


REGIMENTAL DOCUMENTS

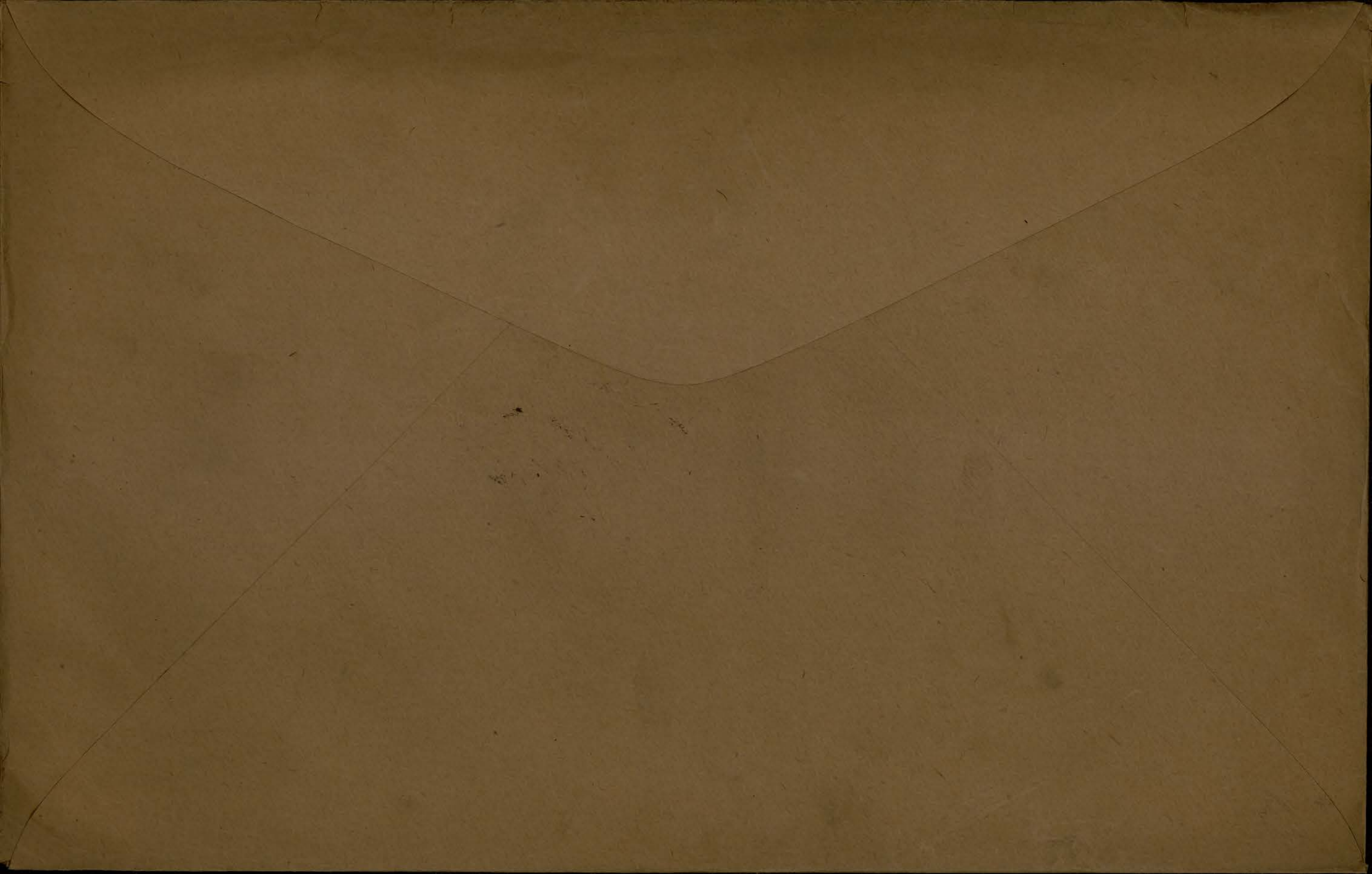
NAME AUBIN JOSEPH

REGT. No. 315823

UNIT 288 A R

H. Q. FILE No. 1679/

| 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)                          |               |                                                                                     |                |                         |                  |
| FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)               |               |                                                                                     |                |                         |                  |
| 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. 178)             |               |  |                |                         | 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        |
| <u>1</u> LAST PAY CERTIFICATE (M.F.W. 44)                    |               |                                                                                     |                |                         |                  |
| <u>2</u> 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                                                   |               |                                                                                     |                |                         |                  |
|                                                              |               |                                                                                     |                |                         |                  |
|                                                              |               |                                                                                     |                |                         |                  |
|                                                              |               |                                                                                     |                |                         |                  |
|                                                              |               |                                                                                     |                |                         |                  |
|                                                              |               |                                                                                     |                |                         |                  |
|                                                              |               |                                                                                     |                |                         |                  |
|                                                              |               |                                                                                     |                |                         |                  |
|                                                              |               |                                                                                     |                |                         |                  |
|                                                              |               |                                                                                     |                |                         |                  |
|                                                              |               |                                                                                     |                |                         |                  |
|                                                              |               |                                                                                     |                |                         |                  |



M. D. Depot Battalion Regiment

Regtl. No. D\* 153823

PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917

a.m.B. 27-7-18

(Class ONE)

