

AB 9-1-19

31004

DISCHARGE DOCUMENTS

R. O. No.
H. C. No.

Proceeding on Dis. forwarded B.
on 10/10/1918
NOC, Retd 20-1-1919

Proceedings of Court of Inquiry or on men
reported Missing on Active Service.....

Attestation Papers..... 3

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge..... 2

Corps History Sheet.....

Date and No. of Deposit Receipt for

Purchase Money and Amount.....

Parchment Certificate..... 1

Medical Report for Invalids..... 66

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

M. F. W. 192 - 1

A & B 122 - 1

M & W 97 - 1

A & B 179 - 1

A & W 3118 - 1

M. F. W. 62.

100m. - 5-17.

H. Q. 1772-39-235.

A.F.I. 1237-1

M & W 67-1

M 149 - - 1

Name BOURASSA, LOUIS

Regt. No. 102413 Rank Pte

Corps 23rd Bn

M

Med unfit

22 H

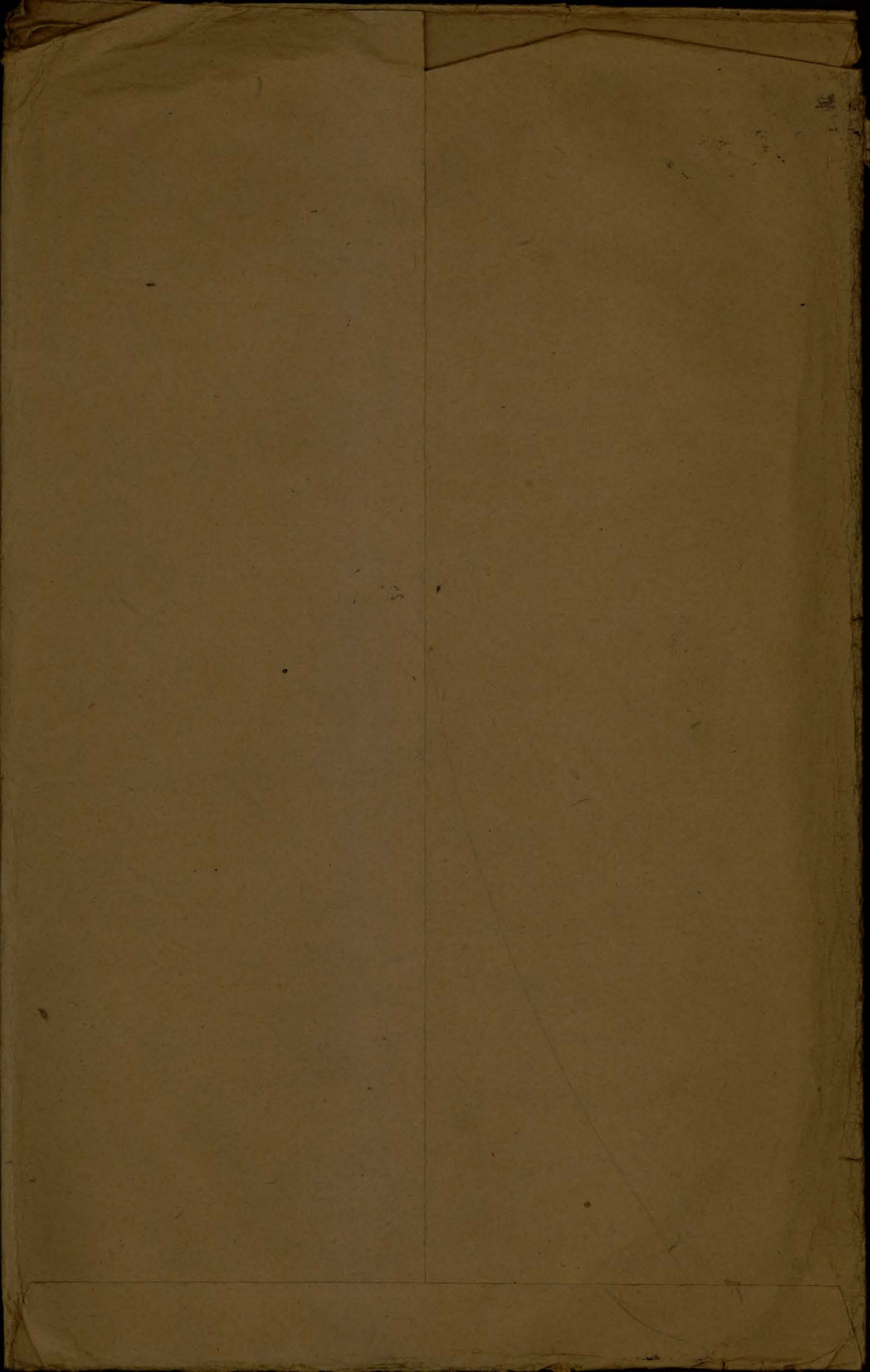
A.F.B. 181-
misc med's
R 122

1092 med
MIX
3-2-21
R.R.

7.7
22-7
26 7

2

S



Duplicate **DUPLICATE**

ATTESTATION PAPER.

No. **1021103**

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... Bourassa
- 1a. What are your Christian names?..... Louis
- b. What is your present address?..... Morinville Alberta Canada
- 2. In what Town, Township or Parish, and in what Country were you born?..... Quebec P.Q. Canada
- 3. What is the name of your next-of-kin?..... Philip Bourassa
- 4. What is the address of your next-of-kin?..... Morinville Alberta Canada
- 4a. What is the relationship of your next-of-kin?..... Father
- 5. What is the date of your birth?..... 17th October 1895
- 6. What is your Trade or Calling?..... Farmer
- 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 }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Louis Bourassa, 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.

L. Bourassa (Signature of Recruit)

Date 6th June 1916 L. J. Richard (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Louis Bourassa, 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.

L. Bourassa (Signature of Recruit)

Date June 6th 1916 Joyce (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 Edmonton this 6th day of June 1916

J. B. E. Mathias (Signature of Justice)

TRANS. TROOP
107
A. H. H. B. 17818

BAGGAGE
BAGGAGE
M. BOLL

Handwritten notes in the bottom right corner.

Description of Louis Bourassa on Enlistment.

Apparent Age 20 years 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 measurement { Girth when fully expanded..... 35 ins.
 Range of expansion..... 2 1/2 ins.

Complexion Clear

Eyes Blue

Hair Sandy

Religious denominations.
 Church of England.....
 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 June 6th 1916

Place Edmonton

[Signature]
 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.

Louis Bourassa.....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] Lt. Col. (Signature of Officer)
 COMMANDING 233rd C. BATTN. C. E. F.

Date June 6th 1916

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 1021103 (Rank) Private

Name (in full) Louis BOURASSA enlisted in

the 233rd Overseas Battalion,

CANADIAN EXPEDITIONARY FORCE at Edmonton on the 6th

day of June 1916

HE served in France, with the 22nd O. Bn.

and is now discharged from the service by reason of Being Medically Unfit for

further Service, although fit for employment in civil life.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age 23 Years

Height 5 Feet 5 Inches.

Complexion Clear.

Eyes Blue.

Hair Fair.

Marks or Scars

Signature of Soldier

Issuing Officer

Officer i/c Discharge Section District Depot M. D. 18

Rank Capt

Date of Discharge December 16th, 1918

Appointment

Signed at Calgary, Alta. this 16th day of December 1918

in Military District No. 13

File Reference No. 13D B 226

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. 1021103 (Rank) Private Name Louis BOURASSA

Unit The 233rd Overseas Battalion,

Address on Discharge Morinville, Alberta,

Character and Conduct VERY GOOD

Former Occupation Farmer,

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks Was in France.....

Signed at Calgary, Alta. this 16th day of December 1918

W. W. Asmuth

Name of Officer Lieut.-Col.
Commanding District Depot M. D. 13

Rank

Appointment

CLINICAL CHART.

Army

Corps 2nd DIVISION.

(To be attached to Case Sheet.)

Military Hospital 58 8.8.5.

No. 1021103

Rank and Name Bannawa, L. Pte.

Age 22

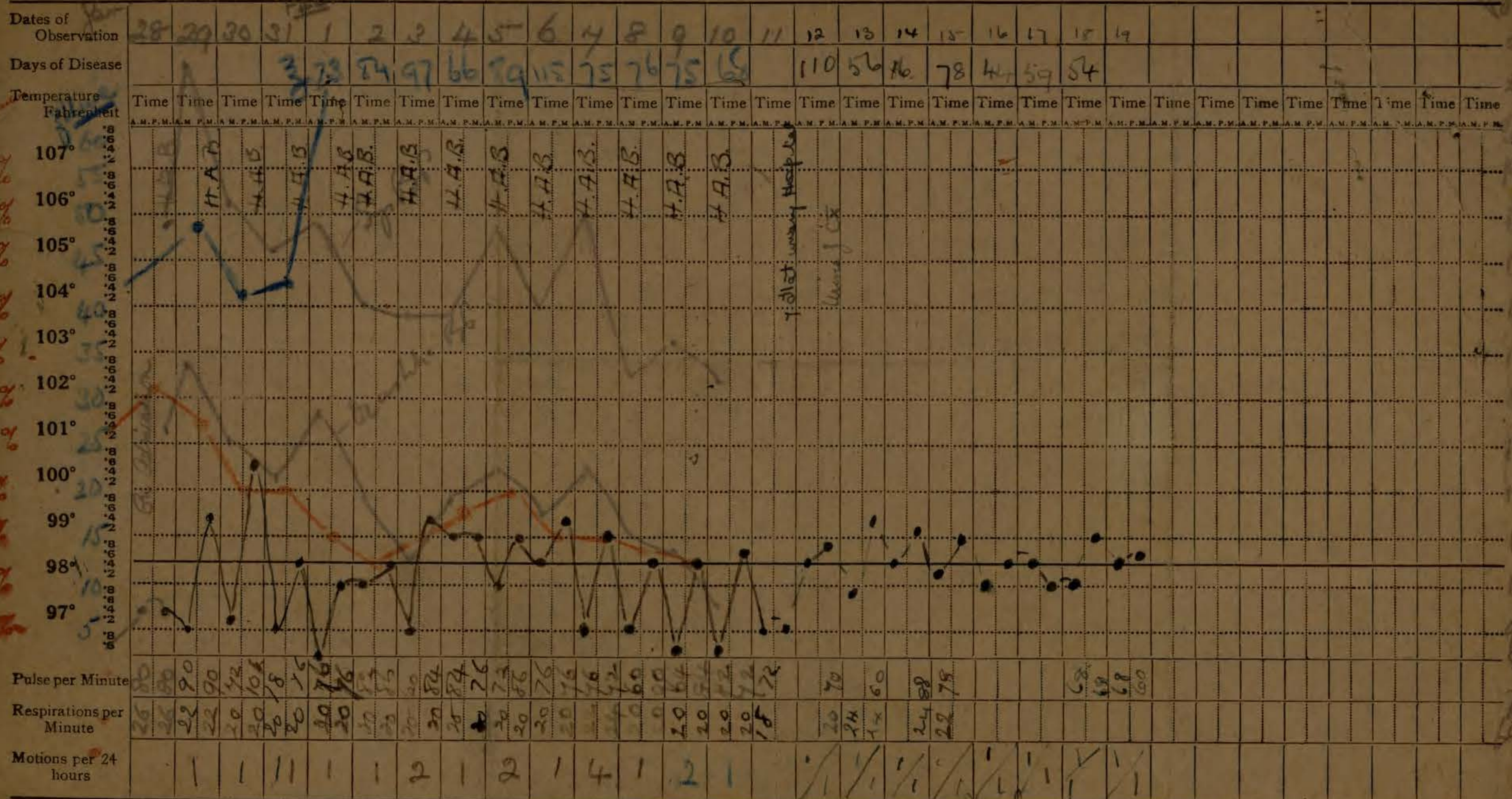
Service 2 yrs.

