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a JB 122 - 1

**DISCHARGE DOCUMENTS**

Name **BOSWELL FRED**  
 Regt, No, **526688** Rank, **Private**  
 Corps, **6 a m 6**  
*Died of Wounds 20-9-17*

*obert. 29023*

R. O. No.....  
 H. Q. No.....

29023 (H)

Index Card	
Casualty Card	IV
Non-Effective Card	
Part II Order Card	/
Change of Address Card	
Honour & Award Card	

*IR/nn*

7-4  
 22-4  
 26-5  
 1

*73X*  
*6-1-21*  
*6-1-21*



2nd Field Ambulance

Original  
No. APR 11 1916

# ORIGINAL ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE. Folio. 526688

## QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

- 1. What is your surname?..... **Boswell**
- 1a. What are your Christian names?..... **Fred**
- 1b. What is your present address?..... **1066 Notre Dame St. W. Montreal**
- 2. In what Town, Township or Parish, and in what Country were you born?..... **Radcliffe England**
- 3. What is the name of your next-of-kin?..... **Mr. John William Boswell**
- 4. What is the address of your next-of-kin?..... **1066 Notre Dame St. Montreal P. Q.**
- 4a. What is the relationship of your next-of-kin?..... **Father**
- 5. What is the date of your birth?..... **9 October 1893**
- 6. What is your Trade or Calling?..... **Stenographer**
- 7. Are you married?..... **No**
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... **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 } **Yes**  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, **Fred Boswell**, do solemnly declare that the above are answers made by me to the above questions and that they 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.

*Fred Boswell* (Signature of Recruit)

Date **11 April** 191 **6** *A. H. Pichard* (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, **Fred Boswell**, 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.

*Fred Boswell* (Signature of Recruit)

Date **11 April** 191 **6** *A. H. Pichard* (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 **11th** day of **April** 191 **6**.

*H. P. Bates* (Signature of Justice)

Description of Fred Boswell

on Enlistment.

Apparent Age.....23 years .....5 months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height.....5 ft. 5 ins.

Chest-measure-ment { Girth when fully expanded.....38 ins.  
 Range of expansion.....4 ins.

*Mole on each forearm  
 Mole forehead left*

Complexion Light

Eyes Blue

Hair Ash-blond Auburn

Religious denominations.  
 Church of England X  
 Presbyterian.....  
 Methodist.....  
 Baptist or Congregationalist.....  
 Roman Catholic Yes  
 Jewish.....  
 Other denominations.....  
 (Denomination to be stated.)

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 11th April 191 6

*A. MacLennan*

Place Montreal

*Stamo*

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.

Fred Boswell.....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.

..... (Signature of Officer)

Date APR 12 1916 191 6

*A. M. O.*  
 CAPT. A. M. O.  
 O. C. A. Section No. 2 F. A. Depot.

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins..... **A. M. C. TRAINING DEPOT NO 4** .....

.....

(2) Regimental Number..... **526688** .....

(3) Full Name of Soldier..... **Fred Boswell** .....

.....

(4) Place of Birth..... **Badcliffe. England** .....

.....

(5) Are you married, or not? ..... **No** .....

(6) If married, state,

(a) Full name of your wife..... **MMMMMMMMMM** .....

.....

(b) Present Postal Address..... **MMMMMMMMMM** .....

.....

(7) Are you a widower? ..... **No** .....

(8) Have you any children? ..... **No** .....

If so, give number of boys and girls..... **MMMMMMMMMM** .....

Also their names and ages..... **MMMMMMMMMM** .....

.....

.....

.....

.....

(9) Is your Father alive? **Yes**.....

If so, state name and address **J.W. Boswell. 956 a 1066x Notre Dame St West. Montreal**

(10) Is your Mother alive? **No**.....

If so, state name and address..... **not applicable**

(11) If your Mother is a widow..... **MMMMMMMMMMMMMMMMMMMM not applicable**

Are you her sole support, or not?.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

..... **MMMMMMMMMMMMMMMMMMMM not applicable**

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

..... **MMMMMMMMMMMMMMMMMMMM not applicable**

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

..... **MMMMMMMMMMMMMMMMMMMM not applicable**

(15) Are you insured? **No**.....

