d*) Discharge as permanently unfit?

present seven shrapnel scars of the left leg with large cicatrices, bone still shows callous

walks on ball of foot unable to put foot to ground owing to pain about tibial region

other systems normal.

not applicable

not applicable

not applicable

Yes

J R Goodall Capt

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, *except*†

Station Dibgate

Date Sept 13

J R Goodall Capt

Officer in charge of Hospital.

* Loss of teeth on, or immediately after, active service should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as it is essential that the Members of the Pensions and Claims Board should be in possession of the most reliable information to **enable them to decide upon the man's claim to pension.**

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pensions vary according to whether the disability is attributed to wounds or injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. It is therefore essential when assigning the cause of the disability to differentiate between them (*see* Articles 641 to 648 of the Canadian Pay and Allowance Regulations).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

20. (*a*) State whether the disability is the result of injuries received or illness contracted, (1) in the presence of the enemy, (2) on active service. a1 yes a2 yes

(*b*) If due to one of these causes, to what specific conditions do the Board attribute it? G.S.W.

21. Has the disability been caused or aggravated by
(*a*) Intemperance? no
(*b*) Misconduct? no

22. Is the disability permanent? no

23. If not permanent, what is its probable minimum duration? six months

To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present? 1/4 for six months.

In defining the extent of his inability to earn a livelihood, estimate it at $\frac{1}{4}$, $\frac{1}{2}$, $\frac{3}{4}$, or total incapacity.

25. If an operation was advised and declined, was the refusal unreasonable? not applicable.

26. Do the Board recommend
(*a*) Fit for duty? no
(*b*) Fit for base duty? no
(*c*) Invalided to Canada? no
(*d*) Discharge as permanently unfit? yes

APPROVED
CAPTAIN, C. [illegible] FOR D. OF R. & O; FOR
BRIGADIER GENERAL
COMMANDING
CANADIAN TRAINING DIVISION,

27. Remarks.
This man is of poor physique and combined with G.S.W. of leg will in our opinion be unfit for further service.

Signatures:—
R. M. Fergusson Capt. President.
[illegible] Members.

SHORNCLIFFE—
(19, Westbourne Gardens, Folkestone.)

Station [illegible]
Date Sept 19/16

Approved.
Station Shorncliffe
D. J. McIntyre
Administrative Medical Officer.
Date 19 SEP 1916
FOR A.D.M.S. CANADIANS, SHORNCLIFFE.

I-252
15/11/16

NOV 2 0 1916

PENSIONS AND CLAIMS BOARD, Canadian Expeditionary Force, assembled at Prior Park, Bath, England, on the 23rd day of September 191 6.

Members of Board.

Lieut.Col.Sir H.Montagu,Allan.
Lieut.Col.W.Grant Morden.
Lieut.Col.D. McLean.
Major R.Raikes.C.A.M.C.
Major Hume Blake.

Proceedings.

The Board having considered the evidence of the man marginally noted, and the documents submitted, hereto attached, which form part of these Presents, marked

No.61331.
Pte. E.Desy.
22nd Battn.

Recommends:-

1. That this man's discharge be not carried out until he is in receipt of the first payment of the following Pension:-

2. That he be granted a Pension for the period of Six Months under Class 5, at the rate of 20 per cent, Ninety Six dollars per annum, under the Pay and Allowance Regulations 1914, as amended by P.C. 1334 of June 3rd 1916.

APPROVED
CAPTAIN C.M.G., D.S.O., R.A.M.C.
DIRECTOR GENERAL
COMMANDING
CANADIAN MEDICAL SERVICE

Signed at Prior Park, Bath, this 23rd *day of* September, *191* 6.

H. Montagu Allan *President.*
Lt.Col.

D.McLean
Lt.Col.

R. Raikes
Major.
C.A.M.C.

MEDICAL HISTORY OF AN INVALID.

B.B.C.
4D.22* D- 281

1. Station. Ste. Agathe des Monts
2. Regiment or Corps. 22nd. Bn.
3. Regimental No. and Rank. 61331 Pte.

Permanent Address 3213 St. Andre Street Montreal.

