

919582

**I.D. number**

**No. d'identification**

BROPHY

**Surname**

**Nom de famille**

LAWRENCE WALTER

**Given names**

**Prénoms**

KIA 6-11-17

**PERSONNEL RECORDS CENTRE**

**CENTRE DES DOCUMENTS DU**

**PERSONNEL**

OPEN  
ATIA

**Location**

**Lieu**

1112

Box # III D .

REGIMENTAL DOCUMENTS

*Inc*  
S

H

NAME BROPHY LAWRENCE WALTER REGT. NO. 919582 UNIT 189 H. Q. FILE NO. \_\_\_\_\_

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2 ATTESTATION PAPER (M.F.W. 23, 133, or 51)				41995	DEATH
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2 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)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1 B. 149					
1 P. 85					
1 Res card					
2 Copies of ...					
1 P. 12					
1 pc					



Box  
22/20

ATTESTATION PAPER.

No. 919582  
Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.  
(ANSWERS.)

- 1. What is your surname? Brophy
- 1a. What are your Christian names? Lawrence Walter
- 1b. What is your present address? 782 Champagneur Street
- 2. In what Town, Township or Parish, and in what Country were you born? Montreal Que
- 3. What is the name of your next-of-kin? Margaret Brophy
- 4. What is the address of your next-of-kin? 782 Champagneur Street, Montreal, Que
- 4a. What is the relationship of your next-of-kin? Mother
- 5. What is the date of your birth? Sept. 16th. 1897
- 6. What is your Trade or Calling? Clerk
- 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? Composite Regiment 13 Months  
55th. I C R 6 Months
- 10. Have you ever served in any Military Force? 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, Lawrence W. Brophy, 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.

Date: June 14th 1916.  
Lawrence W. Brophy (Signature of Recruit)  
E. G. O'Brien (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Lawrence W. Brophy, 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.

Date: June 14th 1916.  
Lawrence W. Brophy (Signature of Recruit)  
E. G. O'Brien (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.  
The above questions were then read to the Recruit in my presence.  
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Montreal this 14th day of June 1916.  
[Signature] (Signature of Justice)

*Lawrence Walter*  
*L. W. Propley*

Description of \_\_\_\_\_ 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. 7 ins.

Chest measurement { Girth when fully expanded 34 ins.  
Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Fair

Religious denominations.  
Church of England \_\_\_\_\_  
Presbyterian \_\_\_\_\_  
Methodist \_\_\_\_\_  
Baptist or Congregationalist \_\_\_\_\_  
Roman Catholic XXXXX  
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 May 9 1916.

Place Must.

*H. Curby*  
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.**

L. W. Propley 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.

Date May 14 1916

*H. Curby*  
(Signature of Officer)

24<sup>th</sup> B am

L. u. a . 6/11/17

transf . 10/12/17

A-67-

2008/3

Date of Enlistment

June 14, 1916

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch

Date of Assignment

Dec. 1/1917  
Dec 1/16

RATE OF SEPARATION ALLOWANCE

20	25 <sup>00</sup>		
----	------------------	--	--

1-12-17

RATE OF ASSIGNMENT

20	15 <sup>00</sup>		
----	------------------	--	--

P. 6. 7375 GR.

PARTICULARS OF SEPARATION ALLOWANCE

No. 919582  
 Rank *to* Promoted Reverted Discharge  
 Soldier's Name Lawrence W. Brophy  
 Battalion 199<sup>th</sup> *in* *Patrol*  
 Beneficiary Mrs. Margaret Brophy  
 Relationship Mother  
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Margaret Brophy  
 Address 782 Champagne St. Montreal Que  
 Change of Address  
 1  
 2  
 3  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Oct 31/17		331	220	551	
Nov. B 54577		20	20	40	
Dec D 60334		20	20	40	
Jan '18 U 69949		30	10	40	
Feb M 74705		25	15	40	
Mar U 85009		25	15	40	
<i>1/2 done</i>					