If so, in what Company?..... **not applicable**

Have you made arrangements for payment of your Insurance premium..... **not applicable**

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

**R. H. Bon** *past* Major,  
O.C. A.M.C. Training Officer Commanding.

Date **14th Oct 1916**.....

17583

Perforated sheet for Will from Pay Book of Reg.

No. 526688  
Name Fred Boswell  
Unit C.A.M.C.

Military Will.

Will left in charge of

Mr. Geo H Smith

69 Victoria St.

Bedcliffe

Worcestershire

England.

Signature. Wt Fred Boswell.  
Rank and Regt. 526688. C.A.M.C.  
Date. February 18th. 1917.

I hereby certify the above to be a true copy of the original Will now on file in Estates Branch.

....., Oct. 1917.   
Lieut.  
for Officer i/c Estates, O.M.F.C.

NOTE. Extracted from Pay Book page 20.

Holograph.

Died of wounds 20-9-17.

Transferred 5-10-17.

Wt. F. BOSWELL, No. 526688, 2nd F.A.C.A.M.C.

SL.

1875

1875

...

...

...

...

...

...



# ORIGINAL MEDICAL HISTORY SHEET.

*Original*

526688

Surname Boswell Christian Name Fred

Examined { on 11 day of April 1916  
 { at Montreal  
 Birthplace { City or Town Radclife  
 { County Eng.

Approved by [Signature]  
 Rank W. A. M. O.

Apparent age 23 yrs 6 mths  
 Trade or occupation Stenographer  
 Height 5 Feet 5 Inches.  
 Weight 146 Lbs.  
 Chest measurement { Minimum 34 inches.  
 { Maximum expansion 38 inches.  
 Physical development good  
 Small-Pox Marks none

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.

Vaccination Marks { Arm Right Left  
 { Number 2

Date.	Result.	VACCINATIONS.
<u>15-4-16</u>	<u>Good</u>	<u>[Signature] Capt M.O.</u>

When Vaccinated last 4 years ago  
 (a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>16-5-16</u>	<u>Good</u>	<u>10 Dose Callum, Lieut M.O.</u>
<u>24-5-16</u>	<u>Good</u>	<u>10 Dose Callum, Lieut M.O.</u>
<u>13-6-16</u>	<u>Good</u>	<u>10 Dose Callum, Lieut M.O. [Signature]</u>

Enlisted on 11th day of April 1916 at Montreal

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment		<u>526688</u>		<u>11-4-16</u>
Transferred to	<u>C.A.M.C</u>			

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Montreal</u>	<u>NOV 22 1916</u>		<u>Fit. A. J. [Signature] Capt. A.M.O.</u>

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.

Surname *Bowen* Christian Name *Fred*

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>Montreal</i>	<i>11-4-16</i>								<i>No admissions</i>	<i>R. H. B. [Signature]</i> Major, O.C. A.M.C. Training Depot No. 4.	
<i>Valparaiso</i>	<i>31-8-16</i>										
<i>Montreal</i>	<i>OCT 7 - 1916</i>										

*Em*

Register No. *OB 1560*

WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. *1884-2-4*

Regt'l No. *52 66 88* Name *Fred* *Boswell*  
(Christian Name) (Surname)  
Unit *2nd Old Amb.* Rank *Ote* Date of enlistment  
Date of casualty *20-9-17* B.P.C. File No. *138289*  
Was service performed overseas? *yes.*

DEPENDENT

Name *John William Boswell* Relationship *Father*  
Address *96 Masson St*

*Em*  
*Papineau ave*  
*Montreal Que.*

Amount of Special Pension Bonus \$ *nil* Abstracted by *E. Lapensee.*

M.F.W. 2652  
25M-6-30.  
H.Q. 1772-89-1473

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

REMARKS: *Claim for OG rejected No. 1 A paid*

Clerk *W Mitchell*

Audited by  
Date

*Noted 18/8/20*

# 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:


MILITIA AND DEFENCE  
ASSIGNED PAY.

