

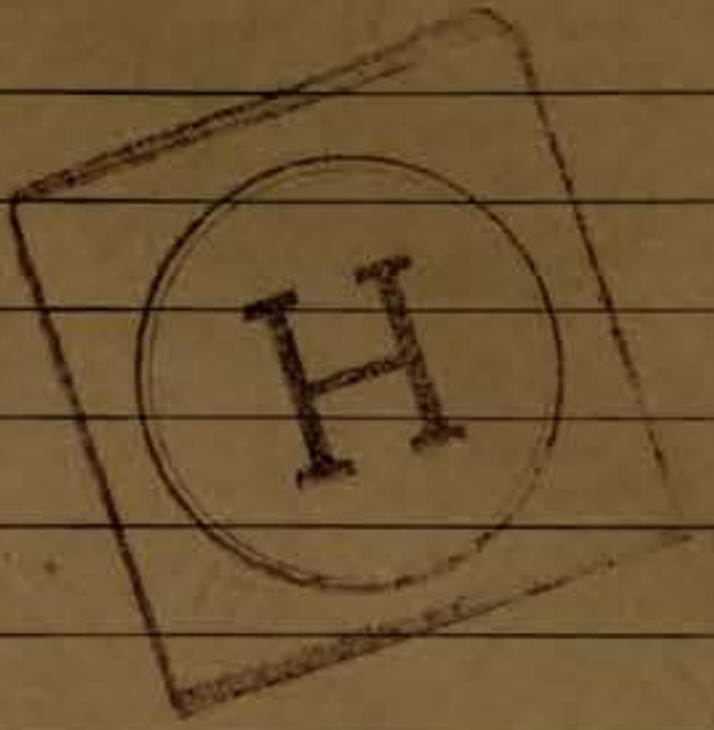
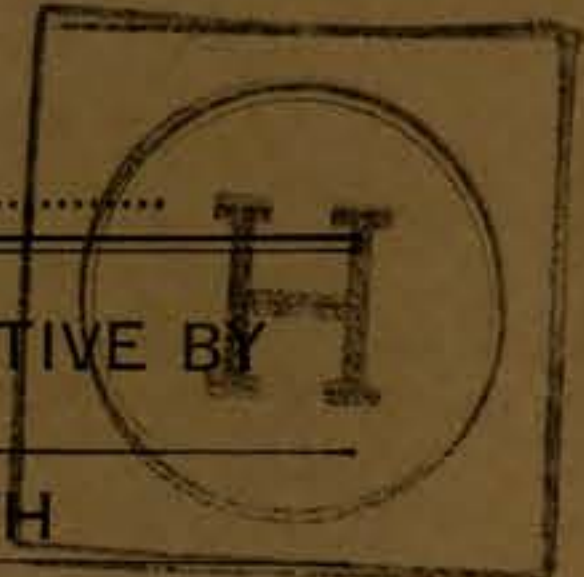
C.E.F. REGIMENTAL DOCUMENTS

