

49220

2009882

BUCKLAND

Gilbert Victor

**I.D. number**  
**No. d'identification**

**Surname**  
**Nom de famille**

**Given names**  
**Prénoms**

OPEN ATIA

deceased 29/09/18

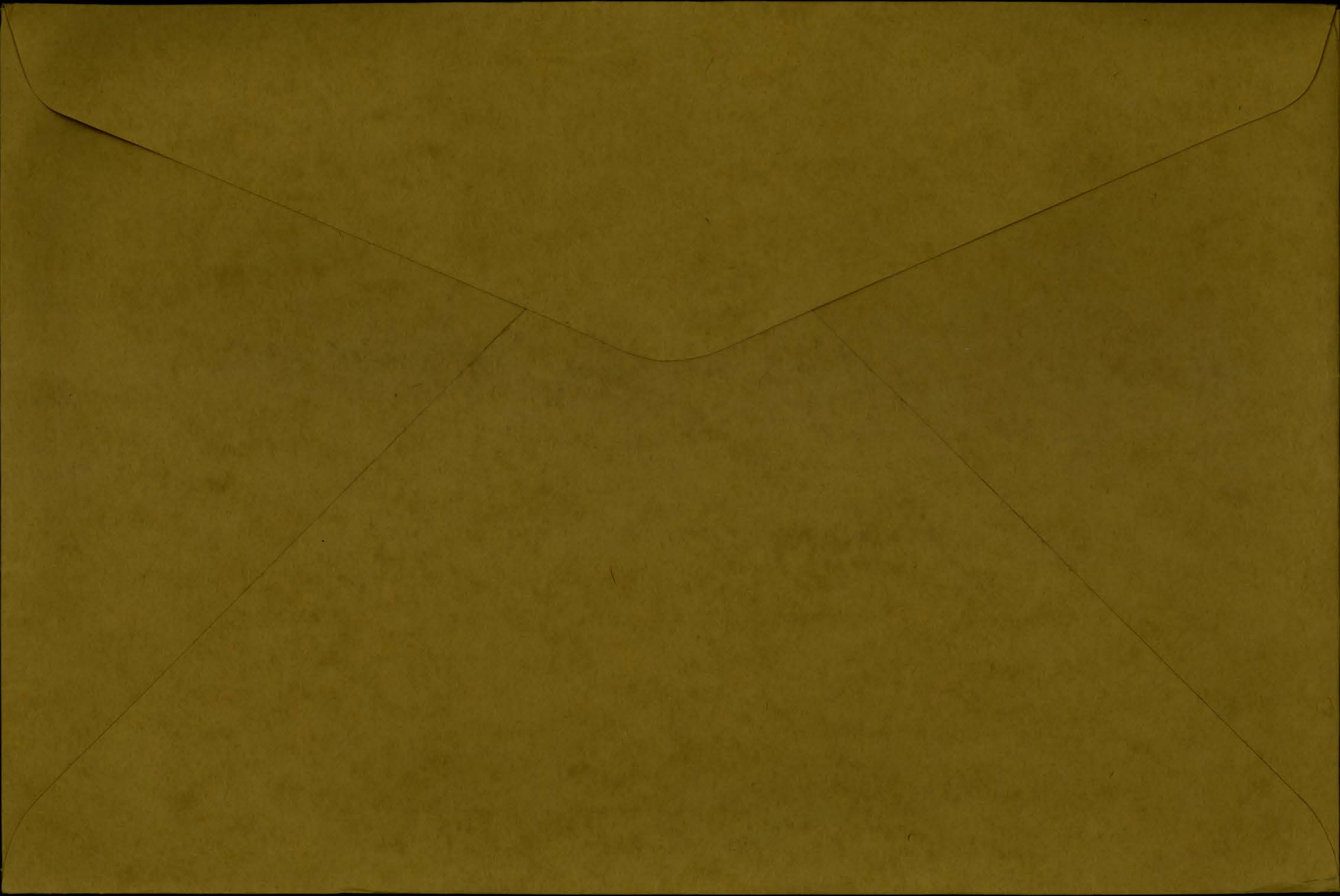
**NATIONAL PERSONNEL RECORDS CENTRE**  
**CENTRE NATIONAL DES DOCUMENTS**  
**DU PERSONNEL**

**PERSONNEL RECORDS ENVELOPE**  
**ENVELOPPE DES DOSSIERS DU PERSONNEL**

**Location**  
**Lieu**

Box: 1238

**« CONTENTS CONFIDENTIAL »**  
**« CONTENU CONFIDENTIEL »**



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

Attestation Papers 23.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms 1.....