To whom *Mr. G.H. Smith.*  
Address *69 Victoria Str.  
Radclyffe  
Launceston.*

By whom assigned *Coswell J.*  
Regtl. No. *526688.*  
Rank *S.Pte.*  
Corps, &c. *Camp. S. - 27th. Amb.  
New Pay 2d Deal.*

Rate *20<sup>00</sup>*  
Date to commence

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan	1916				<p><i>Died of Wounds 20/9/17.</i> <i>24/9/17.</i></p>  <p><i>Mentor (father). J.W. Coswell, 1066 Notre Dame Str., Montreal, Que.</i></p>
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan	1917				<p><i>Ad. as Pte. as at date of casualty \$1.00 per day.</i></p>
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					

# ASSIGNED PAY.

By whom assigned \_\_\_\_\_

Regtl. No. \_\_\_\_\_

Month.	Year.	Cheque No.	Amount.	Pay Sheet.	REMARKS.
Sept.	1917		200		a.p. paid in full from 4/12/16 to 20/9/17.
Oct.					
Nov.					
Dec.					
Jan.	1918				
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					
Sept					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
Mar.					

44632

MILITIA AND DEFENCE  
ASSIGNED PAY.

Ref. No. .... N.R. ...

To whom Mrs. G. H. Smith,  
Address 69, Victoria Street,  
Radcliffe,  
Lancs.

By whom assigned Boswell, F.

Regtl. No. 526585 526688

Rank Pte.

Corps, &c. A.M.C., T.D. No. 4 Rnf. Dft.

526688? *Came to*

Rate \$20.00

Date to Commence 1st December, 1916.

PAYMENTS.

*ap lsa checked OK W.M.C.*

Month.	Year	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916				
Feb.					
March					
Apl.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.		304514	20	X	
Jan.	1917	309211	20	X	
Feb.		349298	20	X	
March		392714	20	X	
April					
May					
June					
July					
Aug.					







LTR

Rank

*Pte.*

Name

BOSWELL, Fred

*2nd Fd Amb.*

Reg'l No.

R-122  
8,401-50,000-21-10-16,  
526688

Unit No. 4. Dft. A.M.C. T.D.

If in perm. Corps,  
What Unit?

Married or Single

Single

Place and Date of Enlistment Montreal, 11th, April 1916

Place of Birth Radcliffe, Eng.

Name and Address, Next-of-Kin Mr John William Boswell,  
1066 Motre Dane St, Montreal, P.Q.