*closed*

C.F. 30/11/17 240<sup>00</sup> Reynolds 13/12/17  
*at open assigne dependant*  
 Pension Granted... 4-18  
 B.P.C. to Recover \$.....  
 Clerk J.P.L. Date 21-3-18  
*mailed 27/3/18*

Pensions Notified Date... 13/12/17  
 Killed in Action }  
 Died of Wounds } Date 6/11/17  
 Missing }  
 C. L. 2-24/11/17 Clerk Reynolds  
 Date Noted... 13/12/17 1917

Pay S.A. & A.P. to 31-3-18 and S.A.B.  
 File 2237-4-1 Feb 22-3-18

PENSION  
 A CLOSED.....  
 OVER-PAY.....  
 RECOVERED BY  
 B.P.C. 26-3-18  
 GRANTED

*184 B. 34  
M. A. R.*





SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

BROPHY

L.W.

919582.

RANK

UNIT

Co.

TROOP

BATTY.

Pte.

EQ. 24.

HOSPITAL

DATE OF ADMISSION

HOSP.

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

1.

2.

3.

RFB . KILLED IN ACTIN 6-11-17. Ho

DISPOSITION

DATE

CL 20-11-17 A67.

REMARKS

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

✓ Brophy, L.W., Pte. 919582 24th Bn. 649-B-22213

1706 Esplanade Ave  
Montreal 20 1/23

Med. & Dec. (Mother) Mrs. Margaret Brophy,  
Re J. 26-3-21 782 Champogneur, Ave.,

Scout Desp. ~~JAN 13~~ Reqn. No. ~~2967~~ Montreal, Que. 1706 Esplanade Ave

~~Auth. 649-B-22213~~  
~~25/1/22~~

Plague Desp. JAN 13 1922 Reqn. No. R 3570

P. & S: (Mother) Address as above.

(Serial no. 765088.)

Mem. Cross:

" " " "

40366

not elig. 14/15 star

7 elig. 0 m.

7 " B.W. m.

DESPATCHED

11556 4/3/22

B.

654

M

C. 38664 DEC 28 1920

Plaque Ret. 31.1-221

Plaque p. resp. 25. 1-23 E 905.

38664

ms x ret'd 221 gone away





SURNAME.

*Brophy*

CARD NO.

CHRISTIAN NAMES

*Lawrence Walter*

FOLL.

REGL. NO.

*919582*

RANK

*Pvt.*

UNIT

*199<sup>th</sup>*

FORMER CORPS

*Composite Regt. 139 Mes. 55<sup>th</sup> I.C.P. Br.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Brophy Mrs. Margaret*

RELATIONSHIP TO SOLDIER

*Mother*

ADDRESS

*782 Champagne St.  
Montreal, P.Q.*

COUNTRY OF BIRTH

*Canada Montreal P.Q.*

DATE

*Sept. 16<sup>th</sup> 1897*

PLACE OF ATTESTATION

*Montreal, P.Q.*

DATE

*June 4<sup>th</sup> 1916*

*of 13-12-16,*

*From Halifax per SS Olympic 13-12-16*

MARRIED

SINGLE *Yes*

WIDOWER

TRADE OR CALLING

*Clerk*

RELIGION

*Roman Catholic*

DESCRIPTION.

APPARENT AGE

*Not stated*

YEARS

MONTHS

HEIGHT

*5.*

FEET

*7.*

INCHES

CHEST MEASUREMENT

*34.*

INCHES

EXPANSION

*3.*

INCHES

COMPLEXION

*Not stated*

EYES

*Not stated*

HAIR

*Not stated*

DISTINGUISHING MARKS

*Not stated*

MEDICAL EXAMINATION.

PLACE

*Montreal P.Q.*

DATE

*May 9<sup>th</sup> 1916*

*Present Address - 782 Champagne St.  
Montreal P.Q.*



No. 919582 RANK Pte.

NAME Brophy L. J.