NAME **ANTAYA, THEOPHILE**

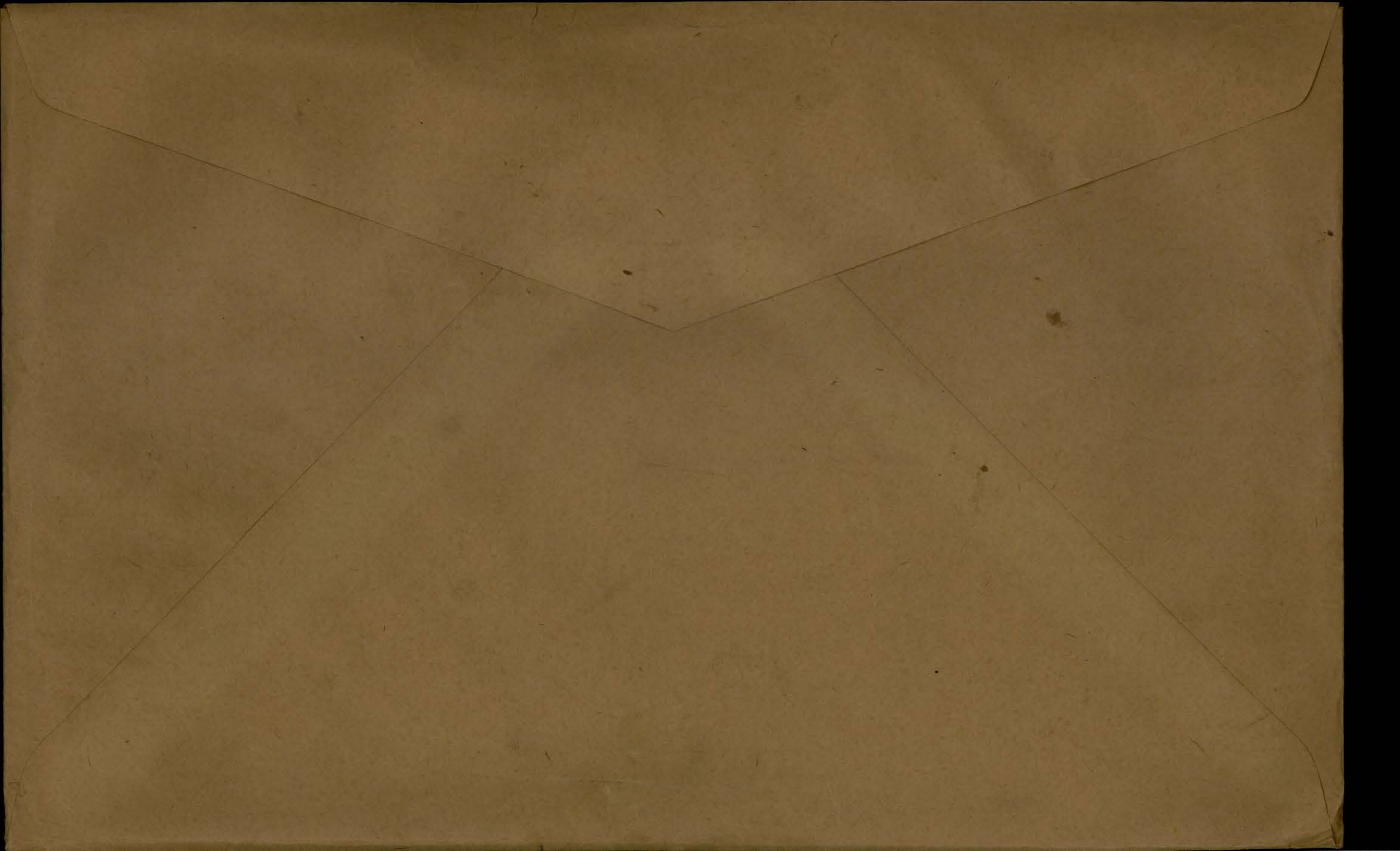
REGT. No. **33555**

UNIT **C.A.M.C.**

H. Q. FILE No. **X 1036**



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					DIED OF WOUNDS
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					4-5-17
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					



ORIGINAL
ATTESTATION PAPER.

No. 33555

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... *Theophile Antaya*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Ashland Mass USA*
- 3. What is the name of your next-of-kin?..... *(Mother) Evelyn Antaya*
- 4. What is the address of your next-of-kin?..... *8 Eugene de Grantham*
- 5. What is the date of your birth?..... *28-5-95. Coburnton Que*
- 6. What is your Trade or Calling?..... *Miner*
- 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?..... *845 Regt St Hyacinth*
- 10. Have you ever served in any Military Force?.. *No*
If so, state particulars of former Service.
- 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*

Theophile Antaya.....(Signature of Man).
J. Mulbourn.....(Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Theophile Antaya*....., 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.

Theophile Antaya.....(Signature of Recruit)

Date..... *Sept 25*.....1914. *J. Mulbourn*.....(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Theophile Antaya*....., 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.

Theophile Antaya.....(Signature of Recruit)

Date..... *Sept 25th*.....1914. *J. Mulbourn*.....(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..... *Dalmenier*..... this *25th* day of *September*.....1914.

J. Mulbourn.....(Signature of Justice)

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

J. Mulbourn.....(Approving Officer)

Description of Theophile Butaya on Enlistment.

Apparent Age 20 years months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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.)

Height 5 ft. 7 1/2 ins.

Chest measurement { Girth when fully expanded 34 ins.
 Range of expansion 2 ins.

Complexion Dark

Eyes Brown

Hair Black

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

*Scar. outer sides knees
 l -
 Deformity terminal
 phalynx little finger
 right*

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.....1914.

S. Alvin Smith

Place.....

Capt. C. H. B.
 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.

Theophile Butaya.....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.

J. A. K......(Signature of Officer)

Date.....1914.

no card.

12141

✓
✓

63932

Will:

33555 Pte Antaya, J.
#3 Ho Ambul.

14

WILL

In the event
of my death I give
the whole of my
property property
and effects to

Mde. Theophile Antaya
Duncan Station
County Drummond
Province of Quebec

Canada
J. Antaya Pte.
3rd Can. Field Amb
23rd Feb. 1915

Alive

ESTATES BRANCH
AUG 10 1917
MILITIA DEPT.

Rank and Name *Pte.* ANTAYA, Theophile
 Regimental No. 33555 ✓
 Unit 3 Field Amb.
 Date of enlistment 25 Sept 1914
 Place of birth U.S.A.
 Married (Yes or No) No

Name and Address of Next-of-kin
 Evelyn Antaya, (Mother)
 St. Eugene de Grantham,
 Co. Drummond, Que.

Date and place of discharge
 Reason for discharge
 Character on discharge

N/E. R.B. No. 625
 File R.L. 25-A-1158
 Category D.W.

If in Permanent Force

Promotions or appointments

Date	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				
			On Strength No. 3 Field Amb. France		July 1915	From Roll.
			"		1.3.16	"
10-5-17	1 st CANC	1.6.65	Died of Wounds	Field	4-5-17	CL A358.
10-5-17	3 rd Field Amb		Died of Wounds received in action		4-5-17	Pf 110-34



E 18654-6

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				

Temporary Duplicate

Certified Correct
AAG FILE
102-353
Army Form B. 103.

[Handwritten initials]

Batman

Casualty Form—Active Service.

