10493

R. O. No.

H. Q. No.

~~DISCHARGE~~ DOCUMENTS

Name BECHINGER, LEGER.

Regt. No. 328/211 Rank Pte.

Corps 1st D.B. 2nd C.R.

Deceased. (S.O.S. 14.12.18.)

10193

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.....1.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

Roc S.F. 10-1
A.F.B. 122-1
M.F.W. 113-1
D.F.B. 465-1

M. F. W. 62.
100m.—8-17
H. Q. 1773—29—935.

ORIGINAL 166

5th M. D. FIRST Depot Battalion SECOND QUEBEC Regiment

Regtl. No. 3281211

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE)

REGISTRY OFFICE 2nd QUEBEC REGT. JAN 21 1919 1/2 Q.R.

Military District No. 5 QUEBEC JAN 21 1919 17-B-138 D. No.

1. Surname: Belanger
2. Christian name: Leger
3. Present address: 14 St Cyrille st. St Joseph de Levis P.Q. Can.
4. Military Service Act letter and number: 182232
5. Date of birth: 17 February 1895
6. Place of birth (town, township or county and country): St Joseph de Levis P.Q. Canada
7. Married, widower or single: Single
8. Religion: Roman Catholic
9. Trade or calling: Laborer
10. Name of next-of-kin: Joseph Belanger
11. Relationship of next-of-kin: Father
12. Address of next-of-kin: 14 St Cyrille St. St Joseph de Levis PçQ. Can.
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: Nil
15. Medical Examination under Military Service Act:—

(a) Place: Quebec (b) Date: 28/5/18. (c) Category: A2

DECLARATION OF RECRUIT

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

Lé Belanger (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age: 23 yrs. – mths.

Height: 5 ft. 6½ ins.

Chest measurement: fully expanded 34 ins.; range of expansion 3½ ins.

Complexion: Medium

Eyes: Brown

Hair: Brown

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

O. C. 1st DEPOT BATTALION, 2nd QUEBEC REGIMENT

for O. C. Depot Btln.

SECOND QUEBEC Regt.

Place: Drill Hall Quebec Date: 28/5/18.

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

FORM OF WILL

I, Leger Belanger, (Name in full)

Regimental Number 3281211 serving in 1st. Depot Bt. 2nd Quebec Regt.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

Joseph Belanger. Father
14 St. Cyrille St.,
St. Joseph de Levis, P.Q. Can.

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Joseph Belanger Father
14 St. Cyrille St.,
St. Joseph de Levis, P.Q. Can.

Name and Address of person or persons to receive personal estate* (*See note*).

NOTE
This space for the appointment of Executor if necessary.

IMPORTANT NOTE
This must be signed and Dated by THE SOLDIER HIMSELF.

this 28 day of ~~Mai~~ Mai A.D. 1918

L. Belanger. Signature of Soldier.

*N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

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

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness P.P. Trembley.

Address of Witness Drill Hall, Quebec, P.Q.

Occupation of Witness Clerk.

Signature of Second Witness Antoine Cloutier.

Address of Witness Drill Hall, Quebec, P.Q.

Occupation of Witness Clerk.

