C.E.F. REGIMENTAL DOCUMENTS

NAME BOIVIN, HENRI REGT. No. 50621 UNIT 57 BN H. Q. FILE No. 26354

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)					MISSING
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					1-10-18
REGT. CONDUCT SHEET (M.B.W. 293 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					

M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377

50621 B

ATTESTATION PAPER

No. 50621

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? Bowin — Henri
2. In what Town, Township, or Parish, and in what Country were you born? St Gabriel de Brandon
3. What is the name of your next-of-kin? Charles Bowin — father
4. What is the address of your next-of-kin? 183 Rawlinson Montreal
5. What is the date of your birth? 7 March 1894
6. What is your trade or calling? Briquetier
7. Are you married? No
8. Are you willing to be vaccinated or re-vaccinated? yes
9. Do you now belong to the Active Militia? No
10. Have you ever served in any Military Force? 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

Henri Bowin (Signature of Man.)

H. Todd Capt (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Bowin Henri, 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.

Henri Bowin (Signature of Recruit.)

Date 17 May 1915 H. Todd Capt (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Henri Bowin, 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.

Henri Bowin (Signature of Recruit.)

Date 17 May 1915 H. Todd Capt (Signature of Witness.)

CERTIFICATE OF MAGISTRATE.

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

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Montreal this 18 day of May 1915.

E. A. Patterson J.P. (Signature of Justice.)

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

E. Cameron Lt (Approving Officer.)

M. F. W. 23.
200 M.—3-15.
H.Q. 1772-39-841.

auth in D H's
men not accounted for

~~Lt Col~~
OC. 57 Bn

Corded
7-16
BB

DESCRIPTION OF Boivin Henri ON ENLISTMENT.

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

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

Chest measurement:
- Girth when fully expanded ..... 36 ins.
- Range of expansion ..... 2 1/2 ins.

Complexion Blond

Eyes Blue

Hair Blond

Religious Denominations:
- Church of England .....
- Presbyterian .....
- Methodist .....
- Baptist or Congregationalist .....
- Other Protestants ..... (Denomination to be stated.)
- Roman Catholic Yes
- Jewish .....

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

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

Cyst of the umbilicus

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 May 18th 191 5 — Geo. Chabot Captain

Place Montreal — ~~XX~~ F. A.

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

Henri Boivin 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.

E. Rivard (Signature of Officer.)

Date May 18 191 5

Lt. Col.
O.C. 57 Bn.

L. L. 28912. [illegible] & D. 8368.

M. F. W. 12.
25m.—10-17.
H. Q. 1772-39-819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs Mary L ~~Boivin~~ Boivien

Address 183 Bourbonnier St.
Montreal Q.

Rate 15.00 NOV 1 1917

By Whom Assigned ~~Boivin~~ Boivien H.

Regtl. No. 50621

Rank Pte.

Corps 1 Q Regt 2 Cdn

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

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

Register No. DB1700

A.P. File No. 1145-H-19

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

Regt'l No. 50621 Name Henry Bowin (Christian Name) (Surname)

Unit 5th R.M.L. Rank Pte. Date of enlistment

Date of casualty 1-10-18 B.P.C. File No. 120175

Was service performed overseas? Yes

DEPENDENT

Name Mr. Charles Bowin Relationship Father

Address 183 Bourbonnere St.
Montreal,
P.Q.

Amount of Special Pension Bonus $ Nil Abstracted by J. LeClair

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

Clerk W. Mitchell

REMARKS: Pension cancelled, 30-6-19.
Pensioner earning $20.00 per week.
Not eligible under P.C. 1486
No S.A. paid

Audited by

Date

Noted 18/8/20

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

Army Form B. 103. 2 Regimental Number 50621

Casualty Form—Active Service.

Regiment or Corps

Rank Pte Surname Bowen Christian Name H.

Religion Age on Enlistment years months

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

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

Extended { } Re-engaged { } Qualification (b) or Corps Trade and rate

Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked			
		Disembarked			
23.10.18	Unit.	S.O.S. as missing	Field	1.10.18	Letter 26/10/18
					LIEUT. FOR LT COL. A.A.G.
3/8/19	14 Bn	R/ Died on or about 1/10/18 and hereby S.O.S.		a.o 20	Lieut
					for D/R.

