83
29-8-19

REGIMENTAL DOCUMENTS form 625

NAME Chaput Joseph Donat REGT. NO. Lieut UNIT C a M R.A. 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)	M	France. 4th Stat Hosp. Sgt		15648	DEATH
1	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)		B.P.C.	30/3/20		
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					d. 19 Mar 20
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category med unfit
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 333 or A.F.A. 2)					DESERTION
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
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	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	Doc - S. F - 10					
1	Pay Card					
1	A.F.B. 122					
1	179 - 2					
1	P. 122 2					
1	PHO 6091.					

H H

40356

W. 2589
100M 11-18
1772-3M-1327

1

card 2 # 4/16 6

beard mgs.

35

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? — Chaput Donat
2. In what Town, Township or Parish, and in what Country were you born? — St Ambroise de Kildare P.Q.
3. What is the name of your next-of-kin? — Father Hormidas Chaput
4. What is the address of your next-of-kin? — Howell Saskatchewan
5. What is the date of your birth? — Sept 26. 1890
6. What is your Trade or Calling? — Medical Student 4th year
7. Are you married? — No
8. Are you willing to be vaccinated or re-vaccinated? — Yes
9. Do you now belong to the Active Militia? — Yes Laval C.O.T.C.
10. Have you ever served in any Military Force? — Yes
    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

Donat Chaput (Signature of Man).

Albert J. Giroux (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Donat Chaput, do solemnly declare that the above answers made by me to the above questions 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.

Donat Chaput (Signature of Recruit)

Date March 13 1915 Albert J. Giroux (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Donat Chaput, 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.

Donat Chaput (Signature of Recruit)

Date March 13 1915 Albert J. Giroux (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 16th day of March 1915.

C. Pelletier Major (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

(Approving Officer)

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-30-841

Description of Chaput Donat on Enlistment.

Apparent Age 24 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 3 3/4 ins.

Chest measurement: Girth when fully expanded 34 ins.
Range of expansion 5 1/4 ins.

Complexion Fair

Eyes Blue

Hair Chatain

Religious denominations:
- Church of England
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic R.C.
- Jewish

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).

1 Birth mark left scapula
1 vaccination left arm

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 March 16 1915 — E. Peltier Major

Place Montreal — O.C. No XX F.A.

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.

Chaput Donat 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.

for O.C. E. Peltier (Signature of Officer)

APR 9 1915 No. 4 STATIONARY HOSPITAL FRENCH CANADIAN

Date 191 .

M.F.B. 465
2WOM 1-17
1772-39 950

DENTAL HISTORY SHEET

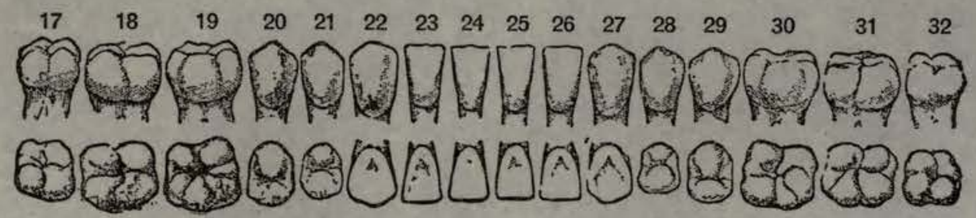
CANADIAN ARMY DENTAL CORPS

DISTRICT 4

NAME OF SOLDIER Chaput, Joseph Donat.

REGIMENT A. M. C. TRAINING DEPOT RANK Lieut.

No.



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show :

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination																						

Canadian Discharge Depot.
Empire Hotel, Burton.
11 MAY 1917
.....1917.

No. 625.

I hereby certify that the marginally noted man was examined by me on the above date, and was not suffering from any skin, contagious, infectious or venereal diseases, and that he is fit to travel.

Name Sgt. Chaplet L.D.

E. M. Kelley
Lieut. C. A. M. C.
Canadian Discharge Depot.

Number Rank Name

625. Sgt. Chapel W.

Westenhanger, Kent.

Apl 20/1917.

The marginally noted has this day been examined and found free from Vermin, Venereal, and Skin Diseases, and I consider him in a fit state to travel.

W. M. Robb. Capt.

R.O., C.I.M.C. Training School.

No. 35 RANK Pte. NAME Chaput Donat

T. O. S. 16.3.15, Apr. pay list UNIT No 4 Stationary Hospital A. M. C.
(French Canadian)

M. D. 4

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Mar 16	Mar 31	✓		
Apr.		✓		
May.		✓.		

UNIT SAILED
MAY 6 1915

MARRIED yes SINGLE WIDOWER

TRADE OR CALLING Med. Student. RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 24 YEARS 7 MONTHS

HEIGHT 5' FEET 3 3/4 INCHES

CHEST MEASUREMENT 34 INCHES EXPANSION 5 1/4 INCHES

COMPLEXION Fair EYES Blue HAIR Auburn

DISTINGUISHING MARKS 1 Birth mark left scapular
1 vacc. left arm.

MEDICAL EXAMINATION. PLACE Montreal, P. Q. DATE Mar. 16th 1918

SURNAME. Chaput.

CHRISTIAN NAMES Donat.

REGL. No. 625 RANK Cpl.

UNIT No. 4 Stat. Hosp.

FORMER CORPS Laval C. O. T. C.

CARD NO.

S.O.S. Dis. 29-5-17-5-

NEXT OF KIN.

NAMES IN FULL Chaput, Hormidas.

RELATIONSHIP TO SOLDIER Father

ADDRESS Howell, Sask.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, St Ambroise de Kildare P.Q. DATE Sept. 26th 1890

PLACE OF ATTESTATION Montreal, P. Q. DATE Mar. 16th 1915

O/S 6-5-15-70/2

R/e. 21-5-17.

Hall

CHAPUT, Joseph Donat, Lieut. C.A.M.C.

E lig for 14-15 Star. Lieut # 4 Stat Hosp.