M. F. W. 82.
300M.-12-16.
1772-39-983.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

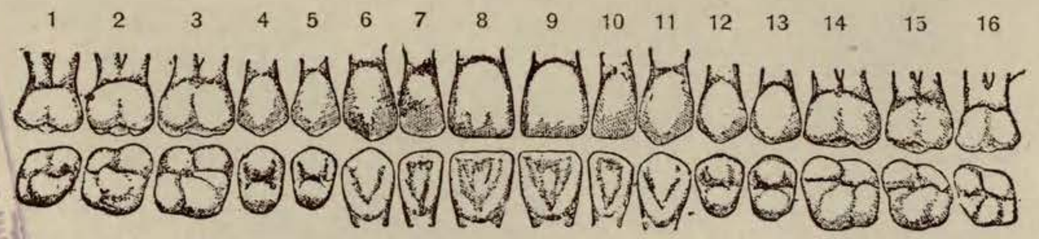
District 5

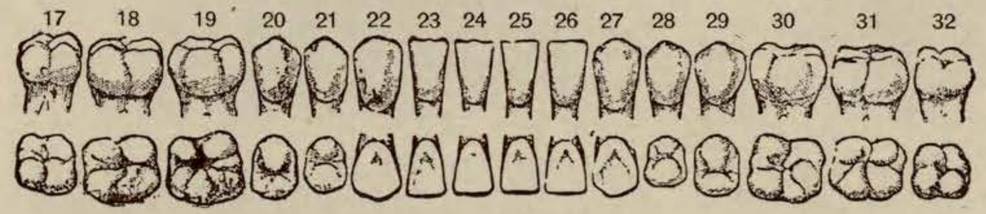
No. 328121

Ministère du Travail et de la Main-d'œuvre Québec
17-B-138
M. D. No.

Name of Soldier BELANGER Leger

Regiment 1st/2nd Quebec Regt. Rank Private





INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

   Only such entries to be made on this sheet as will show:

   1. Condition on examination (in red).
   2. Condition on leaving Canada.
   3. Condition on discharge.

	Date		Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES U	DENTURES L	DENTURES P	Gold Clasp	Gold Filling	CROWNS Gold	CROWNS Porcelain	Bridge Work	OPERATOR	Military District	REMARKS
Condition on first Examination																							

M.F.B. 465.
200M.—6-18.
1772-39-950

15-6-18

Reg. No. 328 1211

Rank, Pte

Name, Belanger, Leger

Unit, 1st/2nd R.

This form to be completed and filed with

the M/N Ptes' documents.

H. Q. File Reference,

Date Struck Off Strength, 14-12-18

Reason, Deceased.

Military District, M.D. 5.

Auth. M.F.H. 54

Clerk's Initials, CS

Date, 24-1-19

Doc; S.F. 10.
1000-9-18
LHP

M.S.A. 15 F.

LOI DU SERVICE MILITAIRE

FEUILLE MÉDICALE

IMPORTANT.—Si le nom de l'homme n'apparait pas sur la liste des hommes répondant à l'appel, ou s'il n'a pas fait une demande d'exemption ou une déclaration d'être prêt à répondre au service militaire ou, dans le cas où il aurait fait l'une ou l'autre, s'il en ignore le numéro, on l'informera qu'il doit attacher la copie de cette feuille médicale (qu'on lui remettra) à la déclaration ou à la demande d'exemption qu'il pourra faire en s'adressant à n'importe quel maître de poste en Canada, ou envoyer lui-même après avoir marqué dessus le numéro du reçu qu'il a reçu du maître de poste, au Registraire ou au député Registraire de la Loi du Service Militaire. Dans tous les cas le double de cette feuille médicale sera envoyé par le Bureau Médical au Commandant du District à moins que ce dernier n'ait donné ordre de l'envoyer directement au Registraire ou Député Registraire.

1. Nom de famille ..... Nom de baptême .....
2. Numéro de la réponse à l'appel ou de la demande d'exemption d'après le reçu du maître de poste ou la liste .....
3. Numéro consécutif de la liste des déclarations (s'il y apparait) .....
4. Adresse (y compris la rue et le numéro s'il en existe) .....

Voici les renseignements exacts qui résultent de l'examen du sujet ci-dessus nommé, fait le ..... jour de ..... 191..., par le bureau médical soussigné siégeant à .....

5. Âge affirmé ..... ans ..... mois.
6. Âge apparent ..... ans ..... mois.
7. Hauteur ..... Pieds ..... pouces.
8. Poids ..... livres.
9. Mesure de poitrine { Minimum ..... pouces / Maximum ..... pouces }
10. Couleur ..... { Yeux ..... / Cheveux ..... }
11. Développement physique ..... { Bon / Moyen / Pauvre }
12. Marques de vérole .....
13. Nombre de vaccinations { Bras droit ..... / Bras gauche ..... }
14. Dernière vaccination .....
15. Indices distinctives et indices de particularités congénitales ou de maladie antérieure .....
16. Défauts légers insuffisants pour l'exemption .....