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

W. 8525—M2733 20,000 9/17 (35811) C. P. & S., Ltd., Form B./103 E/1807. P.T.O.

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-926.

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

Casualty Form—Active Service.

Unit, Regiment or Corps ~~1st DEPOT BN. 1st QUEBEC REG'T.~~ 2nd Reinf Dft. R.H.C. to 1st D.R.

Regimental No. 50621 Rank Pte. Name Boivin, Henri

Enlisted (a) 17 May 1915 Terms of Service (a) ~~C.E.F.~~ C. E. F. Service reckons from (a) 18 May 1915

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) Bricklayer

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				
		Embarked	Montreal	30-10-17	H.M.T. "Canada"
		Disembarked	Liverpool	19-11-17	
23.11.17	20 Res	2.D.S.	Bramshott	20.11.17	D.O. 320
4/12/17	20 Res	Granted furlough	Bramshott	4/12/17	65/403 809/10
14/2/18	20 Res	S.O.S. on posting to 1st Que Reg Depot	B'shott	14/2/18	D.O. 45
16/2/18	1st D.R.D.	J.O.S. on comm 2.66 D	B'shott	14/2/18	D.O. 42
15.2.18	2 CCD	attached to 2 CCD	Bramshott	14.2.18	Pt 2 # 39
2 Mar 1918	OC. 2nd CCD	Ceases to be attached to 2nd C.C.D. on return to 20th Res. Bn.	Bramshott.	1 MAR 1918	Pt. 2 D.O. No. 52 for OC. 2nd CCD.
5/3/18	10.R.D.	S.O.S to 20 Res Bn	BRAMSHOTT.	1/3/18	D.O. 56
7/3/18	20 Res	S.O.S & cease on comd 2nd CCD	BRAMSHOTT.	7/3/18	D.O. 61

20th CANADIAN RESERVE BN

(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.

50621 Bowen A

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				
25/4/18	20th Res	Fire transp (Draft leave)	Bishott	18/4/18	D.O. 115
25/4/18	20th Res	S.O. Son posting to 10th Res Bn.	Bishott	25/4/18	D.O. ~~115~~ 113 [illegible] Lt. & Adjt. 20th Canadian Reserve Bn.
25/4/18	10th Res Bn	S.O.S from 20th Res. Bn ✓	Bishott	25/4/18	D.P. II. 95
31.5.18	10th Res Bn	S.O.S on transfer to 23rd Res Bn in order to proceed Overseas Auth Reinf 221/1026/d. 24.5.18	Bishott	30.5.18	S.O.P. II 127 [illegible] Lieut. Cost. Adj 10th Res Bn
31/5/18	23rd CAN. RES. BN.	TAKEN ON STRENGTH	Bramshott	30/5/18	D.P. II. O. No. 151
2/6/18	do	Posted to 14th Battn	Bramshott	1/6/18	D.P. II O. 153 [illegible] Capt. Adjt. 23rd Can. Res. Batt.
	C. B. D.	ARRIVED C. B. D.	FRANCE	3/6/18	N. R. D 3/6/18 678 PART II ORDERS No 73 D 6.6.18
3/6/18	C. B. D.	LEFT C. B. D. FOR Clerks		6/6/18	~~N. R. D~~ RR 1460
7.6.18	O. C. ..... BN	ARRIVED Clerks BN.	FIELD	6.6.18	~~B 213 D~~ RR 819
22.7.18	Clerks.	To Unit.	do	22.7.18	RR 1264
27.7.18	Unit	Joined.	do	23.7.18	B213
4.10.18	do	Missing	do	1.10.18	do 14/10/1918

Form R 122
2353—100M—9-12-16.

CR. Rank Name BOIVIN, Henri Reg'l No. 50621.

Unit 2nd Rein. Dft. RHC. to 1st Q.R If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Montreal, May 17th, 1915. Place of Birth St. Gabriel de Brandon.