MEDALS & ~~DECORATIONS~~	Madame Flore Chaput (Widow) 282 Fabre St., Montreal, P.Q.
Decorations, Orders PLAQUE & SCROLL	Widow, as above.
(Ser. # 985147.) MEMORIAL	Widow, as above.
CROSS	Mother, predeceased.

179

Desp AUG 26 1920 (M) C, 9890

Scroll Desp. 21/10/23 Reqn. No 569002

Plague Desp. DEC 21 1923 Reqn. No 50117

Scroll retd. 9-6-23.

H. Q. Clearing Services

M. D. No. H X5 29-11-18 20125 3 1/16

T. O. S. June 22nd 1918

D. O. Pt. II 183 of 2/7/18

S. O. S. 31-7-1919

Reason Demob m-u

Auth. RO 2130 18/8/19 D.O. 23/18/8/19 #4020

Surname Chapput

Christian names Joseph Donat.

Regtl. No. Rank Lieut.

Unit C. A. M. C. (T.D.)

(Per. Conducting Staff.)

Next of kin Chapput Mrs. Flore. Relationship Wife.

Address 463 Garnier St.

Montreal,

P. Q.

Also notify: Onc 19.5.20 4

auth SCR 41-3151 22.8.20

P.Q.

BORN—Place Canada St Ambroise Date Sept 26th 1890

ATTESTED—Place Montreal, P. Q. Date June 22nd 1918.

O/S 13/9/18 1447/1

R/C 28-10-18 226/1

W. 22—75M-5-18. 1772-39 839

Number. 625 Rank. Sgt.

Surname. CHAPUT.

Christian Names. Donat.

Unit. C.A.M.C. Theatre of War. France

Date of Service. 19/11/15

Remarks.

Latest Address. Montreal, P.Q.

Roll No. B. Page 2209 No. 4 Stat. Hosp.

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

M. F. W. 54. (A. F. B. 103)
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps A. M. C. Training Depot #4.

Regimental No. ------ Rank Lieut. Name Chaput, Joseph Donat.

Enlisted (a) 22 Jun 18 Montreal, Terms of Service (a) C. E. F. C. E. F. Service reckons from (a) 22-6-18.

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) Physician.

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				
		Transferred to S.D.#4 Authy S.O. 292-8-85 4/2-7-18. Attd. 5-1-78 4/5-7-18.			
		S.D.L., C.A.M.C., T.D., M.D. No. 6, on Transfer to Clearing Service Command. Authy: R.O. 1384 d/31-12-18	Halifax N.S.	31/12/18	C. Lindsay Capt & Major, O.C. A. M. C. Training Depot No. 4. Lt. Col. C.A.M.C. O.C. A. M. C. Training Depot No. 6
AMCTD MD4		Attached to Clearing Services Command	Quebec	9-7-18	D.O. 35. Lieut. Officer in Charge Records Clearing Services Command

(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

29.7.19
M.D.4

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				
5.8.19	Quebec.	S.O.S. on Return to M.D.4	C.S.C. Quebec.	29.7.19	D.O 217 of 5.8.19.
19/8/19 19-8-19	Overseas	T.O.S. D.D. No.4. S.O.S. "med. unfit"	Montreal do	29/7/19 31-7-19	Auth. D.O. 231-2 Auth. D.O. 231-4

Officer i/c Records
Clearing Services Command

J. Des Vrou Ruiniers
Capt. & Adjt.
DISTRICT DEPOT No. 4.

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

2317

Army Form B. 103.

Casualty Form—Active Service.

No. 4 STATIONARY HOSPITAL
FRENCH CANADIAN.

CERTIFIED CORRECT.
A. Pensioner Record Office,
Westminster Bridge Road,
Lambeth, S.W.

Regiment or Corps

Regimental No. 625 Rank Cpl Name Chaput Donald

Enlisted (a) 13/3/15 Terms of Service (a) Period of war Service reckons from (a)

Date of promotion to present rank 21 April 1915 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				
11.4.16	O.C. 4 Can Stat Hosp	Is promoted Corporal from.	St Cloud	21.4.15	161/C.A.M.C./21/8 Pt II Orders No 18 d/30/4/16
28.5.16	A.A.G. Can Lect 3rd Echn	Is promoted Sergeant from DM.S. Corps Ords. 142/1044 d/15/6/16	D°	23.2.16	161/CAMC/21/8. Pt II 25 d/21/6/16
29.3.17	No 8 Can Gen	Arrived Base from unit	Havre	29.3.17	Nom Roll.
15.4.17	C.B.D.	Left C.B.D. for Shorncliffe	England	15.4.17	Nom Roll.
26.2.17	A.A.G. Can Section	Struck off strength on posting to C.A.M.C. Depot Shorncliffe. auth:- W.O. 121/Overseas/1109 (A.M.D.1.) d/24/2/16	"	15.4.17	file K.E. 184/276. Pt II 30 d/25/4/17 D. C. Skinner Capt. Staff Captain for Major D.A.G. Can Section
	C.A.M.C. Depot	S.O.S. on discharge to Canada to resume civil duties.	Westerhanger		Auth. A.G. letter. A.G. 3b1. A.G. 2-E-301 dated. 3-3-17 [illegible]

Over

(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				
	Dis Depot	SoS to resume medical Studies	Quebec.	29.5.17	auth paylists.
					Adjt. Secretary.
					for DOAR

W.W.4-38.
L.B.

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

28-1-22

This is to Certify that (Rank) Lieutenant.

(Name in full) Joseph Donat CHAPUT.

Enlisted in The Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE, on the ~~xxxxxxxxxx~~

day of ~~xxxxxxxxxx~~ 191 AND WAS APPOINTED to COMMISSIONED RANK

in The Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE on the Twenty-Second day

of June 1918.

HE SERVED in CANADA, with the Canadian Army Medical Corps.

and was STRUCK OFF THE STRENGTH on the Thirty-First day

of July 1919 by reason of being Medically Unfit.

Dated at Ottawa, this Twenty-Second day

of June 1920

Previous service with the C.A.M.C. as #625 (Private) in Canada, England and France, from 16-3-15 to 29-5-17.