Le sujet nie avoir souffert de { Rhumatisme / Tuberculose / Syphilis } Nous ne trouvons pas de preuve qu'il ait souffert de { Rhumatisme / Tuberculose / Syphilis }

(Rayez la maladie admise ou soupçonnée.)

Nous avons examiné le sujet ci-dessus nommé, conformément aux règlements pour les examens médicaux des F.E.C. et il est classé dans la catégorie .....

..... *Président.*

..... *Membre* ..... *Membre*

Date	Résultat	Vacciné	Date	Résultat	Innoculations, Anti-Typhoïdes, Etc.
		O.M.			O.M.
		O.M.			O.M.
		O.M.			O.M.

Enrôlé le ..... *jour de* ..... *191...* *à* .....

	Corps	No. dans le régiment	Habitudes	Date
Enrôlé				
Transféré à				

EXAMINÉ OU REFUSÉ PAR UN BUREAU MÉDICAL.

Quartier	Date	Maladie	Resultat

N. B. Il sera disposé de cette feuille conformément aux règlements du service médical de l'armée, si le sujet devient inapte au service; la date et la cause seront indiquées au verso.

Nom de famille Belanger Nom de baptême Leger

QUARTIER	Date de l'arrivée au quartier	Dates de l'Admission à l'hôpital			Dates de Sortie de l'hôpital			MALADIE	Nombre de jours à l'Hôpital	Remarques sur la nature de la maladie; comment contractée; légère ou violente; si complètement guérie; s'il y a eu traitement particulier; dans les cas de maladies vénériennes, mentionnez la maladie originaire et si le mercure a été administré. Si c'est un accident, dites s'il est arrivé en devoir et si une enquête a été faite. Date et détails de fourniture de fausses dents et autres articles de chirurgie. Détails d'innoculations prophylatiques.	Signature de l'officier médical
		Jour	Mois	An	Jour	Mois	An				
Lusteu		5	6	19	18	6	18	Rheumatism	14	Improved return to Duty C III	[illegible]

Jeffery Hale

CASE HISTORY SHEET.

No. 328121 Rank Pte Name Belanger Leger Age 23

Unit 1 Depot Completed years of service (Where and how long) 1 yr

Date of admission 5-6-18 Date of discharge 18/6/18

Diagnosis Rheumatism Place of origin Lanzon

CONDITION ON ADMISSION AND PROGRESS OF CASE

Admitted to Hosp. 5-6-18 at one o'clock in the afternoon complaining of pain & swelling in the Rt. foot at the instep. Dates from an injury 2 months ago. Pain in rt. knee also.

6/6/18. 7/6/18. 8/6/18 - 9/6/18. foot improved.
10/6/18 - 11/6/18 -
12/6/18 to date. Slight improvement.
Discharged - as he has leave of 30 days granted.

FAMILY HISTORY negative

(Tuberculosis, mental or nervous diseases.)

TREATMENT Rest in bed. Friction Wintergreen - Aspirin gr. v. t.i.d.

(Especially any specific or special form.)

CONDITION ON DISCHARGE, Discharged - Cat. C III

(and disposal made of case.)

Date 18/6/18

J. Dobson Capt.
Medical Officer i/c case.

M. F. B. 313a.
50M.-11-17.
1772—39-439.

A 108
6

CLINICAL CHART.

(To be pasted into Case Book opposite Patient's case.)

Corps 1 Depot Hospital Station Jeffery Hale

No. 328121 Rank and Name Belanger Leger Pte Age 23 Service CAMC

Disease Rheumatism Date of Admission 5-6-18 Date of Discharge 18/6/18 Result Improvement Case Book 521 Folio 3

