

847361
I.D. number
No. d'identification

CHAMPAGNE
Surname
Nom de famille

ALBERT
Given names
Prénoms

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu

1612

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DISCHARGE DOCUMENT

R. O. No.

H. Q. No.

Name

Champagne Albert

Regt. No.

84736

Rank

Pte.

Corps

No. 4. Coy, 150th, O. B. C. E. F.

Deceased.

14293



Bx 1/10/2

M. S.

ATTESTATION PAPER.

No. 847361

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

1. What is your surname?	Champagne	12. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit?													
1a. What are your Christian names?	Albert		13. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?												
1b. What is your present address?	221 Plessis St.			14. If so, what was the nature of the disability?											
2. In what Town, Township or Parish, and in what Country were you born?	Montreal				15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?										
3. What is the name of your next-of-kin?	Elevantine Champagne					16. If so, what was the reason?									
4. What is the address of your next-of-kin?	221 Plessis St. Montreal														
4a. What is the relationship of your next-of-kin?	Wife														
5. What is the date of your birth?	1876														
6. What is your Trade or Calling?	Laborer														
7. Are you married?	Yes														
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.	Yes 83rd Regt.														
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, Albert Champagne, 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 February 7th 191 6, A. Champagne (Signature of Recruit)
J.H. Hebert Pte. (Signature of Witness)
No. 20

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Albert Champagne, 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.

A. Champagne (Signature of Recruit)
Date February 7th, 191 6, J.H. Hebert Pte (Signature of Witness)
No. 20

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 7th day of February, 191 6.

P. T. Stern Major (Signature of Justice)

True Copy.
A. Mahoney. For 1/0 Records.

Cancelled
22.5.17
Wm

Description of Champagne Albert on Enlistment.Apparent Age 39 years months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6½ ins.Chest measurement { Girth when fully expanded. 39 ins.
Range of expansion. 3 ins.Complexion BrownEyes Light BlueHair Gray BrownReligious denominations { Church of England
Presbyterian
Methodist
Baptist or Congregationalist
Roman Catholic R.C.
Jewish
Other denominations R.C.
(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).

Tattoo
Name on right fore arm
outside left leg

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 7th February 1916 S.A. Chabot CaptainPlace Montreal 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.

Champagne Albert 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.

H. Barre

(Signature of Officer)

Date 7th February 1916

SEPARATION ALLOWANCE

Name *Mde. Joseph Therrien.*Name of Soldier *Champagne,*Address *221 Plessis
Montreal*Regtl. No. *844361*Rank *Pte*Corps *150 Batt*

Relation to Soldier

To what Corps belonging

wife, child or mother

Children's Guardian

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				

Dis. 15th / 16 Pmt 11th / 16

ACCOUNT CLOSED
DATE *JUN 17 1916* PER *W.*

SEPARATION ALLOWANCE

Name Mde Joseph Thervien

Name of Soldier

Champagne, A

Address

221 Plessis
Montreal
QueRegtl. No. 847361

Rank

Rte

Corps

150 Batt

Relation to Soldier

To what Corps belonging

wife, child or mother

Children Guardian

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				

ACCOUNT CLOSED
DATE JUN 17 1916 PER W.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Mde Joseph Therrien

PAYMENTS.

847361

Name of Soldier

*Champagne, A**Rte*

L. L. Job 95618—M. & D. 6555.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	<i>P1456</i>	<i>40</i>	<i>40</i>
May		<i>U2972</i>	<i>20</i>	<i>20</i>
June			<i>X</i>	<i>Re</i>
July				<i>Dis. 15th April 11th</i>
Aug.				<i>Recall 30⁰⁰ unpaid up 16/8/16</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

ACCOUNT CLOSED

DATE.....1916 PER *W*
JUN 17

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier

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.				

847361

MEDICAL HISTORY SHEET.

Surname Champagne Christian Name AlbertExamined { on 7th day of February 1916
at Montreal

Approved by

J. Chabot CaptainBirthplace { City or Town Montreal
County Que.

Rank _____ M.O. _____

Apparent age 40 Yrs.Trade or occupation LaborerHeight 5 Feet 6 $\frac{1}{2}$ Inches.Weight 155 Lbs.Chest measurement { Minimum 36 inches.
Maximum expansion 39 inches.Physical development GoodSmall-Pox Marks NilVaccination Marks { Arm Right Left.
Number 3When Vaccinated last 1 yr ago(a) Marks indicating congenital peculiarities or
previous disease RecentGonorrhea & Syphilis

(b) Slight defects but not sufficient to cause rejection

reper Sensae BodyEnlisted on 7th day of February 1916 at Montreal

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment				
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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.