Relationship Father.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

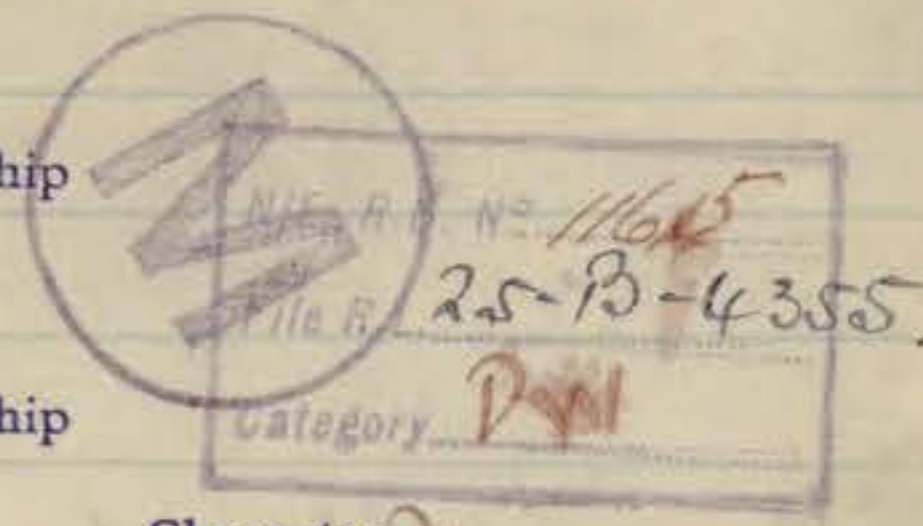
Payable to

Relationship

Discharge, Date and Place

Reason

Character



*Sample*

*MX  
6-1-21  
21*



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.				
		Arrived in England S.S. Mauretania		30-11-16	
3-12-16	Canb. S. LOS on arrival		Dibzac	30-11-16	Pte P. II DO 341 Gol 6235
26-2-17	Do S.O.S. on proceeding overseas		Westenhanger	26-2-17	" " 57
3-3-17	C.A.M.C. Gen. T.O.S. from C.A.M.C.T.S.		Field	27-2-17	" " 22
26-3-17	— — S.O.S. to 2nd F. Amb.		— —	10-3-17	— — 28. 2nd F.A. Pte II 19
21-9-17	C.A.M.C. Adm. to No 7. C.C.S.		Do.	19-9-17	" C.L. 9.17. Dampford.
24-9-17	Do. Died of Wds. at No 7. C.C.S.		Do.	20-9-17	" C.L. 9.19. G.S.N. L. Com.
25-9-17	267 Amb. Died of Wounds rec. in action		Field	20-9-17	Pte P. II 70



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

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

250M.—1-16.

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps A. M. C. TRAINING DEPOT NO 4

Regimental No. 526688 Rank Private Name Fred Boswell  
C. E. F.

Enlisted (a) 11/4/16 Terms of Service (a) Imperial War Service reckons from (a) 11/4/16

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) Stenographed

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				
<u>3/12/16</u>	<u>same</u> <u>T.S.</u>	<u>TAKEN ON STRENGTH C.A.M.C. T.S. from Canada</u>	<u>Halifax</u> <u>Liverpool</u>	<u>24/11/16</u> <u>30/11/16</u>	<u>St II 06341</u>
<u>26-2-17</u>	<u>C.A.M.C. T.S.</u>	<u>TRANSFERRED Overseas</u> <u>DISEMBARKED</u>	<u>Westenhanger</u> <u>HAVRE</u>	<u>26-2-17</u>	<u>Pt 5 D.C. 57</u> <u>S. Squares</u> <u>Capt. Adjutant for O.C. C.A.M.C. Training School</u>
<u>10-3-17</u>	<u>CB D</u>	<u>Having arrived at Can Base Depot as Reinforcement is taken on the strength of CAMC Gen. Posted to 2 Can Fld Amb</u>	<u>Field</u>	<u>27-2-17</u> <u>10-3-17</u>	<u>WR Pt II 22 of 3/17</u> <u>WR Pt II 28 of 26 3/17</u>
<u>17/3/17</u> <u>19/9/17</u> <u>21/9/17</u>	<u>2 C7 Amb</u> <u>7 CES.</u> <u>9 C.C.S.</u>	<u>Top S as Reinforcement of S.W. Arm 4. Died of Wounds received in Action</u>	<u>No 2 C7 Amb</u> <u>7 C.C.S.</u>	<u>11/3/17</u> <u>19/9/17</u> <u>20/9/17</u>	<u>B213</u> <u>9704</u> <u>KM 16/23/167</u> <u>19. 24/3/17</u> <u>Dec. 31/16.</u> <u>Pt 5 Ord. 70 25/9/17</u>

(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.

W.D. Brace  
 Capt. for Lt.-Col., A. A. P. O.  
 Canadian Section, G. H. Q. 3rd Echelon, B. E. F.