Disease NEPHRITIS

Date of admission 28-1-18

Date of discharge _____

Result _____



Signature [Signature] In charge of case.

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

*L, 1
Eps-*

0

Name **Bourassa, Louis**
Surname Christian Name

Regimental Number **1021103** Rank: **Pte.** Address (in full) **Morinville, Alta.**

Unit **233rd Bn.**

Original Unit

District where paid **M.D. 13.**

Date of Discharge **16-12-18.**

P. D. P. Filing Number

Rates:—Regimental pay \$ per diem: Field Allowance \$ per diem. Separation Allowance \$ per month.

L. L. 46038—M. & D. 9245

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments 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.
 25M.—8-18.
 1772-30-1140.

Remarks: **Account opened 28-12-18.**

WAR SERVICE GRATUITY.

File No.

Register No.

Reg. No.

Dependent.....

Name.....

Address.....

Address.....

Dec'n No. **W. S. G. File No**

Award days at \$ per day \$

S. A. months at \$ per mo. \$

Less P. D. P. Credited \$

Less further debit balance \$

Net due paid as below

Pay Soldier \$

Pay Dependent \$

TO SOLDIER TO DEPENDENT

0	Ag. No.	Ch No	Amount	1	2	3	4	5	6
1									
2									
3									
4									
5									
6									

Days..... Rate..... Due.....

Less P.D.P. credited.....

Less further Dr. Bal. or overpayment.....

Net.....

Clerk.....

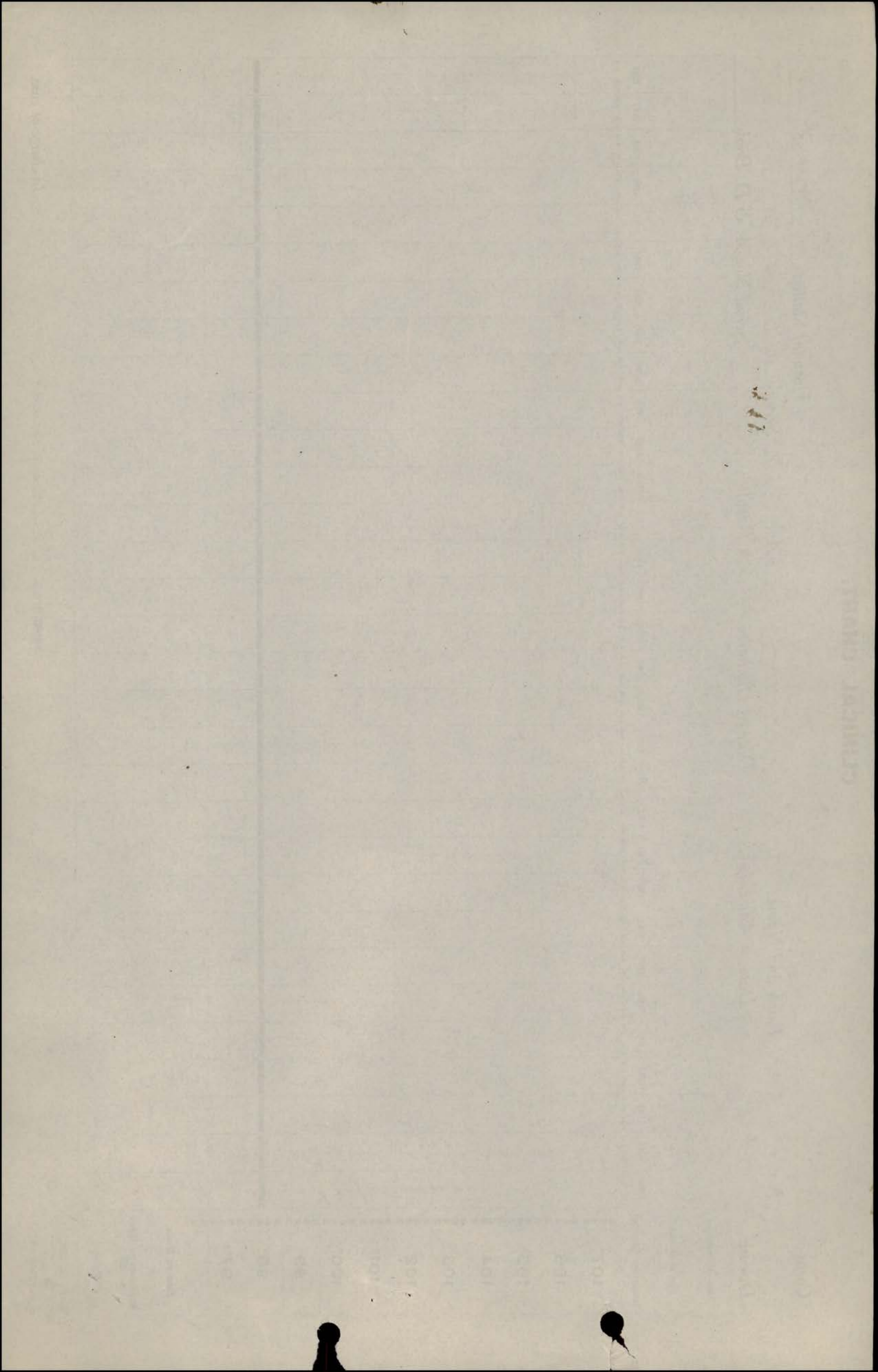
Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount.
1					1			
2					2			
3					3			
4					4			
5					5			
6					6			

GEN'L AUDITOR

Posting checked by

.....

Date.....



CLINICAL CHART.

Corps 23rd Battalion

Hospital Station Edmonton, Alta.

No. 1021103 Rank and Name Courassa James Pte Age 22 Service C 1st 2 1/2 2 1/2

Disease Chronic Hepatitis Date of Admission 29-10-18 Date of Discharge 18-11-18 Result No Change Serial No. A. & D. Book

Dates of Observation	Oct			Nov																															
	29	30	31	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18														
Days of Disease																																			
Temperature Fahrenheit	TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		
	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	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																																			
Respirations per Minute																																			
Motions																																			

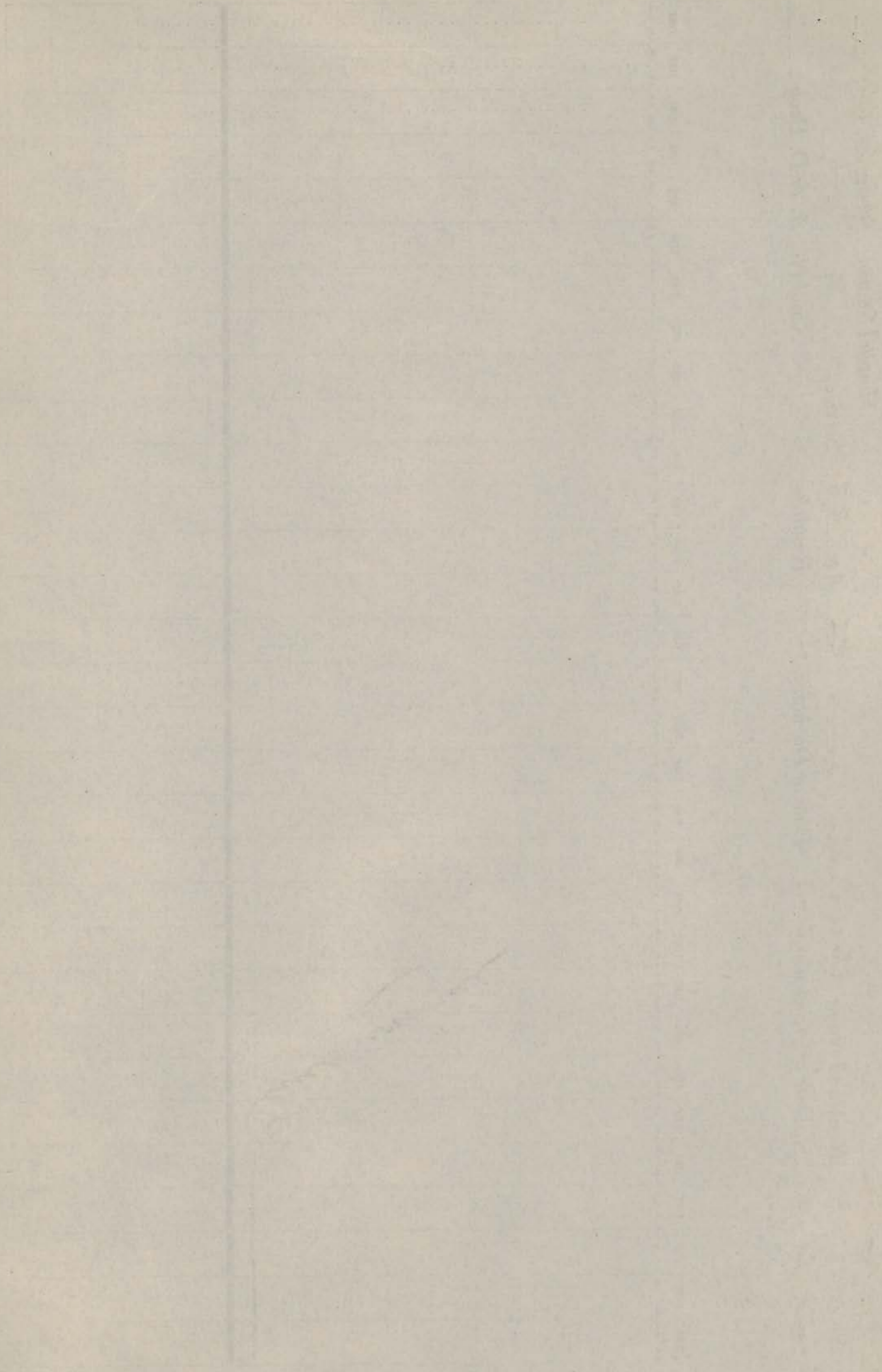
Temp normal

Signature J. McDonald Capt In charge of case.