1. Surname AUBIN
2. Christian name Joseph
3. Present address 41 St. Augustin St., Montreal P.Q. Canada.
4. Military Service Act letter and number 19589 DG
5. Date of birth July 20th, 1897
6. Place of birth St. Felix Co. Berthier P.Q. Canada.
7. Married, widower or single Married
8. Religion Roman Catholic
9. Trade or calling Laborer
10. Name of next-of-kin Armagene AUBIN
11. Relationship of next-of-kin Father
12. Address of next-of-kin 41 St-Augustin St., Montreal P.Q. Canada.
13. Whether at present a member of the Active Militia No
14. Particulars of previous military or naval service, if any None
15. Medical Examination under Military Service Act :-
(a) Place Montreal P.Q. Can (b) Date June 25th 1918 (c) Category A

DECLARATION OF RECRUIT

I, AUBIN Joseph, do solemnly declare that the above particulars refer to me, and are true.

Joseph Aubin (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 20 yrs. 11 mths.
Height 5 ft. 6 ins.
Chest measurement fully expanded 38 ins. range of expansion 4 ins.
Complexion Medium
Eyes Brown
Hair Brown
Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Commanding 2nd Depot Bn., 2nd Quebec Reg't. O.C. Depot Btl. Regt.

Place Montreal P.Q. Can. Date May 1st, 1918

4 M. D. Depot Battalion Regiment

Regtl. No. D\* 3158873

PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917 3158823

(Class ONE)

- 1. Surname AUBIN
2. Christian name Joseph
3. Present address 41 St. Augustin St., Montreal P.Q. Canada.
4. Military Service Act letter and number 19589 DC
5. Date of birth July 20th, 1897
6. Place of birth St-Felix Co. Berthier P.Q. Canada.
7. Married, widower or single Married
8. Religion Roman Catholic
9. Trade or calling Laborer
10. Name of next-of-kin Armagene AUBIN
11. Relationship of next-of-kin Father
12. Address of next-of-kin 41 St-Augustin St., Montreal P.Q. Canada.
13. Whether at present a member of the Active Militia No
14. Particulars of previous military or naval service, if any None
15. Medical Examination under Military Service Act :-
(a) Place Montreal P.Q. Can (b) Date June 25th 1918 (c) Category A

DECLARATION OF RECRUIT

I, AUBIN Joseph, do solemnly declare that the above particulars refer to me, and are true.

Joseph Aubin (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 20 yrs 11 mths.
Height 5 ft 6 ins.
Chest measurement fully expanded 38 ins. range of expansion 4 ins.
Complexion Medium
Eyes Brown
Hair Brown

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

[Signature] Lt.-Col. O. C. Commanding 2nd Depot Bn. 2nd Depot Btl. Regt.

Place Montreal P.Q. Can. Date May 1st, 1918

PARTICULARS OF RECRUIT  
DRAFTED UNDER MILITARY SERVICE ACT, 1917

Class

|                                            |  |
|--------------------------------------------|--|
| MURIN                                      |  |
| James                                      |  |
| 41 St. Andrew's St., Montreal E.C. Canada. |  |
| 1888 DC                                    |  |
| JULY 1917                                  |  |
| St. John Co. Barracks E.C. Canada.         |  |
| Recruited                                  |  |
| Roman Catholic                             |  |
| Labourer                                   |  |
| Assesses MURIN                             |  |
| Labour                                     |  |
| 41 St. Andrew's St., Montreal E.C. Canada. |  |
| Mr.                                        |  |
| 1888                                       |  |
| 41 St. Andrew's St., Montreal E.C. Canada. |  |

DECLARATION OF RECRUIT

AUBIN JAMES

DESCRIPTION OF CALLING

111

20

MURIN

James

James

23-11-18

P. 4.

DISTRIBUTION OF ESTATES

File No 649-1-5972

NAME, RANK & NO 5758325 Pte. J. Aubin BIRTH 1881

Whether Will exists Yes (Dated 18) Domicile Decided Que.

Married No Amount N.E. Account \$50.00

DATE of DEATH 19-9-18

SHARES ISSUABLE

| <u>Share</u> | <u>Relationship</u> | <u>Name</u>                                             | <u>Address</u> | <u>Am't.</u> | <u>Cheque No.</u> |
|--------------|---------------------|---------------------------------------------------------|----------------|--------------|-------------------|
| 9/16         | Father              | Bernogono Aubin, Esq., 41 St. Augustine St.<br>Montreal |                |              | 10311<br>\$21.50  |
| 1/4          | Mother              | Mrs. Amanda L. Aubin                                    | " "            | " "          | 9.54 10312        |
| 1/16         | Sister              | Mrs. Laura Aubin                                        | " "            | " "          | 2.39 10313        |
| "            | "                   | Bertha Aubin                                            | " "            | " "          | 2.39 10314        |
| "            | "                   | Amanda Aubin                                            | " "            | " "          | 2.39 10315        |

4-12-18

(The father's share includes the shares of five infant children, namely Donat, Paula, Yvonne, Annette and Jeanne Aubin).

.....  
Transferred  
SHARES:  
Retained

**PAID**  
DEC 5 1918

Distribution approved & authorized

MAJOR  
DIRECTOR OF MILITARY ESTATES.