4. Name. H. Desy
5. Age last Birthday. 36 yrs.
6. Enlisted on October 21st. 1914
   at Montreal
7. Former Trade or Occupation. Butcher

8. General remarks on his :—
   (a) Conduct. Fair
   (b) Habits. Good
   (c) Temperance. Not strict

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

Date. September 20th. 1917

9. Service.

	Years.	Days.	PERIODS. From.	PERIODS. To.
Canada 22nd. Bn.			20/10/14	20/3/15
England "			20/3/15	20/9/15
France "			20/9/15	21/5/16
Casualties (England)			21/5/16	12/10/16
"A" Unit., M.H.C.C.			20/10/16	To Date.

10. (a) Disease or disability. (A) Pulmonary Tuberculosis
    (B) Talipes of left leg
    (b) Date of origin. (A) Unknown
    (B) May 21st. 1916
    (c) Place of origin. (A) Unknown
    (B) St. Eloi France
    (d) Cause. (A) Infection with Bacilli of tuberculosis.
    (B) Shrapnel

11. Present Condition. (Most Important).
(To include full description of present disabling condition or conditions.)

SYMPTOMS Cough, Expectoration negative for acid-fast Bacilli. Night sweats, dyspnoea, hyperexcitability, Pain over right tibia, running down twards the ankle joint.

Physical Examination Right Lung:- Shows impaired resonance with harsh breath sounds and increased vocal transmission from 2nd. rib in front to 3rd. dorsal spine behind. No adventitious sounds.

Left Lung:- Shows harsh breath sounds running down the left sternal border as previously outlined but no adventitious sounds.

Surgical:- Cast has been removed from foot which is now in sufficently good condition to permit of slight walking.

12. (a) Is the disability the result of service or climate ? Service and climate.
    (b) Has it been aggravated by intemperance, vice or misconduct ? No.

M. F. B. 227,
100 M—2-16.
1772-39-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Numerous scars on left leg

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held ?

Wounded by shrapnel in action at St. Eloi France on May 21st. 1916.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and wheth r it was exceptional or otherwise.

Not unusual

14. Treatment

For Wound, England, Boulogne 21/5/16 to 1/6/16 Sheffield 2/6/16 to 19/8/16 Oxbridge 19/8/16 to 20/9/16 Epsom 20/9/16 Canada Montreal General H. 5/12/16 to 16/12/16 Grey Nuns C.H. 16/12/16 to 19/12/16, Royal Victoria H. 19/12/16 to 15/1/17 Grey Nuns C.H. 15/1/17 to 20/6/17. For Tuberculosis L.I.M.S. 22/6/17 to 10/7/17 .For Wound G.N.C.H. 12/7/17 to 19/7/17 For T.B. L.I.M.S. 21/7/17 to Date.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent ?

Yes 100%

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes ?

Six months disability for combined conditions.

17. To what extent will it prevent his earning a full livelihood in the general labour market ? Please state in fractions.

75 %

18. State if for discharge on account of unfitness for Service.

yes

Lieut. T.C. Wolff C.A.M.C.

T. C. Wolff Lieut. A.M.C.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report ? If not, give differing opinion.

10. Yes

11. Yes

12. Yes

15. Yes

16. Yes

17. Yes

19. Is he unfit for Military Service. Yes

20. Recommendations : That as #61331 Pte. H.Desy late of the 22nd. Bn. C.M.C.F. has a partially arrested Pulmonary Tuberculosis and is not content to remain under treatment, that a furtherence of Sanatorium treatment will not materially enhance his condition and that he be allowed to pass under his own control with a disability of 75% for six(6) months.

Signatures :—

President.

Capt. C.A.M.C.

Lieut. C.A.M.C.

Lieut. C.A.M.C.

Members.

Station. Ste. Agathe des Monts

Date. September 20th. 1917.

Date.

Approved.

Assc. Director of Medical Services.

Date.

Director-General of Medical Services.