Proceedings on discharge 1.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet 1.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit 2.....

Last Pay Certificate.....

ATB-122-1

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19-2-21  
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DISCHARGE DOCUMENTS

Name BUCKLAND, GILBERT, Victor

Regt. No. 2009882 Rank Spr.

Corps Canadian Congress

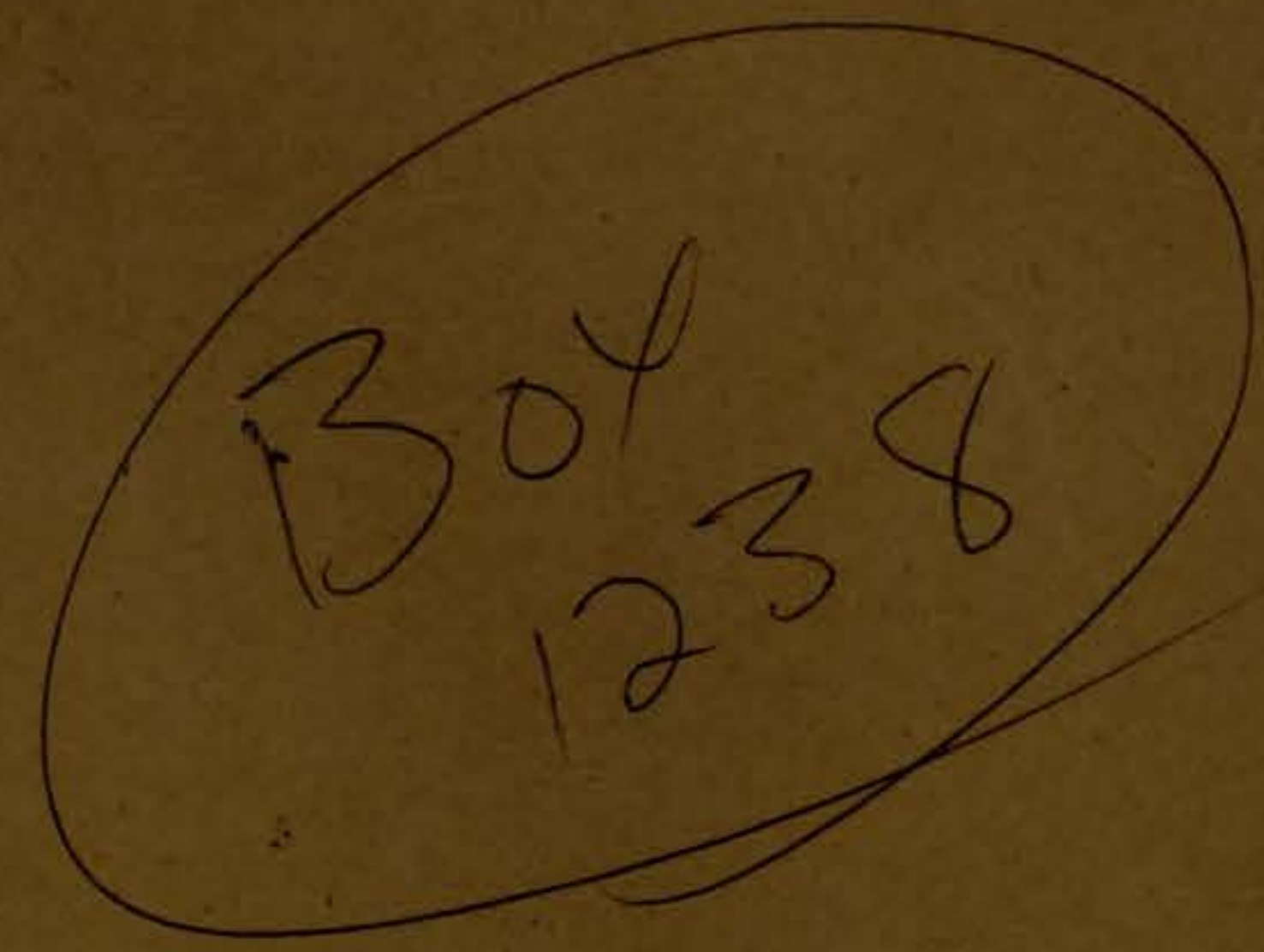
R. O. No. ....