1864

1864

1864

1864

1864

1864

1864

1864

1864

1864

1864

# CANADIAN CONTINGENT EXPEDITIONARY FORCE

## LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 3158825 Rank Private Name AUBIN Joseph

Corps 2nd Depot Bn, 2nd Que Regt. who was\* S.O.S. D.O. 263 (Drowned)

On September 19th, 1918, 1918, to \*\*\*\*  
 \*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from September 1st, 1918 1918, to Sept. 19th, 1918 the inclusive date of transfer or discharge.

| Dr.                                      | \$        | c.        | Cr.                                          | \$        | c.        |
|------------------------------------------|-----------|-----------|----------------------------------------------|-----------|-----------|
| Bal. Dr. from prev. month                |           |           | Bal. Cr. from prev. month                    |           |           |
| Advances } No.....                       |           |           | Reg'tl Pay <u>19</u> days at \$ <u>1.00</u>  | <u>19</u> | <u>00</u> |
| by } No.....                             |           |           | Field Allow. <u>19</u> days at \$ <u>.10</u> | <u>1</u>  | <u>90</u> |
| Cheques } No.....                        |           |           | Separation Allowances* (Monthly)             |           |           |
| Assigned Pay and Sep'n Allee. No.....    |           |           | Other Allowances*                            |           |           |
| Other charges <u>Q.M. Charges</u>        | <u>4</u>  | <u>79</u> | Other Credits* <u>Clothing Credit</u>        | <u>10</u> | <u>00</u> |
| Payment on transfer or discharge No..... |           |           | Bal. Dr. (to be deducted by new unit)        |           |           |
| Balance Cr. (to be paid by the new unit) | <u>26</u> | <u>11</u> | Total                                        | <u>30</u> | <u>90</u> |
| Total                                    | <u>30</u> | <u>90</u> | Total                                        | <u>30</u> | <u>90</u> |

\* Give particulars.

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of Assigned Pay for the month of..... 191..... } (to) Assignee..... }  
 and Sep'n Allee. for month of..... 191..... }  
 (Address) .....

(†) Insert amount to be assigned, whether it has been paid or not.  
 (‡) Insert "not" if amount has not been paid for period of account.

### On Transfer of an Officer

Outfit Allowance of \$..... has been paid by Paymaster, Military District No.....

### REMARKS:—

- State (1) date of enlistment June 1st, 1918
- (2) if married and if a Separation Allowance Card has been submitted.....
- (3) cause of discharge Drowned authority D.O. 263
- (4) authority for transfer.....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date September 21st, 1918

Place Montreal, P.Q.

*P. Brossier*  
 Lieut.  
 Asst. Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.





\* 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 \* Court of Officers

assembled at Peel Street Barracks Montreal Que.

on the 20th September 1918

by order of Officer Commanding 2nd Depot Bn 2nd Que.

for the purpose of collecting evidence and reporting

upon the death of 3158823 Pte Joseph Aubin

2nd Depot Bn 2nd Quebec Regt according to Para.

517 P. & A. Reg.

PRESIDENT.

Captain Geo. Guimond  
2nd Depot Bn 2nd Que. Regt

MEMBERS.

Lieutenant Fernand Dansereau  
2nd Depot Bn 2nd Que. Regt

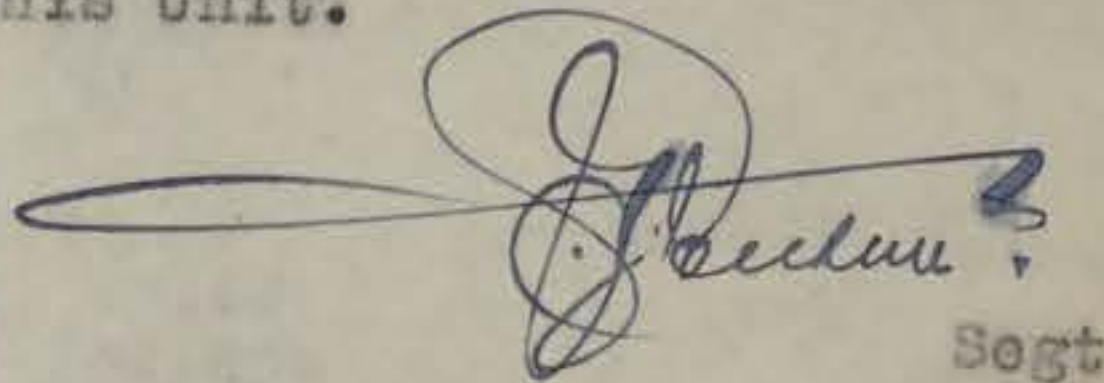
Lieutenant Leopold Ferland  
2nd Depot Bn 2nd Que. Regt

The Court having assembled pursuant to order, proceed to

take evidence as follows:-

1st Witness

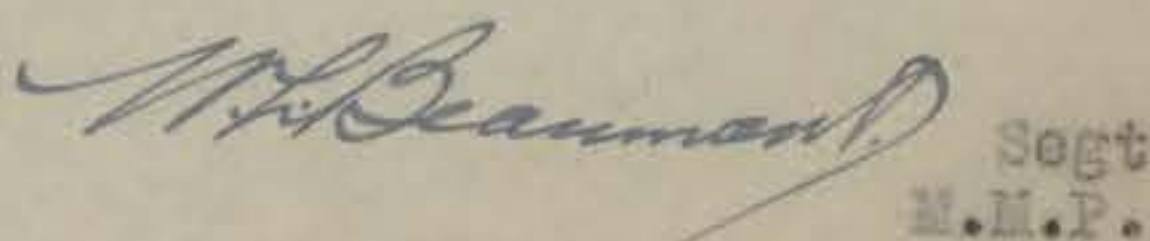
3155669 Sgt George Couture i/c Record Office being duly sworn gives evidence as follows:-  
Joseph Aubin reported to the 2nd Depot Bn 2nd Quebec Regt on 25th June 1918 having been called for service by the Registrar on 1st May 1918. On his being taken on strength he was allotted Regimental No 3158823 as shown on Documents kept in Records by this Unit.