ASSISTANT DIRECTOR MEDICAL SERVICES M.D. No. 4 APPROVED SEP 24 1917 MAJOR For A.D.M.S. MONTREAL, Que.

(At Station or Hospital where finally disposed of.)

Station and Hospital } ..... Arrived from } .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

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Date of final Medical Board or decision. } .....

Administrative Medical Officer.

Militia Form B. 227.

100 m-2-16.
H. G. 1772—39—117.

DETAILED MEDICAL HISTORY OF INVALID.

Station .....

Corps .....

Regimental No. ..... Rank .....

Name .....

Disability .....

Date .....

Hospital or Station transferred to for final disposal. } .....

Date of final disposal } .....

How finally disposed of } .....

The original Report is invariably to accompany the discharge documents of invalids.

4 D 22 - D- 281

MEDICAL HISTORY OF AN INVALID.

1. Station. **Montreal.**

2. Regiment or Corps. **22nd Battalion**

3. Regimental No. and Rank. **#61331 Private**

Eugene.

4. Name. **H. Desy**

5. Age last Birthday. **34**

6. Enlisted on **Oct. 20th, 1914.**

at **Montreal.**

7. Former trade or occupation. **Laborer.**

8. General remarks on his:—

(a) Conduct.

(b) Habits.

(c) Temperance.

MILITARY DISTRICT No. 4
JUN 16 1917
M.D. 4
DEPT MILITIA & DEFENCE
JUN 23 1917
H.Q. CANADA

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

6-49-2-1667

Date. **May 31st, 1917.**

9. Service.

	Years.	Days.	PERIODS From	PERIODS To
22nd Battalion, C.E.F.			**Oct. 20, 1914.**	**May 31, 1917.**

Tuberculosis

10. (a) Disease or disability. **1. Suspected ~~bronchitis~~. 2. Talipes left leg.**

(b) Date of origin. **1. Developed on service. 2. May 21, 1916 for leg.**

(c) Place of origin. **1. In France. 2. France.**

(d) Cause. **1. Predisposition and trench warfare. 2. Gun shot wound.**

11. Present condition. (Most Important.)

(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, *i.e.*, debility, breathlessness on exertion, necessity of treatment by rest, etc.)

General condition - only fair. Invalid of poor physique. Complains of cough, night sweats, expectoration. Sputum analysis is negative for tuberculosis. Examination: heart normal. The apex of right lung is slightly dull if compared with the left one. Vocal fremitus exaggerated at left apex. No rales, ronchi or any adventitious sounds heard today. Invalid has a characteristic pigeon chest and a mid dorsal lateral scoliosis. His mother died of tuberculosis.

12. (a) Is the disability the result of service or climate? **1. Yes. 2. Yes.**

(b) Has it been aggravated by intemperance, vice or misconduct? **No.**

M. F. B. 227.

200M. 8 16.
1772-39-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Numerous scars on left leg.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held ?

Received shrapnel wounds of left leg while on duty.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

No exceptional exposure.

14. Treatment.

Operation for correction of talipes May 27th, 1917, and foot now in plaster of Paris cast, and to remain there for six weeks.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent ?

1. Not applicable. 2. Not applicable.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes ?

1. Six months. 2. Two months.

17. To what extent will it prevent his earning a full livelihood in the general labour market ? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

1. 1/4 for lung condition.

2. Total for two months, then 1/10.

18. State if for discharge on account of unfitness for Service.

Not for discharge. Sanatorium

treatment recommended and accepted.

Jackaboe Captain C

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report ? If not, give differing opinion.

10. **Yes.**

11. **Yes. In addition he has slight dulness and crepitations in left apex.**

12. **Yes.**

15. **Yes.**

16. **Yes.**

17. **Yes.**

18. Is he unfit for Military Service. **Yes.**

Recommendations : **The Board having met and examined Private H. Desy, #61331, 22nd Battalion, C. E. F., recommends that he be transferred to L. I. M. S. for six months. Disability 100% for six months for lung condition. Compensation for foot is concurrent. To return at end of six months for readjustment, Class "D" III.**

Signatures :—

A. D. Blue Lt. Col. ..... President.

A. D. Gibson Capt. .....

..... Members.