T. O. S.

UNIT 199<sup>th</sup>. Battalion

*Trans. from Composite Regt. 14-6-16  
(June paylist)*

(Irish Canadian Rangers) M. D. 4

PAID  
FROM

PAID  
TO

SIG.  
OR  
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

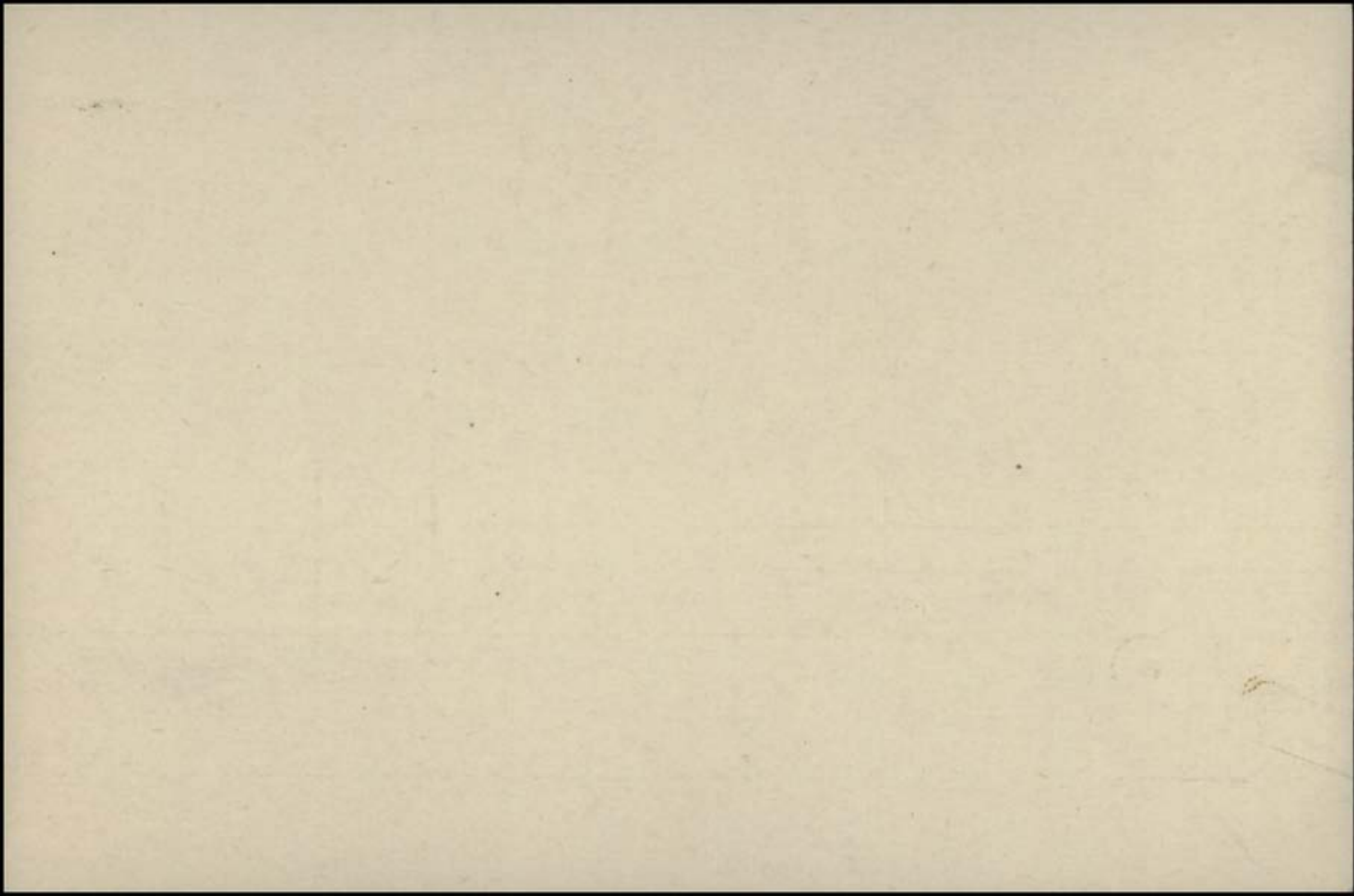
PARTICULARS

AUTHORITY

1916 June 14  
1916 June 30  
July  
Aug.  
Sept.  
Oct.  
Nov.  
Dec.

✓  
✓  
✓  
✓  
✓  
✓  
✓

UNIT SAILED  
DEC 15 1916



LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
<i>MMD</i> <i>MJ</i> Number... 919582		Rank...	Pte
Surname...	BRophy		
Christian Name...	Lawrence Walter		
Unit...	24 <sup>th</sup> Bu Canby	Theatre of War...	France
Date of Service	22/5/17		D. -
Remarks...	Mother		
Latest Address...	Mrs. Margaret Brophy		
<i>Page 3390</i> Roll No.	1706	E. Spland. Ave.	
Roll No.	13	20 <sup>1</sup> / <sub>2</sub> 3	Montreal, Que.

B  
V

NAME

REGT. NO.

RANK AND UNIT

NEXT OF KIN

CABLE

NATURE OF CASUALTY

NO.

DATE

G-

18107

See

MAY 9 - 1921

NAME

Grady Lawrence Walker

REG'T'L No.

919582

RANK AND CORPS

2nd Lt. Co. 199th Br

H. Q. FILE NO. 649.

CABLE

FOLLOWS  
No.

NO. 79-8

DATE

NATURE OF CASUALTY

FOLLOWS

M6384

20-11-17

Killed in action

Nov. 6th 1917

A. F. B. 20904

14-11-17  
Rouen

Killed in action Nov. 6<sup>th</sup> 1917.

LIST NO.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

a67-1

Reported from Base

6-11-17.

Killed in Action (1st Base)

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

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