Sgt

2nd Witness

2644400 Sgt Beaumont W.L. being duly sworn gives evidence as follows:-  
3158823 Pte Joseph Aubin was detailed for duty with Montreal Military Police 2nd Depot Bn 2nd Quebec Regt on 2nd July 1918 and has always been fulfilling that duty. On 12th September 1918 Pte Aubin was reported A.W.L. at Tattoo and he did not report himself to the Battalion since.



Sgt  
M.M.P.

3rd Witness.

Jeanier Massa, Montreal Detective Office  
Being duly sworn gives evidence as follows:-

On 18/9/18, I was notified there was a man found drowned in Ogilvie's Bassin, Lachine Canal. Immediately I proceeded to the Morgue and hereupon the 2 P.M. and Mr. Jos. McDonald claimed that they had found the body in the above named place. Hereupon I received instructions from Coroner Prince to notify an officer from his regiment to be here on 20/9/18 at ten o'clock in the morning.

*J. Massa*

4th Witness.

Armand Aubin, 41, St-Augustin Street, being duly sworn gives evidence as follows:-

On the 15th September 1918 I received a letter from the Officer Commanding 2d Depot in 2d Quebec Regt advising me that the body of my son had been found in the Lachine Canal. On 28th September 1918 I proceeded to the Morgue and after having examined the body and the uniform and a few personal articles found with the body I ascertained that it was the body of my son Joseph Aubin. I saw him for the last time on 12th September 1918 at about 8, 15 P.M., when he left home. He told me that he was going back to barracks. He was perfectly sober. My daughter went to see him to barracks on Sunday morning but they answered, that he was absent without leave.

*his  
Armandine + Aubin  
mark*

5th Witness

Lorenzo Prince Esq. Deputy-Coroner of Montreal  
being duly sworn gives evidence as per document  
annexed to these proceedings.

Finding

The Court having heard the evidence conclude that No3158883 Pte Joseph Aubin has been absent without leave from his Quarters from Tattoo on the 12th September 1918.

That he was drowned while he was on active service through accidental cause.

That this death has not occurred through the fault or neglect of anybody and that no crime accompanied or preceded it

That nobody should be held responsible of this death.

P R E S I D E N T

*Geoffrey*

Capt.

2nd Depot Bn 2nd Que. Regt

M E M B E R S

*James*

Lieut.

2nd Depot Bn 2nd Que. Regt

*Leop. Forland*

Lieut.

2nd Depot Bn 2nd Que. Regt.



Faint, illegible text at the top of the page, possibly bleed-through from the reverse side.

Faint, illegible text in the middle section of the page.

Small handwritten mark or signature in the middle of the page.

Faint, illegible text in the lower middle section of the page.



CANADA

PROVINCE DE QUEBEC

DISTRICT DE MONTREAL

C O U R   D U   C O R O N E R

Présent

Lorenzo Prince

Député coroner.

RE: JOSEPH AUBIN

Décédé à Montréal, le ou vers le douze septem-  
bre mil neuf cent dix-huit.

