

23-10-18

Deceased

DISCHARGE DOCUMENTS

9595

R. O. No.

H. Q. No.



Name BARON COME,

Regt. No. 3090617 Rank Pte

Corps 9^{and} Depot Bn 2nd Div Que Regt

Date struck off strength 5-10-18



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

J
Q
g

Doc. S.F. #10- /
 Dental Hist Sheet /
 M & W. 113- /
 A & B. 122- /

mt 21
6.11.21
GAS

1 copy of will

13.26
20.26
28.26

4th. M. D. Depot Battalion Regiment

Regtl. No. 3090017

12-9-18

PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917

JAK. (Class 1.)

1. Surname BARON. 2. Christian name COME. 3. Present address Almaville. Co. Champlain. Que. 4. Military Service Act letter and number 70095 DC. 5. Date of birth Feb 7th, 1894 6. Place of birth Ste. Elmelie. Que. 7. Married, widower or single Single. 8. Religion R.C. 9. Trade or calling Engineer. Mechanic. 10. Name of next-of-kin Elie Baron. 11. Relationship of next-of-kin Father. 12. Address of next-of-kin Almaville. Que. SUFFICIENT ADDRESS 13. Whether at present a member of the Active Militia No. 14. Particulars of previous military or naval service, if any None. XXXX 15. Medical Examination under Military Service Act:— (a) Place Montreal. P. Q. (b) Date July 27th, 1918 (c) Category A

DECLARATION OF RECRUIT

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

Leone Baron (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 24 yrs. 4 mths. Height 5 ft. 4 ins. Chest measurement fully expanded 37 ins. range of expansion 37 ins. Complexion Med. Eyes Hazel. Hair Light. Distinctive marks, and marks indicating congenial peculiarities or previous disease. Eyes. R. 40 L. 40 Hearing. R. OK L. OK

Major. for O.C. 1st Depot Bn. 1st Quebec Regiment. O. C. First. Depot Btin. First Quebec. Regt.

Place Montreal. P. Q. Date July 27th, 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.

DEPT. MILITARY & DEFENCE
OCT 20 1918
H.Q. CANADA

Name, &c. I, BARON Come.
Regimental number 3090617 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 Elie Baron.
whose address is Almaville. Que.
to be the executor of this my last will.

General gift I give to Elie Baron
whose address is Almaville. Que.
all my property not disposed of above.

Date Dated at Montreal this 27 July 1918

Signature Come Baron
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>Harold Dawson</u>	Signature <u>C. Deshaies</u>
	Address <u>Guy St Barracks. Que.</u>	Address <u>Guy St Barracks. Que.</u>
	Occupation <u>Soldier</u>	Occupation <u>Soldier.</u>

OCT 22 1918

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.