Name and Address, Next-of-Kin Charles Boivin.

183 Bourbonniere, Montreal, Canada. Relationship Father.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

m 27-12-20 ac

No. A.E.F. A.B. No. 15025 File A.L. 25-B-6249 Category Mechanic

H. W. V., Ld.—9546-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		Arrived in England		19-II-17	S/S Canada
23.11.17	20 Res Bn	Taken on Strength	Bramshott	20.11.17	Pt II DO 320.
14. 2. 18	"	S.O.S. to 1 QRD. CCD.	"	14. 2. 18	DO #42 of 16.2.18 1 QRD " 45. DO #39 2 CCD
2. 3. 18	"	T.O.S. from 1 QRD Depot Regt.	"	2. 3. 18	DO #56 of 5.3.18 1 QRD " 61 DO #52 2 CCD
25.4.18	10 "	" " 20th Res Bn	"	25.4.18	DO #1130 of 25.4.18 20 Res DO #95
31. 5. 18	23 Res	T.O.S. from 10 Res	"	30.5.18	DO #127 of 31.5.18 10th Res. " 151
2. 6. 18	.	S.O.S. to 14th Bn	"	1. 6. 18	" 153. 14th Bn 13 6.6.18
29-10-18	14th Bn	Missing	" Fld	1-10-18	DO 146.

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.				
21.8.19	General Cas List	Previously reported Missing "Now for official purposes presumed to have Died on or since	Field	1.10.18.	CLA-1
		Obs for SOS 27.8.19			

FORM D.M.S. 1300.

SURNAME	CHRISTIAN NAME OR NAMES	REG. NO.
Boivin	H.	50621.

RANK	UNIT	CO.	TROOP	BATTY.
Pte		1st Que	20th R.	14 Que.

HOSPITAL	DATE OF ADMISSION
12 Can. Gen. Bramshott	10.1.18.

1. HOSP.

2. HOSP.

3. HOSP.

4. HOSP.

DIAGNOSIS

1 Debility Sy

2.

3

Misc. 14.2.18.

DISPOSITION

DATE

Ch. 17.1.18 C114-1

18.2.18 C141.

21.10.18 A350.1 R.F.B. Missing 1-10-18 R.

21-8-19 A.1.

REMARKS

Now for Official purposes presumed to have Died on or since 1-10-18. R.

EPITOME OF HOSPITAL TREATMENT

HOSPITAL	ADM.
1.	
2.	
3.	
4.	
5.	
6.	
7.	

Number 50621 Rank Pte

Surname BOIVIN

Christian Name Henri

Units 14th Bn C. Inf. Theatre of War France

Date of Service 1-6-18

Remarks (M) Mrs. Mary L. Boivin

Latest Address 183 Bourbonniere St.,
Montreal, P.Q.

Roll No. B. Page 20512

200m.-6-21.

H.Q. 649-B-20715.

Boivin, Pte. Henry, #50621, 14th Battn.

M. & D. (Mother) Mrs. Mary L. Boivin,
183 Bourbonniere St., Montreal, P.Q.

P. & S. (Father) Chas. Boivin,
(address as above)

Mem. C. (Mother) Same as above.

not Elig. for 14-15 Star
E.. .. V on
E- - B W on

41068

ae

No. 127 RANK Pte. NAME Boivin, Henri

T. O. S. UNIT 57th Battalion C. E. F.

M. D. 5 - Val

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
May 18	May 31	✓	Recruiting station - 57th Regt.	May paylist
	June -	✓		

UNIT SAILED
JUN 2 1916

Sailed from Halifax Per S.S. Canada 9/4/17.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Bricklayer. RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 21 YEARS MONTHS

HEIGHT 5 FEET 5-1/4 INCHES

CHEST MEASUREMENT 36 INCHES EXPANSION 2 1/2 INCHES

COMPLEXION Blonde EYES Blue HAIR Blonde

DISTINGUISHING MARKS Cyst of the umbilicus

MEDICAL EXAMINATION. PLACE Montreal P.Q. DATE May 18th 1915

Present Address — Not Stated.