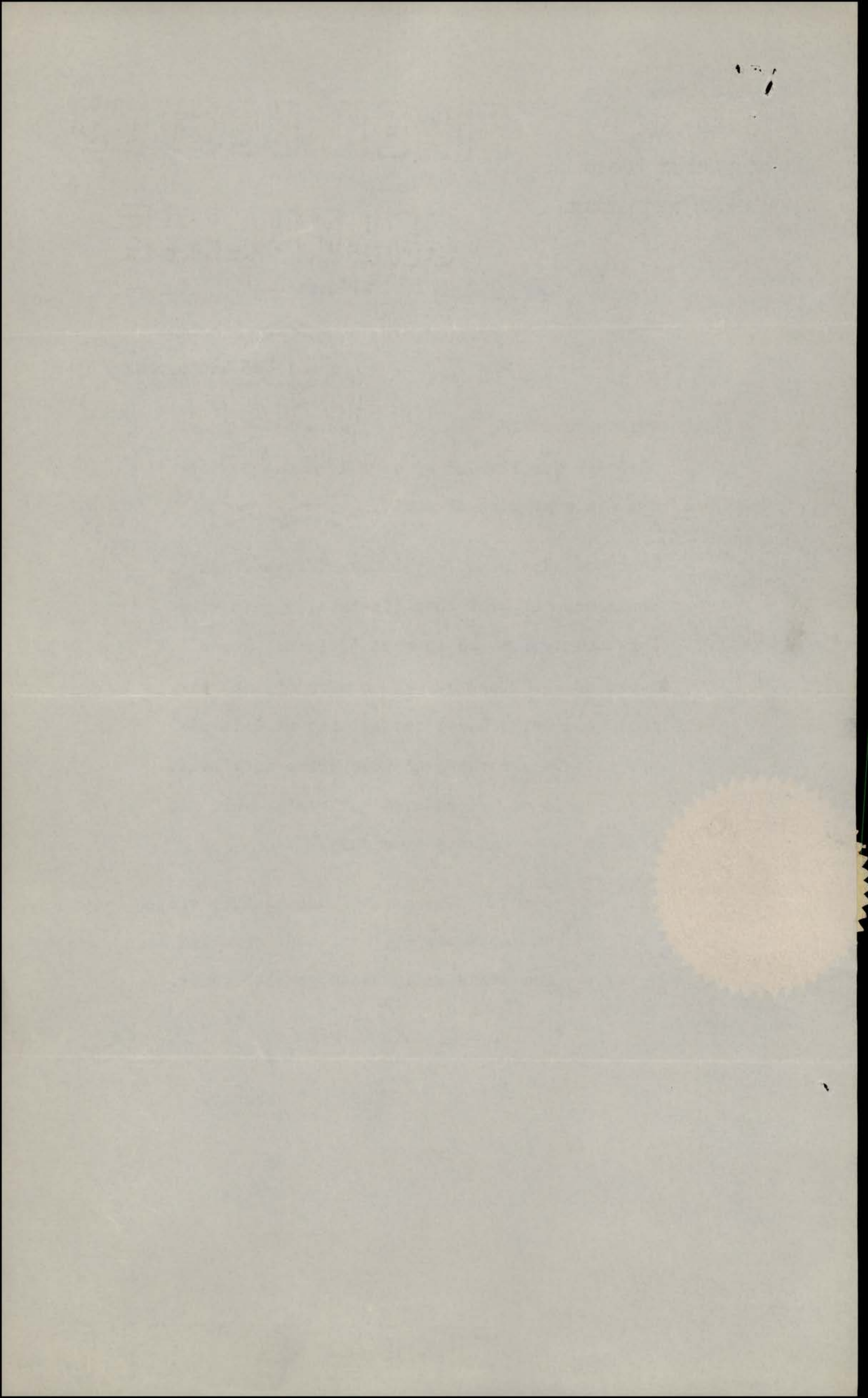
Après enquête sans Jury, à Montréal, le vingt  
septembre mil neuf cent dix-huit, je suis venu  
à la conclusion que la mort était due à une  
cause ACCIDENTELLE que cette mort n'était im-  
putable à crime à qui que ce soit ni à la né-  
gligence de personne; qu'aucun crime ne l'avait  
accompagnée ou précédée et qu'il n'y avait pas  
lieu de tenir enquête avec Jury.

Donné à mon bureau, à Montréal, ce vingt-  
un septembre mil neuf cent dix-huit, sous  
mon sieng et le sceau de notre Cour.



*Lorenzo Prince*

Député coroner.



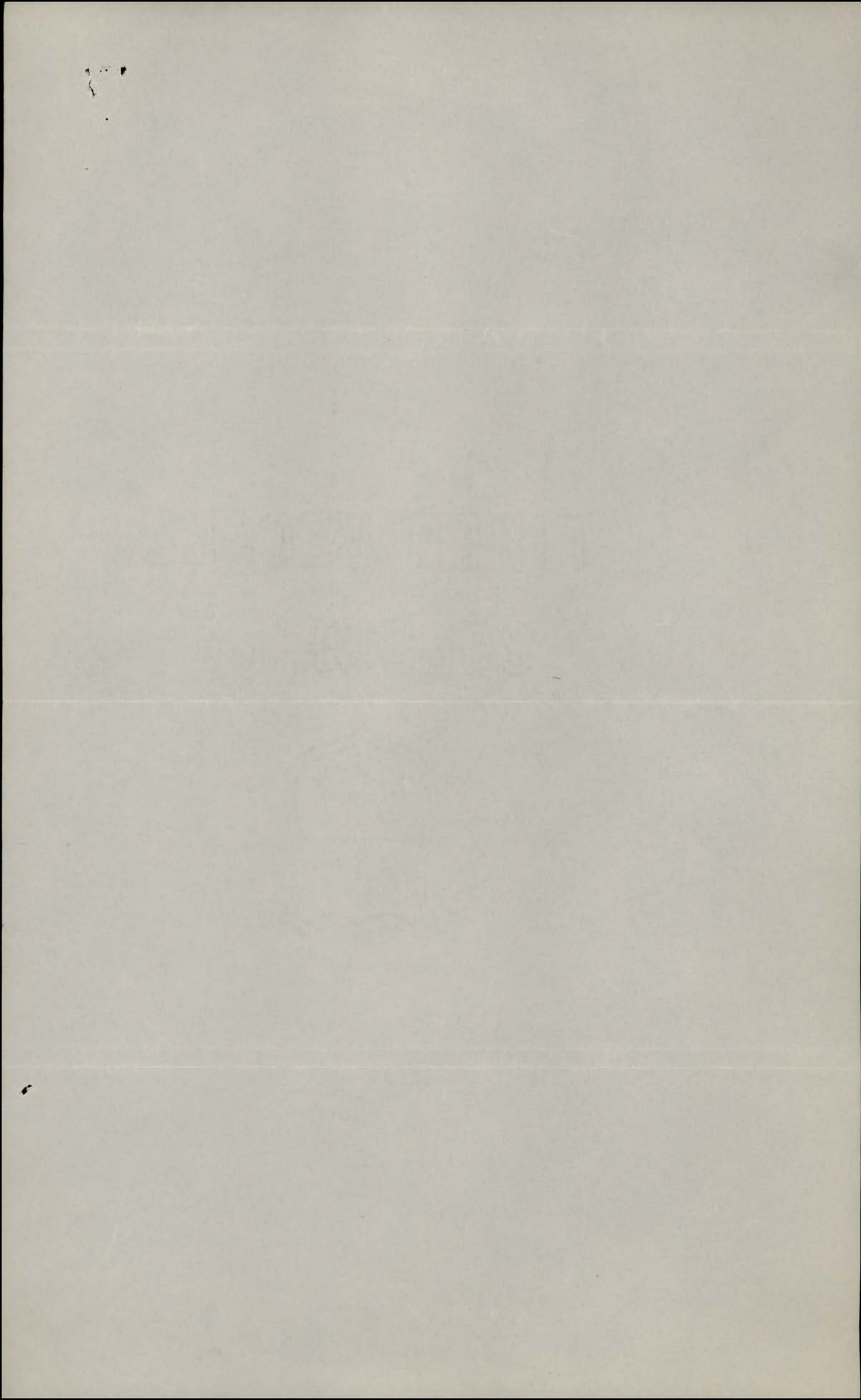
.....  
COUR DU CORONER  
MONTREAL  
.....