Capt.

for. Director of Personal Services.

M. F. W. 2618a

10M.—3-20
1772-39-1428

Rank | Name CHAPUT Donat | Reg'l No. ~~614~~ 625

Unit No. 4 Stat. Hosp. | If in perm. Corps, What Unit? | Married or Single Married

Place and Date of Enlistment Montreal 16th March 1915 | Place of Birth St. Ambroise de Kildare P.Q.

Name and Address, Next-of-Kin Hormidas Chaput, Howell, Saskatchewan.

Relationship Father.

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

N/E. R.B. No. 698.
File R.L.
Category D.R. Can.

Discharge, Date and Place | Reason | Character

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 per S.S. Megantic		15.5.15	
31-7-15	D.M.S.	Transfer Can. Conv. H.			
		Monks Halton to No 4. Can Stat H.	—	29-7-15.	Corps Orders 56.
		Confirm Corpl for		1-7-15	Nom Roll of Confirm
6/8/15	#4 Stat Hosp	With unit	Shorncliffe	6/8/15	Muster Roll.
20-11-15	Sub Offr	Embarked for Overseas	Folkestone	19-11-15	Nom Roll.
30.4.16	" "	Is promoted Corporal from	St Cloud.	21.4.15	Pt II 18.
21.6.16	"	Promoted Sergt	do	23.2.16	Pt II 25
31-5-16.	4 Stg. Hop.	On Nom Roll	do	31-5-16	Nom. Roll
25.4.17	8 Gen Hp	S.O.S. on posting to CAMC Dep (Staff) to resume medical studies	do	15.4.17	Pt II 0-30 + Pt II 0-108 of 18.4.17 CAMC Dep

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					
18-5-17	[illegible]	[illegible] leave to be shown on leave to C.O.D. Burton & S.O.S. on return to Canada	W'hgr.	26-4-17	P.I.D. II 138 Laval University	
	Dis Depot	Finally Discharged	Quebec.	29.5.17.	N.R 285 Montreal	

M. F. W. 41
1 0M—7-16
1772-39 889.

(1500)

Name Chaput, D.A. (Sgt).

Regimental No. 625

~~Name and~~ address ~~of next of kin~~ Laval University. Montreal.

Unit No 4 St. Hospital.

Date of enlistment

Place of " S.A. $20.00 fr 16/3/15 to 22/2/16 } $630.00
25.00 fr 23/2/16 to 30/6/17 }

Married (yes or no) Yes.

Date and place discharged 25. 5. 17.

Amount of pay assigned monthly $ 15.00 fr 1/5/15 to 31/1/16 } $518.00
28.00 fr 1/2/16 to 30/4/16
22.00 fr 1/5/16 to 30/6/17

Reason for discharge

To whom payable Mrs Flore M. Chaput, 894 St. Herbert St. Montreal

Character on discharge H2 649. 6 12535

Olympic. 24. 5. 17. Civ. Clothing Issd. No Claim.

Job 5351—M. & D. 6880.

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
	28/4/17							42 54								Eng L.P.C.
24/4/17	29/5/17	36	1.35	48 60	36	15	5 40							96 54		D.D. Que.
									96 54						96 54	
3/1/18 Final payment been made no further action can be taken to recover debit $8.72 P.L.P.										Sup L P.C.				8 72	8 72	

Eng A.P. 30/4/17

Name.....

M. F. W. 41
1 0M — -16
1772-39 889.

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

3073-20-1

Name Chaput, Donat Q
Surname Christian Name

Regimental Number 625 Rank Sgt.

Address (in full) Lavel University, Montreal, P.Q.

Unit C.A.M.C. C.C.A.C.

Original Unit No. Stat. Hosp.

District where paid Ottawa

Date of Discharge 29-5-17

P. D. P. Filing Number 1C22

Rates:—Regimental pay $ 1.35 per diem: Field Allowance $ .15 per diem. Separation Allowance $ 25.00 per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
211 50	4612	2/10/17	70 00	4571	11/11/17	70 00	4994	7/12/17	71 50		211 50

Remarks:

M. F. W. 127.
60M—6 17.
1772 39-1140.

File No. .....

WAR SERVICE GRATUITY.

Register No. .....

Reg. No. .....

Name .....

Address .....

.....

.....

Pay Soldier $ .....

Clerk .....

Dep'n No. ..... W. S. G. File No. .....

Award ..... days at $ ..... per day $ .....

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

Less P. D. P. Credited $

$

$

Less further dr. bal. or overpayment $

Net accounting to W

Dependent .....

Address .....

.....

.....

Pay Dependent $ .....

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

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

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

Net .....

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

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
.....
Date.....

L. L. Job 70481—Req. 5220.

M. F. W. 12.
10m. 11 14.
H. Q. 1772 39-819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs. Flore Moudir-Chaput

Address ~~1575 Manse St.~~
897 St Hubert St. Montreal, Que.

Rate $15.00

By Whom Assigned Chaput, Donat. A

Regtl. No. 6265

Rank Corporal.

Corps # 4 Stationary Hospital
French Canadian.

MAY 1 1915

PAYMENTS

Month	Year	Cheque No.		REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May		7L 1218	15 —	
June		P.2115	15 —	
July		U803	15	
Aug.		S3710	15 —	
Sept.		M72855	15 —	
Oct.		M8237	15 —	
Nov.		Q9340	15	
Dec.		R 11716	15 —	
Jan.	1916	U11291	15	
Feb.		W 10496	25	
March		M 14254	25	

COPIED FOR 3 CAS. S.