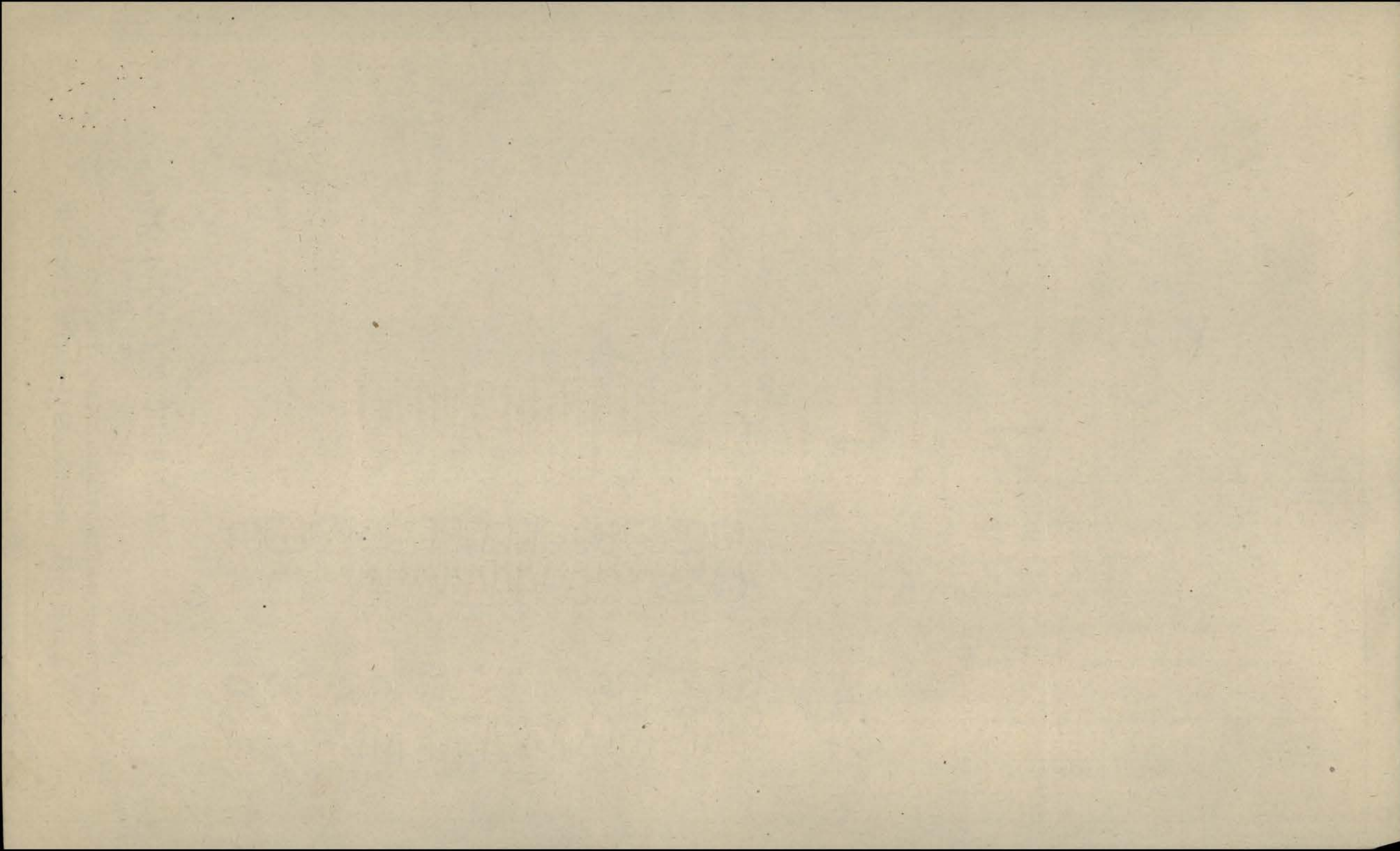
I give to.....*my mother, Mrs. Eliz. Smith,*.....
whose address is.....*250 Yonge Street, Toronto,*.....
all my property not above disposed of.

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.



DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 8165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

- 1. Christian names Baron 2. Surname Emil ✓
- 3. Rank Spr 4. Original Unit 41st 5. Reg. No. 117667 ✓
- 6. Address, in full, to which future payments of gratuity are to be forwarded G.P.O. Wafston Ave ✓
- 7. Date of enlistment in the C.E.F. 29-8-15 ✓
- 8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge no
- 9. Relationship of such dependent no
- 10. Address, in full, of such dependent no
- 11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? no
- 12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
- 13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?
- 14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service.
- 15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served.
- 16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department no
- 17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? no

FINANCE

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *No*

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *No*

20. ~~Have you been issued with a War Service Badge? If so what class?~~

21. Have you, during the present war, served in the Imperial Forces? *No*

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *No*

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *No*

(b) If so, was such reversion in consequence of misconduct or inefficiency?

24. Are you now serving in the C.E.F.? *No* If not, give: (a) Date of discharge *Dec 1919* (b) Reason for discharge *Demitted*

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit.