# Casualty Form—Active Service.

250M.—1-16,  
H. Q. 1772-39-920.

Unit, Regiment or Corps 199th Bn. C.E.F.

Regimental No. 919582 Rank Private Name Brophy, Lawrence Walter

Enlisted (a) 14/5/16 Terms of Service (a) Soft W. + 6 mos. Service reckons from (a) 14/5/16

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) \_\_\_\_\_

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 Disembarked	Canada England	16.12.16 6.12.16	SS Olympic
10-6-17.	GC.199th	Transferred to the 23rd Reserve Bn. Shoreham.	Witley.	10-6-17.	Part II D.O. 130/17.  Stewart CAPT. 1. 1917. FOR LIEUT. COL. O. C. 192nd MUN. C. E. F.
11. 17	23rd. R. Bn.	Taken on strength	Shoreham	10. 5. 17	B.P. II. D. 127 ✓
23. 5. 17	23rd. R. Bn.	Posted to 24th. Bn.	Shoreham	22. 5. 17	D.P. II. D. 140
			W.A. Chalmer		Lieut. for 23rd. Res. Bn. C. E. F.
24. 5. 17	26th B.D.	Reformed as 23rd Res Bn	26th B.D. Dep	23. 5. 17	NR149 P20.52 dt 18/6/17
1. 6. 17		Class a	51 Cont	1. 6. 17	NR204
31. 5. 17	51 Cont.	7 D.C. Ser.		31. 5. 17	NR302 dt 17/5/17

(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.

*Handwritten initials*

CERTIFIED CORRECT.  
16 JUN 1917  
CIV. RECORDS, LONDON.

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				
11.6.17	.2 CIBD.	Left join 24th. Cdn. Bn.	Field	21.6.17	NR.307.
15.6.17	.24 C. Bn.	Joined 24th. Cdn. Bn.	"	12.6.17	B.213 323 d/-7.7.17.
10.11.17	. . .	<i>Killed in action</i>		6.11.17	<i>At. 16/30436. P.O. 101 of 14/11/17</i>
			<i>J. Whogan</i>		Major for Lt.-Col. A.A.G. Canadian Section G.H.Q. 3rd Echelon