1000

1000

1000
1000
1000



STWICHT CHWAL

CASE HISTORY SHEET.

Edmonton Military Hospital. Edmonton, Alta. Station.

No. 1021103 Rank Private Name BOURASSA, LOUIS Age 22

Unit 233rd Bn. Completed years of service 62⁵/₁₂ 77/12 8¹²/₁₂
Where and how long

Date of admission Oct 29, 18. Date of discharge 22-11-18

Diagnosis Chol Hepatitis Place of origin Leaven

CONDITION ON ADMISSION AND PROGRESS OF CASE

Previously well nourished
now lost, very pale and face swollen.
Developed hepatitis in Nov 1917, treated
to England. Has pain in back constantly
over region of kidneys. No oedema of feet
and legs. Is short of breath on exertion
Heart & lungs normal. Has indigestion
if allowed to eat meat & heavy food
Bowels constipated. Nervous system
normal
Urea analysis S.G. 1014, acid albumen. Marked
granular casts + waxy casts.

Condition unchanged.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.) neg for nervous and TB disease

TREATMENT

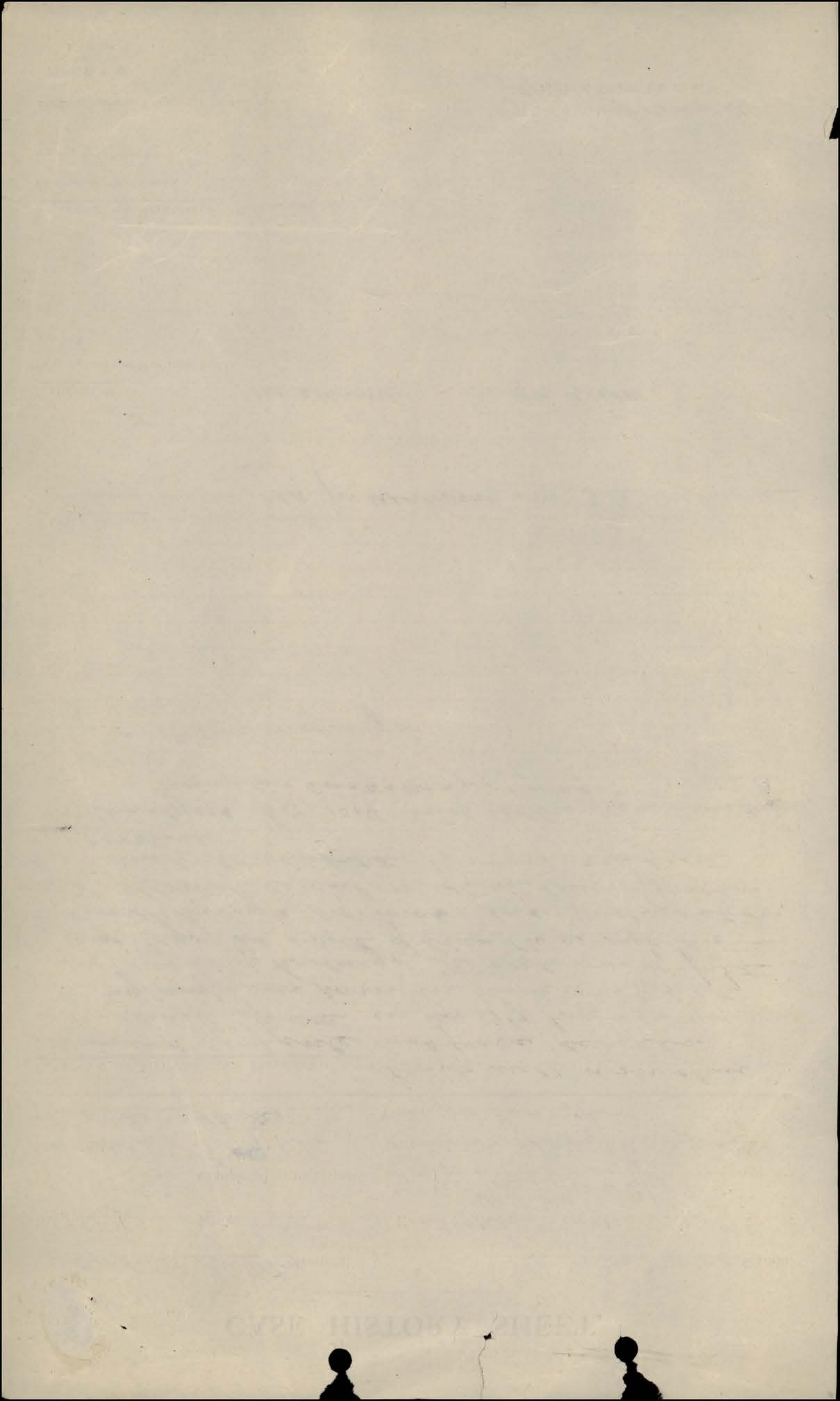
(Especially any specific or special form.) Medical, with diet

CONDITION ON DISCHARGE

(and disposal made of case.) Unchanged
Class F

Date Nov. 18. 18. J. C. McDonald
Medical Officer i/c case.

32422



CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

DISTRICT DEPOT 13.

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

Instrumental No Rank Name

Serials 1021103 pte who was* BOURASSA L.

On 178th 191..... to discharged

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 191.....
to 191....., the inclusive date of transfer or discharge.

16.12.	8	\$	c.	Cr.	\$	c.	1.12. 8
Bal. Dr. from prev. month				Balance Cr. from prev. month			
Advances by Cheques	No.			Regt'l. Pay	days at \$.....c.....	18 00	
Assigned Pay and Sep'n Allee.	No.			Field Allow.	days at \$.....c.....	18 00	
Other charges	A 2576	35	00	Separation Allowances* (Monthly)	10	1 60	
Payment on transfer or discharge	No.	25	00	Other Allowances*			
Balance Cr. (to be paid by the new unit)	A	20	60	Other Credits*	Clothing	35	00
Total	2596			Total			
		70	60			70	60

*Give particulars.

A monthly stoppage of \$..... (†) has (§) been paid on account of Assigned

Pay for the month of 191..... }
and Sep'n Allee. for month of 191..... } (to) Assignee charged

(Address) December 8 Mrs Marie Clara Bourassa

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

On Transfer of an Officer.

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

REMARKS:—

- State (1) date of enlistment
- (2) if married and if a Separation Allowance Card has been submitted
- (3) cause of discharge authority No
- (4) authority for transfer H.O. S.A.B.

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

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

Date

Place 11.12.18

[Signature]
Paymaster.

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

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

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

M. F. W. 44.



W. B. ...

Synopsis for Canada

5 C 4 7.
MEDICAL CASE SHEET.* 06

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	1021103	PTC	Bourassa	Louis
Year	Unit.	Age.	Service.	
	22nd Bn.	22	2 yrs 9/2	
Station and Date.	Disease			
nos can. G.H.	Nephritis	Next of Kin Mother Mrs. M. C. Bourassa Inornville Alberta. Man.		
	Occupation Farmer			
	Enlisted 6 th June 1916			
	came to England 14 th March 1917			
	Went to France 12 th May 1917			
Lens	Reported pains in Back 28 th Jan 1918. ... also shortness of breath swelling hands and feet. ... marked nephritis at 3 rd c.c.s.			
	Hospitals in France 28-1-18. 3rd. C. C. S.			
	10-2-18 7 th Stationery Hosp. Imperial. Boulogne			
	Nephritis - milk diet. bea...			
	Hospitals in England. 20-2-18. Royal Southern			
	Hosp. Imperial. 6-6-18 Kirkcubright. Liverpool.			
	Previous history. patient states that he thinks he must have had kidney trouble before he entered as he was often troubled with pains in the back. At Royal Southern Hospital Liverpool; his urine showed albumin 5 grains			

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

Station
and Date.

leucocytes

daily, sp gr. 1010, a few R.B. cells,
leucocytes, numerous large granules,
hyaline casts.

Keith's case: June 7th 1918.

Present condition: 9.6. fair, well
built, well nourished, but 15. present
very pale and anemic. complains
of frontal headaches, shortness of
breath, frequency of micturition at
night, pain in back over region of
kidneys.

Circulatory system. apex just under
nipple line. heart slightly enlarged
transversely to nipple line. heart
regular ^{no murmurs} pulse 76. regular
B.P. 165. 121. arterial wall
normal.

Gastro-intestinal system. tongue pale-
flabby. coated white. his independence to
omit his food specimen, bowels
constipated
respiratory system normal.

A. F. Ryker
Capt

Keith's case Urinalysis June 11th 1918. ^{Come} Capt Church

straw color acid sp gr. 1010
sugar negative, albumin + + +.
micro: a few pus cells

A. F. Ryker
Capt
Cord

3763

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Bourassa Christian Name Louis

Examined { on 6th day of June 1916 at Edmonton Alberta
Birthplace { City or Town Quebec Rank Capt. M.O.
County Province of Quebec

Apparent age 30
Trade or occupation Farmer
Height 5 Feet 5 Inches M.O.
Weight 125 Lbs. M.O.
Chest measurement { Minimum 29 inches M.O.
Maximum expansion 32 inches M.O.
Physical development Good M.O.
Small-Pox Marks None M.O.

Vaccination Marks { A r m. Right. Left.
Number None
When Vaccinated last 1/2/17 M.O.
(a) Marks indicating congenital peculiarities or previous disease None M.O.