H. Q. No. ....

49220



29-9-18. Deceased.



42-5  
4-5  
6-5

11

ATTESTATION PAPER.

No. 2009882

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... **Buckland**
- 1a. What are your Christian names?..... **Gilbert Victor**
- 1b. What is your present address?..... **1173 Deserable St. Montreal**
- 2. In what Town, Township or Parish, and in what Country were you born?..... **Montreal**
- 3. What is the name of your next-of kin?..... **Albert E. Buckland**
- 4. What is the address of your next-of-kin?..... **1173 Deserable St. Montreal**
- 4a. What is the relationship of your next-of-kin?..... **Brother**
- 5. What is the date of your birth?..... **December 5th 1893**
- 6. What is your Trade or Calling?..... **Loc. Engineer**
- 7. Are you married?..... **Single**
- 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.** *G.V.B.*
- If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... **Yes**
- 12. Are you willing to be attested to serve in the } **Yes**  
    CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. **No.**
- 14. If so, what was the nature of the disability?..... **---**
- 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?..... **No.**
- 16. If so, what was the reason?..... **---**



DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, **Gilbert Victor Buckland**, 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.

*Gilbert Victor Buckland* (Signature of Recruit)

Date **May 14th** 191**8**. *A. Pascal* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, **Gilbert Victor Buckland**, 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.

*Gilbert Victor Buckland* (Signature of Recruit)

Date **May 14th** 191**8**. *A. Pascal* (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 *St John P. Que* this **14th** day of **May** 191**8**.

*[Signature]* (Signature of Justice)

Description of Gilbert Victor Buckland on Enlistment.

Apparent Age 24 years 5 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 44 ins.  
 Range of expansion 4 ins.

Complexion Fair

Eyes Blue

Hair Fair

Religious denominations. { Church of England X  
 Presbyterian  
 Methodist  
 Baptist or Congregationalist  
 Roman Catholic  
 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).



R. D. =	30
L. D. =	40
R. EAR	
L. EAR	OK

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 M. D. No. 4 for the **Canadian Over-Seas Expeditionary Force.**

Date MAY 15 1918 191

Place MONTREAL, P. Q.

\*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:—

Declared **FIT** by MEDICAL BOARD  
 MOBILIZATION CENTRE, M. D. #4

*J. Mulcaugh* Medical Officer.

**"B"** Fit for Service Abroad  
 (but not for General Service)

CERTIFICATE OF OFFICER COMMANDING UNIT.

Gilbert Victor Buckland 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.

*M. Mulcaugh* (Signature of Officer)

Date 20 - 5 191 8

649-B/30712

*200982*

200982,

2009882

*L/epi.* ~~Pte.~~ Gilbert Victor Buckland, Jan. Engrs.

M. & D.

(Brother) Mr. Albert Buckland,  
1173 Deserables St.,  
Montreal, P.Q.

P. & S.

(Father) (Major) Rev. Alfred W.  
Buckland,

*Doc # 806634*

The Rectory,  
New Carlisle, Que.

Memorial Cross (NIL)