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

*Mrs.*  
 To Whom *Margaret Brophy*  
 Address *782 Champagne St  
 Montreal Que.*

By Whom Assigned *Brophy, Lawrence W.*  
 Regtl. No. *919582*  
 Rank *Pte*  
 Corps *199 Bn.*

Rate *20<sup>00</sup>*

DEC 1 1916

**PAYMENTS**

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



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2

1

# SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2

*Ms Margt Brophy*

*Mother*  
PAYMENTS

Name of Soldier

*Brophy L. W*  
*/ etc*

L. L. Job 310.—Req. 6574.

*919582*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		<i>K 25394</i>	<i>131</i>	<i>131</i>
Jan.	1917	<i>F 28511</i>	<i>20</i>	<i>20</i>
Feb.		<i>7 31423</i>	<i>20</i>	<i>20</i>
March		<i>7 34590</i>	<i>20</i>	<i>20</i>
April		<i>H 488</i>	<i>20</i>	<i>20</i>
May		<i>G 4045</i>	<i>20</i>	<i>20</i>
June		<i>I 6917</i>	<i>20</i>	<i>20</i>
July		<i>L 10539</i>	<i>20</i>	<i>20</i>
Aug.		<i>N 13569</i>	<i>20</i>	<i>13</i>
Sept.		<i>O 6582</i>	<i>20</i>	<i>13</i>
Oct.		<i>P 23101</i>	<i>20</i>	<i>20 331.00 OK!</i>
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier \_\_\_\_\_

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				



# ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2. *Mrs. Margaret Brophy*  
(Assignee)

## PAYMENTS.

Name of Soldier *Brophy Lawrence W*  
*919582 Pte 19913*

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>20<sup>00</sup></i>	<i>DEC 1 1916</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917	<i>3 36719</i>	<i>40.</i>	} <i>20.00</i> <i>20.50</i> <i>20.45</i> <i>20.60</i> <i>20.00</i> <i>20.00</i> <i>20.00</i> <i>220.00 ✓</i>
Feb.		<i>I 42960</i>	<i>20</i>	
March		<i>R 46143</i>	<i>20</i>	
April		<i>V 107</i>	<i>20</i>	
May		<i>W 6839</i>	<i>20</i>	
June		<i>P 15374</i>	<i>20</i>	
July		<i>J 20210</i>	<i>20</i>	
Aug.		<i>N 27637</i>	<i>20</i>	
Sept.		<i>M 37059</i>	<i>20</i>	
Oct.		<i>K 48465</i>	<i>20</i>	
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*Boyle*

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier \_\_\_\_\_

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

14-6-16

MILITIA AND DEFENCE

M. F. W. 11.  
50m.—4-16.  
H. Q. 1772-30-818.

217

SEPARATION ALLOWANCE

Name *Mrs Maryt Brophy*  
Address *782 Champagne St  
Montreal  
P.Q.*

Name of Soldier *Brophy L. W.*  
Regtl. No. *919582*  
Rank *Pte*  
Corps *199th Bn*

Relation to Soldier }  
wife, child or mother } *Mother*

To what Corps belonging }  
when called out }

PAYMENTS

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



1922  
R



20959

123968

**FORM OF WILL.**

Name in full.

I Laurence Walter Brophy,

Regimental Number 919582 serving in 199<sup>th</sup> Bn. I.C.B.

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

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

I DEVISE and BEQUEATH all my real estate unto

Mrs. Margaret Brophy,  
782 Champagne St.  
Outremont, Montreal, Que. Canada

absolutely, and my personal estate I bequeath to

Mrs. Margaret Brophy,  
782 Champagne St.  
Outremont, Montreal, Que. Canada

Name & Address of persons or person to receive personal estate (see Note 1.)

Fill in Date and Year.

IN WITNESS WHEREOF I have hereunto set my hand this 8<sup>th</sup> day of March A.D. 1917.

L. W. Brophy  
(Signature)

Signed by the said Testator as his last Will and Testament, the same having been read over and explained to him, in the presence of us both present at the same time who at his request and in his presence and in the presence of each other have subscribed our names as witnesses.

