REGIMENTAL DOCUMENTS

NAME BOUVET VICTORIN ADRIEN Pte REGT. NO. 288560 UNIT 22nd Battn H. Q. FILE NO.

S

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
/	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
/	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)				32239	
/	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
3	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
/	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demobilization
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	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
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/	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
/	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	ASW 3997					
1	MSW 192					
1	Proc Med Board					
1	CADC 5009					
	M 7W 67					
1	R 172					

H

W. 2589

221st OVERSEAS BATTALION

ORIGINAL

ATTESTATION PAPER.

No. 288060

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Bonnet
1a. What are your Christian names? Victoria Adrien
1b. What is your present address? Woodridge Manitoba Canada
2. In what Town, Township or Parish, and in what Country were you born? Alton, France
3. What is the name of your next-of kin? Mrs Thomas Atkinson
4. What is the address of your next-of-kin? 471 Logan Avenue Winnipeg Man Canada
4a. What is the relationship of your next-of-kin? Friend
5. What is the date of your birth? Sept 6 1891
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? If so, state particulars of former Service. 4 yrs 38th Infantry France
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, Victoria Adrien Bonnet, 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.

V. A. Bonnet (Signature of Recruit)

Date May 4th 1916. Chas Rhoos (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Victoria Adrien Bonnet, 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.

V. A. Bonnet (Signature of Recruit)

Date May 4th 1916. Chas Rhoos (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 Winnipeg this 4th day of May 1916.

E. H. N. Tool (~~Signature of Justice~~)

A Commissioner in B. R., &c.

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-861.

Description of Victoria A. Bonnet on Enlistment.

Apparent Age 44 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement: Girth when fully expanded 37 ins.
Range of expansion 2 ins.

Complexion Medium Dark

Eyes Blue

Hair Brown

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

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).

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date May 4th 1916. A Arthur

Place Winnipeg Capt.

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.

Victoria Adrian Bonnet 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)
LIEUT.-COL.
Comm'd'g 221st Overseas Battalion.

Date May 4th 1916

Two Blue.

No. 10 DISTRICT DEPOT DISCHARGE SECTION

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 288560. (Rank) Pte.

Name (in full) VICTORIN, ADRIAN, BOUYET. enlisted in

the 221st Battn.

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 4th

day of May 1916.

HE served in France, C.R.T.; One year 9 mths.

and is now discharged from the service by reason of Demobilization R.O. 1420 (c)

☆ C.O. 66 - 797 D.O.78 ☆

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

Age 54 years.

Height 5'6"

Complexion Dark

Eyes Blue

Hair Brown.

(V Bouyet)
Signature of Soldier

Marks or Scars Nil.

A. Forbes Major
Officer Commanding No. 10 District Depot
Issuing Officer

Rank

Appointment

Date of Discharge 21-3-19

Signed at Winnipeg this 21st day of March 1919

in Military District No. 10

File Reference No. HH B 2092

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.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

WAR SERVICE BADGE

CLASS " A " NO. 75165 ISSUED

Upon demobilization the particulars called for on the back of this certificate will not be completed.

.....

Name of Officer

.....

Rank

.....

Appointment

Number 288560 Rank Spr

Surname BOUVET

Christian Name Victor Adrien

Units C.R.T. Theatre of War France

Date of Service 16-7-17.

Remarks

Latest Address Woodridge, P.O. Man.

Roll No. B

200m.-6-21.M. Page 19765

Bibl. rel. 11/27

DESP. MAR 23 1927

REGN. NO. 30327

From Halifax per S.S. "Ausonia" 18-4-17.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Farmer RELIGION Roman Catholic.

DESCRIPTION.

APPARENT AGE 44 YEARS 7 MONTHS

HEIGHT 5' FEET 6 INCHES

CHEST MEASUREMENT 37 INCHES EXPANSION 2 INCHES

COMPLEXION Medium Dark EYES Blue HAIR Brown.

DISTINGUISHING MARKS nil.

MEDICAL EXAMINATION. PLACE Winnipeg Man. DATE May 4th, 1916.

Present address. Woodridge, Man.

CARD NO.

SURNAME. Bouvet

CHRISTIAN NAMES Victoria Adrian

REGL. No. 288560. RANK Pte

UNIT 221st

FOLL.

S.S. Dis. 21-3-19
Letter
D.O.78 of 19/3/19
to D.
Bn.

FORMER CORPS 4 yrs. 38th Infantry France.

NEXT OF KIN.