" R E "  
Joseph Aubin

" certificat "

le 21 septembre 1918





# FORM OF WILL

SEE INSTRUCTIONS ON BACK

If you do not specifically mention your life insurance it will be assumed to pass by this will.

POST  
MILITARY OFFICE  
OCT 27 1918  
H.Q.  
CANADA

Name, &c. I, <sup>E</sup>AUBIN Joseph  
D\*  
Regimental number 3158823 Rank Private serving in the  
2nd DEPOT BN. 2nd QUEBEC REG'T. Canadian Expeditionary Force,

declare this to be my last will, revoking all previous wills, if any.

Executor I appoint \_\_\_\_\_  
whose address is \_\_\_\_\_  
to be the executor of this my last will.

General gift I give to My wife Mrs. Laura AUBIN<sup>E</sup>  
whose address is 41 St-Augustin St., Montreal P.Q. Canada.  
all my property not disposed of above.

Date Dated at Montreal P.Q. Canada. this June 25th, 1918

Signature Joseph Aubin  
Signature of Soldier.

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

|           |                                  |                              |
|-----------|----------------------------------|------------------------------|
|           | 1ST WITNESS                      | 2ND WITNESS                  |
| Witnesses | Signature <u>Raymond L. L...</u> | Signature <u>P. L. B...</u>  |
|           | Address <u>Camp Barracks</u>     | Address <u>Camp Barracks</u> |
|           | Occupation <u>Soldier</u>        | Occupation <u>Soldier</u>    |

# INSTRUCTIONS

## NAME

Give your first names and surname in full. Fill in correctly your rank, regimental number and the name of the unit to which you belong.

## EXECUTOR

Appoint as executor some responsible person, preferably a civilian, and if possible someone who is permanently resident in the Province where the property is situate. It is advisable that the person to whom you leave your property should be the executor. For instance, if you leave your property to your wife, you should ordinarily appoint her. One, two or more executors may be appointed, but the appointment of more than two is inconvenient.

## LIFE INSURANCE

If you do not wish to pass life insurance by the will this should be stated.

## SHARES

If you wish to give part of your property to one person and part to another, write in the blank space a gift of the property of which you want to dispose specially, and then complete the rest of the form. Thus, if you wanted to give your farm and implements to your sister, whose name was Mary Smith, and to leave the rest of your property to your mother, whose name was Elizabeth Smith, you would write into the form what appears in italics below.

For example:—

*I give to my sister, Mary Smith, whose address is 154 William Street, Winnipeg, my homestead and farm implements.*

I give to.....*my mother, Mrs. Eliz. Smith,*.....  
whose address is.....*250 Yonge Street, Toronto,*.....  
all my property not above disposed of.

## DATE

Do not forget to insert the date on which the will is signed.

## WITNESSES

Two witnesses are absolutely necessary. They and the soldier must all be present together when the three signatures are made. It is advisable that the witnesses should be persons permanently resident in Canada, and they must not receive any benefit from the will.

MEDICAL HISTORY SHEET.

1. Surname AUBIN Christian name Joseph  
 2. Number of report for service or claim for exemption according to Postmaster's Receipt or schedule 19589 DC  
 3. Consecutive number on schedule of men reporting for service (if he appears on it) None  
 4. Address (including street and number if any) 41 St-Augustin St., Montreal P.Q. Canada.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 25th day of June 1918, by the undersigned medical board sitting at

5. Age as stated..... Years 6 Months.....  
 6. Apparent age..... Years..... Month.....  
 7. Height 5 Feet 6 Inches.....  
 8. Weight 139 Pounds.....  
 9. Chest measurement { Minimum 34 Ins. Maximum 38 Ins. }  
 10. Complexion Medium { Eyes Brown Hair Brown }  
 11. Physical development le 000 { Good Fair Poor }  
 12. Smallpox marks Chilo  
 13. Number of vaccination marks { Right arm 1 Left arm..... }  
 14. When vaccinated last Chilo  
 15. Distinctive marks and marks indicating congenital peculiarities or previous disease.....