C. 649-B-20715

CARD NO.

SURNAME. Boivin

CHRISTIAN NAMES Henri

Sos Deceased
O/S 06 9 18-7-19
FOLL. 1-10-18
3rd C. Inf. Bn.

REGL. No. 50621 RANK

UNIT ~~57th~~ (1st Depot. C. R. (2nd R. D.) Bn.

FORMER CORPS Nil.

NEXT OF KIN.

NAMES IN FULL Boivin, Charles.

RELATIONSHIP TO SOLDIER Father

ADDRESS 183. Bourbonniere Ave.,
Montreal, P. Q.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada St. Gabriel de Brandon P.Q. DATE Mar. 7th 1894

PLACE OF ATTESTATION Montreal, P. Q. DATE May 18th 1915

O/S. 9-11-17 9547

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

Form R. 149.

Name BOIVIN. Henry. Rank Pte Reg. No. 50621.

Unit 14 Bn

Next of Kin Charles Boivin. 25.B.6249
183 Bourbonniere, Montreal.

Date 1918		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1.	10.	Missing after action			A350. H416		4277.
		10-4-19 A.A.G.					
		11-4-19 C.R.X					
		4.6.19 Ottawa					
1.10.18		Presumed Dead			171.	2/8/19	

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

FORM OF WILL

I, Henry Boivin (Name in full)

Regimental Number 50621 serving in 1st DEPOT BN. 1st QUEBEC REG'T.

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

No.

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

absolutely, and my personal estate I bequeath to

Mother.
Mrs. Mary Louise Boivin,
183 Bourbowniere St., Montreal, Canada.

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 29 day of Oct A.D. 191 7

Henry Boivin
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 H. Kymister
Address of Witness Guy Street Barracks
Occupation of Witness Soldier
Signature of Second Witness Geo. A. Hiatt.
Address of Witness Guy St. Barracks
Occupation of Witness Soldier

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

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 20th Res. Military Hospital ~~[illegible]~~

No. 50621 Rank and Name Pte. Boivin H. Age 22 Service 3/12

Disease Debility Date of admission 10 - 1 - 18. Date of discharge Result

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature W. Roberts Capt. In charge of case.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Military Hospital__________

Corps__________

No.__________ Rank and Name__________ Age__________ Service__________

Disease__________ Date of admission__________ Date of discharge__________ Result__________

Dates of Observation	10																														
Days of Disease																															
Temperature, Fahrenheit	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.	Time A.M.P.M.

Pulse per Minute	94	88																													
Respirations per Minute	18	18																													
Motions per 24 Hours																															

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature__________ In charge of case.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	50621	Pte.	Boivin	H.
Year	Unit.		Age.	Service.
1918	20th Res.		22	3/12

Station and Date.	Disease Bronchitis Chronic
Bramshott	~~P.H.~~ negative
10-1-18.	P.I. Has had dry hacking cough for the past month.
	Organs normal only Lungs On Physical Exam. lungs show signs of small dry crepitant rales all over apex of both lungs.
28.1.18.	Respiratory System are negative
	Other physical exam negative except Cutaneous system is suffering from Scabies on thighs, penis abdomen.
	Scabies treatment given.
4-2-18	Discharged to duty

W. [illegible]
Capt

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
5 m. 6-16.
1772—39—818.

Sheet No. 2. Mrs Mary L Boivin Boivin

L. L. Job 4503. Req. 6832.

Name of Soldier Boivin H.

50621 Pte 1 Q Regt 2 dft

15.00 NOV 1

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.					
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.					

Bed 27

Urine Laboratory

Ward 9 Date Oct 10th 1918.

Reg.No. 50621 Rank & Name Pte. Boivin H. Unit 20th Res.

Reaction Acid Sp.Gr. 1025 Bile

Albumen Neg Sugar Neg Blood

Sediment

Capt. CAMC. Capt. CAMC.

M.O. i/c Ward. Officer i/c Laboratory.

6

Urine Laboratory

S P E C I A L I S T'S R E P O R T.

Ward No. ~~6~~ 9

To: Officer i/c Ward 6 (spec) Department.
No. 12 Canadian General Hospital.