NAMES IN FULL Atkinson, Thomas

RELATIONSHIP TO SOLDIER Friend

ADDRESS 471 Logan Ave., Winnipeg, Man.

CHANGE OF ADDRESS

COUNTRY OF BIRTH France. Acton. DATE Sept. 6th, 1871.

PLACE OF ATTESTATION Winnipeg, Man. DATE May 4th, 1916

R/C 23-2-19 271/41 Spr

No. 288560 RANK Pte. NAME Bouvet V. A.

T. O. S. 4-5-16
D.O.S. 4-5-16

UNIT 221st Battalion C.E.F.

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
May 4	May 31	✓		
June		✓		
July		✓		
Aug		✓		
Sept.		✓		
Oct.		✓		
Nov.		✓		
Dec		✓		
1917				
Jan.		✓		
Feb.		✓		
Mar.		✓		

*Name Bouvet. Victoria, a Rank Pte. Regtl. No. 288560.

Fyle Depot

Original unit 221st. Present Unit M/ or S. Age 47 Religion R.C. Ref. H.Q.

Port, ship, and date of arrival Halifax. H.M.T."CANADA" 24-2-19.

Next of kin Thomas Atkinson, (FRIEND) 471 Logan Ave., Wpg., Man.

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Farmer. Date and place of enlistment 4-5-16. Winnipeg, Man.

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
15-2-19.	T.O.S. #10 D.D. & Posted to Cas. Coy. D.O.62-2.	
	14 days landing leave with subs.	

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

(over)

Date.	Remarks.	Pt. 2 Order No.

M.F.W. 192
150M—5-18.
1772-39-1243.

C.A.D.C. 5009 A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

M.D 10.

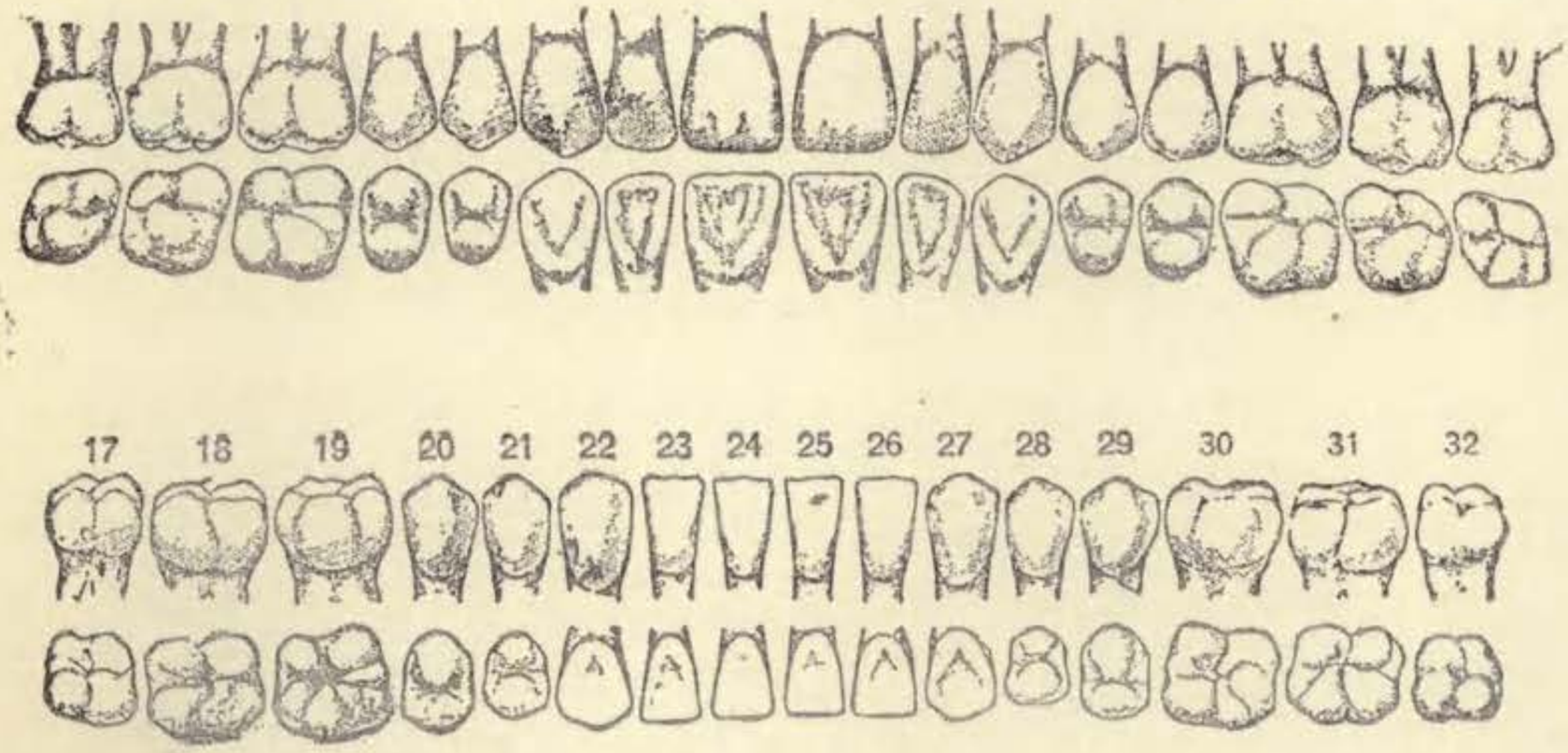
DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