Surname **BOSWELL** Christian Name or Names **F.** Reg. No. **526688**  
 Rank **Pte.** Unit **C.A.M.C. 2FA.** Co. Troop Batty.  
 Hospital **7 C.C.S.** Date of Admission **19-9-17.**

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis **G.S.W. Lt. Arm**

(1)  
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

**PR. Dan. Wd. NOW DIED OF WOUNDS 20-9-17. R.**

DISPOSITION

Date

**CL.22-9-17 A17. Dan. Wd.**  
**25-9-17 A19.**

REMARKS

**A.M.D. 2 DEPT.**  
**Beh. of D.G.M.S. O.M.F.C. London.**

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

649-15-19825

CARD NO. ✓  
713

SURNAME. *Boswell*

CHRISTIAN NAMES *Fred*

REGL. No. *626688.*

RANK *Plé.*

UNIT *A Sect. no 2 Fld. Amb Depot. a.m.c. I. D. no. 4. (4<sup>th</sup> P.D.)*

FORMER CORPS *Nil*

FOLL.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Boswell John William*

RELATIONSHIP TO SOLDIER *Father*

ADDRESS

*1037. Ethel St.,  
Verdun, Montreal, Que.*

*E.P.R. 161, 28-9-14*

COUNTRY OF BIRTH *England. Radcliffe.*

DATE *Oct 9<sup>th</sup> 1893*

PLACE OF ATTESTATION *Montreal. P. Q.*

DATE *Apr 11<sup>th</sup> 1916*

*9/10 23/11/17 641*

*Trans. from no 2 Fld Amb Depot to a.m.c. Train Depot. no. 4*

*Auth. a.m.c. Train Depot. R. 22 M. F. W. 22. 250M.-2-16. H. Q. 1772-39-339.*

MARRIED

SINGLE *Yes*

WIDOWER

TRADE OR CALLING

*Stenographer*

RELIGION

*Nil.*

DESCRIPTION.

APPARENT AGE

*23* YEARS

*5* MONTHS

HEIGHT

*5* FEET

*5* INCHES

CHEST MEASUREMENT

*38* INCHES

EXPANSION

*4* INCHES

COMPLEXION

*Light-*

EYES

*Blue*

HAIR

*Auburn*

DISTINGUISHING MARKS

*One mole each forearm 1 mole on left forehead.*

MEDICAL EXAMINATION.

PLACE

*Montreal P. Q.*

DATE

*April 11<sup>th</sup> 1916*

*Present address, 1066 Notre Dame St. Montreal P. Q.*



RL 25-B-4355.

Name **BOSWELL. FRED** Rank **Private**

Reg. No. **526688**

Unit **C.A.M.C. 2nd Field Amb.**

Next of Kin **Canada DEAD D/R 2K**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917. 19-9	No 4 CAS. C. & STAT: -	<u>DANG WOUNDED</u>		A 14	6095 <sup>M</sup>	20/17
20-9	No 4 CAS. C. & STAT: -	<u>DIED OF WOUNDS</u>			<sup>M</sup>	
			G.S.W ARM L	A 19	6104	A 36-1-20-9
						25-9-17