Regiment or Corps 3 Can Field Ambulance

Regimental No. 33555 Rank Pte Name Antaya Shepphile

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

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		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				

<i>5/5/17</i>	<i>3 CF Amb</i>	<i>Bomb wd back (penetrating abdomen) Evacuated to</i>	<i>CCS.</i>	<i>2/5/17</i>	<i>KM 16/4737 DCS. 306 4/5/17</i>
<i>8/5/17</i>	<i>1 C.C.C. Sqn.</i>	<i>Died of wounds received in Action</i>	<i>1 CCS.</i>	<i>4/5/17</i>	<i>KM. 16/5154. Pte Col. 34-10/4/17</i>



F. L. Kuntz
St. Col. C.A.M.C. for
A.A.G. Gen. Sec. 3rd Ech G.H.Q.

(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				

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Juss J. Antaya

PAYMENTS. *38255*

Name of Soldier

Antaya J. 12th Bty

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	<i>Q 150</i>	<i>15</i>	
May		<i>D 1379</i>	<i>15</i>	
June		<i>08758</i>	<i>15</i>	
July		<i>8545</i>	<i>15</i>	
Aug.		<i>Q 12211</i>	<i>15</i>	
Sept.		<i>F 16344</i>	<i>15</i>	
Oct.		<i>F 28685</i>	<i>15</i>	
Nov.		<i>H 75311</i>	<i>15</i>	
Dec.		<i>R 33447</i>	<i>15</i>	
Jan.	1917	<i>K 37346</i>	<i>15</i>	
Feb.		<i>K 42581</i>	<i>15</i>	
March		<i>K 48593</i>	<i>15</i>	
April		<i>B 364</i>	<i>15</i>	
May		<i>L 6443</i>	<i>15</i>	
June		<i>L 13086</i>	<i>15</i>	
July		<i>L 20215</i>	<i>15</i>	
Aug.		<i>N 27077</i>	<i>15</i>	
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

15.00

15 \$
157390.00 - 679 30/3/17 Est Madley
St E uorne de Grantham Rus
assigne depd Drummond
safte bouton till 30/3/17 Est Madley
tu pension granted 420.13.

N 27077 cancelled

Pension Granted. *1-8-17*
 B.P.C. to Recover \$.....
 Clerk. *J.P.S.* Date *24/7/17*

420 £ FX 21-11-17

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier.....

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

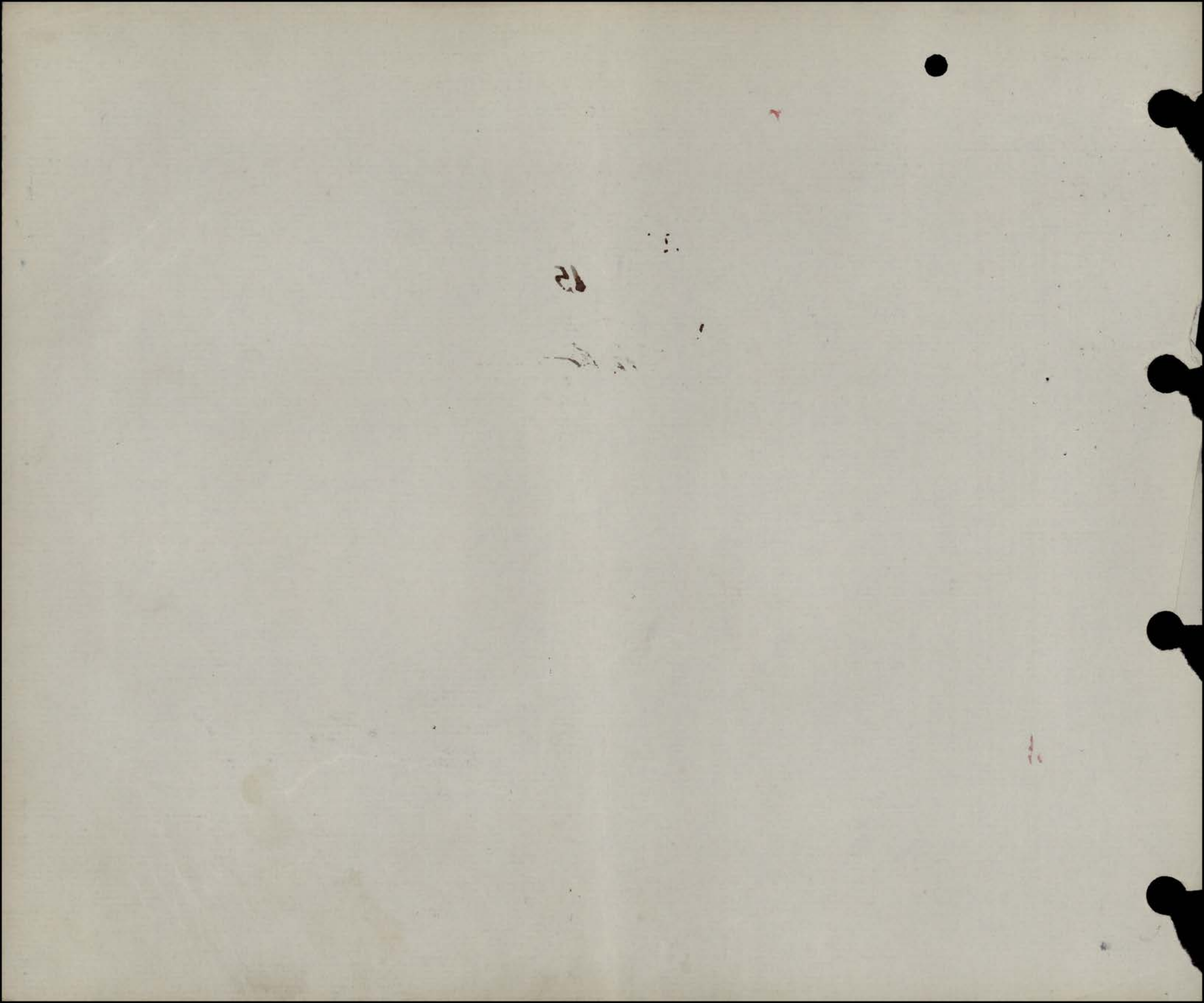
To Whom *Mrs J. Antaya* ^{Wife} By Whom Assigned *Antaya J.*
 Address *Duncan Station* Regtl. No. *38505*
St. Cuyens de Grantham. Que Rank *Plt*
Drummond Co ⁵⁻¹⁰⁻¹⁶ Corps *12th Battalion*
 Rate *\$ 15.00* From *Apr 1/15.*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April		<i>H7977</i>	<i>15</i>	
May		<i>49456</i>	<i>15</i>	
June		<i>2 8818</i>	<i>15</i>	
July		<i>610158</i>	<i>15</i>	
Aug.		<i>D12496</i>	<i>15</i>	
Sept.		<i>C12956</i>	<i>15</i>	
Oct.		<i>B14075</i>	<i>15</i>	
Nov.		<i>d15065</i>	<i>15</i>	
Dec.		<i>210582</i>	<i>15</i>	
Jan.	1916	<i>J12275</i>	<i>15</i>	
Feb.		<i>A18180</i>	<i>15</i>	
March		<i>417540</i>	<i>15</i>	