NAME OF SOLDIER (Block Letters) BOUVET, V.

REGIMENT C.R.T. RANK Sgt No. 288560.

Date of Examination in England 31.1.19. | Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS 16.
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (a) In Canada
- (b) In England NO
- (c) In France

KINMEL PARK, NORTH WALES.

Signature of Dental Officer A R Trivel Capt

S. S. Canada.

Woodridge Man.

2092

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 188560 Rank Spr. Surname BOUVET (Give name in full) VICTOR.

Unit or Corps B 221. C.R.T. 1000 Birthplace Acton: France

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. **GENERAL DESCRIPTION:**

Physique good Weight 150 lbs. Height 5 ft. 6 in. Color of Eyes Blue

Nutrition good

Pulse 72

Condition of arteries normal

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)

None

Opinion as to general health and physical condition good good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System no

Disturbance of mentality no Muscular System no Digestive System no

Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

DISTRICT DEPOT NO. 10

RECEIVED HEADQUARTERS MAR 14 1919

10 M. D. MAR 13 1918 HEADQUARTERS WINNIPEG

Ass't Director Medical Services No. MAR 13 1919 Milty. Dist. No. 10, Winnipeg

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Canada)

Date ..... Signed .....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signautre .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at Winnipeg (Canada)

Date March 12th 1919 Signed J. Picard Capt M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature V. Bouvier

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

APPROVED

N. McLeod Col.

MAR 14 1919

FOR A. D. M. S., M. D. No. 10
WINNIPEG, MAN.

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

Form D.M.S. 1394.
7004.—100M.—5/2/17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at May 4th 1917 1917.

No. 288560 Rank Pte Name Bouset, V.A.

Local Unit 11th Reserve Overseas Unit ---------- Age 52

Examination held at St. Martins Plain

DISABILITY.
Overseas—Local
(scratch one out).

Myalgia

PRESENT CONDITION.

Is 52 years of age. Is a stringly built man. Has been a farmer all his life. He complains of myalgia pains in muscles of right thigh He is fit for labour.

BOARD RECOMMENDS:—

B.ii.

1. Fit for Duty
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:—

F.G.

(Sgd) H. Coppinger Capt. ..... President.

Members (Sgd) D.E. Howes Capt.

APPROVED 5 MAY 1917

Dated ..... 1917.

CAPT. For A.D.M.S.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Bouvet *Christian Name* Victoria A

Examined { on 4 day of May 1916 / at Winnipeg

Approved by A Arthur

Rank Capt. M.O.

Birthplace { City or Town Acton / County France

Apparent age 24 yrs

Trade or occupation Farmer

Height 5' Feet 6 Inches.

Weight 145 Lbs.

Chest measurement { Minimum 36 inches. / Maximum expansion 37 inches.

Physical development Good

Small-Pox Marks none

Vaccination Marks { Arm Right. 2 Left. X / Number 2

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease Nil

(b) Slight defects but not sufficient to cause rejection Teeth to be attended to

Date.	Fit or Unfit.	Examined for Re-engagement.	
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date.	Result.	Vaccinations.	
Nov 27.		A L Shanks	M.O.
			M.O.
			M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.	
June 12	YAB	A Arthur	M.O.
	4/5/17	Capt MacKay	M.O.

Enlisted on 4th *day of* May 1916 *at* Winnipeg

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	221st Overseas Battalion	288560.		4th May 1916.
Transferred to	4th Res C.R.T			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
St Martins Plerni Ability	4 May 1917 N-1-19	Myalgia Arteriosclerosis & Arthralgia	Bn Medical Capt. Bn. Medical Capt.