Acct Closed

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2. Mrs. Flore Mondor Chaput

PAYMENTS. 625 cpl

Name of Soldier Chaput, Donat

H & Ste Hosp

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
				~~25.00~~ 22.00 Pay 1/16
April	1916	91105	25	
May		03608	25	
June		P7646	25	
July		~~E6497~~	~~15~~	16
Aug.		L10349	16	
		11088	22	22
Sept.		#15598	22	
Oct.		H20057	22	
Nov.		H25592	22	364
Dec.		H31456	22	
Jan.	1917	H36556	22	
Feb.		H42499	22	22 P
March		J49849	22	22 Pay
April		Y804	22	22 6
May		7 7374	22	897-St Hubert-St. Montl. J.O.C. 30/4/17
June		R13805	22	22 8
July			518 00	A/c Closed 30-6-17
Aug.				Ret'd per Troopship 2810
Sept.				Date 12-5-17 F. X
Oct.				Clerk J.P.L. 22-6-17
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				

38391 THE MORTIMER SYSTEMS,
OTTAWA, CANADA

16 - 3 - 15

~~1 - 5 - 15~~

18

45

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name Mrs Flore, M Chaput,

Address ~~1575 Mance St.~~ Montreal, Que

899 St Hubert

Relation to Soldier wife, child or mother } Wife

Name of Soldier Chaput, Donat,

Regtl. No. 625

Rank ~~pte~~ ~~Cpl.~~ Sgt 23-2-16 Sgt 17-12-16

Corps # 4 ~~General Stat. Hospl~~

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		H5556	20	20
June		H6774	20	20
July		H8394	20	20
Aug.		J7934	20	20
Sept.		[illegible]8808	50	50
Oct.		M7496	20	20
Nov.		E21056	20	20
Dec.		J18039	20	20
Jan.	1916	M17260	20	20
Feb.		E28120	20	20
March		J30980	20	20

COPIED FOR 5 CASUALTIES.

ACCOUNT CLOSED
DATE ..... PER ..... W

Romeo
(555)

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
60m.—12-15.
1772—39—818.

Sheet No. 2 Flore. M. Chapeut Wife

Name of Soldier Chapeut Donat Cpl.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	0691	20	20
May		R 5293	20	20
June		R 6796	20	20
July		~~R 10656~~	~~20~~	~~20~~ R. 10656 Cancelled per address 8-8-16
Aug.		~~R 12791~~	~~20~~	~~20~~ R 12791 " " " " "
Sept.		R 13688	40	mailed 25-8-16.
Oct.		F 15473	20	20
Nov.		V 18418	20	20
Dec.		X 21658	20	20
Jan.	1917	X 24691	20	50 R 20 mailed 28-12-16
Feb.		m. 26162	50	— 25. W 28261 cancelled Rewrite 25
March		~~W 28261~~	~~20~~	
April		m. 28331	25	— mailed 4-1-17
May		W 31149	25	25
June		W 34023	25	25
July		~~X 378~~	25	25
Aug.		X 3627	25	— 25 897 St Hubert - Montreal
Sept.		Y 6956	25	25
Oct.			~~25~~	25
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

$630.00

Acc Closed 30/6/17

Ret'd per Prospective 2810

Date 12/5/17 F. X.

Clark W. P. 22/6/17.

ACCOUNT CLOSED

DATE ..... PER W

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.				

Rank a/Sgt. Name CHAPUT Donat Reg'l No. ~~C14~~ 625

Unit No. 4 Stat. Hosp. If in perm. Corps, What Unit? Married or Single Married

Place and Date of Enlistment Montreal 15th March 1915 Place of Birth St. Ambroise de Kildare P.Q.

Name and Address, Next-of-Kin Hormidas Chaput, Howell, Saskatchewan.

Relationship Father.

Assigned Pay Monthly $ ~~15.00~~ ~~25.00~~ 1 Feby 1916 ~~20.00~~ 22.00 1 21 May 1916 Payable to Mrs J. Chaput 1575 Manor St Montreal

Relationship Wife.

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
May 1	5	5	1.10	5 50	5	.10	50	3 75	9 75			10 -	15 -				Bal Prev. Account Canada
5	31	26	..	28 60	26	..	2 60		31 20			15 95			40 95		15.95.
June 1	30	30	..	33 -	30	..	3 -	15 95	51 95			20 -	15 -		35 -	16 95	Error in carried forward June pay sheets Oct
July 1	31	31	..	34 10	31	..	3 10	16 95	54 15			10 -	15 -		25 -	29 15	Corrected in August
								29 15				55 95					
								1 49									#1.49 diff Exchange May 1 to July 31
Aug 1	Aug 31	31	..	34 10	31	.10	3 10	30 64	67 84			29 20	15 -		44 20	23 64	
Sept 1	Sept 30	30	..	33 -	30	..	3 -	23 64	59 64			24 34	15 -		39 34	20 30	
Oct 1	Oct 31	31	..	34 10	31	..	3 10	20 30	57 50			19 46	15 -	15 95	50 41	7 09	Error in bal forwards for May corrected in Oct.
Nov 1	Nov 30	30	..	33 -	30	..	3 -	7 09	43 09			17 41	15 -		32 41	10 68	
												12 20			12 20	5 48	
Dec 1	Dec 31	31	"	34 10	31	"	3 10	10 68	47 88			26 16	15		41 16	~~6 72~~	
1916															5 48		
1/1	31/1	31	1-10	34 10	31	10	3 10		37 20			8 72	15			29 20	
1/2	29	29		31 90	29		2 90	8	42 80			8 72	05		33 72	9 08	
1/3	31/3	31	1-10	34 10	31	10	3 10	9 08	46 28			8 72	25		33 72	12 56	
				369 60			33 60	524 40	844			210 98	185		395 88	12 56	Carried forward to Large Ledger sheet

Checked 43 7/12/17

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

M. F. W. 41
100M-1-18.
1772-39-883.

Name Lieut Chapeut J. D.

649-C-12535

Regimental No.

Name and address of next-of-kin

Unit Amc. (md. #6)

Date of enlistment

Place of "

Married (yes or no)

Date and place discharged C.C.O.

Amount of pay assigned monthly $

Reason for discharge

To whom payable

Character on discharge

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
Recovered on Nov. paylist 1918 Amc.								73 00	73 00					73 00	73 00	Adv. Eud. on L.P.
Letter dated 7-1-19-								48 67	48 67					48 67	48 67	Adv in Engld
Recovered on March Paylist Closing Service Command letter 14 3/19																

Name.....