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *Emil Baron*

Place of Residence: *Wafston Ave*

Declared before me at: *Severpool*

This *First* day of *Apr* 19 *19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

W. Clade Laph *J. J. Grant Mag C.B. 7.*

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....

Certified Correct.

District Paymaster.

Register No. DB/356

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 902-6-10

Reg't No. 3090617 Name Home Baron
(Christian Name) (Surname)
Unit Sib Ex F. Rank Pte. Date of enlistment.....
Date of casualty 5.10.18. B.P.C. File No. 82369
Was service performed overseas? yes

*M.A.
9.7*

DEPENDENT

Name Mr. Elie Baron, Relationship Father.
Address Cap de la Madeline,
Quebec.

M.F.W. 2652
25M-6-20.
H.Q. 1772-39-1473

Amount of Special Pension Bonus \$ MB Nil Abstracted by M. Knox.

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

Total deductions \$

Balance due \$

Cheque No. Date issued

Dated 18/8/20

REMARKS : Pension cancelled 30 ⁶/₂₀
Father not incapacitated
Ineligible as no PA was
paid.

Clerk J. G. Muller

Audited by
.....
Date

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		

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

Remarks:

Fill in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 10s.

500M.—9-16

H. Q. 1772 39-9:3.

Casualty Form—Active Service.

Unit, Regiment or Corps

2nd DEPOT BN. 2nd QUEBEC REG'T.

Regimental No. 3090617 Rank Pte Name BARON Come

C. E. F.

Enlisted (a) 27-7-18 Terms of Service (a) C.E.F. Service reckons from (a) 27-7-18

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) Mechanic

mx
6.1.18
g.s.

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
<u>Refer. 6-1918</u>	<u>M.D. Fort</u> <u>Transferred</u>	<u>L. Depot Bn. 2nd Quebec Regt</u> <u>Auth. SO 1419 of 30-8-18 22. B. 5824</u>	<u>Montreal</u> <u>Que</u>	<u>6-9-18</u>	<u>Par. See Order 247</u> <u>ADJT.</u> <u>for O. C., 1st. Depot Bn, 1st Quebec Regiment.</u>
<u>Oct. 5-1918</u>		<u>Transferred to French-Canadian Company, Siberian Expeditionary Force. Authority D. O. 1631</u>	<u>Montreal.</u>	<u>5/10/18</u>	<u>Cap't.</u> <u>Adjutant 2nd Depot Bn., 2nd Quebec Reg't.</u> <u>Captain,</u> <u>O.S. "C" Coy 259th. Bn. C.S.B.F.</u>
		<u>DECEASED at 10 A.M. October 5th. 1918 at the presbyterian College Neur. Mil. Hospital.</u>	<u>Montreal.</u>		

SEP 1918



1) 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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Sig. on A.P. - Baron, Come,

H. Q. 649-B-30952.

~~BARON~~, Pte. Come. #3090517, 1st/1st Que. Regt.

Baron

M. & D. (Father) Mr. Elie Baron,
Cap de la Madeleine,
Co. Champlain, P.Q.

P. & S. " ditto.

(Ser. # 806426)

Mem. C. (Mother) Mrs. Elie Baron,
(address as above)

Scroll Desp MAY 3 Reqn. No 2.40599

Canada only.

Plaque Desp

24 7/2 - 4-25 P43465 JAS

673

M C. 40913 JAN 13 1921

[Faint, illegible markings]

LEDGER NO. ^{v.} 3885 - 125.

SERIAL NO.

REG. NUMBER 3090617 NAME Barrow

RANK Spw CORPS 6 & 67

AGE SERVICE

NAME OF HOSPITAL Royal Victoria PLACE Montreal

DATE OF ADMISSION 4/10/18

DISEASE Influenza (Pneumonia)

TRANSFERRED TO OTHER HOSPITALS

Died 5/10/18

OPERATION

DISCHARGED TO IN CATEGORY

REMARKS:.....

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