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

M. F. B. 313.
400M.—1-16.
H. Q. 1772-39-439.

Surname Bowell Christian Name Victor Oshan

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

(9) Is your Father alive? No

If so, state name and address —

(10) Is your Mother alive? No

If so, state name and address

(11) If your Mother is a widow

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.

(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.

Michael Janese
Richot St
St Boniface Man

(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.

(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 February

Officer Commanding.

LIEUT.-COL.
Comm'd'g 221st Overseas Battalion.

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.

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(1) Name of Overseas Unit which Soldier joins 22nd C. E. F.

(2) Regimental Number 288560

(3) Full Name of Soldier Victorin Adrien Bouvet

(4) Place of Birth Savoie France

(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

) Have you any children? —

If so, give number of boys and girls —

Also their names and ages —

M. F. W. 67.
300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

Army Form B. 103. Sheet 2. Regimental Number 288560

Casualty Form—Active Service.

Regiment or Corps 22nd Bn

Rank Gr Surname Bouvet Christian Name Thelesia Adrien

Religion / Age on Enlistment ..... years ..... months

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

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

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (b) .....

or Corps Trade and Rate .....

Occupation ..... Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
24.1.19	C.R.T.D.	S.O.S. to Kinmel Park M.D. Wing 10		24.1.19	C.R.T.D. Pierfolk C.R.T. Depot
26.1.19		S.O.S. C.C.C. Kinmel Park for return to Canada. Part 11 Orders No. 25.			
Embarked 15 FEB 1919		C.C.C. Kinmel Park on embarking for Canada, Part 11 Order No. 41		11.2.19	
Disembarked 25 FEB 1919		H. M. Clare Lt Col Commanding 10 Wing, Kinmel Park Camp.			

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

(6228) W. 13863/M1477 2,400.000 1/17 McA & W Ltd Forms B./103/4 (E. 856)

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		T.O.S. No 10 DISTRICT DEPOT			
15/2/19.		D.O. 62			
		R. Morgan Major			
		Officer Commanding No. 10 District Depot			
		Discharged 21-3-19.			
		C. O. 66/797 D. O. 78			
		Jack Major			
		Officer Commanding No. 10 District Depot			

BOUVET

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 221st C. Bn. "C" Co.

Regimental No. 288560 Rank Pte Name ~~Bouvet~~ Victorine Adrien

C. E. F.

Enlisted (a) 4. 6. 16 Terms of Service (a) War Service reckons from (a) 4.6.16

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) 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				
		Embarked	Halifax	16-4-17	H.M.T.
		Disembarked	Liverpool	29-4-17	Scandinavian.
~~2-5-17~~	~~O.C. 221st Battn.~~	~~Apptmt. of A/ on arrival in England~~	~~Hold Litgate~~	~~30-4-17~~	~~Pt II Bn.O. 89~~
2-5-17	" "	Trans to 11th C.R.Bn	Shorncliffe	30-4-17	Pt II Bn O. 89
					Capt & Adjutant 221st Battalion C.E.F.
1-5-17	O.C. 11th Can Res Battn.	Taken on strength 11th	Shorncliffe	30-4-17	Pt II Bn:O. 100
11-5-17	"	Posted to Man Reg Depot Attached 11th C. Rg Bn	"	4-5-17	pt II Bn.O. 109
15-5-17	"	Returned to Man. Reg Depot	"	15-5-17	pt II Bn O. 112
					for Captain & Adjutant, 11th (Res.) Battalion.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
25.5.17	M. R. D.	Transferred to Can Troops Railway Depot D.O. 85-2-6-17			Lieut. & Adjt. Manitoba Regiment(s) Forces
1/6/17	CRTD	Taken on Strength	Penflet	1/6/17	TT #D0141
17/7/17	CRT Depot	S off Strength to 4th Bn CRT Overseas	Penflet	16/7/17	TT #D0187 Sidney Strickland Capt ADJUTANT. DEPOT CAN. RLY. TROOPS.
28-4-14	A.A.G.	Taken on Strength 4th Bn CRT	Field	28.4.14	A.B.O. 54 of 28.4.14
23.4.14	C.G.B.D.	Left C.G.B.D. for Unit		23.4.14	T.R.
28.4.14	O.C. Unit	Joined Unit	Field	23.4.14	B213. A.B.S. 33 8/10/14
27.3.18	do.	Granted 14 days leave to Paris		13.3.18	D.O. 14
30.3.18	do.	Returned from leave		30.3.18	B213
23/12/18	C.G.B.D.	Trans to Eng. & posted to C.R.T. Depot Witley		23/12/18	T.R. 13
4/1/18	CRTD	T. O. S.	Witley	25/12/18	Pt 11 -03

C. A. Hewett
Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B.E.F.

CERTIFIED CORRECT
CAN. RECORDS LONDON
2 OCT 1917

Form R 122.
2353—100M—9-12-16.