M. F. W. 41
100M-1-18.
1772-39-889.

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

Envy on D

Register No. D 61545

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 3066 J. 20

Regt'l No. — Name Jos Donat Chapuis (Christian Name) (Surname)

Unit C A M C Rank Lieut Date of enlistment

Date of casualty 19-3-1920 B.P.C. File No. 160562

Was service performed overseas? Yes

DEPENDENT

Name Mrs Donat Chapuis Relationship Widow

Address Apt 17 - 850 Durocher Outremont
Montreal
Que

Amount of Special Pension Bonus $ 120.00 Abstracted by D Maher

Eligible for Gratuity $

Less amount of Special Pension Bonus paid $

Less Debit Balance of S. A. or A.P. $

Total deductions $

Balance due $

Noted DG 18
18/8/20

Cheque No. Date issued

Clerk W Mitchell

REMARKS: Not eligible under PC 1486
Casualty date subs 1/1/19

Audited by

Date

M.F.W. 2652
25M—6-20.
H.Q. 1772—30-1473

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname Christian Name

Regimental Number Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

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

L.L. 53961—M. & D. 9731

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127
300M-1-19
1712-39-1140

Remarks:

A. M. C. TRAINING DEPOT NO 4

MEDICAL HISTORY SHEET

Surname Chaput Christian Name Joseph Donat.

Examined on 22 day of June 1918 at Montreal

Birthplace City or Town St. Ambroise County Joliette Co. Que.

Apparent age 28 years.

Trade or occupation Physician

Height 5 feet 4 1/2 Inches

Weight 123. lbs.

Chest measurement Minimum 34 inches Maximum expansion 37 inches

Physical development Good.

Small-pox Marks none:

Vaccination Marks Arm Right Left ✓ Number one:

When Vaccinated last Childhood

(a) Marks indicating congential peculiarities or previous disease none:

(b) Slight defects but not sufficient to cause rejection none:

Approved by C. Lumsden Rank Capt. Can. M.O.

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

Date	Result	Vaccinations	
			M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
			M.O.
			M.O.
			M.O.

Enlisted on 22nd day of June 191 8 at Montreal, Que.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	AMC.TD.#4	Lieut.		22-6-18.
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 Servcie, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname ..... Christian Name .....

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				

Married or Single: Married

Place of Birth: Quebec

Name and Address of Next of Kin: N. Chaput, Howell, Sask. Can.

Relationship of Next of Kin: Father

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
Prom Sgt	23/3/16	DO 25 (21-6-16)

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l. No. 625 Rank Pte/Sgt/Cpl Name Chaput Donat

If in Permt. Corps What Unit: Unit 4 Stat Hosp Now 8 Can Hosp

Permanent Force Allowances

Place of Attestation

Date of Attestation

Transferred to: L.P.B. Bch Date 22/4/17 Authority H.12.C.787 AG 3.B.2.C.351 3/3/17

Transferred to: Dept. K Date 24.4.17 Authority ✓

Transferred to: Date: Authority:

Transferred to: Date: Authority:

Assigned Pay Monthly $ 22.00 Date Effective 1/5/16

Payable to Mrs Chaput 1575 Manor St. Montreal Que. Relationship Wife

Assigned Pay Monthly $: Date Effective:

Payable to: Relationship:

Stop-Payment Form (Assigned Pay) Rendered (Date) 23.4.17. Effective 1.5.17. Reason Discharged to Canada to resume Medical Studies

Discharge Date and Place Cancelled 23.4.17 Reason and Authority H.12.C.787. AG 3.B. 2 C.351. 3/3/17.

Account transferred to Non-Effective Branch (Date)

Account transferred to Officers' Pay Branch (Date)

PAY OFFICE BRANCH SEP 11 1916 CANADIAN CONTINGENTS

C.J.

Date 1916	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
Mar 31			36	960			33	60						524	408	44										210	88	185		395	88	12	56			
apr 30	1.9		33		30	.10	3								36		45	15/4						436 ✓				25		29	36	19	20			
May 31			34	10	31		310								37	20	51	30/4	67	31/5	60	15/5		426 ✓	426 ✓	426 ✓		22		34	78	21	62			
June 30	1.35		40	50	30	.15	450							20	70	65	70				74	15/6			596 ✓			22		27	96	59	36			69 days @ 30¢ Pay & Allowance 44 days in Jan 1917
July 31			41	85	31		465									46	50	81	30/7	90	15/7			596 ✓	623 ✓			22		33	19	72	67			
Aug 31			41	85	31		465									46	50	98	31/7	113	15/8			610 ✓	610 ✓			22		34	20	84	99			
Sept 30			40	50	30		450									45	00	129	31/8	142	15/9			872 ✓	871 ✓			22		39	43	90	54			
Oct 31			41	85	31		465									46	50	159	30/9	874	1/10			872 ✓	872 ✓ 282 ✓			22		42	06	94	98			
Nov 1/30			40	50	30		450									45	00	194	31/10					872 ✓				22		30	72	109	26		109 26	
Dec 1/31			41	85	31		465									46	50	227	30-11					1744 ✓				36.4		48	16	107	60			
1917			71	80														241	15-11					872 ✓				22								
Jan 1/31		1.50	46	50										9	00	55	50	249	29 Dec					523 ✓												
																		238	15					872 ✓				22		35	95	127	15			8 B.L. 703 4 Stat June 1916 Undercredit 30 days @ 30¢ in Montreal
																		274	14-1					523 ✓												
Feb 1/28			42													42	00	260	16-1					523 ✓				22		32	46	136	69			
Mar 1/31			46	50												46	50	305	22-2	324	10-3			523 ✓	78 47 ✓											
																		288	17-2	313	3-3			524 ✓	523 ✓			22		116	17	67	02			
			932	40										34	94	967	34							107 88	1295 6	210 88		452		900	32	67	02			

S.S. C.C.A.C. sailed on S.S. Corsican 7810 from Liverpool - 12/5/17

S.L. 37. 17/5/17. Cr. $52.25

Small Ledger Sheet.