MAY 4 - 1971

Scroll Desp. \_\_\_\_\_

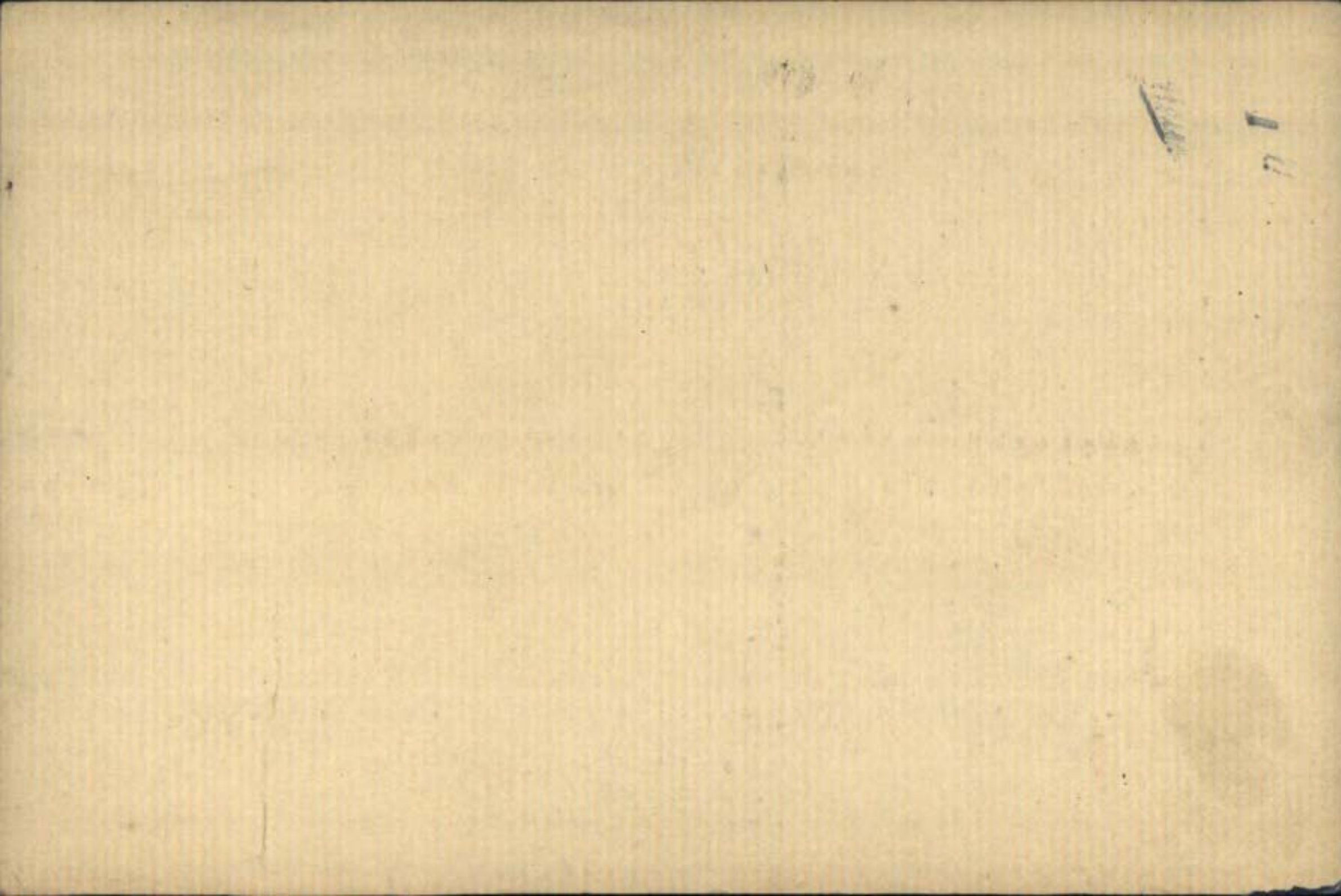
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*Canada only*

Plague Desp. ~~SEP~~ 12 1921

Reqn. No. 44338  
*P6602*

*al*



29  
18

H. Q. .... ✓

M. D. No. 4 .....

Surname Buckland, .....

T. O. S. May 14<sup>th</sup> 1918 .....

Christian names Gilbert Victor, .....

D. O. Pt. II 1137 of 175-18 .....

Regtl. No. 209882 Rank Spr .....

S. O. S. .... 19 .....

Unit Can. Eng. Tr. Ops .....

Reason .....

Auth. ....

Next of kin Buckland, Albert, Esq. Relationship Brother .....

Address 1173 Deserables St. Montreal Also notify: .....

P.Q.