LTR

Rank | Name BOUVET, Victoria Adrien | Reg'l No. 288560

Unit 221st Bn. to Manitoba Regt. | If in perm. Corps, What Unit? | Married or Single Single.

Place and Date of Enlistment Winnipeg, May 4th, 1916. | Place of Birth Aston, France.

Name and Address, Next-of-Kin Thomas Atkinson.
471 Logan Ave, W. Winnipeg. Manitoba, Canada. — Relationship Friend.

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

N.L. R.S. No. 8711.
File R.L.
Category Can O.R.

H. W. & V., Ld.—9546-16.

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
		ARRIVED IN ENGLAND 29-4-17 S.S. AUSONIA.			
MAY, 1917		JRES TOS		30 4 17	Pt O.100
11-5-17	"	S.O.S. to Mar. R. Dep. + attd	Sheliffe	4-5-17	A.F.B. 103 CLOSED 24 JUL 1917 (M.R.D. 69 Pay 17-5-17)
15-5-17	"	Case to be attd on rely to M.R.D.	"	15-5-17	(M.R. Def. 74 22-5-17)
2-6-17	M.R.D	S.O.S. to Lieut. Aby Instruction	"	1-6-17	85 (R-II Do. 141 of 1-6-17 C.B.T.A. 4th C.R.S.)
17-7-17	C.R.T.D	S.O.S. to 4th C.R.T. Sqn.	Spr	Purfleet	16-7-17 — 187 (R-III Do. 57 of 25-7-17 M.R.D. Pt III 130 #62 of 30/12/18)
4-1-19	"	T.O.S. from 4th C.R.T. + on command to 1st C.C.D. Witley	Spr	Witley	25-12-18 — 3 (M.R.D. Pt III 130 #62 of 30/12/18)
14-1-19	"	Cases on Com. 1st C.C.D	"	"	13-1-19 — 13
24-1-19	"	S.O.S. to M.D. 10 Rhyl	"	"	24-1-19 — 23, M.D. 10 Pt II 46 of 16/4/19.
16-2-19.	M.D. 10	S.O.S. to Canada	"	Rhyl	15/2/19 — 46.

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.					

10/

Bouvet · Woodridge PO.
Man

FORM OF WILL.

I, Victor Adrien Bouvet (Name in full)

Regimental Number 288560 serving in 221st O.B.

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

I bequeath all my real estate unto

Michael Janex
107 Richard Street
St Boniface - Man

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

absolutely, and my personal estate I bequeath to

Michael Janex
107 Richard Street
St Boniface - Man

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

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

this 22nd day of January A. D. 1917

Victorin Adrien Bouvet Signature of Soldier.

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

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

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness J. Roy Lund

Address of Witness

Occupation of Witness Lieutenant - 221st O.B.

Signature of Second Witness P. S. Turner

Address of Witness

Occupation of Witness A. C. S. M. 221st Bn

M. F. W. 82
300M-5-16.
1772-39-983.

Homestead

NE ¼ – 7 – 4 – 12 – W of 1st M.

168 acres

Horza.
Man

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

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

.....
Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

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

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

A.F.B. 179 Canada (Revised 1918). 4182 100m. 16/11/18 D.495

Reserved for M.H.C.

Regt. No. 288560 Rank Spr. Surname BOUVET. Christian Name VICTORIA

Unit or Corps—(a) Overseas from United Kingdom R^R C.R.T. (b) in United Kingdom C.R.T.

Born at—Town AETON County or Province — Country FRANCE

Date of Birth—Day 6 Month Sept. Year 1864 Age 54 yrs. 4 months.

Joined at WINNIPEG MAN. CANADA Date 4-5-1916

Former trade or occupation FARMER

Permanent Marks or any peculiarity that will serve for future identification :—

2 VACCINATION MARKS R^T ARM
1 " " L^T ARM.

Height—feet 5 inches 6 Colour of eyes Blue

Signature of Soldier (*for identification purposes*) Victoria Warren Bouvet

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a) ARTERIOSCLEROSIS
Disabilities Group (b) ARTHRALGIA
Disabilities Group (c)

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(i.) As to Group (a) above.	AGE	prior to Enlist.	
(ii.) As to Group (b) above.	UNKNOWN	" " "	"
(iii.) As to Group (c) above.			