625 Sgt. Chaput D. 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
Mch			932	40										34 94	967 34
April 1-23	23	150	34	50											34 50
														3 00.	
														15 95	15 95
June															

DATE	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
Mch									107 88	129 56	210 88		452		900 32	67 02				Commenced 2 days from 22/4
April 1-23													22	3 00	22 00 / 3 00	76 52				
					2.4.17 Hawkes						8 72									
					10. 18.4.17 Washington						24 33				33 05	46 47				
														H2	H2	62				
June	1102	7/5.17	Buxton						973						973	5227				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	CR. 1	CR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SEP. ALLCE. ENG.
Oct/17	Bal fo								5227		
				Drawl Orb 30/4/17 c/o Roulle	872				43 55		
					872						
June				Dr Bal Obsw	43 55				0		
					43 55						

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE

Remarks:

Commenced 2 days from 22/4
Ex 23/4 @ 150 per da
Trans to L.P.C. Bch effec
24/4/17 Auth H2 C787
Ch 3 B 20 C 351 3/3/17
$15.95. Shows not have been credited on Acct of Oct 1915
Pay Warrant Cheques as paid from May & June
& Not Cash Payments as shown
on May Postings
H2 & overpaid Acct of Exc

A3M. FORM REN. 24/4/17 EFFEC. 25/4/17
DISCHARGED TO Canada DATE 23/6/17
PAYBOOK VERIFIED 5 Cash from AS PB
Cpl BAL. $62.00 L.P.C. REN. 23/6/17
AUTHY Cash by cs to Canada
SEP. ALLCE. ENG.
Supply LPC 13/6/17 $13.28

Checked

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. | RANK Lieut | NAME (IN FULL) CHAPUT Jos. D (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes | DATE EFFECTIVE 1-8-19

TO WHOM PAID Mrs J. Chaput | RELATIONSHIP wife

ADDRESS ~~262 Jarvis St.~~ ~~Montreal~~ ~~P.Q.~~ James wsly.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Tos on ceasing to be a Patient & Clearing Sick Command Posted to Cadre	29-7-19	Ro 2130 Do 231/2 Do 238/4
Miles Allowance		

ORIGINAL UNIT C.E.F. CAMC | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 1st March 16/1915 | TRANSFERRED TO 2nd May 29/17 | DATE 25th June/1918 to 31-7-19 (reference state ent) | AUTHORITY

ASSIGNED PAY $ 60.00 | DATE 1-8-19

PAYABLE TO ~~Mrs J. Chaput~~ | RELATIONSHIP

ADDRESS

ANY CHANGE IN ASSIGNEE OR ADDRESS Boy No. 36 St. Agathe des Monts Co. Terrebonne Que.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE SOS | DATE 31-7-19 | REASON Med Unfit | AUTHORITY Ro 2130 Do 231/4 | IF ENTITLED TO POST DISCHARGE PAY

MONTH 1919	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			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.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT									Nil																				Nil								Bal L&A Nil to 31-7-19. OA off 1/8/19 SA off 1/8/19
Aug 1		4.00	Other Credits		W. S. C.		S. A.		Total		War Service Gratuity														Other Charges		W. S. G.		S. A.		Total		Balance				
					732	00	240	00	972	00																							732	00	240	00	1+2
12/9/19																											244	00	80	00	324	00	488	00	160	00	1530162 1530163
31.9.19																											124	00	40		164	00	364	00	120	00	1629779 1629780
31.10.19																											120		40		160		244		80		1616708 709
30.11.19																											124		40		164		120		40		1793613 614
31.12.19																											120		40		160		✓		✓		1799797 798
																															972						

200M-3-19.—L. & S. 58786-I.I. & D. 9985.
M. F. W. 2596.
1772-39-1390.

AUDITOR	PAYMASTER

M. OR S.

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

REGT. No. RANK Lieut NAME (IN FULL) Chaput J.D.

NEXT OF KIN RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes. DATE EFFECTIVE

TO WHOM PAID Mrs Flore Chaput RELATIONSHIP

ADDRESS 463 Garnier St. Montreal P.Q.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. IF IN P.F. WHAT UNIT? (BLOCK LETTERS SURNAME FIRST) T.D.O. Montreal

PLACE OF ATTESTATION TRANSFERRED TO Clearing Services Command. DATE 4-12-18 AUTHORITY Ro 1384

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 60.00 DATE EFFECTIVE

PAYABLE TO Mrs Flore Chaput RELATIONSHIP

ADDRESS 463 Garnier St. Montreal P.Q.

ANY CHANGE IN ASSIGNEE OR ADDRESS

A/CHIEF CONDUCTING PAYMASTER, CLEARING SERVICES COMMAND

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE EFFECTIVE

DISCHARGED PLACE Transferred to MDH. DATE 29.7.19 REASON AUTHORITY DO. 218 IF ENTITLED TO POST DISCHARGE PAY

MONTH 1919	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	S.A. $	C.	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.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
April	30	3.00	90	00	48	67	40	00	178	67	29	29 4/29			22	22 4/29	78	67					100	00							178	67					Credit 48.67 charged in March Pay list the amount was previously received by the Paymaster on letter of 11.5.19 Refund of pay for 1st half of May
May	31	3.00	93	00			40	00	133	00	1691	30 5/29			1154	20 5/29	33	00					100	00							133	00					
June	30	4.50	135	00	91	50	40	00	266	50	1966	4 6/29	234	20 5/29	2414	21 5/29	91	50	75	00			100	00							266	50					15th Refund of 50 cents per diem
July	31	4.00	124	00			40	00	164	00	3167	29 7/29			3390	21 7/29	49	00					100	00			15	00			164	00					
			442		140	17	160		742	17							252	17	75				400				15				742	17					

L.F.C. Paterson

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

FORM P. 15. H.W.V.Ld.—3717-18.
12519—16M—1-3-18

ASSIGNED PAY.	UNIT. NAME OF	RATE OF P. AND A.	RANK.	DATE	AUTHORITY	NAME.
Beneficiary	D.C.O.	Pay	Lieut.			Name Chaput
Address	Term. Cond. Staff	F.A.				Initials J. D.
		Messing				Bank
Amount. $						
Separation Allowance issued. Yes or No.....						