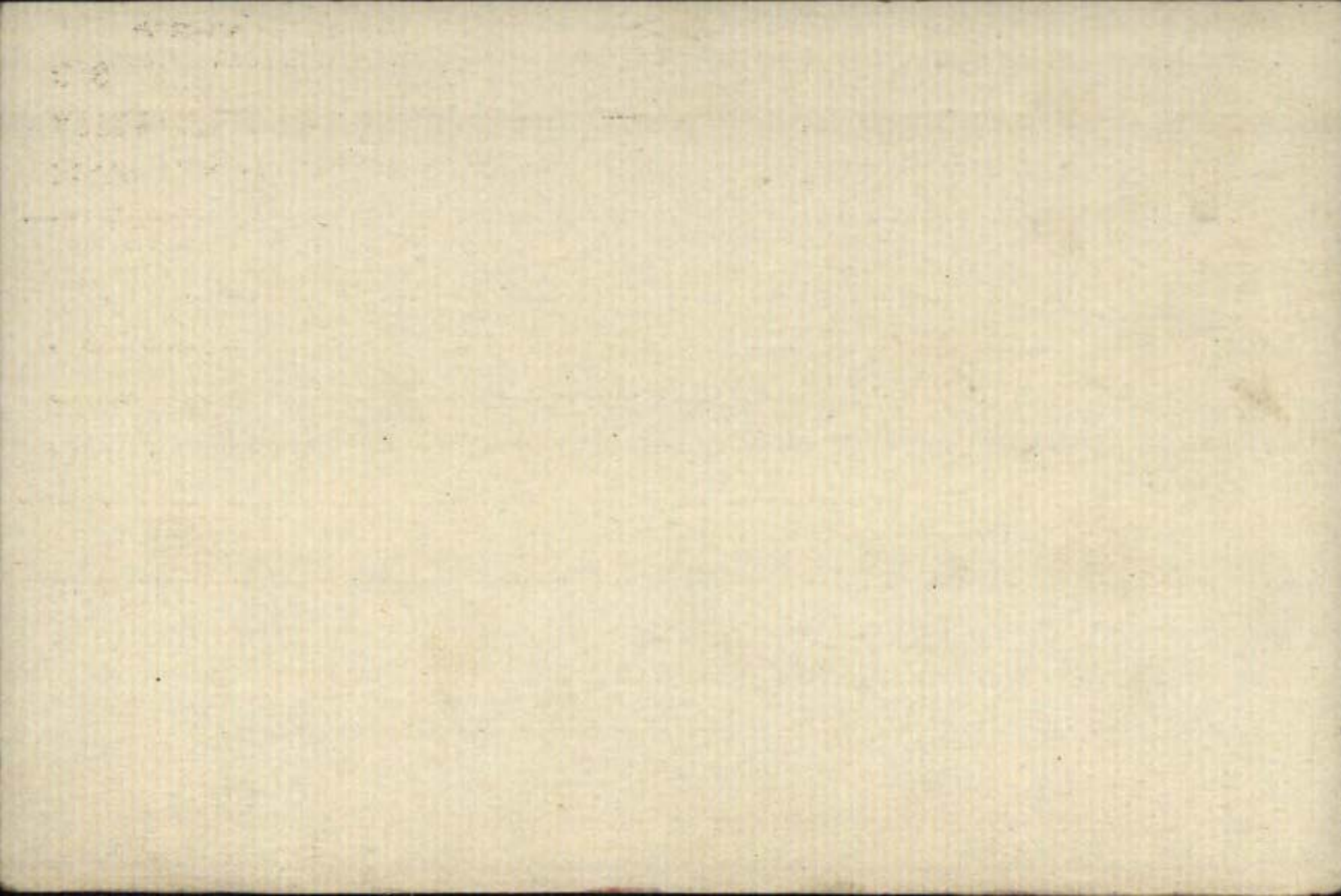
BORN—Place Canada, Montreal P.Q. Date Dec. 5<sup>th</sup> 1893 .....

ATTESTED—Place St. Johns, P.Q. Date May 14<sup>th</sup> 1918 .....

O/S .....

R/C .....





u) 9799  
11/6/11  
LEDGER No. ....

SERIAL No. 14609 ✓

REG. NUMBER 2009882 NAME Buckland G.V.

RANK Spr. CORPS C.E.