Consolidated A/c

Pensions Notified Date *30/3/17*
 Killed in Action }
 Died of Wounds } Date *4/3/17*
 Missing }
 C. L. *D11373/17* Clerk. *E. S. Bradley*
 Date Noted *30/5/17* 191



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Theophile Antaya

Name of Soldier

Antaya, Theophile

PAYMENTS.

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	A 63	20	20
May		B 835	20	20
June		E 3602	20	20
July		M 10120	20	20
Aug.		A 12140	20	20
Sept.		E 14858	20	20
Oct.		S 13102	20	20
Nov.		F 21105	20	20
Dec.		7 24380	20	20
Jan.	1917	C 28196	20	20
Feb.		E 31211	20	20
March		E 34498	20	20 E 34498 Remailed to Duncom strn P.Q. 11-4-17
April		G 20	20	20
May		9 3538	20	20 St Eugene de Grantham P.Q.
June		H 6326	20	20
July		G 10022	20	20
Aug.		I 12843	20	20 I 12843 Cancelled
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Pensions Notified Date *3073/17*
 Died of Wounds } Date *4/5/17*
 Missing }
 C. L. *6/15/17* Clerk *Bell*
 Date Noted *3075/17*

Pension Granted *1/18/17*
 B.P.C. to Recover *Nil*
 Clerk *M. G. Hill* Date *25/17*

ACCOUNT CLOSED
 DATE..... PER *W*

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.	1919			
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.	1920			
Jan.				
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name *Antaya, Mrs. Théophile* Name of Soldier *Antaya, Théophile*
 Address *Duncan Station.* Regtl. No.
P. Q. Rank
St Eugene de Grantham Corps *12 Prov. Batta.*
 Relation to Soldier *P. Q.* To what Corps belonging
 wife, child or mother } *mother* when called out } *54th Reg't* ✓ ✓

Certificate Canadian Pet. Fund. Sherbrooke Branch. PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug. <i>1/2 mo.</i>	1914	B4799	90 -	
Sept. ✓				
Oct. ✓				
Nov. ✓				
Dec. ✓				
Jan.	1915	A-3789	20 -	
Feb.		A-4972	20 -	
March		A-6197	20 -	
Apl.		A-7393	20 -	
May		B-9673	20 -	
June		C-10632	20 -	
July		D-10269	20 -	
Aug.		A-11614	20 ✓	
Sept.		B-14070	20 -	
Oct.		C-14635	20 -	
Nov.		D-14179	20 -	20
Dec.	A-15463	20	20	
Jan.	1916	B-18432	20 -	20
Feb.		C-19323	20	20
March		A-18039	20	20



ACCOUNT CLOSED
 DATE..... PER.....
W

10. 10. 10.

11. 11. 11.

12. 12. 12.

13. 13. 13.