3. Is the disability due to disease contracted or injuries received prior to Active Service?

(i.) As to Group (a) above? YES. If yes, has Active Service aggravated it? YES.
(ii.) As to Group (b) above? YES. If yes, has Active Service aggravated it? YES.
(iii.) As to Group (c) above? NA. If yes, has Active Service aggravated it? NA.

4. Is the disability due to disease contracted or injuries received while on Active Service?

(i.) As to Group (a) above? NO.
(ii.) As to Group (b) above? NO.
(iii.) As to Group (c) above? NA.

PART I. (continued).

5. MEDICAL HISTORY. Enlisted 4th May. 1916. Winnipeg - A.2 16 mos. in France - Returned as B2 man - Boarded 27 Martin plain May 4th 1917 - Myalgia B3.
States that the myalgic pains of his arms & legs come on by spells, but is no worse on the whole than when they first began 14 mos. ago.
Had very slight myalgic pains previous to enlist.

6. PRESENT CONDITION. Complts: 1. Pains in legs & upper arms.
Well developed, well nourished man who appears quite the stated age of 54 yrs. Heart A2 plus - Otherwise normal. Lungs - Some bronchitis - Arteries palp & tortuous at wrist - B.P. 155-100 Urinalysis 1016, albs. no sugar. Knees & arms show no abnormality objective -

7. OPERATION. (i.) Was one performed? No. (ii.) If so, state what. No.
(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.

8. (i.) Is there loss or decay of teeth attributable to Active Service? Yes - 6.
(ii.) If so, describe. Upper lower molars -

9. DO YOU RECOMMEND:—
(a) Fit for duty? (state category) B III
(b) Invalid to Canada? No
(c) Discharge from the Service as permanently unfit? No.

Date of Report Jan. 20 1919
Station Witley Camp
Signed W. F. Malone Capt. Officer in medical charge of case.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except Not in Hospital {Officer i/c Hospital / S.M.O. Brigade} Strike out one of these

Dated at ..... Station, on ..... 191.....
*Delete if inapplicable.

PART II.

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

10. Is the disability fully described in Part I. (1)? If not, describe it. No

11. Is the cause of the disability fully described in Part I. (2)? If not, describe it. No

12. From the medical information now adduced, was the disability caused or aggravated by:— (a) Negligence of the Soldier {Caused? / Aggravated?} No (b) Misconduct of the Soldier {Caused? / Aggravated?} No

13. 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, 5%, 10%, 15%, 20%, etc.*) N.A.

14. THE DISABILITY DUE TO SERVICE.—(*See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.*)
What part of the entire disability estimated next above (13) is due to causes arising during Active Service? (*Estimate at none, 1/10, 2/10, 3/10, etc., or all.*) N.A.

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent? N.A.
(ii.) If not permanent, what is its probable minimum duration (*in months*)?

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

17. Can the former trade or occupation be resumed? No.

18. REMARKS:—
Adv. Cat. A. Adj. (9083) 19/1/19

19. RECOMMENDATION:—
(a) Fit for duty? (state category) B III.
(b) Invalid to Canada?
(c) Discharge from Service as permanently unfit? } No.

Date of Board 20-1-19.
Station Witley Camp.
Signatures of the Board: President. Lieut-Colonel Lane Colonel; A. J. Grant Capt. Colonel

Approved ..... CAPTAIN. For A.D.M.S. CANADIAN TROOPS, WITLEY.
Dated at ..... A.D.M.S. Station

HEADQUARTERS A.D.M.S. 21 JAN. 1919 File..... CANADIAN TROOPS, WITLEY

P. 559
MARRIED OR SINGLE: Single

PLACE OF BIRTH:

NAME AND ADDRESS OF NEXT OF KIN: Mr Michel Jauer
107 Ratchot St. St Boniface, Winnipeg Man

RELATIONSHIP OF NEXT OF KIN: Friend

NAME AND ADDRESS OF NEXT OF KIN:

RELATIONSHIP OF NEXT OF KIN:

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO:

RELATIONSHIP OF DEPENDANT:

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

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

REG'L NO. 285560 RANK Pte NAME Bowet Victoria Adrien

IF IN PERMT. CORPS WHAT UNIT } UNIT 221st Ch Bn to 11th Res

TRANSFERRED TO	DATE	AUTHORITY

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION Winnipeg Man

DATE OF ATTESTATION 4th May. 1916

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

C1

DATE 1917	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No	1 Date	2 No	2 Date	3 No	3 Date	4 No	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
																															28 00				
May	Balance from Canada													28 00	28 00																				
															34 10										2 43					2 43	59 67		15	44 67	
Jay	31	1.10	34 10																					29 20						29 20	63 47		30	33 47	
June	30	1.10	33												33																97 57				
July	31	1.10	34 10												34 10																131 67				
Aug	31	1.10	34 10												34 10																164 67				
Sep	30		33												33																				