Champagne

Christian Name

Edbert

[illegible]

150 CARABINIERS MONT ROYAL OVERSEAS BATTALION C.E.F.

MEDICAL HISTORY SHEET

Surname Champagne Christian Name Albert

Examined	{ on day of Jan. 1916	Approved by	
	{ at Montreal		
Birthplace	{ City or Town Montreal	Rank	M.O.
	{ County Que		
Apparent age	41	Date	Fit or Unfit EXAMINED FOR RE-ENGAGEMENT
Trade or occupation	Journalier		M.O.
Height	5 feet 6 Inches		M.O.
Weight	180 lbs.		M.O.
Chest measurement	{ Minimum 37 inches		M.O.
	{ Maximum expansion 39 inches		M.O.
Physical development	Good		M.O.
Small-pox Marks	None		M.O.
Vaccination Marks	{ Arm Right Left	Date	Result VACCINATIONS
	{ Number 3		
When Vaccinated last	Child		M.O.
(a) Marks indicating congenital peculiarities or previous disease	None, except Scar on palmar surface of Rt. Forearm		M.O.
			M.O.
(b) Slight defects but not sufficient to cause rejection		Date	Result ANTI-TYPHOID INOCULATIONS, ETC.
			M.O.
			M.O.
			M.O.

Enlisted on day of 191 at

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT

Albert

Signature of
Medical Officer

MEDICAL HISTORY SHEET

Surname Champagne Christian Name Albert

Examined	on <u>5th</u> day of <u>Feby</u> 191 <u>7</u>	Approved by	
	at <u>Bordeaux</u>		
Birthplace	City or Town <u>Montreal</u>	Rank	M.O.
	County <u>Duc</u>		
Apparent age	<u>42</u>	Date	Fit or Unfit
Trade or occupation	<u>Laborer</u>		EXAMINED FOR RE-ENGAGEMENT
Height	<u>5</u> feet <u>8</u> Inches		M.O.
Weight	<u>160</u> lbs.		M.O.
Chest measurement	Minimum <u>33</u> inches		M.O.
	Maximum expansion <u>37</u> inches		M.O.
Physical development	<u>good</u>		M.O.
Small-pox Marks			M.O.
Vaccination Marks	Arm <u>Right</u> <u>Left</u> <input checked="" type="checkbox"/>	Date	Result
	Number <u>3</u>		VACCINATIONS
When Vaccinated last	<u>boy</u>		M.O.
(a) Marks indicating congenital peculiarities or previous disease			M.O.
			M.O.
(b) Slight defects but not sufficient to cause rejection		Date	Result
			ANTI-TYPHOID INOCULATIONS, ETC.
			M.O.
			M.O.
			M.O.

Enlisted on _____ day of _____ 1917 at _____

	CORPS	REG'T L NUMBER	HABITS	DATE
Joined on enlistment	<u>150th I.S.B.M.L</u>			
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Montreal</u>	<u>7-2-17</u>	<u>superior vision</u> <u>low myopia</u> <u>anxiety</u> <u>on church cap</u> <u>Per</u>	<u>Discharge</u> <u>on church cap</u> <u>to home</u>

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

Sub_name

[illegible]

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

Casualty Form—Active Service.

150th Bn

Unit, Regiment or Corps.

Regimental No. 847361

Rank.

Pte

Name.

Champagne Albert

C. E. F.

Enlisted (a) 7-2-16

Terms of Service (a)

Service reckons from (a)

7-2-16

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

Date

From whom
receivedRecord of promotions, reductions, transfers,
casualties, etc., during active service, as re-
ported 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

1-5-16

150th BnSOS on conviction by
civil authorities for
DesertionAmherst
N.S.

15-4-16

Pt 11 65

not by
150th BnTaken on strength
SOS med Unfit

Montreal

21/2/16

" " 21

10-2-17

"

13-2-17

" " 41

31-8-22

"

Pt 11 41 of 10-2-17 Discharge
cancelled! - SOS
DeceasedIssued by
DOFR

22-2-17

After order 7




Stokes
for DOFR.

(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.

Last Ray Certificate
sent to A. P. G.

29-7-16

S. B.

This man was to be discharged as Medically unfit
on February 13th 1917, was given leave and died at his
home on February 22nd. Proceedings on discharge were
inadvertently not signed by the man. 

*carded
23 5/17 EPB.*

LEAST JUDICIAL

MADE IN U.S.A.

649-C-12218.