Kindly examine Nasal Passages of Pte Boivin

with special regard to Chronic Catarrh

Date 21-1-1918

W. Stewart Lyle
M.O. i/c Ward.

REPORT. Septal Deflection
Small Adenoid

D. N. Cameron
Officer i/c Department.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch B

OVERSEAS CONTINGENTS

Date of Assignment

8723 Nov 1, 1917.

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15-			

E

PARTICULARS OF SEPARATION ALLOWANCE

No. 5-0621.

Rank Pte. Promoted Reverted Discharge

Soldier's Name H. Boivien

Battalion 1Q Regt. 2 Dft.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Mary L. Boivien

Address 183 Bourbonnier St. Montreal, Que.

Change of Address

1

2

3

4

2

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS 1145-X-19
Nov	E 50696		15	15-	m B	Kiled in Action
Dec	F 57447		15	15	m	
Jan	D 69088		15	15	mc	
Feb.	b 92184		15	15	ϕ	
Mar	a 99466		15	15	✓	
April	l 3332		15	15	ϕ	
May.	E 10120		15	15	✓	
June	D 18160		15	15	✓	
July.	X 32496		15	15	✓	
Aug	b 29943		15	15	✓	
Sept.	D 36021		15	15	✓	
Oct.	B 47791		15	15	✓	
~~Nov~~	~~B 51396~~		~~15~~	~~15~~		
			180			

~~KILLED IN ACTION~~ / ~~DIED OF WOUNDS~~ DATE Rept Miss. 1/10/18

C. L. No 342 fol 10 DATE 25-10-18.

M.R.O. 22731 TO DESTROY RENDERED 8-11-18.

B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE

8-11-18

CLERK Gok DATE 8-11-18

B. 51396 for Nov. Cancelled per C.O. 3938-18 11/18

Oct 2

M. F. W. 126.
400M.—'-17—1772:39-1141
L. L. 22330—M. & D. 7993.

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

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

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

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

M. F. W. 128.
4'0M. 6-7-1 72-39-1141
L. L. 22240—M. & D. 1501.

Form R. 149.

Name BOIVIN. Henry Rank Pte Reg. No. 50621.

Unit ~~20th~~ 14th Res Bn.

Next of Kin Charles Boivin 183 Bourbonniere Montreal. Canada

Date 1918.		Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
10-14	1	Ex 12 C.G.H. Brandhott		Debility			10477.
	2	Discharged.		do			3161.
1-10		Missing after Action					4277.
		For Official purposes presumed to have died on or since 1-10-18.			A.1.	H416	
		Ottawa in-death cert				25-B6240.	

Pte

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

Form DMS 1401.
8289 100M 9/3/17.

No 12 CAN. GENERAL HOSPITAL HOSPITAL.

A. & D. CARD

AT

A. & D. No. 263 PL. OF ACTION 50621

RANK Pte. UNIT 20 Res. C. Coy. SICK OR WOUNDED

NAME Boivin H. AGE 22. RELIGION R.C.

PLACE IN HOSPITAL Wd. 9.

DIAGNOSIS Debility

ADMITTED 10. 1. 18 FROM

DISCHARGED 14. 2. 18. TO Duty.

TRANSFERRED

SERVICE AT HOME 3/12 IN FIELD

RESULTS 2/12.

(See Document Card for M.H. Sheet and other Documents.)

(P.T.O.)

REMARKS.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
C141-1	Disch. # 12 Can. Ken	Dram. 14-2-18	Debility (1st Lus. R.
A350-1.	Rep. from Dam. (Miss?	1-10-18	
A-1.	Rev. up. Miss. (Non)	1-10-18	for off. purposes
	presumed to have died on or since.		

REGT'L. No. 58631

NAME Boivin Henri

H. Q. FILE No. 649

RANK AND CORPS Pte 2 CR. 14th Batt.

FOLLOWS No. ~~7th Bn of Mtd.~~ 2nd Rifs.

CABLE NO.	CABLE DATE	"C."	NATURE OF CASUALTY
			form.