(b) Slight defects but not sufficient to cause rejection None
Date. Result. ANTI-TYPHOID INOCULATIONS, ETC.
4/2/16 OK W. J. Gussard M.O.
11/12/16 OK W. J. Gussard M.O.
16/12/16 OK W. J. Gussard M.O.

Enlisted on 6th day of June 1916 at T.A.B. Edmonton

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>233 rd. Co</u>	<u>1021103</u>		<u>June 6, 16</u>
Transferred to	<u>178th Batt</u> <u>10th Res Bn</u>	<u>1021103</u>		<u>March 1st 1917</u> <u>15-3-17</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>50th Lt</u>	<u>11-6-18</u>	<u>Nephritis of T. C.</u>	<u>29 Paul Capt Camp</u>
<u>Edmonton, Alta.</u>	<u>19-11-18</u>	<u>Nephritis.</u>	<u>Extraduro Capt.</u> <u>CAPT. C. A. M. O.</u>

CANADIAN

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 Bourassa Christian Name Lewis

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				
Royal Southern Hosp.		20	2	18	5	6	18	Nephritis subacute epithelial	106.	On admission 5 gms albumen Now 7 gms daily - no reduction after 2 1/2 mos rigorous treatment. Heart normal. For Medical Board	J. D. McAusland M.D.
		5 JUN 1918			27 SEP 1918		nephritis	-	g.c. fms. complaints from in back, shortness of breath, pale, anemic freq. of micturition = B.P. 155...120	Ogden Capt Cowe	
H.M.S. Lunarian		24	9	18	7	10	'18	Do		Discharged to Port of Dumbarton	W. Seaman Capt Lane
S.M.H. Edmonton		14	10	18	25	11	'18	Nephritis		Complaints of weakness, and headache. Urinalysis shows albumin plus	Leffeggie, M.D.

NO. 5 CANADIAN
 GENERAL HOSPITAL
 LIVERPOOL

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 233rd Bn C.E.F. (F.C.)

(2) Regimental Number 102103

(3) Full Name of Soldier Bourassa, Louis

(4) Place of Birth Yamachiche, P. Q.

(5) Are you married, or not? No

(6) If married, state,
(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower? No

(8) Have you any children?.....

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

Also their names and ages.....

(9) Is your Father alive? *Yes*

If so, state name and address *Philippe Bourassa, Morinville, Alta*

(10) Is your Mother alive? *Yes*

If so, state name and address *Morinville, Alta*

(11) If your Mother is a widow *No*

Are you her sole support, or not? ~~No~~ *Yes*

(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.

(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.

(His father)

(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.

Yes

(15) Are you insured? *No*

If so, in what Company?

Have you made arrangements for payment of your Insurance premium?

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

Date *4th Febr. 1917*

[Signature]
Officer Commanding.



H.H.B. Rank

Name BOURASSA, Louis

Reg'l No. 1021103

Unit 178th. Bn.

If in perm. Corps, }
What Unit? }

Married or Single Single

Place and Date of Enlistment Edmonton, 6th. June 1916

Place of Birth Quebec, P.Q., Can.

Name and Address, Next-of-Kin Philip Bourassa
Morinville, Alberta, Canada

Relationship Father

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

*M.X.
3-2-21
R.R.*

*N.I. No. 11460
P.H. R.L.
C.A. 1000
M. U. Ban*

Discharge, Date and Place

Reason

Character

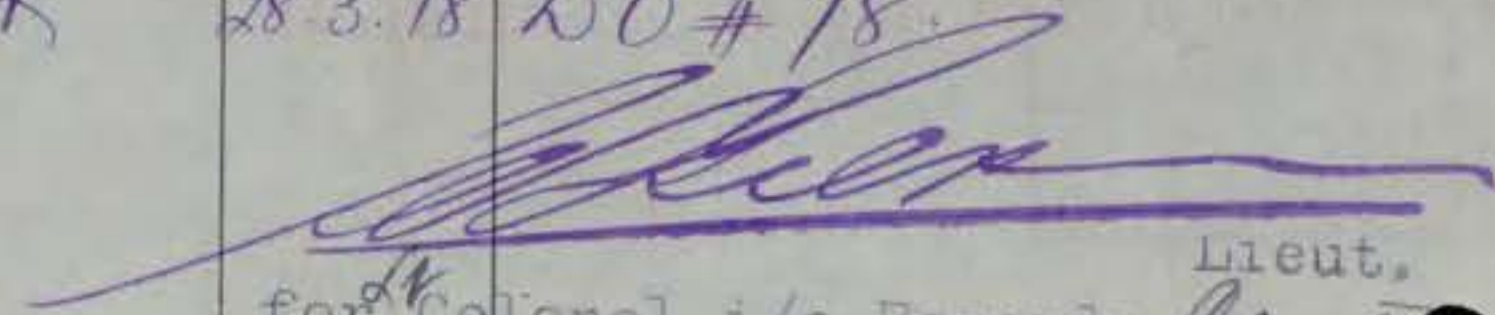

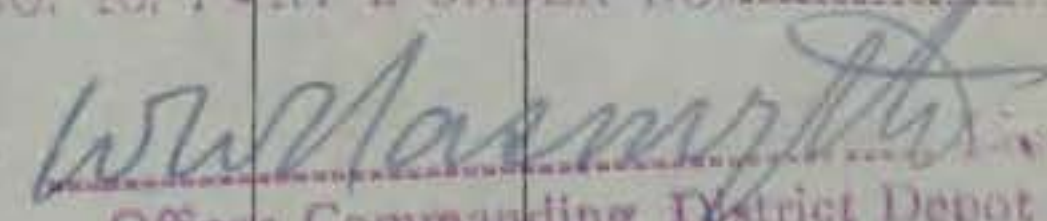
H. W. V., Ld.-9546-16.

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.				
<i>6</i>	<i>ARRIVED</i>	<i>ENGLAND S S</i>	<i>CANADA</i>	<i>15 MAR 1917</i>	
<i>19-3-17</i>	<i>10th Res Bn</i>	<i>Taken on Strength</i>	<i>Shoreham</i>	<i>14-3-17</i>	<i>PT 2 O No 62</i>
<i>27.5.17</i>	<i>---</i>	<i>S.O.S on Trans to 22 Bn</i>	<i>---</i>	<i>27.5.17</i>	<i>Pt 2 Do 126. 000 680/19617</i>
<i>27.12.18</i>	<i>2 Q.R.D.</i>	<i>Admitted to Spel. Sick</i>	<i>P. Willey</i>	<i>20.2.18</i>	<i>" 21 2/4.3.18 22 Bn.</i>
<i>27.3.18</i>	<i>"</i>	<i>S.O.S. to 1 Q.R.D.</i>	<i>"</i>	<i>28.3.18</i>	<i>49 Do # 78 2/30.3.18 1 Q.R.D.</i>
<i>30.9.18</i>	<i>Q.R.</i>	<i>Invalided to Canada</i>	<i>Lpool</i>	<i>24.9.18</i>	<i>Ch B-332</i>
<i>3.10.18</i>	<i>Q.R.D.</i>	<i>S.O.S on transfer to the</i>	<i>C.E. 7 in Canada</i>	<i>B'shott</i>	<i>24.9.18 Do. 240</i>
		<i>Further med treatment</i>			

#1021103

Pte. Bourassa Louis

113th Bn.

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				
10-2-18	5866.S	Nephritis, seriously ill, condition improved for evacuation to Base	5866.S	28-1-18	W 3391. 1827
20-2-18	7 Staty. 50	nephritis 20 Invalided "Sick" per H.S. "St. Denis" and posted to 2 nd Quebec Regt. Depot, Witley. -	A.S. St Denis	20/2/18	W 3391-24436. W 3083-4844. 20-2-18. Part II order 21/1918.
		W. Logan	Major for Lt.-Col., A.A.G. Canadian Section, G. H. O. 3rd Echelon D.E.F.		
30. 3. 18	Q.R.D. J.O.S.		Beboth	28.3.18	DO # 78.  Lieut. for Colonel i/c Records, Comd.
24-9-18		TAKEN ON STRENGTH OF DISTRICT DEPOT 13, PART 2 ORDER NO. 152			
					 Lieut. Col. Officer Commanding District Depot No. 13
16.12.18		DISCHARGED FROM THE SERVICE BY DISTRICT DEPOT NO. 13, PART 2 ORDER NO. 243			
		AUTHORITY: <u>Roubaix Order 237</u> <u>Letter Ottawa 09-2-18</u>  Lieut. Col. Officer Commanding District Depot No. 13			

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

M. F. W. 54. (A. F. B. 101)

Casualty Form—Active Service.

250M.-1-16.
H. Q. 1772-39-020.

Unit, Regiment or Corps 233rd Overseas Battalion, C.E.F.

Regimental No. 1021103 Rank Plt Name Bourassa, Louis
 Enlisted (a) 6 June 1916 Terms of Service (a) C.E.F. 2 of W. Service reckons from (a) 6 June 1916

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) Farmer

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				
19-3-17	O.C. 10th. Res. Bn.	Taken on from 178th Bn.	Embarked Canada Disembarked England	3-3-17 15-3-17	✓
27.5.17	O.C. 10th. Res. Bn.	Transf. to 22nd. Bn. C. E. F.	Shoreham	15-3-17	D.O.P. 11--62.
		<i>Discharged except for</i>		27.5.17	D. P. 11. O. 126
					Adj. 10th. Can. Res. Battn.
27/5/17	C. B. D.	ARRIVED C. B. D.	FRANCE	28/5/17	N. R. D PARTIAL ORDERS No. 68. D. 19-6-17
15/6/17	C. B. D.	LEFT C. B. D. FOR			N. R. D
	O. C. 10th. Res. Bn.	ARRIVED 3rd Bn.	FIELD	15-6-17	B. 213 D. NR.
3/8/17	O.C. 10th. Res. Bn.	Joined Unit	"	31/7/17	B. 213. D. 25/16.
28/1/18	58 C. B. D.	Nephritis	Adm. 58 C. B. D.	28-1-18	103291-2635.
11-2-18	7 Stat.		To 39 A.T.	11-2-18	DO D. 2346
			Adm 7 Stat.	DO	DO D. 2416

(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, Shoering Smith, etc., etc., also special qualifications in technical Corps duties.

CITY OF LIVERPOOL

VENEREAL DISEASES.