Dates of Observation	June 5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	July 1	2	3	4	5
Days of Disease																															
Temperature Fahrenheit (TIME a.m. p.m.)																															
107° (8 6 4 2)																															
106° (8 6 4 2)																															
105° (8 6 4 2)																															
104° (8 6 4 2)																															
103° (8 6 4 2)																															
102° (8 6 4 2)																															
101° (8 6 4 2)																															
100° (8 6 4 2)																															
99° (8 6 4 2)																															
98° (8 6 4 2)																															
97° (8 6 4 2)																															
(8 6)																															
Pulse per Minute	76	64 76	74 72	76 80	76 76	68 72	74 76	74 76	80 84	72 80	74 76	78 68	74 76																		
Respirations per Minute	20	18	20 20	18 18	18 20	20 20	18 18	18 20	18 20	18 18	18 20	18 18	18 20																		
Motions	T	T T	0 T	T 0	T T	T 0	0 T	0 T	0 T	T T	T 0	T T	T T																		

Signature J Babin Capt. In charge of case.

M. F. B. 288.

50m.—7-16.
H. Q. 1772-39-513.

CLINICAL CHART.

(To be pasted into Case Book opposite Patient's name.)

Corps

Hospital Station

No. Rank and Name Age Service

Disease Date of Admission Date of Discharge Result Case Book Folio

Date & time of Admission

Date & time of Discharge

Temperature Pulse

107°

106°

105°

104°

103°

102°

101°

100°

99°

98°

97°

Pulse or Mean

Temperature or Mean

Signature

In charge of case

1st DEPOT BATTALION 2nd QUEBEC REGIMENT

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-20.

Military District No. 5 QUEBEC, QUE. 19 JAN 1919 17-B-138

Casualty Form—Active Service.

Unit, Regiment or Corps 1st DEPOT BATTALION 2nd. QUEBEC REGIMENT

Regimental No. 3281211 Rank Pte Name Leger Belanger

Enlisted (a) 28/5/18 Terms of Service (a) C. E. F. Can. Exp. Force Service reckons from (a) 28/5/18.

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		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				
17-1-19		Having died while on Conditional Leave is struck off strength with effect from 14.12.18.	Sutton	17.1.19.	

LT.-COL.
1st DEPOT BATTALION, 2nd QUEBEC REGIMENT

Mt 17-12-18 dc

(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				

649-B-28534

1st, 2Spo - Bn 2nd Que Rgt

Belanger, Leger, Pte. No. 3281211 C.E.F.

Med. and Dec.	Father	Jos. Belanger, 14 rue St. Cyrille, Lauzon, Que.
P. and S.	Father	Same as above.
Memorial Cross	Mother	Mad. J. Belanger, Address as above.

(Ser. # 806466.)

Scroll Desp MAY 4 - 1921 Regn. No 241165

Canada Only.

Plague Desp DEC 8 1921 Roll No 39621 Page No 819872

922

638223

DEC 23 1920

A108

REG. No. 3281211. NAME (SURNAME FIRST) Belanger Leger.

RANK Pte. CORPS 1 Depot.

AGE 23. SERVICE 1/52.

NAME OF HOSPITAL Jeffery Hale PLACE Quebec.

DATE OF ADMISSION 5-6-18.

DISEASE Rheumatism.

DISCHARGE 18-6-18.

OPERATION

DISCHARGED TO DUTY Cat. C III

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS

H. Q. 649-13-28534

M. D. No. 5

T. O. S. May 28th 1918.

D. O. Pt. II 147 of 27/5/18.

S. O. S. Dis 14-12-1919

Reason Deceased

Auth. D.O. 17. 17-1-19 1/2nd Que

Surname Belanger

Christian names Leger

Regtl. No. 325121 Rank Pte

Unit 2nd Que Regt 1st Dpo Bn

Next of kin Bélanger Joseph Relationship Father

Address 14 St Cyprien St St Joseph de Levis P.Q.

Also notify:

BORN—Place Canada. St Joseph de Levis P.Q. Date Feb. 17th 1895.

ATTESTED—Place Quebec, P.Q. Date May 28th 1918.

O/S

R/C

W. 22—75M-5-18. 1772-39 839.

No. 3281211 RANK Pte NAME Bélanger Léger

T. O. [redacted] UNIT 1st Depot Battalion, 2nd Quebec Regt.

M. D. 5

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 May 28	1918 May 31	W	Drown N Coy 28-5-18	N.O. 149 of 5-18