Name of Witness

M. D. Doyle

Address of Witness

199th Bn. I.C.B.

Occupation of Witness

Capt 199th Bn

Name of Witness

Joe Pyle

Address of Witness

199th Bn I.C.B.

Occupation of Witness

Capt 199th Bn

ESTATES BRANCH  
JAN 21 1918  
MILITIA DEPT.

N.B.—Personal Estate includes pay, effects, money in Bank, insurance policy, in fact everything except real Estate.

FORM OF WILL

I, \_\_\_\_\_ of the County of \_\_\_\_\_ State of \_\_\_\_\_ do hereby certify that the within and foregoing is a true and correct copy of the original of the within and foregoing will of \_\_\_\_\_ of the County of \_\_\_\_\_ State of \_\_\_\_\_ as the same appears from the records of the \_\_\_\_\_ Court of said County.

Witness my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_\_\_.

Notary Public for said County.

MEDICAL HISTORY SHEET.

Surname Brophy Christian Name Lawrence W.

Examined { on \_\_\_\_\_ day of \_\_\_\_\_ 191\_\_\_\_  
at \_\_\_\_\_  
Birthplace { City or Town \_\_\_\_\_  
County \_\_\_\_\_

Approved by H. Aubrey  
Rank Major M.O.

Apparent age \_\_\_\_\_  
Trade or occupation Labourer  
Height 5 Feet 7 Inches.  
Weight 124 Lbs.  
Chest measurement { Minimum 31 inches.  
Maximum expansion 34 inches.  
Physical development good  
Small-Pox Marks \_\_\_\_\_

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left  
Number 1  
When Vaccinated last 5 years ago 22/4/16  
(a) Marks indicating congenital peculiarities or previous disease \_\_\_\_\_

Date	Result	VACCINATIONS,
		M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection \_\_\_\_\_  
\_\_\_\_\_

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
3.7.16	Good	M.O.
12.7.16	Good	M.O.
31.7.16	Good	M.O.

Enlisted on 14<sup>th</sup> day of June **MAY 17 1917** 1916 at Montreal

CORPS.	REG'TL NUMBER.	HABITS.	DATE.
199TH BATTALION C.E.F. IRISH CANADIAN RANGERS	919582		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
Montreal	24/10/16	fit	PASSED MED. BOARD <u>L.H. Goodhue</u> Capt. A. M. C.

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.

*Lawrence B.*

Christian Name

*Bipha*

Surname

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				

APR 13 1881

E.T.

Rank *Plt* Name **BROPHY, Lawrence Walter** ✓ Reg'l No. 919582. ✓  
 Unit 199th Battn. If in perm. Corps } Married or Single Single. ✓  
 What Unit? }  
 Place and Date of Enlistment Montreal. June 14<sup>th</sup>. 1916. ✓ Place of Birth Montreal. ✓  
 Name and Address, Next-of-Kin Margaret Brophy ✓ Quebec.  
 782. Champagneur Street. Montreal. Quebec. ✓ Relationship Mother. ✓

*dmx*  
*221220*  
*21*

Assigned Pay Monthly \$ Payable to Canada. Relationship  
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 10119  
File R.L. 25-B-4703  
Category.....

**KILLED IN ACTION**

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>Arrived in England</i>		26 DEC 1916	
10.5.17	23 <sup>rd</sup> Res Bn	J.O.S. from 199 <sup>th</sup> Bn.	Shoreham	10.5.17	Pt II DO 127 199 <sup>th</sup> Bn Pt II 0150 10.5.17
23.5.17	---	SOS on Trans to 24 <sup>th</sup> Bn	Field	22.5.17	Pt II DO 140. r 24 <sup>th</sup> Bn Pt II DO 52 d 18.6.17
14.11.17	24 <sup>th</sup> Bn	Killed in Action	---	6.11.17	Pt II DO 101 Also CL 967 (19-11-17) 1 <sup>st</sup> Wnd

**CHECKED**  
10313

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.					