Identification letter or number of patient ... Pte Bourassa

Administrative County or County Borough ... (V.D.C. 733)

in which patient resides ... Liverpool

Name of clinic, if any ... Royal Southern Hosp

Name and address of doctor ... Dr Lloyd Roberts

... Royal Southern Hosp

Date of receipt of specimen ... 27-2-18

Nature of test performed ... Wassermann test

Result ... Slightly Positive Reaction

Date of Report ... 2-3-18

If specimen not examined, state reason

REMARKS:—

DR. Lloyd Roberts

Royal Southern Hosp

Signature ... J. Beake

BACTERIOLOGICAL DEPARTMENT,

JOHNSTON LABORATORIES,

UNIVERSITY OF LIVERPOOL,

Handwritten notes at the top of the page, including the name "Stuebel" and a date "1891".

Handwritten notes in the middle section, including "Fast mammaries", "1891", and "Stuebel".

Handwritten text at the bottom right, including "1891" and "Stuebel".

LENERENT DISEASES

CALL OF FLECKBOOT

Date of entry and medical unit admitting must be recorded immediately on admission. Brief clinical notes to be added later and signed by M.O.

No. of C.C.S. 58

Date of entry 28 Jan 1918

97 Says he has been in present condition for ~~24~~ 24 hrs. in that he reported sick very morning - got up and duty.

Present - Pain Rt lower chest -
 Ch of br. cough -
 Swelling face none
 swollen legs.

Says SS 212 DBP 148
 10 Feb 18 125 96 temp

No. of Hospital

NO 7 STATIONARY HOSPITAL

Date of entry

11 FEB 1918

looks very pale in mouth some redness
 tongue coated. No previous illness claimed
 Heart dullness $\frac{111}{106}$ sounds clear 2nd Aortic
 Lungs Permat. to some as adventitious
 Abdo. Spt. somewhat distended? small amount
 fluid. Passed 340
 stools after cough not troublesome, B.W.D.
 14.2.18. Stools much better urine 356
 15.2.18. Very well urine 386
 17.2.18. Colour some stool better
 urine clear 1006 ac. old Alb. No sup.
 C.D. pulses 96 regular rhythm casts only
 large numerous
 Evac^d B stools 2, stool exp

This F.M. Card must not be destroyed, and it must be transmitted with the patient if he is evacuated to U.K. Temperature charts or additional clinical notes may be sent with it, either in the in another envelope attached to the patient.

FIELD MEDICAL CARD.

A.T. Serum }
 Dose and date } 1st
 2nd

FIELD AMBULANCE NOTES

Morphia }
 Dose and time }

Date of wound or }
 onset of illness }

Religion *R.C.*

No. *1021103* Rank *Plc*

Name *Bumassa, L.*

Unit *22 Co. (at) 2nd Div Army*

Battle Casualty ~~Accidentally Wounded~~ "Sick" *6686*

(Strike out description which does not apply).

No. of F.A. *Direct Admission*

Date of admission

F.A. diagnosis *g. h. o. 2nd Div Army 1021103*

Additional F.A. Notes to be written on back of card.

C.C.S. diagnosis (if altered from above)

Base Hospital diagnosis (alterations or additional)

SURNAME

CHRISTIAN NAME OR NAMES

REG. No.

BOURASSA

L.

1021103.

RANK
Pte.

UNIT

20. 22. Co.

TROOP

BATTY

HOSPITAL

DATE OF ADMISSION

58 C.C.S.

28-1-18.

27 Stab. Boulogne.

11-2-18

1

1st. W. G. H. Hazakerley & post

HOSP. 20-2-18

2.

5 C. G. Liverpool

6-6-18

HOSP

3.

HOSP

4.

HOSP.

DIAGNOSIS

1.

Nephritis. AT.

2.

3.

Invalided to Canada 24.9.18

DISPOSITION

Dang. ill. 2-2-18 DATE
Rem'd f. Dang. ill. List. 11-2-18 REMARKS

CL. 2-2-18 A121.

" 4-2-18 A122

" 14-2-18 A130

" 18-2-18 A133

" 23-2-18 B129

" 8-6-18 B235⁰

30.9.18 B332-3.

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.

LOCAL CARD

Name BOURASSA Louis Rank Pvt. Regtl. No. 1021191

Fyle Depot 13D-E226

Original unit 21st Bn Present unit 2 Bn M. or S. Age 22 Religion R. Ref. H.Q.

Port, ship and date of arrival Quebec - "Lunenburg" 7-10-18

Next of kin Philip Bourassa, Morinville, Alta.

Address on leave as above

Address on discharge Morinville, Alta.

Transportation issued Yes No Date 14-10-18 Character on discharge

Previous occupation Turner Date and place of enlistment 6-6-16 Edmonton

Diagnosis Nephritis Chronic Date of Medical Boards 19-11-18

Date.	Remarks.	Pt. 2 Order No.
<u>7-9-18</u>		
<u>24-9-18</u>	<u>Reported to Hon. Sec. Edmonton 14-10-18</u>	
<u>1-11-18</u>	<u>Admitted to Edmonton Military Hospital.</u>	<u>152</u>
<u>2-12-18</u>	<u>Transferred to Cas. Co. Edmonton</u>	<u>212</u> <u>228</u>

*—Name will be given in full ; surname first.

Date.

Remarks

Pt. 2 Order No.

16-12-18.

Discharged from H.M. Service

243

NAME *Bourassa Louis*

REGT'L. No. 1021103

RANK AND CORPS *ptc*

H. Q. FILE NO. 649

52nd Form 235th Bn

FOLLOWS NO. _____
FOLLOWS _____

CABLE

NO.

DATE

NATURE OF CASUALTY

H. 36⁽⁴⁾

4-2-18

*b. Dangerously ill 58 Gas Clearing Station
Dec. 9th 1918. Nephritis ✓*

H 47 (2-1)

14-2-18

*Removed from dangerous ill list Feb. 11th 1918
58 Gas. Colg. Station. ✓*

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A121	#58 Cas. de Stat	2-8-18	Nephritis
A122	" " " " " "	2-2-18	" "
A130	#58 Cas. de Stat removed from dangill list	11-2-18	(22) "
A133	#7 Str. Baulsye	11-2-18	" " mild
B129	1st West Gen Hospital Liverpool	20-2-18	(22) Nephritis mild
B332	Invalided to Canada	24-9-18	" -5-3-18

NAME

Bourassa
Bourassa

REGT'L No.

1021103

H. Q. FILE NO. 649.

RANK AND CORPS

Plt *Louis*
Divided Regt

FOLLOWS
No.

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

233 Bn.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

B235 #5 Carlen Liverpool 6-6-18 Nephritis

Louis

Name *BOURASSA* Rank *Pte*Reg. No. *1021103*Unit *22 Bn. att. 2 Div. Wing. C.C.P.C.*Next of Kin *Canada*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1918</i>						
<i>28-1</i>	<i>58. G. C. Str.</i>	<i>Nephritis</i>		<i>A121</i>		<i>12775</i>
<i>2-2</i>	<i>Dangerously ill</i>	<i>do</i>		<i>A132</i>	<i>H36</i>	<i>102889</i>
<i>11-2</i>	<i>Out of Danger</i>	<i>do</i>		<i>A130</i>	<i>H47</i>	<i>103866</i>
<i>11-2</i>	<i>4. Sta Hsf. Boulogne</i>	<i>Nephritis</i>		<i>H133</i>		<i>19647</i>
		<i>med</i>				
<i>20-2</i>	<i>St. W. L. St. Liverpool</i>	<i>do</i>		<i>B120</i>		<i>13001</i>
<i>6-6</i>	<i>No 5 G. L. St. Liverpool</i>	<i>do</i>		<i>B235</i>		<i>19300</i>
<i>24-9</i>	<i>INVALIDED TO CANADA</i>			<i>B332</i>		<i>2451</i>

LEDGER NO. 4106

SERIAL NO. 32422

REG. NUMBER 102⁹¹~~7~~03 NAME Bourassa Louis

RANK Pt CORPS 239rd. Bn

AGE..... SERVICE.....

NAME OF HOSPITAL Strathcona mi PLACE Edmonton

DATE OF ADMISSION 1-11-18

DISEASE Influenza - (2) Nephritis

TRANSFERRED TO OTHER HOSPITALS.....

OPERATION.....

DISCHARGED TO Gas boy 22-11-18 IN CATEGORY E

REMARKS:.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

CARD NO. *mg*

SURNAME. *Bourassa*

CHRISTIAN NAMES *Louis*

REGL. No. *01021103*

RANK *Pte*

UNIT ~~*233rd. 148th*~~

#13 N. N.

*Recd 296.70 13
SCR 1914-8 3/7/20 Bm*

FORMER CORPS *5th*

*S.O.S. Dis. 16/12/18
m. u. FOLL.
D.O. 243 of 16/12/18 #13*

NEXT OF KIN.

NAMES IN FULL *Bourassa Philip*

RELATIONSHIP TO SOLDIER *Father*

ADDRESS *Morinville, Alta*

CHANGE OF ADDRESS

COUNTRY OF BIRTH *Canada Quebec, P. Q.*

DATE *Oct 17th 1895*

PLACE OF ATTESTATION *Edmonton, Alta.*

DATE *June 6th 1916*

Transferred from 23rd to 148th on 12/18/18

Aug 17-3-17. R/O 7/10/18 24/38

0/0 3/3/17

From Halifax Per S.S. "Canada" 3/3/17.

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

20 YEARS

MONTHS

HEIGHT

5 FEET

5 INCHES

CHEST MEASUREMENT

35 INCHES

EXPANSION

2 1/2 INCHES

COMPLEXION

Clear

EYES

Blue

HAIR

Sandy

DISTINGUISHING MARKS

Not Stated

MEDICAL EXAMINATION.