AGE 25 SERVICE ✓

NAME OF HOSPITAL Mil PLACE St Johns. Que

DATE OF ADMISSION 21-9-18

DISEASE Influenza Doub. Pneumonia

TRANSFERRED TO OTHER HOSPITALS

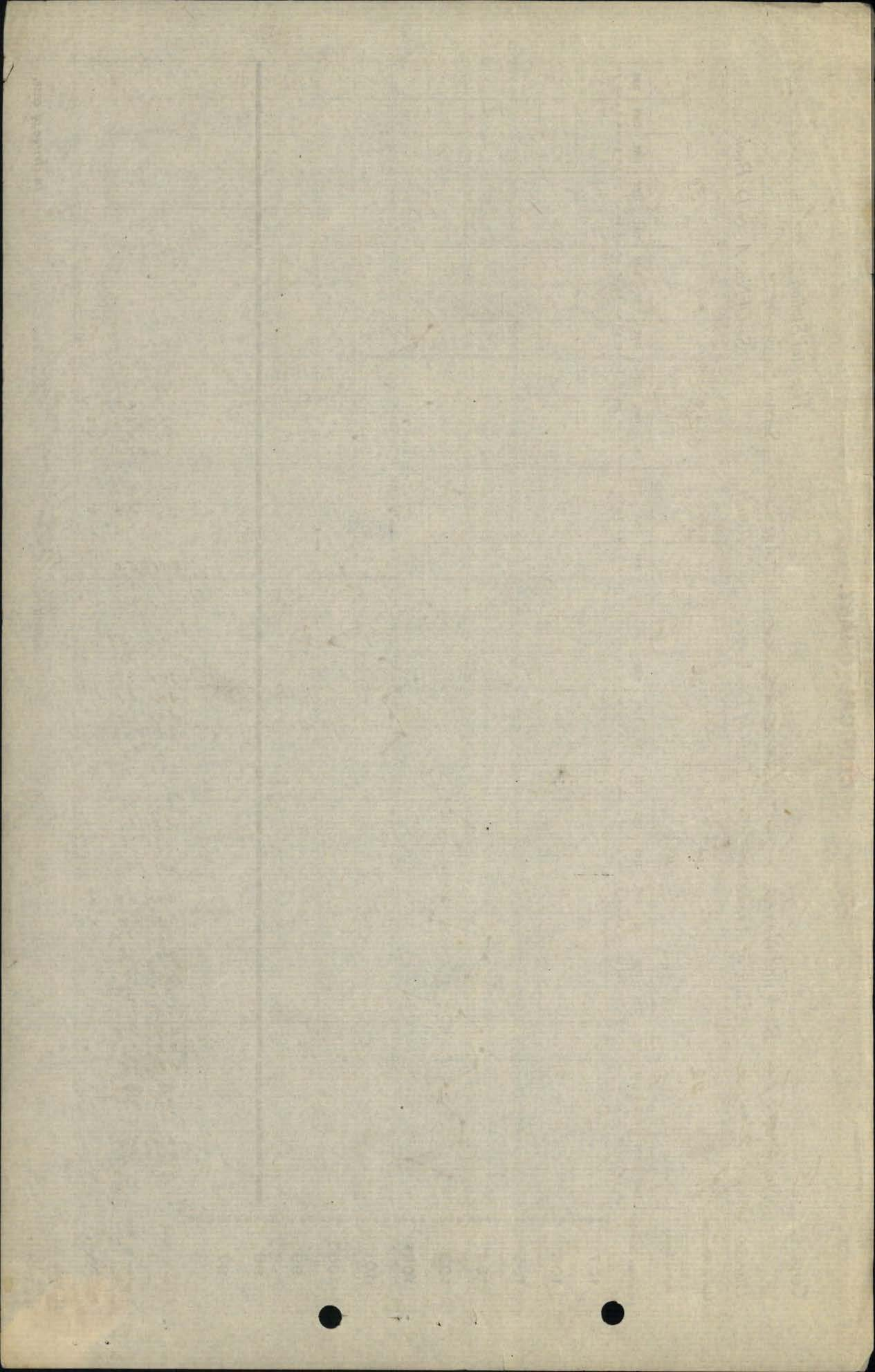
OPERATION Died 29-9-18

DISCHARGED TO ..... IN CATEGORY .....