16. Slight defects but not sufficient to cause rejection Variocole Left  
 The man denies having had { Rheumatism, Tuberculosis, Nervous or Mental disorder. Epilepsy Syphilis, Asthma. } We find no evidence of past { Rheumatism, Tuberculosis, Nervous or Mental disorder. Epilepsy Syphilis, Asthma. }  
 (Strike out disease admitted or suspected)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category

"A" Fit for General Service  
 (a) Vision. R. 80/120 L. OK  
 (b) Hearing. R. OK L. OK

Boisjoly Member. Chilote President. Marcbaum Member.

| Date           | Result    | VACCINATIONS | Date           | Result    | ANTI-TYPHOID INOCULATIONS, ETC. |
|----------------|-----------|--------------|----------------|-----------|---------------------------------|
| <u>25/6/18</u> | <u>OK</u> | <u>M. O.</u> | <u>25/6/18</u> | <u>OK</u> | <u>M. O.</u>                    |
|                |           | <u>M. O.</u> | <u>25/6/18</u> | <u>OK</u> | <u>M. O.</u>                    |
|                |           | <u>M. O.</u> |                |           | <u>M. O.</u>                    |

Joined 25th day of June 1918 at Montreal P.Q. Can.

| CORPS                                 | REG'TL NUMBER    | HABITS | DATE           |
|---------------------------------------|------------------|--------|----------------|
| <u>2nd DEPOT BN. 2nd QUEBEC REGT.</u> | <u>D*3158823</u> |        | <u>25/6/18</u> |

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| STATION | DATE | DISEASE | RESULT |
|---------|------|---------|--------|
|         |      |         |        |

N.B.—This sheet is 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.

Signature of Man Joseph Aubin

If raised in category, record category in a square. The M. O. will initial and date.



E/C

3158823

in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.

501M.—9-16

H. Q. 1772-39-910.

# Casualty Form—Active Service.

Unit, Regiment or Corps

2nd DEPOT BN. 2nd QUEBEC REGT.

Regimental No. <sup>D\*</sup> Rank Private Name AUBIN Joseph

C. E. F.

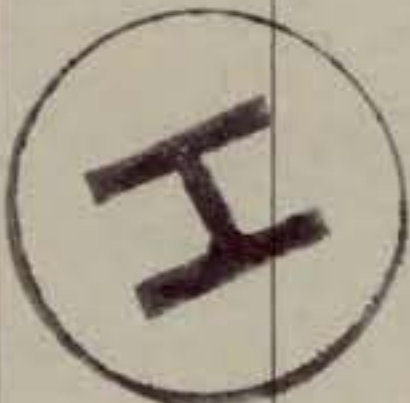
E

A

Enlisted (a) 1/5/18 Terms of Service (a) C.E.F. Service reckons from (a) 1/5/18

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) Laborer

| Report  |                    | Rec rd 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 |                                                                                                                                                                                                                 |          |         |                                                                                                                                                                            |
| 21-9-18 | 2/2 Que Regt.      | S.O.S. Deceased (Drowned)                                                                                                                                                                                       | Montreal | 19-9-18 | Pt. II O. 263<br><br><br><br><u>J. C. [Signature]</u><br><br>For Director of Records. |

(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<br>taken from Army Form B. 213,<br>Army Form A. 36, or other<br>official documents |
|--------|--------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|------|--------------------------------------------------------------------------------------------|
| Date   | From whom received |                                                                                                                                                                                                                 |       |      |                                                                                            |
|        |                    |                                                                                                                                                                                                                 |       |      |                                                                                            |

## List of Discharge Documents.

|                                      |                          |
|--------------------------------------|--------------------------|
| Reg. Conduct Sheet,                  | Militia form B. 263      |
| Squadron }<br>Battery }<br>Company } | Conduct Sheet, " B. 263a |
| or                                   |                          |
| Field Conduct Sheet                  | " W. 178                 |
| Copies of Convictions, by C. P.      | in MS.                   |
| Med. Hist. Sheet,                    | Militia form B. 313      |
| Casualty Form                        | " W. 54                  |
| Medical Report for Invalid§          | " B. 227                 |
| Dental History Sheet                 | " B. 465                 |
| Last Pay Certificate                 | " W. 44                  |
| Duplicate Discharge Certificate      | " W. 39A                 |
| ‡Form of Will                        | " W. 82                  |

|                          |                    |
|--------------------------|--------------------|
| Attestation Paper        | Militia Form W. 23 |
| or                       |                    |
| Particulars of Recruit   | " W. 133           |
| 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.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

This space to be for numbers.