PLACE

Edmonton, Alta

DATE

June 6th 1916

Present Address

St Boninville, Alta

No. 1021103. RANK *Pt.*

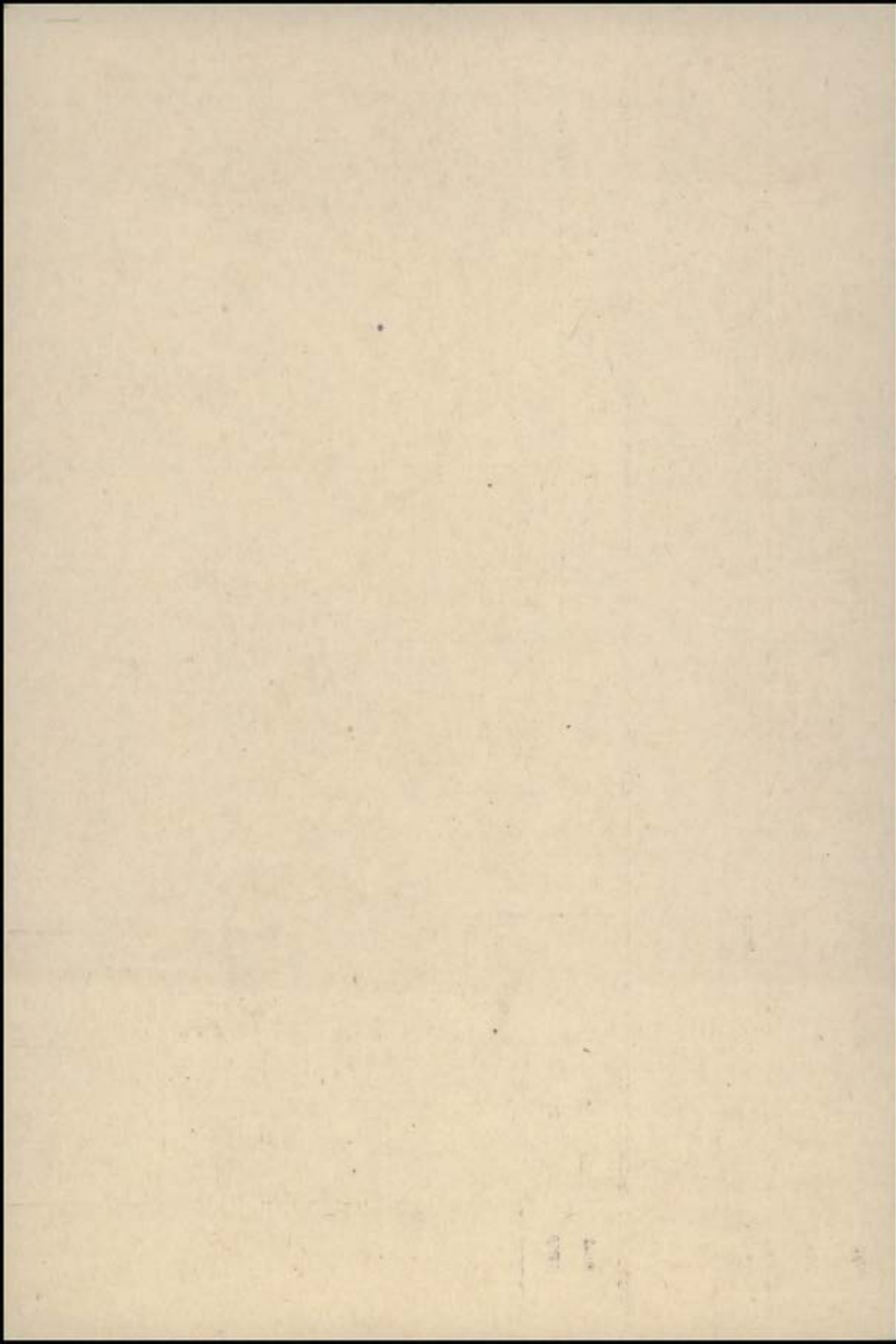
NAME *Bourassa, L.*

T.O.S. 6.6.16
D.O. 46 of 8.6.16.

UNIT *233rd Battalion. C. E. F.*

M. D. *13.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>June 6</i>	<i>1916.</i> <i>June 30</i>	<i>n.</i>		
<i>July.</i>		<i>n.</i>		
<i>Aug.</i>		<i>n.</i>		
<i>Sept.</i>		<i>n.</i>	<i>Forfeit. 16 day's pay.</i>	<i>D.O. 118 of 20.9.16.</i>
<i>Oct.</i>		<i>n.</i>		
<i>Nov.</i>		<i>n.</i>		
<i>Dec.</i>		<i>n.</i>		
<i>1917.</i>				
<i>Jan.</i>		<i>n.</i>	<i>" " 2 " A. W. L.</i>	<i>D.O. 16 of 19.1.17.</i>



Number

1021103 ✓

Rank

Cte. ✓

Surname

BOURPASSA ✓

Christian Name

Louis ✓

Units

22³⁹ Bn. C. Inf. ✓

Theatre of War

France ✓

Date of Service

28-5-14 ✓

Remarks

sent to ✓

Latest Address

Mounville, Alta. ✓

56684

Roll No.

19

200m.-6-21.

Page 19427

DESP. JUL 24 1924

REGN. NO. 6300

S.O.S. 16-12-18. M.U.
M.D#13.

✓ BOURASSA, Pte. L. ✓ #1021103. ✓ 22nd Bn. ✓ 649-B-24536.

~~R.R.~~

Medals and
Decorations

✓ Philipp Bourassa, Esq., (F)
Morinville,
Alta.

Plaque and
Scroll

(Ser. #985068.) " "

Memorial
Cross

✓ Mrs. Marie C. Bourassa, (M)
Address as above.

not eligible for 14-15 Star
E " " " U.M
eligible for B.W.M.

[Handwritten signatures and initials]
SBR
R.R.

Scroll Deep. $22\frac{5}{3}$ Reqn. No. 55955

Plate No. **DEC 21 1923** Reqn. No. 50112

M. E. 44619

RECORDED
1921

747

Date of Enlistment

5.6.16

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

B

9653

May 1st 1918

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15.00			
-------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 1021103
 Rank Pte Promoted Reverted Discharge
 Soldier's Name Louis Bourassa
 Battalion 233rd Bn.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Marie Clara Bourassa
 Address Mourinville Alta

Change of Address

1			
2			
3		15	15.00
4			

MRS. MARIE CLARA BOURASSA,
 MOURINVILLE,
 ALTA.
 1021103 PTE LOUIS BOURASSA
 FIFTY DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
May	J 535		15	15	
June	D 19150		15	15	
July	X 33516		15	15	
AUG.	E 30899		15	15	
SEP.	D 37186		15 ⁰⁰	15	
OCT.	B 48983		15	15	
NOV.	B 52575		15	15	
DEC.	C 65940		15	15	
1919 JAN.			120		

Sept 1917 L. 15. Mr. 233.

6042 mailed 21-5-18
 a/c closed 31-12-18
 Discharged 16-12-18
 M.O. Destroy 52792

M.P. 13
 A/c Closed open closed
 Ret'd per Tunisian
 Date 9-10-18 F. X. 11-15-18
 Clerk

M. F. W. 128.
 400M. 5-17-1772 39-1141
 L. L. 22320-M. & D. 1903.

AUTHORITY FOR NEW ACCT. W. M. 12418
 W. R. Thorne

* Strike out whichever inapplicable.

ASSIGNED PAY <i>hil</i>	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE: <i>1/5/18</i>		EFFECTIVE DATE: -	
AMOUNT: <i>15⁰⁰ Stop. Eff. 1/4/18</i>		AMOUNT: -	

NAME: *BOURASSA Louis*

NUMBER: *1021103*

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 Marie Clara Bourassa
Morinville, Alberta.

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>Pte</i>

UNIT AND TRANSFERS *DEC 5 1918*

ORIGINAL UNIT: *178th Bn*

DATE ACCOUNT FIRST OPENED: *1st Mar/17*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
	<i>1-7-18</i>	<i>20-4-18</i>	<i>2nd O.P.D. "D"</i>

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
<i>7/6/18</i>	<i>4472</i>	<i>L Pool</i>	<i>2 43</i>	<i>8/1/18</i>			
<i>12/6/18</i>	<i>4558</i>	<i>DO</i>	<i>48 67</i>	<i>10/1/18</i>			

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1 00</i>	<i>10</i>		

P.P.C. 309 90 30/6/18 Supp L.R. Bal \$ 317 26.

ADVISE 30/10-18

PARTICULARS OF RENDERING NON-EFFECTIVE: *Lists Canada 1/4/18 auth: Kirkdale 21st 59 18/6/18 Invalid*

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>Mar 3/18</i>	<i>Bal Ford</i>								<i>303 98</i>	<i>195</i>	
	<i>PP</i>	<i>33</i>		<i>H.R. 980 Hill St L Pool 8-4-18</i>	<i>9 73</i>				<i>327 25</i>	<i>210</i>	
		<i>33</i>			<i>9 73</i>				<i>19 10</i>		
<i>May</i>	<i>PP</i>	<i>34 10</i>		<i>ap.</i>				<i>15</i>	<i>346 35</i>		
		<i>34 10</i>		<i>H.R. 6522 Royal Southern Horse L Pool 8-5-18</i>	<i>9 73</i>				<i>336 62</i>		
		<i>34 10</i>			<i>9 73</i>			<i>15</i>	<i>354 62</i>		
<i>June</i>	<i>P.P.</i>	<i>33</i>		<i>ap.</i>				<i>15</i>	<i>361 10</i>		
	<i>Interest on Def Pay 31-5-18</i>	<i>6 48</i>							<i>368 40</i>		
	<i>S.F. 16-18-22-6-18. 10 days</i>	<i>7 30</i>							<i>319 73</i>		
	<i>20148 Q.R.D. 18-6-18</i>	<i>10 14</i>		<i>H.R. 4558 L Pool 12-6-18</i>	<i>48 67</i>				<i>317 30</i>		
				<i>" H 4472 xpc end 7-6-18</i>	<i>2 43</i>				<i>314 87</i>		
				<i>H.P. 5203 " 28-6-18</i>	<i>2 43</i>				<i>53 53</i>	<i>15</i>	
		<i>46 78</i>							<i>312 44</i>		
<i>July</i>				<i>AR P 638 SCAM 12/18 End.</i>	<i>2 43</i>				<i>310 01</i>		
				<i>AR P 6611 26/18</i>	<i>2 43</i>				<i>48 5</i>		
				<i>AR P 7455 6/18</i>	<i>2 43</i>				<i>307 58</i>		
<i>Aug</i>				<i>AR P 8422 16/18</i>	<i>2 43</i>				<i>305 15</i>		
				<i>AR P 9398 27/18</i>	<i>2 43</i>				<i>302 72</i>		
				<i>AR P 446 17/9/18</i>	<i>2 43</i>				<i>72 9</i>		
<i>Sept</i>				<i>AR P 10561 6/9/18</i>	<i>2 43</i>				<i>297 86</i>		
<i>Oct</i>				<i>DR Sineu 63 24/9</i>	<i>48 6</i>				<i>297 86</i>		