G.P.
Register No. *DA 160*

WAR SERVICE GRATUITY

A.P. File No. *429-13*

TO
DEPENDENTS OF DECEASED SOLDIERS

Antaya

Regt'l No. *33555-* Name *Theophile Antaya*
(Christian Name) (Surname)
Unit *3-7.A.A.M.C.* Rank *Pte.* Date of enlistment.....
Date of casualty *4-5-19* B.P.C. File No. *13814*
Was service performed overseas? *yes*

Antaya

DEPENDENT

Name *Mrs Marie E. Antaya* Relationship *W. mother*
Address *St. Eugene de Grantham Court.*
Drummond
P. Q.

Amount of Special Pension Bonus \$ *700.00* Abstracted by *(Mrs) E. M. Ross*

Eligible for Gratuity \$ *100.00*
Less amount of Special Pension Bonus paid \$ *1*
Less Debit Balance of S. A. or A.P. \$ *1*

Total deductions \$ *1*

Balance due \$ *100.00*

Cheque No. *1891548* Date issued *16/7/20*

3rd Amb.

M.F.W. 2652
25M-6-20.
H.Q. 1772-89-1473

REMARKS :
.....
.....
.....
.....

Clerk *L.J. Perriss*

Audited by
[Signature]
Date *15/7/20*

Dec 17

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay \$ _____ per diem; Field Allowance \$ _____ per diem. Separation Allowance \$ _____ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

M. F. W. 127
 300M-1-19
 1772-39-1140

NAME Aulaya J.

Regimental No.

Name and address of next-of-kin

Unit

Date of enlistment

Place of "

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

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						
27/9/14	31/10/14	40	1 ⁻	40	40	10	4		44			44				44	W.D.O. Pay list
1/11	30/11	30	1 ¹⁰	33	30		3		36			36		3		36	3 W.D. Bal
1/12	11/12	11		11	11		10		14			11		3		14	Departmental exchange

Rank

Name

Antaya T.

Reg'l No.

33555 P-56

Unit

No 3 Fld. Ambley

If in perm. Corps, What Unit?

Married or Single

Place and Date of Enlistment

Valcartier

Place of Birth

Name and Address, Next-of-Kin

12

Relationship

Assigned Pay Monthly \$

15⁰⁰ 4/5/17
358 5/5/17

Payable to

Mrs. E. Antaya, Deerean Station P.Q. Canada

Relationship

Separation Allowance \$

Payable to

Relationship

Character

Discharge, Date and Place

Reason

Date 1914		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							
Sept 16	Oct 31	46	1	46	46	10	460		5060			5060			5060			
Nov 1	Nov 30	30	1	30	30	10	3		33			33			33			
Dec 1	Dec 31	31	1	31	31	10	310		3410			3410			3410			
Jan 1	Jan 31	31	1	31	31	10	310		3410			3410			3410			
Feb 1	Feb 28	28	1	28	28	10	280		2080			9			9	2180		
Mar 1	Mar 31	31	1	31	31	10	310	2180	5590			11			11	4490		
Apr 1	Apr 30	30	1	30	30	10	3	4490	7790							7790		
May 1	May 31	31	1	31	31	10	310	7790	112			6	15	21	91		Receipt S. Clark	
June 1	June 30	30	1	30	30	10	3	91	124			9	15	24	100			
July 1	July 31	31	1	31	31	10	310	100	13410			6	15	21	11310			
									11310									
									512									
1/8	31/8	31	1	31	31	10	310	1822	25332			1340	15	2840	13392			
1/9	30/9	30	1	30	30	10	3	12392	15692			1972	15	3472	12230			
1/10	31/10	31	1	31	31	10	310	12230	15630			262	15	1462	13869			
1/11	30/11	30	1	30	30	10	3	13862	14168			880	15	2380	14198			
1/12	31/12	31	1	31	31	10	310	14188	18198			2006	15	3506	14692			
1916	31/1	31	1	31	31	10	310	14692	18102			523	15	2023				
1/8	29/8	29	1	29	29	10	290	10079	19269			10724	15	13224	70405			
								5320	51259032			36987	150	51987				

Department of SEP 29 1917



Entered on N.E. Card Index Checked by T. J. Williams

\$512 diff. of book

Carried forward to Large Ledger sheet

filled

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						
1916				532 ..			53 20 5 12 520 32				369 87 150 ..				519 87	
1/3	3/3	31	1	31	31	10	3 10 70 46 104 56				6 98 15				21 98	
							82 84									\$82.57 Credit Balance.
				563 ..			56 30 5 12 624 42				376 85 165 ..				541 85	

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Aug 15, 1914.

April 1st/15

RATE OF SEPARATION ALLOWANCE

<i>20-</i>			
------------	--	--	--

RATE OF ASSIGNMENT

<i>15.</i>			
------------	--	--	--

12127

PARTICULARS OF SEPARATION ALLOWANCE

No. *3355*

Rank *Pte* Promoted Reverted Discharge

Soldier's Name

J. Antaya.

Battalion

12th Bn. (54th Rgt)

Beneficiary

Mrs. Thophile Antaya

Relationship

mother

Address

St. Eugene de Grantham, Drummond Co., Que

PARTICULARS OF ASSIGNMENT

Name *Mrs. J. Antaya*

Address *St. Eugene de Grantham*

Change of Address *Drummond Co. Que*

- 1
- 2
- 3
- 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
------	------------	------------	------------	-------	---------

<i>1917</i>					
<i>Sept</i>	<i>30</i>	<i>710 -</i>	<i>420 -</i>	<i>830 -</i>	

Acct. to continue until pension is granted.