Station. **Montreal, Que.**

Date. **June 6, 1917.**

Date. 16/6/17

H. S. Mungalestone Major .....

Asst. Director of Medical Services.

Approved.

Date. .....

Director-General of Medical Services.

9463

JUN 25 19

(At Station or Hospital where finally disposed of.)

Station and Hospital } ..... Arrived fr m } .....

Date .....

If admi ted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

Summary of Causes of invaliding, or remarks as to remand to Regiment, Stat on or Depôt.

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Date of final Medical Board or decision. }

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Administrative Medical Officer.

Militia Form B. 227.

200m. 8 6.
H. Q. 1772-39-11.

DETAILED MEDICAL HISTORY OF INVALID.

Station .....

Corps .....

Regimental No. ..... Rank .....

Name .....

Disability .....

Date .....

Hospital or Station transferred to for final disposal. }

Date of final disposal }

How finally disposed of }

The original Report is invariably to accompany the discharge documents of invalids.

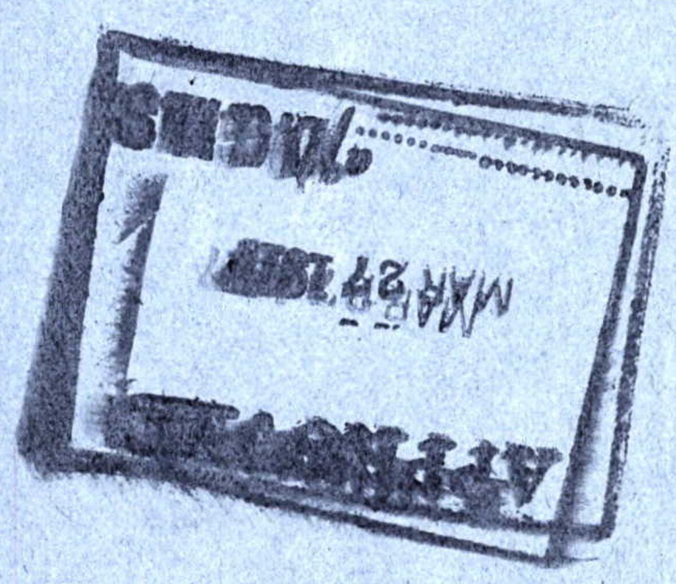
To the Secretary, Militia Council,

Ottawa, Ont.

APPROVED AND FORWARDED.

Lieut-Colonel, A.D.M.S., M.D.#4.
for Major-General, O.C.C., M.D. #4.

Montreal P.Q.
Mch. 22nd 1917.



* N.B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * MEDICAL BOARD

assembled at The Grey Nuns Convalescent Home

on the 12th day of March, 1917.

by order of The A. D. M.S., Military District No. 4

for the purpose of examining

Private H. Desy, #61331, 22nd Battalion,

C. E. F.

DEPT MILITIA & DEFENCE
MAR 24 1917
449-10-1667
CANADA

PRESIDENT.

Captain H. R. D. Gray A.M.C.

MEMBERS.

Captain L. A. Chabot A.M.C.

Captain H. R. Edwards A.M.C.

The Board having assembled pursuant to order, proceed to examine Pte. H. Desy, #61331, 22nd Battalion, C. E. F., find and report:

1. General condition: only fair.
Still complains of stiffness of left calf muscles but of a lesser degree. Had Talipes corrected in Royal Victoria Hospital and now walks with a limp. Invalid complains at present of occasional night sweats and cough, more so in the morning, with very slight expectoration. Sputum analysis is negative.
The apex of right lung is slightly dull if compared with the left one, so is the vocal fermitus slightly exaggerated in right apex.
Today no rales, ronchi or any adventitious sounds can be heard. He has a characteristic pigeon chest and a slight lateral mid dorsal scoliosis. The mother died of tuberculosis at 45 years of age.
The heart is negative.