No. 526688 RANK *Pvt*

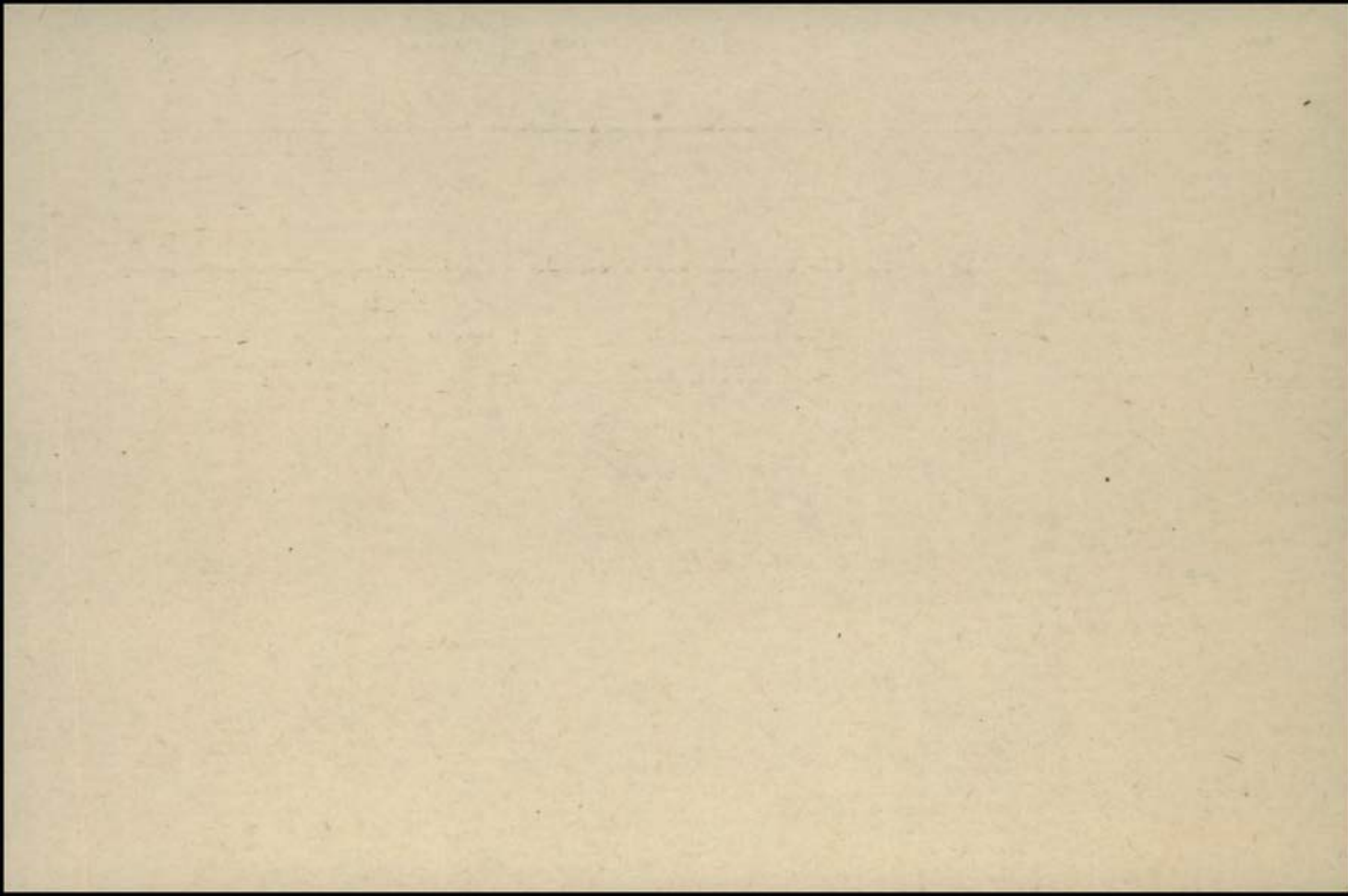
NAME *Bowell F.*

T. O. S. *12/4/16*  
*Apr. payroll.*

UNIT *A. M. C. Training Depot - No 4*

M. D. *4*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>Apr. 12</i>	<i>Apr. 30</i>	<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July</i>		<i>✓</i>		
<i>Aug.</i>		<i>✓</i>		
<i>Sept.</i>		<i>✓</i>		
<i>Oct.</i>		<i>✓</i>		
<i>Nov.</i>		<i>✓</i>	<i>Trans. 75 22/11/16</i>	<i>D.O. 348 of 22/11/16.</i>



att  
yell

Number 526688 Rank Pte

B  
W

Surname BOSWELL

Christian Name Fred

Units C.A.M.C. Theatre of War France

Date of Service 27-2-17 D.

Remarks

Latest Address Benef. Mrs Geo. Henry Smith  
69 Victoria St., Radcliffe  
Lancs., England

Roll No.

200m.-6-21. Page 19447

DESP. MAR 22 1923  
REGN. NO. 2752

H.Q. 649-B-19825.

✓ ✓ ✓  
Boswell, Pte. F., #526688, C.A.M.C. *2<sup>nd</sup> Field Amb.*

M. & D. (Beneficiary) M Mrs. George Henry Smith,  
69 Victoria St.,  
Radeliffe, Lancs., Eng.

P. & S. (Father) John W. Boswell, *1037 Ethel St. 173*  
~~95 Masson St., 395 Wilkes Ave~~  
~~Papineau, Montreal, P.Q. Verdun, Que.~~

*(Serial no. 791084.)*

Mem. C. Nil.