Pensions Notified Date	<i>30/5/17</i>
Retired in Action	
Died of Wounds	Date <i>4/5/17</i>
Missing	
C. L. <i>(8)</i>	<i>15/5/17</i> Clerk
Date Noted	<i>30/5/17</i> 191

Pension granted 1-8-17 - 24/7/17.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
------	------------	------------	------------	-------	---------

M. F. W. 128
 400M-6-17-1772-39-1141
 L. L. 22320-M. & D. 7668.

No. 33 655 RANK Pte.

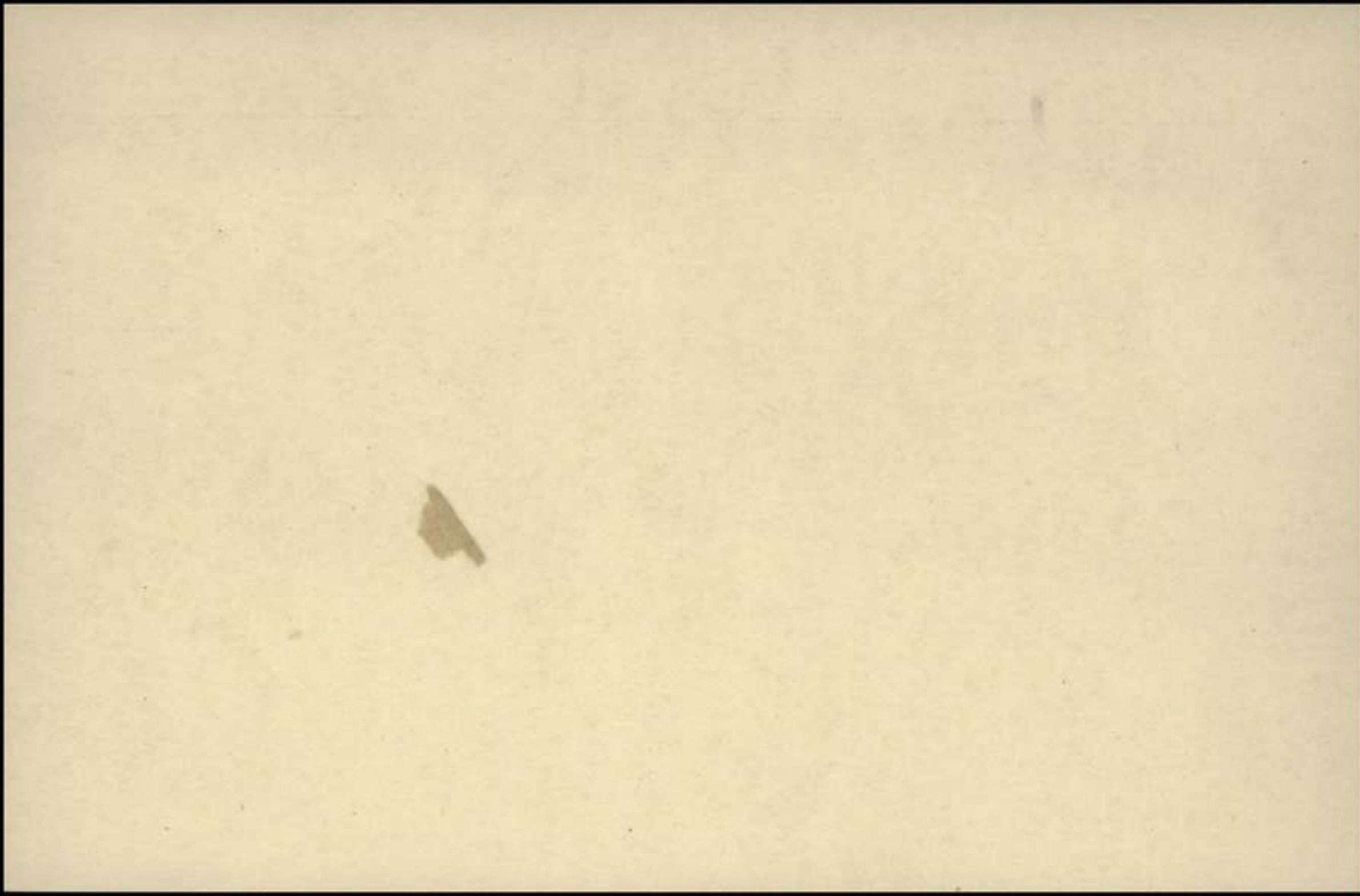
NAME Antaya. T.

T. O. S.

UNIT # 3 Field Ambulance B. A. M. C.
(o/p pay lists only)

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Sept 1	1915 Sept 30 Oct.	n. u.		



SURNAME.

Antaya - (449-A-4343)

CARD NO.

M. J. x

D

CHRISTIAN NAMES

Theophile

FOLL.

REGL. No.

33555

RANK

Pl.

UNIT

3rd. 4th. Ambulance Depot.

FORMER CORPS

84th Regt.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Antaya Evelyn (Mrs.)