## Proceedings on Discharge.

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

|                                                                                                     |                                                    |
|-----------------------------------------------------------------------------------------------------|----------------------------------------------------|
| No.                                                                                                 | D-5158823                                          |
| Rank                                                                                                | Private                                            |
| Surname                                                                                             | AUBIN                                              |
| Christian name                                                                                      | Joseph                                             |
| NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority. |                                                    |
| Corps (Squadron, Battery or Company)                                                                | 2nd Depot Bn, 2nd Quebec Regiment.                 |
| Date of discharge                                                                                   | September 19th 1918 (D.O. 263 2/2 Quebec Regiment) |
| Place of discharge                                                                                  | Montreal, Que, Canada.                             |

### 1. DESCRIPTION AT THE TIME OF DISCHARGE.

| Age                                    | Descriptive marks                         |
|----------------------------------------|-------------------------------------------|
| 20 years 11 months                     |                                           |
| Height 5 feet 6 inches                 |                                           |
| Complexion Medium                      |                                           |
| Eyes Brown                             |                                           |
| Hair Brown                             | Nil                                       |
| Trade Laborer                          |                                           |
| Intended place of residence            | 41 St-Augustin St, Montreal, Que, Canada. |
| (To be given as fully as practicable.) |                                           |

2. The above-named man is discharged in consequence of **being drowned**  
**Cat, "A" Fit for General Service**

Authority for discharge.....

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.

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 soldiers and the Officer Commanding his Squadron, Battery or Company.

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

M. F. B. 218.

200M.—5-18.  
H. Q. 1772-39-113.

(OVER)





## List of Discharge Documents.

|                                         |                            |                                                                                                     |                                   |
|-----------------------------------------|----------------------------|-----------------------------------------------------------------------------------------------------|-----------------------------------|
| Reg. Conduct Sheet,                     | Militia form B. 263        | Attestation Paper                                                                                   | Militia Form W. 23                |
| Squadron<br>Battery<br>Company          | } Conduct Sheet, " B. 263a | or                                                                                                  | Particulars of Recruit " W. 133   |
| or                                      |                            | Field Conduct Sheet " W. 178                                                                        | Proceedings on Discharge " B. 218 |
| Copies of Convictions, by C. P.         |                            | In the case of recruits who are rejected on final approval, the discharge documents will consist of |                                   |
| Med. Hist. Sheet,                       | Militia form B. 313        | (a) Proceedings on Discharge.                                                                       |                                   |
| Casualty Form                           | " W. 54                    |                                                                                                     |                                   |
| Medical Report for Invalid§             | " B. 227                   |                                                                                                     |                                   |
| Dental History Sheet                    | " B. 465                   | (b) Attestation.                                                                                    |                                   |
| Last Pay Certificate                    | " W. 44                    |                                                                                                     |                                   |
| Duplicate Discharge Certificate         | " W. 39A                   | (c) Medical History Sheet.                                                                          |                                   |
| ‡Form of Will                           | " W. 82                    |                                                                                                     |                                   |
| §Only if discharged " Medically unfit." |                            |                                                                                                     |                                   |
| ‡Only if man has not been overseas.     |                            |                                                                                                     |                                   |

Documents not accompanying this form should be crossed out.

*I hereby certify that the following documents are unobtainable.*

*Officer Commanding.*

*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.*

This space to be for numbers.

## Proceedings on Discharge.

899

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

|                                                                                                                    |                                                    |
|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| No.                                                                                                                | D-3158823                                          |
| Rank                                                                                                               | Private                                            |
| Surname                                                                                                            | AUBIN                                              |
| Christian name                                                                                                     | Joseph                                             |
| <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small> |                                                    |
| Corps (Squadron, Battery or Company)                                                                               | 2nd Depot Bn, 2nd Quebec Regiment.                 |
| Date of discharge                                                                                                  | September 19th 1918 (D.O. 263 2/2 Quebec Regiment) |
| Place of discharge                                                                                                 | Montreal, Que, Canada.                             |

### 1. DESCRIPTION AT THE TIME OF DISCHARGE.

| Age                                                   | Descriptive marks                         |
|-------------------------------------------------------|-------------------------------------------|
| 20 years 11 months                                    |                                           |
| Height 5 feet 6 inches                                |                                           |
| Complexion Medium                                     |                                           |
| Eyes Brown                                            |                                           |
| Hair Brown                                            | Nil                                       |
| Trade Laborer                                         |                                           |
| Intended place of residence                           | 41 St-Augustin St, Montreal, Que. Canada. |
| <small>(To be given as fully as practicable.)</small> |                                           |

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

**Cat, "A" Fit for General Service**

Authority for discharge.....

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.

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 soldiers and the Officer Commanding his Squadron, Battery or Company.

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

M. F. B. 218.

200M.—5-18.  
H. Q. 1772-39-113.

(OVER)

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

Nil

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

6. Medals and Decorations

Nil

To be copied by the Commanding Officer on the 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) Montreal, Que.

*M. A. ... Capt*  
Commanding Officer Co "F"

(Date) September 23rd 1918

Commanding 2/2 Quebec Regiment

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, and that I have received my permanent discharge certificate.

(Place) Montreal, Que. (Signature of Soldier.)

(Date) September 23rd 1918 (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.  
(84 Days) Total.... years.... days.

11. Confirmation of Discharge.

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

(Place) Montreal, Que.

*E. Mackay, O.C.*  
(Signature) Lieut-Colonel

(Date) September 23rd 1918 O.C. 2nd Depot Bn, 2nd Quebec Regiment.

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.)

List of Discharge Documents

Faint table with multiple columns and rows, likely containing document numbers and descriptions.