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S. *Single* REGT. No. *1021103* RANK *Pte* NAME (IN FULL) *BOURASSA LOUIS*
 IF IN P.F. WHAT UNIT? *233.* (BLOCK LETTERS SURNAME FIRST)

ORIGINAL UNIT C.E.F. *233.*

PLACE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

DATE OF ATTESTATION _____ TRANSFERRED TO _____ DATE _____ AUTHORITY _____

ASSIGNED PAY \$ _____ DATE EFFECTIVE _____

PAYABLE TO _____ RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS _____

ADDRESS _____ ADDRESS _____

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE _____ EFFECTIVE _____

DISCHARGED _____ PLACE _____ DATE _____ REASON _____ AUTHORITY _____ IF ENTITLED TO POST DISCHARGE PAY _____

Morenville
Alta

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS			ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS			
	NO. OF DAYS	RATE	AMOUNT		\$	C.	\$	C.	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.	\$	C.	\$	C.	\$	C.	\$		C.		
			\$	C.																						\$	C.
<i>Certified opening entries on this account have been audited by <u>DML</u> 14/3/19</i>																											
																										<i>War Service Gratuity</i>	
																										<i>W.S.G. S.A. Depd.</i>	
																										<i>S.A. Charges</i>	
																										<i>Balance Soldier Dependant.</i>	
<i>91 Days</i>					<i>100</i>	<i>10</i>								<i>33</i>	<i>00</i>					<i>33</i>	<i>00</i>				<i>67</i>	<i>10</i>	<i>Cheque 17.50.03 24/12/18</i>
														<i>33</i>	<i>00</i>					<i>33</i>	<i>00</i>				<i>34</i>	<i>10</i>	<i>B 5178 24/1/19</i>
														<i>34</i>	<i>10</i>					<i>34</i>	<i>10</i>				<i>100</i>	<i>10</i>	<i>C 5745 25-2-19</i>
					<i>249</i>	<i>90</i>								<i>120</i>	<i>00</i>					<i>120</i>	<i>00</i>		<i>129</i>	<i>90</i>	<i>B 5317-11-3-19</i>		
														<i>179</i>	<i>90</i>					<i>179</i>	<i>90</i>				<i>1349</i>	<i>40</i>	<i>11-79</i>
					<i>350</i>	<i>00</i>								<i>350</i>	<i>00</i>					<i>350</i>	<i>00</i>						

Balance Due on This Account transferred to cash

Chalderalt
Paymaster War Service Gratuity

(On leaving Corps or Station where invalidated.)

Transfer	Date	Name of	Conveyance
	Station		Vessel
or Embarkation	Date	Officer in medical charge	
	Port		

Brief remarks on case during transit, and state on transfer for final disposal.

Re-transferred { Date _____ Hospital or Station _____ } Officer in medical charge _____

(At Station or Hospital where finally disposed of.)

Station and Hospital } _____
Arrived from _____ Date _____

If admitted	If under treatment		Disease	How finally disposed of	Date of Discharge, &c.
	Date	From				To

Detailed statement as to condition on discharge and whether discharged as an invalid, to corps, to station, or to depôt. In cases of discharge from the service it should be stated whether the answers to questions 22, 23 and 24 are concurred in.

Date of final Medical Board, or decision } _____
Administrative Medical Officer. _____

Medical Report on an Invalid.

Station Royal Southern Hospital Liverpool

Date May 18 1918

- 1. Unit 22nd Bat C.F
- 2. Regimental No. 1021103
- 3. Rank Private
- 4. Name Louis Bourrassa
- 5. Age last birthday 22
- 6. Enlisted { on 6th June 1916
at Edmonton
- 7. Former Trade { Farmer
or Occupation {

8. Disability.

Nephritis (subacute epithelial)

Statement of Case.

Note.—The answers to the following questions are to be filled in by the Officer in medical charge of the case. In answering them he will carefully discriminate between the man's unsupported statements and evidence recorded in his military and medical documents. He will also carefully distinguish cases entirely due to venereal disease.

- 9. Date of origin of disability. 1915
- 10. Place of origin of disability. Edmonton Canada
- 11. Give concisely the essential facts of the history of the disability, noting entries on the Medical History Sheet bearing on the case. Patient states that he thinks he must have had kidney trouble before he enlisted; for he was often troubled with pains in the back." Also pains in drance. admitted to CCS 28 January 1918
" to Royal Southern Hospital L'pool 20 Feb. 1918
On admission has average daily albumen 5 grams which in spite of rigorous treatment extending over two or half months produced no diminution in this amount. Now (partweek) average has been 7 grams. No history of oedema of legs. Heart normal save occasional irregularity of rhythm.

- 12. (a) Give your opinion as to the causation of the disability.
- (b) If you consider it to have been caused by active service, climate, or ordinary military service, explain the specific conditions to which you attribute it (See notes on page 3).

The condition (if present before enlistment) has been largely aggravated by active service & exposure.

MEDICAL REPORT ON AN INVALID.

Army Form B. 179.

Station _____
Corps _____
Regimental No. _____
Rank _____
Name _____
Disability _____
Date _____

Hospital or Station transferred to for final disposal } _____
Date of final disposal } _____
How finally disposed of } _____

13. What is his present condition?

Weight should be given in all cases when it is likely to afford evidence of the progress of the disability.

daily albumen 7 grams

Sallow appearance

Early fatigued. No oedema.

The condition is now one of subacute epithelial Nephritis

14. If the disability is an injury, was it caused

NOT an injury

- (a) In action?
- (b) On field service?
- (c) On duty?
- (d) Off duty?

15. Was a Court of Inquiry held on the injury?

- If so—(a) When?
- (b) Where?
- (c) Opinion?

16. Was an operation performed? If so, what?

17. If not, was an operation advised and declined?

18. In case of loss or decay of teeth. Is the loss of teeth the result of wounds, injury or disease, directly* attributable to active service?

very fair teeth.

19. Do you recommend

- (a) Discharge as permanently unfit, or
- (b) Change to England?

discharge as permanently unfit

Stuart S. McAusland M.D.

Officer in medical charge of case.

I have satisfied myself of the general accuracy of this report, and concur therewith, except†

Station _____ Officer in charge of Hospital.

Date _____

* Loss of teeth on, or immediately after, active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

† Delete this word if no exceptions are to be made.

Opinion of the Medical Board.

NOTES.—(i.) Clear and decisive answers to the following questions are to be carefully filled in by the Board, as, in the event of the man being invalided, it is essential that the Commissioners of Chelsea Hospital should be in possession of the most reliable information to enable them to decide upon the man's claim to pension.

(ii.) Expressions such as "may," "might," "probably," &c., should be avoided.

(iii.) The rates of pension vary directly according to whether the disability is attributed to (a) active service, (b) climate, or (c) ordinary military service. It is therefore essential when assigning the cause of the disability to differentiate between them (see Articles 1162 and 1165. Pay Warrant, 1913).

(iv.) In answering question 20 the Board should be careful to discriminate between disease resulting from military conditions and disease to which the soldier would have been equally liable in civil life.

(v.) A disability is to be regarded as due to climate when it is caused by military service abroad in climates where there is a special liability to contract the disease.

20. (a) State whether the disability is the result of (i.) active service, (ii.) climate, or (iii.) ordinary military service.

(b) If due to one of these causes, to what specific conditions do the Board attribute it?

21. Has the disability been aggravated by

- (a) Intemperance?
- (b) Misconduct?
- (c) Any of the conditions mentioned in Question 20, and if so which?

22. Is the disability permanent?

23. If not permanent, what is its probable minimum duration?
To be stated in months.

24. To what extent is his capacity for earning a full livelihood in the general labour market lessened at present?

In defining the extent of his inability to earn a livelihood, estimate it at 1/4, 1/2, 3/4, or total incapacity.

24a. Is the man suffering from a disability which would obviously, as far as you can judge, cause him to be rejected by an Approved Society under the National Insurance Act?

25. If an operation was advised and declined, was the refusal unreasonable?

26. Do the Board recommend

- (a) Discharge as permanently unfit, or
- (b) Change to England?

Signatures:—

President.

Station _____
Date _____
} Members.

Approved.

Station _____
Date _____
Administrative Medical Officer.

OPINION OF THE MEDICAL BOARD—(Continued).

21. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

Recommend discharge Cat. E.

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

PLACE.....Edmonton.....

DATE.....19-11-18.....

APPROVED BY

J. A. M. C.
Captain C. A. M. C.
Supervisor of Medical Board

Assistant Director of Medical Services.

APPROVED BY

Director-General of Medical Services.

DATE.....For NOV 20 1918.....

DATE.....

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned..... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

PLACE.....

DATE.....

President.

Members.

Urinalysis: Appearance—Amber, turbid. S.G. 1.014, acid albumen. Marked granular casts and waxy casts. Sgd. D.G. Revell, Capt. C.A.M.C.

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the soldier to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 8, 9 and 10 be communicated to the soldier, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison & Sons.

STATION.....Edmonton..... DATE.....19-11-18.....

1. 1 (a) Unit.....233rd. to 22nd. (b) Regimental No.....1021103 (c) Rank.....Pte.

(d) Surname.....Bourassa (e) Christian name.....Louis.

2. Age last birthday.....22 Date of birth.....17th Oct. 1895

3. Enlisted at.....Edmonton on.....6th June 1916

4. Personal description:—

(a) Height.....5' 5" (b) Weight.....133 (c) Complexion.....Sallow

(d) Colour of hair.....Fair (e) Colour of eyes.....Blue (f) Identification marks.....Nil

5. Address after discharge (for the use of the Board of Pension Commissioners).....

Morinville, Alta.

6. Former trade or occupation...../ Farmer.

7. (a) Service

Years Days

	PERIODS	
	From	To
233rd.	6-6-16	1-3-17
22nd.	1-3-17	to Date.

(b) Has he been overseas?.....Yes 8. Original disease or disability.....Nephritis

(a) Date of origin.....Jan 1918 (b) Place of origin.....Lillers, France.

(c) Cause*.....Indeterminate.

(d) Present disease or disability.....Nephritis-chronic.