N. of K:- Charles Boivin (father) 183 Bourbonniere Ave., Montreal. P.Q.

H. 416. 30-10-18 Repd. missing. Oct 1st/18.

Miss 258. Sec. 28 Presumed dead. 1-10-18.

ORIGINAL

MEDICAL HISTORY SHEET

MOBILIZATION CENTRE OCT 9 1917 MONTREAL, P.Q.

Surname Boivin Christian Name Henri

Approved by Unapproved FIT by MEDICAL BOARD MOBILIZATION CENTRE, M. D. #4 J. A. Hartigan Lt Col President, M. M. B. Rank M.O.

Examined on 9 day of Oct 191 at Montreal

Birthplace City or Town St Gabriel County Quebec

Apparent age 22

Trade or occupation Bricklayer

Height 5 feet 4½ Inches

Weight 138 lbs.

Chest measurement Minimum 34 inches Maximum expansion 37 inches

Physical development Good

Small-pox Marks Nil

Vaccination Marks Arm Right Left Number

When Vaccinated last

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Eyesight R. D.= L. D.= " " Hearing R. Ear L. " "

Date	Fit or Unfit	Examined for Re-Engagement	
		"A" Fit for General Service	M.O.
			M.O.
14/2/18	D	[illegible] Capt	M.O.
1/3/18	A	2nd C D H Bondy	M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
24/11/17		H MacDonald Capt	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
Tab 2 22/11/17		H MacDonald Capt	M.O.
26/11/17		H MacDonald Capt	M.O.
26/1/18			M.O.

Enlisted on ..... day of ..... 191 ..... at .....

	Corps	Regt'l Number	Habits	Date
Joined on enlistment				
Transferred to	14th Bn	50621		

23rd RESERVE BATT. C.E.F.

20th CANADIAN RES. BTN. R.H.C. 1st DEPOT BN. 1st QUEBEC REG'T.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result

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

M. F. B. 313.
300M.—1-17.
H. Q. 1772-39-439.

50621 ORIGINAL

MEDICAL HISTORY SHEET.

Surname Bourn Christian Name Hector

Approved by A Galoway Capt & M.O.

Examined on 17 day of May 191 at Montreal

Birthplace City or Town St Gabriel de Brandon County Rank M.O.

Apparent age 21

Trade or occupation Bricklayer

Height 5 Feet 5 1/4 Inches.

Weight 148 Lbs.

Chest measurement Minimum 33 1/2 inches. Maximum expansion 36 inches.

Physical development

Small-Pox Marks Nil

Vaccination Marks Arm Right Left ✓ Number 1

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Kiss of the umbilicus

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

Date	Result	Vaccinations.	
24/11/17		H MacDonald Capt	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
Aug 24	good	A Galoway Capt	M.O.
Tab 2 22/11/17		H MacDonald Capt	M.O.
			M.O.

Enlisted on 17 day of May 1918 at Montreal

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	07			
Transferred to	14th Bn	50621		17/5/18

20th CANADIAN RES. BTN. R.H.C.

23rd RESERVE BATT. C.E.F.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.

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

M. F. B. 313.
100M.—1-15.
H. Q. 1772-39-439.

Surname ..... Christian Name .....

STATION	Date of Arrival at the Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				
Norton Fendrop		10	1	18	14	2	18	Bronchitis	16	Recovered. Chest weak. Developed scaties - treated in hosp. Otherwise fit. Discharged D.T.	Asst Surg Capt Cane

Surname ..... Christian Name .....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND or~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND or CANADA.
EFFECTIVE DATE:– 1-11-17.		EFFECTIVE DATE:–	
AMOUNT:– $ 15		AMOUNT:–	

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs. Mary Louise Boivin (Mother)
183 Bourbonniere St Montreal Que

NAME:– BOIVIN Henri

NUMBER:– 50621

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:– 1 Dep Bn. 1 Que R Sd.