MONTH 1917	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLOW. ENG.
	Balance forward	~~164 67~~							164 67		
Oct.	Pay 31 days @ 1.10	34 10									
									198 77		
Nov.	30 days @	33		D.R. 356 2-8-17 2nd Bwt P.R.T.	2 68						
				D.R. 1334 29-6-17 P.R.T.D.	7 30					30	
	Forward	33			9 98				198 77		

16.7.19
9.3.2
26.3.2

CANADIAN
RECEIVED FOR AUDIT
CLERK
DATE 16/7/19

288560 Pte. Bouvet V. A.

Date	Pay: No. of Days	Pay: Rate	Pay: Amount $	Pay: Amount c.	Field Allowance: No. of Days	Field Allowance: Rate	Field Allowance: Amount $	Field Allowance: Amount c.	Working or Special Pay: No. of Days	Working or Special Pay: Rate	Working or Special Pay: Amount $	Working or Special Pay: Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1: No.	1: Date	2: No.	2: Date	3: No.	3: Date	4: No.	4: Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance: Credit	Balance: Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
MONTH 1917	PARTICULARS				CR. 1	CR. 2	PARTICULARS							DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY	SER. RED.	ALLCE. END.	MONTH	PARTICULARS				CR. 1	CR. 2	PARTICULARS			DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY	SER. RED.	ALLCE. END.
Bal Forward					33 00									9 98				198 77		30															
Rec.	31 days	B.B			34 10				a.l. 436	31-5-17	4 days			9 73				246 16																	
					67 10									19 71																					
1918 Jan		B.B			34 10													280 26		60															
					34 10																														
Feb ~~C.O.~~		B.B			30 80				Dr	798	5/12/17	4 days		12 49				298 57		70															
					30 80									12 49																					
Mch					34 10					600	2/11/17	4 "		3 57																					
										408	15/8/17	"		2 67																					
										486	13/7/17	C.R.T.D.		9 73																					
									"	965	1/7/18	4 days		7 14																					
									"	853	17/12/17	"		3 57																					
									"	381	14/6/17	C.R.T.D.		9 73																					
									"	525	15/9/17	4 days		2 68																					
									"	491	2/9/17	"		2 68																					
									"	901	19/1/18	"		7 14																					
									"	747	18/11/17	"		3 57																					
									"	636	15/10/17	"		3 57																					
									"	579	1/10/17	"		2 68																					
									"	1224	1/3/18	"		3 57																					
									"	23059	14/3/18	acts Bonus		26 77																					
									"	24710	19/3/18	" "		26 77																					
					34 10				AR	23930	16/3/18	"		115 84																					
									"	26990	25/3/18	"		26 37 / 8 97																					
									Dr	1056	18/3/18	4 C.R.T.		15 53 / 168 45																					

172 22 90

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper or Particulars of Recruit	Militia Form W. 23 " W. 133
Squadron / Battery / Company } Conduct Sheet, or Field Conduct Sheet	" B. 263a " W. 178	Proceedings on Discharge	" B. 218
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia form B. 313		
Casualty Form	" W. 54		
Medical Report for Invalid§	" B. 227		
Dental History Sheet	" B. 465		
Last Pay Certificate	" W. 44		
Duplicate Discharge Certificate	" W. 39A		
‡Form of Will	" W. 82		

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

WAR SERVICE BADGE
CLASS "A" NO. 75165 ISSUED

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.	288560
Rank	Pte.
Surname	Bouvet
Christian name	Victorin Adrian

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company)	221st, Batt.
Date of discharge	21-3-19
Place of discharge	Winnipeg

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive marks
Age	54 years months.	
Height	5 feet 6 inches.	
Complexion	Dark	Nil.
Eyes	Blue	
Hair	Brown	
Trade	Farmer.	
Intended place of residence (To be given as fully as practicable.)	Woodridge P.O. Man.	

2. The above-named man is discharged in consequence of

☆ C.O. 66 - 797 D.O. 78 ☆

Authority for discharge *Demobilization R.O. 1420 (c)*

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.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

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.)

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of G. C. Badges

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, *(Squadron or Battery,* and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

.....