ST. LUIS  
 OFFICE OF THE ADJUTANT GENERAL  
 ST. LOUIS, MO.

29

P. 559  
MARRIED OR SINGLE

Single

PLACE OF BIRTH

Montreal

NAME AND ADDRESS OF NEXT OF KIN

Mrs. M. Drapkin  
988 Champagne St. Montreal P.Q.

RELATIONSHIP OF NEXT OF KIN

mother

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

REG'L NO. 9988 RANK Private NAME Drapkin L.W.

IF IN PERM. CORPS WHAT UNIT 19th Lt. Bn. TRANSFERRED TO 23 Res. Bn. DATE 22.5.17 AUTHORITY 30.127

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 24th Bn. DATE 21.6.17 AUTHORITY 30.140 23/5/17

PLACE OF ATTESTATION Montreal P.Q. TRANSFERRED TO N.E.B. 10 DATE 1.12.17 AUTHORITY

DATE OF ATTESTATION 14th June 1916 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$20.55 DATE EFFECTIVE 1st January 1917

PAYABLE TO Mrs. M. Drapkin, 988 Champagne St. Montreal P.Q. RELATIONSHIP mother

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY Entered on N.E. and Index J.W.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Checked by H. J. Elliottson CI

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



ADMISSIONS TO HOSPITAL, &c.

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

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS			
	NO. OF DAYS	RATE	AMOUNT \$ C.	NO. OF DAYS	RATE	AMOUNT \$ C.				NO. OF DAYS	RATE	AMOUNT \$ C.	1 NO. DATE	2 NO. DATE	3 NO. DATE	4 NO. DATE	1				2	3				4	CREDIT	DEBIT
Jan 1									19 10	19 10																Sal. from Canada.		
Jan 31	31	1 10/10	34 10						34 10									20		20								
Feb 28			30 80						30 80									20		20								
Mar 31			34 10						34 10	50 2 31/100	15 1/100	21 9/100	24 3/100	4 87/100				20		4 87								
Apr 30			33						118 10	98 20/100	157	180 14/100		9 74				20		9 73							Recess - 10/3/17	
May 1-21	21		23 10						23 10	49 26/100	39	41/4		9 73				20	32	4 86							To 23 Res. 22.5.17	
22-31	10		11						11																			
June 1-20	20		22						22									20										To 24th Bn. 21.6.17.
21-30	10		11						207 20																			
July 31			34 10						34 10	287 24/100				2 68				20										53 74
Aug 31			34 10						34 10	436 24/100	550 23/100			2 68				20		2 67								
Sept 30			33						33	357 13/100	488 8/100	105 12/100	254/100	2 68				20		2 67	4 46							
			300 30						19 10	319 40				44 54				180		32	253 72							Carried forward.

la la la  
Action 6/11/17

Statement of  
MAR 30 1918  
72<sup>10</sup>

919582 Brophy, L.W. Pte AP \$ 20.

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	No. OF DAYS	RATE	AMOUNT	No. OF DAYS	RATE	AMOUNT				No. OF DAYS	RATE	AMOUNT	1	2	3	4	1				2	3			

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SEP. ALLG. ENG.	MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFERRED PAY	SEP. ALLG. ENG.
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B-F ~~65 68~~  
 Oct P.P. 34 10  
 On 23<sup>rd</sup> AR 153<sup>rd</sup> 7/17. 730  
 24<sup>th</sup> AR 607 9/9/17. 268  
 AR 664 24<sup>th</sup> 7/9/17. 267  
 12 6 5  
 Nov P.P. 34 10  
 33 AR 744 24<sup>th</sup> 5/10/17. 446  
 20  
 AR 814 24<sup>th</sup> 7/10/17. 357  
 8 8 8  
 Balance transferred to N. E. Branch. 72 10  
 Lettman for Lett 12/18. 5323 72 10  
 May 18

65 68 Nil  
 20  
 67 1 3  
 20  
 72 10  
 5-18