DATE 1918	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
Aug 14	Adv £15- Direct	6451.		73		73	Voucher to Can. 21/8/18	
Sept 24	Adv. £10 Direct	9192		48 67		$ 121 67	Dr. to N.E. Ledger	12
	Permanent Conducting Staff. no more advances in England						Payments endorsed on L.P.C.	
Sept 30	St. Bal. chgd. to Can. Vo. 422		121 67		Auth: M. Graham	0	$121.67	
	£24/30 recovered by Ottawa Dec file 79-17						Fr 11 Sept 1918.	
	£48 67 " "	"	"	"				

FORM P. 15.
12519—16M—1-3-18 H.W.V.Ld.—3717-18.

ASSIGNED PAY.	UNIT. NAME OF	RATE OF P. AND A.	RANK.	DATE	AUTHORITY	NAME.
Beneficiary		Pay				Name
Address		F.A.				Initials
		Messing				Bank
Amount. $						
Separation Allowance issued. Yes or No.....						

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS

30.

M. F. W. 84.
3M.—9-16.
1772 [illegible]—993.
L. L. Job 82[illegible] [illegible] & D. 7106.

Lt J. D. Chaput. Canada

Date of Dis-embarkation
A/CHIEF CONDUCTING PAYMASTER
CLEARI[illegible]
Place Chq #

PERIOD 1919 From	To	PAY Chq # Days	Rate	Amount	FIELD Remarks Days	Amount	CREDIT LAST ACCOUNT	SUB-SISTENCE	TOTAL CREDITS	ASSIGNED PAY	OTHER CHARGES	Casual Payments	TOTAL DEBITS	Cheque No.	AMOUNT PAID	REMARKS
Apr	23		425		Allow on a/c	Draw Ex			75 00	Cheque by CPC 4372. 23/8/19					75 00	425
"	26		512						51 30	Draw Ex	9/7/18 to 25/7/18				51 30	512
May	6		845						83 00		28/3/19 to 15/4/19				83 00	845
"	29		1822						153 00		15/4/19 to 17/5/19				153 00	Dr. Bal. 75 00
June	25		2659						109 50	"	17/5/19 - 10/4/19.				109 50	
July	10		3199		Duplicate				25 75	"	4/7/19 to 25/7/19.				25 75	
Aug	22		4571													
Sep.	5		4713.						126 00	Draw Ex.	10/6 to 4/7				126 00	
									623 55						623 55	

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
17-4-15	Anti Typhoid inoculation
27-4-15	do
9-6-15	do

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

ORIGINAL

26

ARMY FORM B. 178.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Chaput *Christian Name* Donat

TABLE I.—GENERAL TABLE.

Birthplace ... Parish St Ambroise de Kildare County Joliette

Examined ... ... on 13 day of March 1915, at Montreal

Declared Age ... ... 24 years 7 months ~~days~~

Trade or Occupation ... Medical Student

Height ... ... 5 feet 3 3/4 inches.

Weight ... ... 135 lbs.

Chest { Girth when fully Expanded 34 inches.

M... 5 1/4 inches.

...Normal

	Right	Left
		1

June 3rd/1915

V=

V=

(1)

R. Sellen, Capt. C.A.M.C.

Medical Officer.

Enlisted ... ... at Montreal on 13 day of March 1915.

Joined on Enlistment ... | Corps. No. 4 STATIONARY HOSPITAL FRENCH CANADIAN. | Regtl. No. 625 |

Transferred to ... ...

Became non-effective by ...

on ... day of ... 191 .

(*Signature*)

(*Rank*)

Form—R. 130 8528-25M-25/10/16.

IMPORTANT.

DISPOSAL OF ORIGINAL MEDICAL HISTORY SHEETS.

1. Action by Officer i/c Hospital—
   (a) See that all entries are properly and fully made, and signed.
   (b) Forward to Hospital to which man is transferred, immediately it is done. If discharged to Unit—to Officer Commanding such Unit.
2. Action by Officer Commanding Unit—
   (a) On admission of man to Hospital, forward M.H.S. to such Hospital at once.
   (b) On transfer to another Unit—to Officer Commanding such Unit.
   (c) On proceeding Overseas — return to Record Office, London, without delay.

(Authority, Army Council Instruction 831, April, 1916.)

(4887.) W. 9597/1588. 500M. 9/15. C. P., LTD.

Forms B. 178 39

P.T.O.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

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TABLE I.—GENERAL TABLE.

Birthplace ... Parish St Ambroise de Kildare County Joliette

Examined ... ... on 13 day of March 1915, at Montreal

Declared Age ... ... 24 years 7 months ~~days~~

Trade or Occupation ... Medical Student

Height ... ... 5 feet 3 3/4 inches.

Weight ... ... 135 lbs.

Chest Measurement: Girth when fully Expanded 34 inches.; Range of Expansion 5 1/4 inches.

Physical Development ... Normal

Vaccination Marks: Arm ... Right / Left; Number 1

When Vaccinated ... ... June 3rd/1915

Vision ... ... R.E.—V= L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a)

(b) Slight defects but not sufficient to cause rejection ... ... (b)

Approved by (*Signature*) J. Fallen,
(*Rank*) Capt. C.A.M.C.
Medical Officer.

Enlisted ... ... at Montreal on 13 day of March 1915.

Joined on Enlistment ... Corps: No. 4 STATIONARY HOSPITAL FRENCH CANADIAN. Regtl. No. 625

Transferred to ... ...

Became non-effective by ...

on _____ day of _____ 191 .

(*Signature*)
(*Rank*)

OPINION OF THE MEDICAL BOARD

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

Concur.

19. Is the invalid fit for

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

20. It is certified that the invalid
(a) Does require treatment. (Give the nature of the condition and of the treatment required and its probable duration.)