Commanding.....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) Winnipeg (V Bouvet) *(Signature of Soldier.)*

(Date) 21-3-19 Ch. H. Jenkins *(Signature of Witness.)*

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....*(Signature of Soldier.)*

10. **Statement of Service.**

Service toward Engagement to.... (the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) Winnipeg

(Signature) A Forbes Major

(Date) 21-3-19 O.C.No. 10 District Depot.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

(V Bouvet) None

AUDITOR	PAYMASTER

B.568

Mr or S.

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

REGT. No. 288560 RANK Pte NAME (IN FULL) Bowet V.A. (BLOCK LETTERS SURNAME FIRST) 22

ORIGINAL UNIT C.E.F. 221 Bn IF IN P.F. WHAT UNIT?

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No DATE EFFECTIVE

TO WHOM PAID RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ No DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ADDRESS Woodridge P.O. Man.

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Winn DATE 2/3/19 REASON D AUTHORITY DO 78 IF ENTITLED TO POST DISCHARGE PAY Las

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. No. 1 NO.	DATE	COL. No. 2 NO.	DATE	COL. No. 3 NO.	DATE	CASH PAYMENTS COL. No. 1 $	C.	COL. No. 2 $	C.	COL. No. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							395	21	395	21																									395	21	Trans. Cr 395.21 for pay on 1/3/19
1/3/19 to 31/3/19	49	1.10	53	90	11	21	395	21	495	31	235	11	24	52			437	21	57	22								88			495	31					153 Days @ 1.10 Less 14% Deposit Separation Allowance
			53	90	46	20	790	42	890	52							437	21	57	22								88			495	31			395	21	To
Mar. 21	153						350	00									126	61	70	00															280	00	70 - 1st Prem. Wlf.
Apr. 21																	552	361	70																210	-	70 - 2nd " "
May 21																	571	251	70																140	-	70 - 3rd " "
June 21																	768	298	70																70	-	70 - 4th " "
July 22																	748	323	70																~~70~~	-	70 5th & final
							350	-											350												350	-					

as closed

AUDITED JUL 28 1919 Audit Clerk

100M-1-19.—L. L. 53962-M & D. 9723.
M. F. W. 2596.
1772-39-1300.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

498

ASSIGNED PAY	* ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:–		EFFECTIVE DATE:–	
AMOUNT:–		AMOUNT:–	

NAME:– BOUVET. Victoria Adrian

NUMBER:– 288560

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.

Compiled 25-1-19

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:– 221st Bn

DATE ACCOUNT FIRST OPENED – 1-5-17.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			M.R.D
NR	1/6/18	19/6/18	4th B.R.T. L

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
21/12/18	8776	Field 25f.	~~4 66~~	Ledger Bal			474 34
11/1/19	9724	1st CCD £1	~~4 87~~	L.C. Bal			464 81
			9 53	Diff.			9 53

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE: 31/1/19 Trans'd to Canada Auth'y. £2265. 7/1/19 Unlay to Depl M D 10.

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch	Bal Forward								172 22	90	
Apl	P P	33							205 22	105	
		33									
May	P Pay	34 10		D'h 205 2/5/18 4 b R.T.	3 57						
				" 304 15/5/18 "	3 57				232 18	120	
		34 10			7 14						
JUN	P.P.	33		404 1/6 4 b R.T.	7 14						
				509 15/6 "	3 57				254 47	135	
		33			10 71						
July		34 10		605 2/7 "	3 57						
				709 16/7 "	3 57				281 43	150	
		34 10			7 14						
Aug		34 10		792 1/8 "	7 14				308 39	165	
		34 10									
Sep		33							341 39	180	
		33									
Oct		34 10							375 49		
		34 10									
Nov		33							408 49	210	
				5/1455 15/11	3 43				404 46		
Dec		34 10							438 86	225	
				47/1557 1/12 "	13 06				425 80		
Jan		34 10			16 19				459 90	240	
		101 20			16 19						
	Int on Def Pay 1/5/17 to 31/1/19	14 44							474 34	315	
				Allowed 34/2 C.G.B.D.	4 66						
				9724 9/1/19 1CCD	4 87				464 81	315	
		14 44			9 53						

CANADIAN ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 10/1/19

NUMBER RANK NAME

Month	Particulars	Cr. 1.	Cr. 2.	Particulars	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	Balance	Deferred	Separation
	Due Bwd.				9 52				146 81 315		
				302 Sgt Kinnaekind	9 73				45 5 08		
					19 24						
				SOS. 24/9 D.O. 73 CRJD 24/9							