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (a) weakness, (b) loss (complete or partial) of any organ or member of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

Sallow looking man. Whose weight is eight pounds over weight on

enlistment. Is at present on a strictly milk diet with a little

chicken. Complains of great morning weakness which improves during

9. Present condition.—(Continued.)

the day so that he feels fairly well by bed time. Since his illness began he has never walked more than one mile and this takes him approximately one hour as he is obliged to rest very frequently. The slightest exertion caused dyspnoea and even at rest respiration is 25. Suffers from daily frontal headaches and frequent pain in lumbar region, more marked in left side. Pulse at rest 100; after climbing one flight of stairs 120; and after 3 minutes rest 110. Volume good, no irregularity. There is slight oedema now present of feet and face. (Page 4)

(b) Are the following systems normal? If not, briefly state abnormality.

Nervous...yes... Digestive...Yes... Respiratory...As described... Cardiac...As described...
 Genito-Urinary...As described... Skin, Middle Ear, Eye or any other part...See specialists Report on eyesight.
 Heart not enlarged, no adventitious sounds. Blood pressure 120-160
 Lungs a very few scattered moist rales are heard at both bases.
 Specialist's report on eyesight:-
 Vision-Right Eye 20/30; Left eye 20/200.
 Has refractive error of hyperopia with astigmatism each eye.
 With lenses-Vision-Right eye 20/20; Left eye 20/20
 Condition not due to nor aggravated by service

10. History: (a) of Condition referred to in "a" section 9.

Brother died of "kidney disease" at 21 years of age. Present illness began in Jan 1918 with headaches and swelling of face, hands and feet. Since then he has always had albumin, and casts

(b) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

in his urine.

11. If the disabling condition had its origin before enlistment, has it been aggravated on service?

N.A.

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment?

No

The regimental documents will be referred to.
 (If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one?

Permanent.

14. Treatment (Case reports, general or special, should be secured and attached where possible).

No 7 Str. Hosp. Feb. 1918 Nephritis. Royal Southern Hosp. Feb. 1918 Nephritis, and since that in various Hospitals in England for same condition.

OPINION OF THE MEDICAL BOARD

14. (Continued).

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? (If the answer is "yes" state nature of treatment required and probable duration.)

No

16. Can the former trade or occupation be resumed? (If not, briefly state why.)

No

17. Recommendations

Discharge class "E".

W. J. J. Major, C.M.B.
 Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier and either "satisfied" or "not satisfied" struck out.)

I, the undersigned, Louis Bourassa have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.) I complain in addition of

L. Bourassa
 Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

Concur

19. Is the soldier fit for

- (a) General service, (Category A) (Yes or No).
- (b) Service abroad, not general service, (" B) (Yes or No).
- (c) Home service, (Canada only), (" C) (Yes or No).
- (d) Temporarily unfit, (" D) (Yes or No).
- (e) Unfit for service in Categories A, B and C, (" E) (Yes or No). Yes

20. It is certified that the soldier

(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration).

- (b) Does not require treatment.
- (c) Should pass under his own control.
- (d) Should not pass under his own control. (Strike out condition not applicable).

JSent

13 D B226

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron } Battery } Company } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	
Med. Hist. Sheet, Militia Form B. 313	In the case of recruits who are rejected on final approval, the discharge documents will consist of
Medical Report for Invalid* " B. 227.	(a) Proceedings on Discharge.
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	(b) Attestation.
	(c) Medical History Sheet (in the event of such having been prepared.)

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

This space to be for numbers

Proceedings on Discharge.

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

No.	102
Rank	Private
Surname	BOURASSA
Christian Name	Louis
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	The 233rd Overseas Battalion,
Date of Discharge	December 16th, 1918.
Place of Discharge	Calgary, Alberta,
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age	23 years
Height	5 feet 5 inches
Complexion	Clear.
Eyes	Blue.
Hair	Fair.
Trade	Farmer.
Intended place of residence	Meriville, Alberta.
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of Being Medically Unfit for Further Service, although fit for employment in civil life. Authority Routine Order 237 dated Ottawa 22-2-18	
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.	
3. Conduct and character while in the service have been, according to the records, etc. VERY GOOD	
N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	
<i>H. b. comp. 21-10-19</i>	

M. F. B. 218.
100M.—1-17.
H. Q. 1772-59-113.

DISTRICT DEPT
HEADQUARTERS
DEC 24 1918
M. D. 1918

(OVER)

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the _____ day of _____ 191_____

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

14. THE ENTIRE DISABILITY.—When regard is had to his regular occupation, to what extent is his capacity lessened by the disability?

15. THE PROBABLE DISABILITY.—When regard is had to his regular occupation, to what extent is his capacity lessened by the disability?

16. THE PROBABLE DISABILITY.—When regard is had to his regular occupation, to what extent is his capacity lessened by the disability?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

18. Remarks.

19. Recommendation:—(a) For the date? (b) For the date? (c) Invalid in Canada? (d) Discharge from service as permanently unfit?

Dated at _____ this _____ day of _____ 191_____

Signatures of the Board. President. Assistant Director of Medical Services.

Reserved for M.H.C.

Regt. No. 10,1103 Rank Pte Surname BOURASSA Christian Name LOUIS

Unit or Corps—(a) Overseas from United Kingdom 22 Bn Cdns (b) In United Kingdom 10 Res

Born at—Town QUEBEC County or Province QUEBEC Country CANADA

Date of Birth—Day 17 Month OCTOBER Year 1897 Age 20 yrs 7 months

Joined at Edmonton, Canada Date 6/ June 1916

Former Trade or Occupation Farmer

Permanent marks or peculiarities that will serve for future identification:

Nil

Height—feet 5 inches 5 Colour of eyes Blue

Signature of Soldier (for identification purposes) "L. BOURASSA"

Medical Report.

The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case.

1. DISABILITY (State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted). (Follow the official nomenclature as far as possible.)

Table with 3 columns: Disabilities Group (a), Disabilities Group (b), Disabilities Group (c). Rows: PAIN IN LUMBAR REGION, WEAKNESS EASIBY FATIGUED, Not applicable.

2. CAUSE OF DISABILITY. (Follow the official nomenclature in stating the disease or injury.)

Table with 3 columns: Disease or injury to which the disability is due, Place of origin, Date of origin. Rows: NEPHRITIS CHRONIC (FRANCE, JANR'Y 1918), SAME AS IN GROUP (1) (a) ABOVE (FRANCE, JANR'Y 1918), Not applicable (Not applicable).

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service? (i) As to Group (a) above? No If yes, has Active Service aggravated it? Not app (ii) As to Group (b) above? No If yes, has Active Service aggravated it? Not app (iii) As to Group (c) above? Not app If yes, has Active Service aggravated it? Not app

4. Is the disability due to disease contracted or injuries received while on Active Service— (i) As to Group (a) above? Yes (ii) As to Group (b) above? Yes (iii) As to Group (c) above? Not app

5. If a cause of disability was an injury received on Active Service, was it received—

(i.) While on duty? **Yes** (ii.) While off duty? **No**

(iii.) Was a Court of Inquiry held? **No** (iv.) Where? **Not app** (v.) When? **Not app**

(vi.) Opinion of the Court? **Not app**

6. HISTORY OF THE CASE. (State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records.)

FAMILY HISTORY Brother died kidney disease at 21 years. Had no symptoms of kidney disease prior to present illness. In January 1918 present illness began with headaches, and swelling of face and legs. Evacuated thro 58th CCS. Diagnosed Nephritis. Albumin xx. To No 7 Stationary Feby. 11/18. Albumin x. Hyaline and granular casts numerous. To Royal Southern Hospital, Eng. Feby. 20/18. Patient has decreased in weight. On enlistment 125 lbs. Present 110 lbs. The daily output of albumin has been little influenced by treatment.

7. PRESENT CONDITION. (Give previous and present weight if likely to indicate progress of disability.)

Feels weak, easily fatigued, Constant pain in lumbar region. Color pasty. Genite - urinary Sys. Amount of urine passed daily is small. Does not get up during night to void. Urine analysis. Albumin x. Few R.B. cells. Numerous large hyaline granular casts. Voids about 5 grams of albumen daily. Cardiac Vascular Sys. Heart not enlarged. Arteries not hardened. Blood pressure 105.120. Respiratory Sys. Few moist rales. audible both bases. Nervous Sys. Negative findings.

8. OPERATION. (i.) Was one performed? **No**

(ii.) If so, state what. **Not app**

(iii.) Was one advised and declined? **No**

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (i.) Is there loss or decay of teeth attributable to Active Service? **No**

CAUSE OF DISABILITY. (ii.) Disease or injury to which the disability is due. **Not app**

10. DO YOU RECOMMEND:—

(a) Fit for duty **No**

(b) Fit for base duty? **No**

(c) Invalid to Canada? **Yes.**

(d) Discharge from the Service as permanently unfit? **Not applicable**

Date of Report: 6-6-18 Signed: "T.K. McALPINE" Capt. CAMC

Station: No 5 Canadian General Hospital

I have satisfied myself of the general accuracy of the above Report, and concur therein except—

"G.D. FARMER" Col. CAMC

Dated at: Liverpool Station, on 10th June 1918

Proceedings of a Medical Board on the Soldier mentioned in Part I.

Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.

11. Is the disability fully indicated in Part I. (1)? **Yes**

If not, indicate it.

12. Is the cause of the disability fully indicated in Part I. (2)? **Yes**

If not, indicate it.

13. Was the disability caused or aggravated by—

(a) Negligence of the Soldier **No**

(b) Misconduct of the Soldier **No**

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (Estimate at none, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, or 100%.)

15. THE PENSIONABLE DISABILITY.—see Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate. What part of the entire disability estimated next above in (14) is due to causes arising during Active Service? (Estimate at none, 1/2, 2/3, 3/4, or all.)

16. Permanency of the Pensionable Disability estimated next above in (15).

(i.) Is it permanent? **No**

(ii.) If not permanent, what is its probable minimum duration (in months)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable?

18. Remarks.

19. Recommendation:—(a) Fit for duty? **No**

(b) Fit for base duty? **No**

(c) Invalid to Canada? **Yes.**

(d) Discharge from service as permanently unfit? **No**

Classification for the Military Hospitals Commission. **G**

Date of Board: 11 June 1918

Station: No 5 Canadian General Hospital

Signatures of the Board: "P.L. VAUX" Col. CAMC President, "H.J. PAUL" Capt. CAMC, "A.F. RYKERT" Capt. CAMC

Approved: [Signature] COLONEL, A.D.M.S. CANADIANS BUXTON.

Station: ASSISTANT DIRECTOR OF MEDICAL SERVICES, 16 JUN 1918, CANADIANS BUXTON AREA.