Champagne A. Pte. #847361-C.E.F. *#4 Coy. 150th. Bn.*

Medals

& Dec. (widow) Mrs. Elevantine Champagne,
221 Plessis St.,
Montreal, P.Q.

P.&.S. (Nil)

Dir # 816738
Mem. C. (Nil)

N.B. Died after discharge.

Death not due to Military Service.

47512

not elig. for star.
" " V.M.
" " B.W.M.
Mf.

B.
1

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No. 847361 RANK *Pte*NAME *Champagne A.*T.O.S. 7-2-16 UNIT 150th *Battalion*
D.O. 52, 7-2-16.M. D. *6.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>Oct. 7</i>	<i>1916</i> <i>Oct. 29</i> <i>mat.</i> <i>april.</i>	<i>✓</i> <i>✓</i> <i>✓</i>	<i>aw. 72 has det.</i> <i>72 has cues</i>	<i>D.O. 74, 28-2-16.</i> <i>mat. Paylist.</i>
<i>may. no dates</i>		<i>n.</i>	<i>Dec 15-4-16.</i>	



MARRIED *yes.*

SINGLE

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

P.C.

DESCRIPTION.

APPARENT AGE

39 YEARS

— MONTHS

HEIGHT

5' FEET

6 1/2 INCHES

CHEST MEASUREMENT

39 INCHES

EXPANSION

3 INCHES

COMPLEXION

Brown

EYES

Light blue

HAIR

Grey-brown

DISTINGUISHING MARKS

*Tatoo - name on right forearm,
birthmark outside left leg.*

MEDICAL EXAMINATION.

PLACE

Montreal, P.Q.

DATE

Feb. 7th, 1916.

Present Address.

221 Plessis St., Montreal, P.Q.

No. 847360 RANK

Pte

NAME

Champagne A.