Sanatorium with S.C.R.

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

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

as Medically unfit for service and to undergo treatment with the S.C.R.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

[signature] President.

PLACE Montreal.

DATE July 31st, 1919.

[signature] } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

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

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

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

..... President

PLACE .....

DATE ..... } Members

APPROVED BY [signature] Assistant Director of Medical Services.

DATE 31-7-19

APPROVED BY [signature] Director-General of Medical Services.

DATE .....

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

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

STATION Montreal, P.Q. MD. #4 DATE July 29, 1919.

1. 1 (a) Unit C.A.M.C. (b) Regimental No. ----- (c) Rank Lieut.
(d) Surname CHAPUT (e) Christian name JOSEPH DONAT
(f) Home address 479 Guilford St., Montreal, P.Q.
(g) Next of Kin Mrs. Flora Chaput (h) Relationship Wife
(i) Address of Next of Kin Same as above.

2. Age last birthday 28 Date of birth Sept. 26, 1890.

3. Enlistment, or Appointment (if an Officer) (a) Place Montreal, P.Q. (b) Date March 16/15
Re-enlisted June 25/18

4. Personal description:
(a) Height 5-4½ (b) Weight 120 (stripped) (c) Complexion Sallow
(d) Colour of hair Brown (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Birth mark right shoulder.

5. Former trade or occupation Physician.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days

		Periods From	Periods To
Canada	First enlistment	16-3-15	29-5-17
England	Second enlistment after completion of medical course.	25-6-18	date.
France or other theatres of War	In France during first enlistment.		

7. Original disease, or injury Pulmonary Tbc.

(a) Date of origin June 1918 (b) Place of origin Canada.
(c) Cause Infection

M. F. B. 227.
400M.—11-18.
1773-30-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

Necessity for absolute rest on account of Pulmonary Tuberculosis.

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Pale, sallow young man of 28 years, looking somewhat older at present. Rather poorly nourished, having lost 15 lbs. during last six weeks. Assumes any decubitus with fair amount of ease. Temperature 100°. Pulse 88; respirations 22. Coughs and expectorates a great deal. Perspiring freely at present and has been troubled in this way for last six weeks.
Lungs:- Anteriorly - Expansion fair but lags on right side. Note over right apex is impaired to level of third rib. On auscultation expiration is prolonged and there are numerous moist rales. Posteriorly a similar condition prevails over right apex, viz:- Dulness, prolonged expiration and bursting moist rales on coughing. Elsewhere expiration is slightly prolonged but no rales heard.
Heart and abdomen negative.

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System: No — Cardio-Vascular System: No (If pulse rate is abnormal, B. P. will be taken.) — Genito-Urinary System: No (Albumen and Sugar will be excluded.)

Special Senses: No — Respiratory System: No — Integumentary System: No

Disturbances of Mentality: No — Digestive System: No — Muscular System: No

Osseous and Joint Systems: No — Any other general condition: No

10. (*a*) History (of the condition referred to in Section 9 (*a*).)

Since six weeks has had a rather severe cough with expectoration, has suffered from loss of weight, night sweats and fever. During last ten days temperature in morning has been 99° going to 100 - 101 in afternoon. Has been in bed for last week. On several occasions has had haemoptysis, the last being to-day. This one being rather severe.

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

Nil.

(*c*) (Here give a description of wounds, scars and deformities.

See Sec. 9.

11.—(*a*) Did the disabling condition have its origin before enlistment? No.

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

N.A.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? No

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

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

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

Nil up to present.

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

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

17. Recommendations: That he be admitted to hospital for treatment of his pulmonary condition.

C B Malcolm Capt
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

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

I complain in addition of nothing.

J H P — J D Sharpe 2d A.A.C. Rank.
Signature of invalid examined.

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). Army Form B. 136).
7. Authority for continuance, or extension, of service (if any). Army Form B. 221.)
8. Court of Inquiry on an injury (if any) (Army Form A 2.)
9. Regimental conduct sheet. (Army Form B. 120).
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178)
13. Medical report on invalid (if any). (Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103).
20. Employment sheet. (Army Form B. 2066).

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

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any). (Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery.

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms :—

(a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(b) Character Certificate (Army Form B. 2067) if entitled.
(c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 675 Army Rank Dgr

Name Chapin - Donag
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps C.A.M.C.

Battalion, Battery, Company, Depôt, &c.
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge 29/5/17

Place of discharge Quebec

1. *Description at the time of discharge.*

Age 26 years 8 months
Height 5 feet 5 inches
Chest measurement { girth when fully expanded 34 ins. / range of expansion 2 ins.
Complexion Dark
Eyes Brown
Hair Brown
Trade Medical Student
Intended place of residence (To be given as fully as practicable)

Descriptive marks. Birthmark L. shoulder.

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of Headquarters Shorncliffe Letter H-12-C-787 of 26/4/17

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :— good

4. Character awarded in accordance with King's Regulations :—

Lieut.-Col.
Commanding Canadian Discharge Depot.

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 480 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C. Forms B. 268
A4508 Wt. W17178/M291 500,000 8/16 Sch. 59 40

[OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... ... ... Class _____

6. Campaigns, Medals and Decorations — France 17 mos

Certificate of education .....

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____

(Date) _____

Arthur Leafe Lieut.-Col.
Commanding Canadian Discharge Depôt
Commanding _____ Battn. _____ Regiment.

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

DISCHARGE DEPOT MAY 29 1917 QUEBEC

(Place) _____ W. Clay (Signature of Soldier.)

(Date) _____ E. Tremblay (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 at 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 towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service " " _____ (the date of confirmation of discharge) ... ... _____ " _____ "

Total ... _____ " _____ "

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date) May 29th 1917

DISCHARGE DEPOT MAY 29 1917 QUEBEC

(Place) _____

(Date) _____

Signature E. W. Marriott. Lt.-Col.
Comd'g. Discharge Depot Quebec.

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

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.)

none

W. Clay