# FORM OF WILL

I, Gilbert Victor Buckland (Name in full)

Regimental Number 200988-V serving in

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

I devise all my real estate unto

Nil

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

absolutely, and my personal estate I bequeath to

Albert E. Buckland Esq.  
1173 Deserables St.,  
Montreal, Que.

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

### NOTE

This space for the appointment of Executor if necessary.

### IMPORTANT NOTE

this 14 day of May A.D. 1918

This must be signed and Dated by THE SOLDIER HIMSELF.

Gilbert Victor Buckland Signature of Soldier.

\*N.B. Person l 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.

Signature of First Witness M. Pascal

Address of Witness Guy St Barracks - Montreal

THE TWO WITNESSES

Occupation of Witness Soldier

MUST SIGN HERE

Signature of Second Witness Guy St Barracks

Address of Witness Guy St Barracks

Occupation of Witness Soldier





# CASE HISTORY SHEET.

Hospital. Military Station. St. John P.D.  
 No. 209882 Rank. Sgt. Name. Buckland Age. 20-  
 Unit. C.I.E. Completed years of service            Where and how long }  
 Date of admission. 21-9-18 Date of discharge. 29-9-18 DIED  
 Diagnosis. Influenza, double pneumonia Place of origin. St. John Ave

CONDITION ON ADMISSION AND PROGRESS OF CASE.

Complaints-  
feverish  
Headach, backache & pain all over body  
Weakness  
cough.



History-  
 Patient states for a couple of days he has been feeling a little out of sorts but he says he has chills or felt feverish, also back & head was aching & pain in lungs & body.

Examination-  
 Patient well nourished young man  
 Head & lungs normal, face is flushed, slight conjunctivitis, patient is coughing a good deal & complains of weakness

Temp 103.2 Pulse 100 Resp 28

Family History-  
 (Tuberculosis, mental or nervous diseases.)  
 both back & lungs congested, Expansion diminished, dullness over base, bronchial crackles, increased vocal fremitus, coarse crackles, dyspnea, patient expectorates bloody sputum  
 negative

TREATMENT.

(Especially any specific or special form.)  
Rest in bed constant & aspirin for  
96 L. Brandy. Coughs in oil. St. oxygen.

CONDITION ON DISCHARGE,

(and disposal made of case.)  
Patient died 9:55 AM 29-9-18

Date. 29-9-18 MBuckland  
 Medical Officer i/c case.

G/14609





41715



Faint, illegible handwriting is visible across the page, appearing as light grey or blueish lines. The text is mostly centered and spans several lines, but it is too faded to be transcribed accurately. There are also some very faint, scattered marks and dots across the surface of the paper.

2009882

# MILITARY SERVICE ACT, 1917.

## MEDICAL HISTORY SHEET.

**IMPORTANT.**—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Buckland Christian name Gilbert Victor  
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule Volunteer  
 3. Consecutive number on schedule of men reporting for service (if he appears on it) \_\_\_\_\_  
 4. Address (including street and number, if any) \_\_\_\_\_

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 15 day of May 1917, by the undersigned medical board sitting at Montreal

5. Age as stated 24 Years 5 Months. 6. Apparent age 24 Years 5 Months  
 7. Height 5 Feet 6 Inches. 8. Weight 194 Pounds.

9. Chest measurement { Minimum 40 Ins. 10. Complexion Fair { Eyes Blue  
 { Maximum 44 Ins. { Hair Fair

11. Physical development. Good { Good Fair Poor 12. Smallpox marks \_\_\_\_\_

13. Number of vaccination marks { Right arm \_\_\_\_\_ 14. When vaccinated last Child  
 { Left arm 1

15. Distinctive marks and marks indicating congenital peculiarities or previous disease  
Scarose Venus Both Legs

16. Slight defects but not sufficient to cause rejection  
 The man denies having had { Rheumatism We find no evidence of past { Rheumatism  
 { Tuberculosis { Tuberculosis  
 { Syphilis { Syphilis  
 (Strike out disease admitted or suspected.) Weight

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category B<sup>2</sup>  
 17. (a) Vision R. 50 L. 40  
 (b) Hearing. R. OK L. OK

Williamus Krup President.  
W. Ship Member.  
Member. Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
8-8-18		<u>b.k.d.</u>	22-5-18	<u>1cc</u> <u>opt</u>	<u>b. L. Berich Smith</u> M.O.
			27-5-18	<u>1cc</u> <u>opt</u>	<u>b. L. B.</u> M.O.
			30-7-18	<u>1cc</u> <u>opt</u>	
			8-8-18	<u>tbl.</u>	<u>b.k.d.</u> M.O.