2. Disability in general labour market 1/4 for lungs, 1/6 for left leg.

3. Minimum duration of disability two months for lung condition, permanent for left leg.

4. Recommend - Convalescent Home treatment during period of disability, with cacodylate of soda hypodermically and fresh air.

President H R Dunbar Gray Capt CAMC

Members L A Chabot captain AMC

H R Edwards Capt AMC

M F. B. 303.
100m.—4-16.
H. Q. 1772—39—133.

294-24-3-17

* N.B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * MEDICAL BOARD

assembled at The G. N. C. H., Montreal.

on the 25th day of May, 1917.

by order of The A.D.M.S., Military District No. 4

for the purpose of examining :

Private H. Desy, #61331, 22nd Battalion, C.E.F.

MILITARY DISTRICT No. 4
MAY 30 1917
M.D.4

PRESIDENT.

Capt. A. A. Robertson A.M.C.

MEMBERS.

Capt. F. W. Gilday A.M.C.

Lieut. G. A. Fleet A.M.C.

The Board having assembled pursuant to order, proceed to

examine Pte. Desy, and recommend tenotomy for correction of Talipes, to which he consents.

President
A A Robertson Capt

Members
Fred W Gilday Capt
Geo. A. Fleet Lieut

M F. B. 303.
100m.—4-16.
H. Q. 1772—39—156.

2 K 281

* N.B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a * Standing Medical Board

assembled at Montreal General Hospital,

on the 13th December 1916.

by order of O. C. Military District No. 4.

for the purpose of examining #61331 Pte. Eugene Desy,

22nd Battalion, C.E.F.

PRESIDENT.

Capt. R.E. Powell, A.M.C.

MEMBERS.

Capt. C.R. Bourne, A.M.C.

The Board having assembled pursuant to order, proceed to

examine #61331 Pte. Eugene Desy, 22nd Battalion C.E.F.

and find that:-

1. His general condition is poor.

2. He has multiple shrapnel wounds of the Left Calf.

3. The Scars are painful and the muscles and tendons are adherent.

4. As a result, there is a talipes. The Heel does not touch the ground in walking.

5. The Orthopaedic Surgeon of this Hospital recommends a high heel (1 ½ inch.), massage and baking.

6. No operative interference recommended, at present.

7. Convalescent home is recommended.

Dated at Montreal, P.Q.
December 13th 1916.

R.E. Powell Capt. Pres.

C.R. Bourne Capt.

M F. B. 303.

100m.—4-16.
H. Q 1772—39—183.

Report No. [redacted] Class II.

No. of M. H. C. File	No. of Local File	No. of H. Q. File

[redacted] "A"

Desy, H.
3213 St. Andrew Street
Montreal.

No. 61531 Rank Private Original Unit 22nd Present Unit 69 Res.

Age 34.2 Height 5 ft. 6 ins. Complexion Fair Eyes Blue Hair Brown Character N.R.

Date of enlistment 20.10.14 Where enlisted Montreal Where seen service France 374

Ship returned by Mauretania Date of arrival Oct.18.16 Port of arrival Halifax

Bithplace Canada Religion R.C.

Name and address next of kin Sister - same address.

Cause of disability Injury to muscles of left leg.GSW

Condition which prevents the soldier from earning a full livelihood

Complains of pain and stiffness in calf muscles and along lower portion of tibra when walking. Puts his heal to the ground, bearing his weight with difficulty. Was wounded in leg by shrapnel wound subsequently became infected. Very little destruction of muscles tissue.

Degree of incapacity (Please state in fractions) Eng. Board $\frac{1}{2}$ for 6 mos. Canadian Board $\frac{1}{3}$ or less will di

Probable duration of incapacity 3 mos. or less then $\frac{1}{3}$ permanent.

Is final disability likely to prevent return to previous occupation?