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

*St. Eugene de Grantham,
Drummond Co. P. Q.*

COUNTRY OF BIRTH

U.S.A. Ashland Mass.

DATE

May 28th. 1895.

PLACE OF ATTESTATION

Valcartier P. Q.

DATE

Sept. 25th. 1914.

MARRIED

SINGLE

yes.

WIDOWER

TRADE OR CALLING

Miner.

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

28

YEARS

MONTHS

HEIGHT

5

FEET

7 1/2 INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

2

INCHES

COMPLEXION

Dark

EYES

grey

HAIR

Black.

DISTINGUISHING MARKS

Scar outer side R. knee.

Scar outer side left knee. Deformity terminal phalynx little finger right.

MEDICAL EXAMINATION.

PLACE

not stated

DATE

Present Address: Not stated

Number

33555

Rank

pt
B

Surname

ANTAYA

Christian Name

Theophile

Units

C.A.M.C.

Theatre of War

France

Date of Service

15-7-15

Remarks

(M) Mrs. Marie E. Antaya,

Latest Address

St. Eugene de Grantham
P.Q.

Roll No.

P
Page 20091

10m.-8-21

42,

1

DESP. ~~3441~~ 27 1923
REG. NO. 34570

REGT'L. No. 33555
H. Q. FILE No. 649

NAME Antaya Theophile

RANK AND CORPS Ate. 3rd 7d. Amb. report

FOLLOWS
No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

NO.	DATE	NATURE OF CASUALTY
M4075	9-5-17	killed of wounds no. 1 Cas. Reg. Hosp. may 4th 1917 ✓ killed in action 4-5-17. (Rec'd 11-7-17)
R 5205	14-5-17	
B2090a	10-5-17	
	Rowen	

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

a 358.

#1 Cam Cas Cg. Stat.

9-5-17

Died of was. CA MC. '19

R.L. 25 A-1158

DIED

40

FORM R. 149.

7106-250m-7/2/17.

Name **Antaya.** Rank **Theophile** Pte. **Reg. No. 33555**
 Unit **C.A.M.C.** **No. 3. C.F. Amb.**
 Next of Kin **Canada.**

Date 1917.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
MM	<i>Canadian</i>		DIED OF WOUNDS	A358	(P. 9-5-17)	<u>M 4075</u>
4-5-17. No. 1. C.C. Station						
<u>EXTRACT FROM W.O. TEL. dated. 8-5-17. No. P. 61550.</u>						

✓ Theophile ✓
ANTAYA, Pte. S., #33555, C.A.M.C. No. 3 C.F.A.

Da. Y

Big for 14/15-21st

M

649-A-4343.

MEDALS & DECORATIONS. (Mother) Mrs. Marie E. Antaya,
St. Eugene de Grantham,
P.Q.

PLACQUES & SCROLLS. (Mother) Mrs. Marie E. Antaya,
Address as above.
Serial No. 791044

CROSS OF SACRIFICE. (Mother) Mrs. Marie E. Antaya,
Address as above.

Scroll Desp. **MAR 14 1921** Regn No 228278

Plaque Desp. **DEC 31 1921** Regn No 2148 *PC 2080*

G.B.

W

Surname
Antaya.
Rank
pte.
Hospital

Christian Name or Names
J.

Reg. No.
33255

Unit
C.A.M.C.

Co. Troop Batty.

1st Div

Date of Admission

Transferred #1. *Can. Cas. Reg. Str*

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Died of. Wds.

aw. 4.5.17

DISPOSITION

Date

Ch. 10.5.17 a/358

REMARKS

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.

MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

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
Died of wounds.	5/5/17	C.A. 358

ADMISSIONS TO HOSPITAL, &c

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. 33555 RANK *Pte.* NAME *Antaya, J.*

IF IN PERM. CORPS) UNIT *3rd Mtl. Bn.* 19 MAY 1917
WHAT UNIT TRANSFERRED TO *Pay II K. Died of Wounds.* DATE 5/5/17. AUTHORITY *C.A. No A 358 10/5/17.*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO _____ DATE _____ AUTHORITY _____

PLACE OF ATTESTATION *Valcartier* TRANSFERRED TO _____ DATE _____ AUTHORITY _____

DATE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE _____

PAYABLE TO *Mrs J. Antaya, Quebec, Canada* RELATIONSHIP _____

ASSIGNED PAY MONTHLY \$ _____ DATE EFFECTIVE _____

PAYABLE TO _____ RELATIONSHIP _____

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *May 19th 1917.* EFFECTIVE *June 1st 1917.* REASON *Died of Wounds, C.A. 358. 10/5/17.*