Joined 15<sup>th</sup> day of May 1918 at \_\_\_\_\_

CORPS	REG'TL NUMBER	HABITS	DATE
<u>Canadian Engineers.</u>	<u>2009882</u>		<u>15-5-18</u>

Joined on enlistment \_\_\_\_\_  
 Transferred to..... { \_\_\_\_\_

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>ST. JOHNS, P. Q.</u>	<u>MAY 27 1918</u>	<u>varicose veins</u> <u>overweight</u>	<u>President Medical Board,</u> <u>St. Johns, P. Q.</u>

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 Archives  
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Signature of Man

Surname *Buckland* Christian Name *Gilbert V.*

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
<i>St Johns Reg</i>		<i>21</i>	<i>9</i>	<i>18</i>	<i>29</i>	<i>9</i>	<i>18</i>	<i>Influenza Double Pneumonia following</i>	<i>9</i>	<i>DIED 9.55 AM. 29-9-18. <del>No files</del></i>	<i>Geor. A. [illegible]</i> <b>U. S. MILITARY HOSPITAL</b>

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*[Vertical text in right margin]*

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

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

Canadian Engineers.

500M.—9-16

H. Q. 1772-30-9 '0.

# Casualty Form—Active Service.

ENGINEER TRAINING DEPOT

Unit, Regiment or Corps. ....

Regimental No. 2009892 Rank APR Name Buckland Robert Victor

Enlisted (a) 14-5-18 Terms of Service (a) C.E.F. Service reckons from (a) 14-5-18

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) Loco. Engineer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B 213, Army Form A. 36, or other official documents
Date	From whom received				
		<u>promoted to 2/cpl</u>	<u>St John</u>	<u>15-6-18</u>	<u>D.O. E.T.D. #169</u>

gm x  
19-2-21  
ac



(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Casualty Form Active Service

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				

B 643

### 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.	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 (in the event of such having been prepared.)
Med. Hist. Sheet, Militia Form B. 313	
Medical Report for Invalid* " B. 227.	
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	

\*Only if discharged "Medically unfit."



*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.*

NOT APPLICABLE

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.	2009882
Rank	Sapper
Name	Buckland, Gilbert Victor
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	Canadian Engineers
Date of Discharge	Sept. 29th. 1918.
Place of Discharge	ST. JOHNS, P. Q.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... 24 ..... years..... 9 ..... months.	Descriptive Marks  NIL. 
Height..... 5 ..... feet..... 6 ..... inches.	
Complexion Fair	
Eyes Blue	
Hair Fair	
Trade Loc. Engineer	
Intended place of residence } 1173 Deserable St. (To be given as fully as practicable.) } Montreal, P. Q.	
2. The above-named man is discharged in consequence of DEATH.	
	
<small>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.</small>	
<small>To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.</small>	3. Conduct and character while in the service have been, according to the records, etc.  GOOD.
	<small>N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:</small>
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)  Loc. Engineer.

M. F. B. 218.

100m.—6-16.  
H. Q. 1772-39-113

(OVER)

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

NIL.

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

6. Medals and Decorations.....

NIL.

To be copied by the Commanding Officer on 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) ST. JOHNS, P. O. *Mmmchills* Lt. Colonel C. E. O. C. Engineer Training Depot

(Date) Sept. 29th, 1918. 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.

(Place) ST. JOHNS, P. O. (Signature of Soldier.)

(Date) Sept. 29th, 1918. (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.

Not Applicable. (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) ST. JOHNS, P. O. (Signature) *Mmmchills* Lt. Colonel C. E. O. C. Engineer Training Depot

(Date) Sept. 29th, 1918.

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.)

NIL.