Recommendation of Canadian Board Convalescent Home

Destination to which transportation issued Montreal

Members of Board W.M.Carrick Major E.A.Roberts on M.F.Coglon Capt. W.M.Carrick Major

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment Labourer

Regular trade or profession do

Average earnings previous to enlistment 2.50 a day Any other income

Name and address of last employer Montreal Water Works

Rent per month If purchasing property amount due and annual payment, $ $

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, annual premium 7.20

If in receipt of sick benefits or other insurance—name of society Metropolitan Amt. per mo. $

If unable to follow previous occupation, name preference Light Work

At what age soldier left school? What grade, standard, &c., was he in?

Has he taken any Technical or Continuation classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References Last employer

Witness L.W.Bailey I declare that the above statement is correct.

Date October 27th 1916. Signature E.DESY

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot H. Q., $ L. P. C. leaving Depot, $

Amount forwarded to H. Q. Unit, $ Credit Clothing allowances, $

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date

PENSION—Class..... Amount per year, $..... Period granted for..... Dating from.....

First payment date.....

Form No. 5a.

CLASS 1.—Men for immediate discharge without a pension.
(a) Unfit for overseas service but capable to take up their previous civilian occupation.
(b) Disability not the result of service or involving claim as the result of or aggravation by service.

CLASS 2.—Men whose condition may be benefitted by further medical treatment or rest in a Convalescent Home, Hospital or Sanatorium. If deemed advisable, in some cases the medical officer in charge of the Convalescent Home, Hospital or Sanatorium may grant these men leave to return to their own homes and families for a definite period.

CLASS 3.—Men having a permanent disability which would not be benefitted by further medical treatment (such disability due to or aggravated by service) and whose cases will immediately be considered by the Pensions Board with a view to pension.

DEPENDENTS	NAME	AGE	WHERE EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children	1				
	2				
	3				
	4				
	5				

INFORMATION TO BE FURNISHED BY SOLDIER

Occupation prior to enlistment

Previous employment as to classes likely to be of use, and general remarks:

Name and address of last employer

Average earnings previous to enlistment

Any other income

If possessing property, amount due and annual payment? $

If mortgaged, when is payment due?

Taxes

Rent per month

If receipt of life or accident insurance, annual premium

If contributing to Provident Institute

If unable to follow previous occupation, name difficulty

At what age did you leave school? What grade attended last? Are you able to read?

Have you taken any Technical or Continuation classes? If so what?

What relief given Accidental Training while in Hospital in England. If so, what employer?

References

Witness

Date

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Signature

I declare that the above statement is correct.

Date

Address

Reference

Name and address of Bank

Description to which transportation issued

Recommendation of Canadian Board

Is final discharge likely to prevent return to previous occupation?

Hospital discharge of incapacity

Degree of incapacity. Please state if (medical) Can. Board

Canadian Board

Condition which prevents the soldier from obtaining a full livelihood

Cause of disability

Name and address next of kin

Relationship

Date of enlistment

Where enlisted

Date of entry

Port of entry

Where used service

Rank

Height

Hair

Complexion

Eyes

Original Unit

Present Unit

Chevrons

No.	Regt.	No.	Regt.	No.	Regt.

Report No.

Class II.

Medical Board held at Depot H. Q.'s

Date

Last Pay Cert. C.M. $

Classified to

Unit—Date

Transf'd Class I—Date

Transf'd Class 3—Date

PENSION—Class

Amount per Year $

Period granted for

Amount forwarded to H. Q. Unit. $

Credit Clothing allowance $

First payment date

Form No. 28

Duplicate original to be retained by Unit—3 years

(4) Duplicate original to be retained by Unit—3 years

(3) Original to be forwarded to Ottawa not later than 7 days after discharge

(2) Duplicate to be forwarded to Military District Depot of Unit

(1) Original to be forwarded to Ottawa not later than 7 days after discharge

Instructions for completion of Casualty Form—Active Service

Casualty Form—Active Service—Instructions for completion

Duplicate and two triplicates to be forwarded to Ottawa not later than 7 days after discharge

Original to be forwarded to Ottawa not later than 7 days after discharge

Instructions for completion of Casualty Form—Active Service