T. O. S. 21-12-16

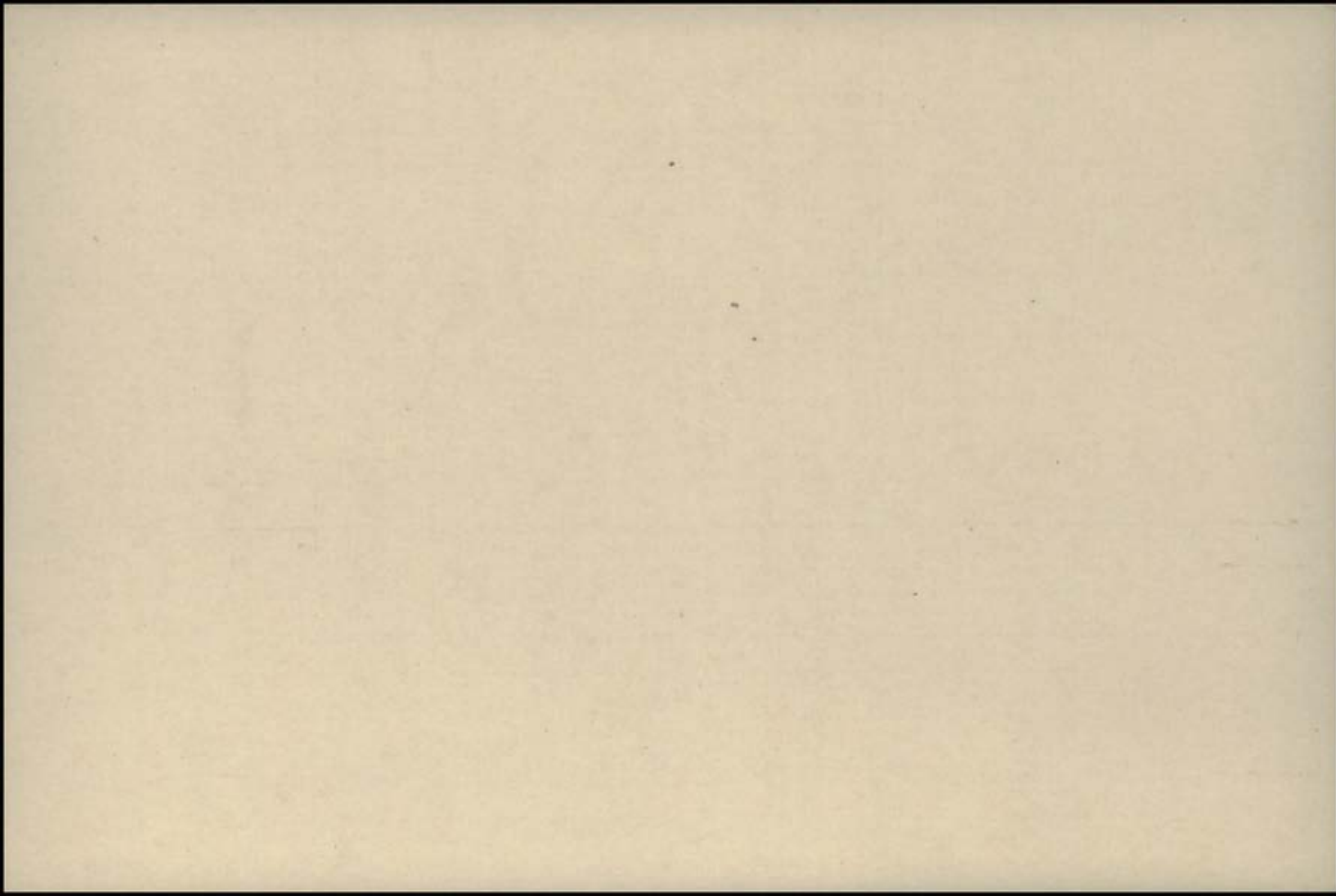
UNIT

No 4th Coy 150th Battalion C.F.

5021 29-12-16

M. D. 4.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Dec 31 1917 Jan 1917	1916 Dec 31	✓ N	a rvl. 35 days pay forfeited Dischgt M. 4.	50 17 27-1-17. 50 41 10-2-17.
etc not closed ✓				



R.O. 27-7-16.

List of Discharge Documents.

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

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

This space to be for numbers.

150th Overseas Battalion C.E.F.

Proceedings on Discharge.

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

No.	847361
Rank	Private
Name	Champagne Albert.
Note—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	150th Overseas Bn. C.E.F.
Date of Discharge	April 15th, 1916.
Place of Discharge	Montreal.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....40.....years.....months.	Descriptive Marks
Height.....5.....feet.....6 1/2.....inches.	
Complexion Brown	
Eyes Light Blue	
Hair Grey Brown	
Trade Laborer	
Intended place of residence	Returned to Unit 21.12.16 Jys.
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of	
On Conviction by Civil Authorities.	
(Desertion)	
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 sign and 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.
	(Indifferent) J.S.
	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:
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	Nil

M. F. B. 218.
25m.—11-15.
H. Q. 1772-39-113.

(OVER)

Carded
28-11-16
J.S.

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 the 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)....Amherst.....

P. J. Stern Major
O. C. 150th Overseas Battalion C. E. F.
Commanding

(Date)....April 14th, 1916.....

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

(Date).....(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).....⁶⁸years.....days.

Total.....years⁶⁸.....days.

11. Confirmation of Discharge.

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

(Place)....Amherst.....

P. J. Stern Major
(Signature) O. C. 150th Overseas Battalion C. E. F.
.....

(Date)....April 14th, 1916.....

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.)

List of Discharge Documents.

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

*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.

This space to be for numbers.

Proceedings on Discharge.

MILITARY DISTRICT No. 4
MAR 12 1917
M.D. 41650

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

No.	A 47361	
Rank	Private	
Name	Champagne Albert	
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>		
Corps (Squadron, Battery or Company)	No. 4 Co. 150th Bn. C.E.F.	
Date of Discharge	Feb. 22, 1917	
Place of Discharge	Montreal	
1. DESCRIPTION AT THE TIME OF DISCHARGE.		
Age.....	39 years.....	months.....
Height.....	5 feet.....	6 1/2 inches.....
Complexion	Brown	
Eyes	Light Blue	
Hair	Grey Brown	
Trade	Laborer	
Intended place of residence	221 Plessis, Montreal	
<small>(To be given as fully as practicable.)</small>		
2. The above-named man is discharged in consequence of <u>District Order #80</u> <u>Para. 332 (2) (c) K. R. & O. 1910</u> <u>Deceased. 22.2.17</u>		
<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.)		

M. F. B. 218.

100m.—6-16.
H. Q. 1772-39-113.

(OVER)

Carded 22.5.17

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

None

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

6. Medals and Decorations.....

None

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) *Montreal, Q.*

1st Lt. Marion Carl

(Date) *Feb. 10/17*

Commanding *2nd Coy 15th Bn*

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) *Montreal, Q.* (Signature of Soldier.)

(Date) *Feb. 10/17* (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) *Montreal, Q.*

(Signature) *L. A. Macdonald*

(Date) *Feb. 10/17*

*Capt. W. A. Macdonald
140th Bn C.E.F.*

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.)