DISCHARGE DATE AND PLACE _____ REASON AND AUTHORITY _____

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) _____

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) _____

Entered on N.E. Card Index.
Checked by J. Williams



DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS							
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT										
			\$	c.			\$	c.			\$	c.																				NO.	DATE	NO.	DATE	NO.	DATE	NO.
<i>1916</i>																																						
<i>Mar 31</i>			<i>563.00</i>				<i>5630</i>								<i>512 674 42</i>									<i>165</i>			<i>541.85</i>	<i>82.57</i>										
<i>Apr 30</i>	<i>1</i>	<i>30</i>			<i>30</i>	<i>10</i>	<i>3</i>							<i>33 600</i>	<i>613</i>								<i>15</i>			<i>70.22</i>	<i>95.35</i>											
<i>May 31</i>	<i>1</i>	<i>31</i>			<i>31</i>	<i>10</i>	<i>3 10</i>							<i>34 10</i>	<i>629</i>								<i>15</i>			<i>20.10</i>	<i>109.35</i>											
<i>June 30</i>	<i>1</i>	<i>30</i>			<i>30</i>	<i>10</i>	<i>3</i>							<i>33</i>	<i>725</i>								<i>15</i>			<i>1755</i>	<i>124.80</i>											
<i>July 31</i>	<i>1</i>	<i>31</i>			<i>31</i>	<i>10</i>	<i>3 10</i>							<i>34 10 791</i>	<i>900</i>								<i>15</i>			<i>2366</i>	<i>135.24</i>											
<i>Aug 31</i>		<i>31</i>				<i>3 10</i>								<i>34 10</i>	<i>966 1/8</i>								<i>15</i>			<i>1762</i>	<i>156.72</i>											
<i>Sept 30</i>		<i>30</i>				<i>3</i>								<i>33</i>	<i>977 249/16</i>	<i>994 13/16</i>							<i>15</i>			<i>20 23</i>	<i>164.44</i>											
<i>Oct 31</i>		<i>31</i>				<i>3 10</i>								<i>34 10</i>	<i>1008 34/9</i>	<i>1092 19/16</i>							<i>15</i>			<i>21 22</i>	<i>178.37</i>											
<i>Nov 30</i>		<i>30</i>				<i>3</i>								<i>33</i>									<i>15</i>			<i>20 22</i>	<i>191.15</i>											
<i>Dec 31</i>		<i>31</i>				<i>3 10</i>								<i>34 10</i>	<i>1116 25/11</i>								<i>15</i>			<i>7633</i>	<i>198.92</i>											
<i>Jan 31</i>	<i>10</i>	<i>34 10</i>												<i>34 10</i>	<i>1169 112/16</i>								<i>15</i>			<i>20 23</i>	<i>212.79</i>											
<i>Feb 28</i>		<i>30 80</i>												<i>30 50</i>									<i>15</i>			<i>17 61</i>	<i>225.98</i>											
<i>Mar 31</i>		<i>34 10</i>												<i>34 10</i>	<i>1203 27/2</i>	<i>1285 13/2</i>							<i>15</i>			<i>43 09</i>	<i>246.99</i>											
		<i>1020 80.</i>												<i>5 12</i>	<i>1025 92</i>								<i>360</i>			<i>808 93</i>	<i>216 99</i>											

Statement of
SEP 29 1917
Account rendered

\$390.00 A.P. checked found correct. C.H.A. 30.5.17
R.S. Booth
Small Ledger Sheet

Carried forward

33555. Plē. Aulāya. T.

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS				
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		NO.	DATE	NO.	DATE	NO.	DATE				1	2				3	4	CREDIT	DEBIT
			\$	C.						\$	C.																		
1917.																													
								5 12	1025 92						34 79	26 82	387 32		360.		808 93	216 99.							
Aprd.	30	1 ¹⁰	33					33			18	7/17				2 62.		15		17 62	232 37.								
May	4.	"	4 40					4 40.										15		15	221 77.								
June													76	29/4	24 38.					2 62	263 219 15								
Aug								29 70	29 70												Balance transferred to N. E. BRANCH.	248 85							
Nov																						248 85							

Transferred. Dept "K" - "Bed of Wounds" - c.a. 358 10/6/17.

2970 Jan Det Rec
 2970 Pay wh/ct 5/31/17
 Transferred 1/28/17 - 3/1/17
 G. B. ...

PAY BOOK CHECK
 Date 9-11-17
 By 100

~~248 85~~

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

DUPLICATE.

33555

Army Form B. 178.

ML.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname ANTAYA. Christian Name Theophile

TABLE I.—GENERAL TABLE.

Birthplace .. Parish Ashland, County Mass. U.S.A.

Examined on _____ day of _____ 191 .
 at _____

Declared Age 20 years _____ days.

Trade or Occupation Miner

Height 5 feet 7½ inches.

Weight 145 lbs.

Chest { Girth when fully Expanded 34 inches.

Measurement { Range of Expansion 2 inches.

Physical Development Fair

Vaccination Marks { Arm Right Left
 Number 2

When Vaccinated October, 1914

Vision { R.E.—V=
 L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease { (a)

(b) Slight defects but not sufficient to cause rejection { (b) Deformity terminal phalynx little finger right.

Approved by .. (Signature) S.A. Smith,

(Rank) Capt. C.A.M.C. Medical Officer.

Enlisted { at Valcartier
 on 25th day of Sept. 1915 .

Joined on Enlistment	Corps.	Regtl. No.
Transferred to	<u>No. 3 Can. Fld. Amb.</u>	<u>33555</u>
Became non-effective by		

on _____ day of _____ 191 .

(Signature) _____

(Rank) _____

This Medical History Sheet has been compared with the corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.
 C.A.M.C.
 for the Officer in Charge of Records
 Canadian Contingents.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				