**Scroll Desp.** **MAR 15 1922** Reqn. No 2 28665

**Plague Desp.** **DEC 29 1921** Reqn No 191579

*Not elig. 14/15 Star  
elig. P.M.  
" B.W.M.*

*424 of B-*

Plaque Ret- 9-1-22

Plaque re-desp. 27-12-22. E 801.



NAME *Boswell, Fred*

REG'T'L No. *526688*  
H. Q. FILE NO. 649.

RANK AND CORPS *Pte. # 2 Fld. Amb. Dep.*

FOLLOWS  
No.  
FOLLOWS

CABLE		NATURE OF CASUALTY
NO.	DATE	
<i>M6095</i> <i>117-5</i>	<i>22-9-17</i>	<i>"6"</i> <i>Dang. wounded 7 Cas. Cl. Sta. Sept. 19.</i> <i>1917 ✓</i>
<i>M6105-6</i> <i>A.F.B</i> <i>Rouen</i>	<i>25-9-17</i> <i>20902</i> <i>25/9/17</i>	<i>Prev. rep. dang. wounded, now</i> <i>rep. died of wounds 7 cas. Belg. Stat</i> <i>Sept. 20th, 1917 G.S.W. Left Arm. ✓</i> <i>Rec'd. 9/11/17</i>

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

A. 17.

Northasby Str

19-9-17

Dang. wounded

A. 19.

" " " " "

20-9-17

Prev. Rep. Dang. W. now died of  
Wounds.

MARRIED OR SINGLE

PLACE OF BIRTH

Single  
Radcliffe England

CASUALTIES, PROMOTIONS, &c.

PARTICULARS  
EFFECTIVE DATE  
AUTHORITY  
Died of wounds. 20/9/17  
C.A. 19  
24/9/17

REG'L. NO. 526688 RANK

Pte

NAME

Boswell Fred

COVE

IF IN PERM. CORPS WHAT UNIT

UNIT

2nd Lt 4

TRANSFERRED TO

27d Amb

DATE

AUTHORITY

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

R. Deeds

DATE

AUTHORITY

PLACE OF ATTESTATION

Montreal Que.

TRANSFERRED TO

DATE

AUTHORITY

DATE OF ATTESTATION

11th April 1916

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$

20.00

DATE EFFECTIVE

1st Dec 1916

PAYABLE TO

Mrs G. H. Smith 69 Victoria St. Radcliffe Lancs Eng

RELATIONSHIP

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

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

EFFECTIVE

20/1/17

REASON

Died of wounds

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

Entered on N.I. Card Index  
C.A. 19  
24/9/17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

Checked by

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

3rd Dec 28/9/17

P.697-25M.  
3989-31-10-17.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.

Date of Payment.	No. of Acq. Roll	AMOUNT					Place of Payment.	Name of Paymaster.	Remarks.
		Francs	£	S.	\$	¢			
17/7/17	347	16	-	-	2	67	SH	D. Murphy	

ADMISSIONS TO HOSPITAL, &c.

DATE CHARGED V. OR A. NAME OF HOSPITAL

DATE	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS	
	1		2		3		4					CREDIT	DEBIT				
	No.	DATE	No.	DATE	No.	DATE	No.	DATE									
10												13 00					Balance from Canada
10	1385	24/6/17	1425	17/17				9731	20		2973	1737					
10	1385	24/6/17	1425	17/17				9731	2431	20	3216	1931					
								486		20	2486	2525					2525
								243		20	3377	2558					
										20	20	2758					20 27d Amb - DO 19 24/9
										20	261	3597					
										20	20	5007					
										20	2529	5748					
										20	2268	6920					
										20	2268	8062					
										20	20	9962					
										20	20	9962					

Checked

Statement of  
FEB 5 1918  
Accounts rendered

Cash found in  
effect

CHX-ek  
as. Pay. Books Unreplied