DATE ACCOUNT FIRST OPENED:– 1-11-17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
N3			1 Q R D
73 6/6/18	1/6/18		14 B. D3

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:–

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
Apl	Bal Fwd								20 37		
	P P	33		a.P.				15 –			
				A.R.46. 20 Res 12-4-18.	9 73						
				" 152 " " 15-4-18.	14 60						
				A.H.005 151. 20 Res. 23-4-18.	5 78				8 43		
		33			30 11			15	14		
May	P.P.	34 10		a.P				15	27 53		
				a.R.239 10 Res 15-5-18.	7 30				20 23		
				" 378 " 26-5-18	9 73				10 50		
		34 10			17 03			15			
June	P.P.	33		a.P.				15	28 50		
				A.H.005/Mgr. 10th Res. 8.6.18.	22				28 28		
				A.R.526 - 1st D.W.C.C.R.C. 13.6.18	3 57				24 71		
				" 623 " 20.6.18	4 46				20 25		
July	P.P.	33 34 10		A.P. Can (July)	8 25			15 15	39 35		
				A.R.822 - 1st D.W.C.C.R.C. 20.7.18	4 46				34 89		
				" 9205 - 1st A. Musk Camp. 2.7.18	4 46				30 43		
Aug	P.P.	34 10 34 10		A.P. Can (Aug)	8 92			15 15	49 53		
				A.R.299 - 3rd C. Inf Bde 1.8.18	3 57				45 96		
				" 500 " 24.8.18	3 57				42 39		
Sept.	P.P	34 10 33		a.P Can	7 14			15 15	60 39		
				A.R.567 - 1st D. Detail. 5.9.18	3 57				56 82		
				" 632 - 3rd Inf Bde 14.9.18	3 57				53 25		
		33			7 14			15			
Oct.	P.P.	34 10 34 10		Cal.				15 15	72 35		HE STATE 2/3 C/Bal 72 35
				W.O. Cs Trans to Canada 4-7-19	72 35				Nil.		
		— — — —			72 35						
				NON EFFECTIVE. ACT.							

Money Note on 350 A.R.

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.	Date												

P. 559.
MARRIED OR SINGLE: Single

PLACE OF BIRTH: St. Gabriel de Brandon, Que., Canada.

NAME AND ADDRESS OF NEXT OF KIN: Charles Boivin
183 - Bourbonnière St., Montreal,

RELATIONSHIP OF NEXT OF KIN: Father.

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. NO. 50621 RANK Pte. NAME Boivin, Henri

IF IN PERMT. CORPS WHAT UNIT | UNIT 1st Depot Batt. 1st Que. Reg. | TRANSFERRED TO 20th Can. Res. Bn. | DATE | AUTHORITY

PERMANENT FORCE ALLOWANCES | TRANSFERRED TO | DATE | AUTHORITY

PLACE OF ATTESTATION Montreal, Canada. | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION May 17th 1915. | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE November 1st 1917 –

PAYABLE TO Mrs. Mary Louise Boivin, 183 - Bourbonnière St., Montreal Canada. RELATIONSHIP Mother.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT C.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT C.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT C.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 NO	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1917 Nov. 1	Balance from Canada																														330 –				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
				Canada					330		
Nov.	Pte pay	33 –		a/R 5q. 30 Re. 3-11-17	4 87						
Dec.	pte pay	34 10		ban. a/p. Nov.				15			
				ban. a/p. Dec.				15 30	35 53 48		
1918 Jan		67 10		a/P	4 87			15			
	PP	34 10		A 406 B a/005 #31. 20 Res. 4-11-17	61 –						
				a/c. 1042 " " 18-12-17.	4 87.						
				" 1010 " " 3-12-17.	14 60. 20 08			15	34 55 13 93		
Feby		34 10		a/P				15			
	RP	30 80 30 80		a/c 1997. #12494. 25-1-18.	4 87. 4 87.			15	45 48		
March				a/P				15			
				" 1307 2 ccD. 23-2-18.	14 60 –						
				" 2461 " " 28-2-18	5 11						
Cr. Bfwd		–			19 71.			15	45 48		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
March	Brt fwd.				19 71.			15	45 48		
	P.P.	34 10 34 10		a/c 1532 20 Res 19-3-18.	24 33 – 44 04			15	20 54		