LP
29-8-18

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

Attestation Papers..... 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

a 2B 122 — 1
a 2B 128 — 1
Form of Will — 1
R. 149 — 1

1 Can Copy
long Will
1 copy

M. F. W. 62.
50m.—9-18.
H. Q. 1772—99—936.

E 19-3-20 E

DISCHARGE DOCUMENTS

R. O. No.....
H. Q. No.....

16109

Name CHARLAND HECTOR

Regt, No. 417289 Rank Pte.

Corps 57th Battn C.E.F.

Died of Wounds 18-9-16

Index Card.....
Casualty Card..... 1
Non-Effective Card.....
Part II Order Card..... 1
Change of Address Card 1
Gallantry & Award Card.....

DISCHARGE DOCUMENTS
RECORDS OFFICE
CITY MILITARY DISTRICT
REGISTERED

17-6
12-6
9-6
1

417289 50848

ATTESTATION PAPER.

No. 412289

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? Hector Chartland
2. In what Town, Township or Parish, and in what Country were you born? Fortier Ville Co Jotbinier
3. What is the name of your next-of kin? Philip Chandenais oncle
4. What is the address of your next-of-kin? Port cuppin Ont
5. What is the date of your birth? Dec-1-1897
6. What is your Trade or Calling? Laborer
7. Are you married? et incecule no
8. Are you willing to be vaccinated or re-vaccinated? yes
9. Do you now belong to the Active Militia? yes
10. Have you ever served in any Military Force? If so, state particulars of former Service. No 9 - Voltigeur de Quebec 3 months
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

Hector Chartland (Signature of Man.)

J Lefrancois (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Hector Chartland, 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.

Hector Chartland (Signature of Recruit)

Date Oct 9 1915 J Lefrancois (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Hector Chartland 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.

Hector Chartland (Signature of Recruit)

Date Oct 9 1915. J Lefrancois (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 Quebec this Twelfth day of Oct 1915.

Emile Stegare (Signature of Justice)

Capt 9th Rft

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

S. Mewburn (Approving Officer)

Adjt.

M. F. W. 23.
200 M.—7-15.
H. Q. 1772-39-841.

Description of Hector Chartand on Enlistment.

Apparent Age 18 years 10 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 4½ ins.

Chest measurement: Girth when fully expanded 31 ins.
Range of expansion 3½ ins.

Complexion fair

Eyes Blue

Hair Auburn

Religious denominations:
- Church of England
- Presbyterian
- ~~Wesleyan~~ Methodist
- 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).

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 Oct 19th 1915. Co-Lieut Capt

Place Quebec Adm

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.

Hector Chartand 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.

Lt. Col. (~~Signature of Officer~~)

Date Oct 13/15 191 . OC. 57th Batt C.E.F.

Held for
Birth add
of Uncle
Try Iroquois Falls.

(24 11/22)

~~41229~~ Charland ORIGINAL. 42898 84

MEDICAL HISTORY SHEET.

Surname Charland Christian Name Hector

Examined on 9th day of Oct 1915 at Quebec

Approved by A Gaboury Capt AMC

Rank M.O.

Birthplace City or Town Fortierville County P. Que

Apparent age 18

Trade or occupation Labour

Height 5 Feet 4½ Inches.

Weight 139 – Lbs.

Chest measurement Minimum 31 inches. Maximum expansion 34½ inches.

Physical development good

Small-Pox Marks No

Vaccination Marks Arm Right. X Left. Number 1

When Vaccinated last 1906

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

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

Date	Result	Vaccinations.
1906	–	— M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
Aug 29 (2nd)		A Gaboury Capt M.O.
8/9/15	"	" M.O.
		M.O.

Enlisted on 9th day of Oct 1915 at Quebec

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	57th Batn C.E.F.			Oct 9/15
Transferred to	4/1st Batty C.F.A.	~~41289~~ 417289		13-10-15

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.

M. F. B. 313.
100M.—5-15.
H. Q. 1772-39-439.

Surname Macklow Christian Name Hector

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				

~~7~~17289

Hector Charland

71st. Batt.

MILITARY WILL

I n the event
of my death I
give the whole of
my property to
my uncle.

Philip Chandonng
Porcupine
Ontario.

H.Charland
Pte. 41st.Batt.
March. 23rd. 1916.

Extract from Pay Book Page No 20.

Holograph.

M/F

No.~~717289~~. Pte. H.Charland. ~~71~~41st.Battn
417289 22nd Bn

(641)—Wt. W1751-1403.—500,000.—5-15.—C. & G. Forms B. 103/1.

Army Form B. 103.

CERTIFIED CORRECT.
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 41st Bn, C.O.E.F.

Regimental No. 417289 Rank Pte Name Charland Hector

Enlisted (a) 9/10/15 Terms of Service (a) D. of W. Service reckons from (a) 9/10/15.

Date of promotion to present rank _____ Date of appointment to lance rank _____ Numerical position on roll of N.C.Os. _____

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		~~Transferred to 3rd Canadian Pioneer Battalion, Authority, B.H. 22-1-4. 18/2/16.~~		19/2/16.	~~Lieut. & Adjutant for O.C. 41st Bn. C.O.E.F.~~
		Transferred to 22nd Battalion, C.E.F. Authority.			Lieut., A/Adjt. for O.C. 41st Bn. C.E.F.
15 APR 1916		Drafted to 22nd Can Batt overseas from the 23rd Res Batt CEF.			LIEUT. & ADJT.
		EMBARKED FOR FRANCE.		15/4/16	Troops/784. a. G.2 a.
19-4-16	C.B.D.	Reinforcement from 23rd Res.Bn & taken on strength 22nd Can.Bn		16-4-16.	101 BD/3/284
6/5/16	"	Left Can.Base Depot		11/5/16	~~101 BD/3/~~ W Roll
12/5/16	O.C.Bn	Joined Unit	Field	6/5/16	B213

(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				
21-9-16	D.A.G. Casualty Base	Died of wounds	2/1st S.Mid. C.C.Stn	18-9-16.	K.I.137/1241 D.C.Sht 187 d/23-9-16 Pt II O.41 d/23-9-16 Whopau Captain for Lt.Col.A.A.G.

L-L. Job 5470—M. & D. 688S

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

72

To Whom Philippe Chandonnet

Address Porcupine Ont

Rate 20 00 July 1/16

By Whom Assigned Charland H

Regtl. No. 417289

Rank Pte

Corps ~~22~~ 41st Battn C.E.F.

2m 3 7/16 WEG

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				Died of wounds Sept. 16/16. C.L.(9) 28/9/6 J.H.G.
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Casualties

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—7-16
1772—39—819.

73

Sheet No. 2. Philippe Chandonnet (Assignee)

Name of Soldier Charland H #417289 22nd Batn C.E.F.

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
			20 00	July 1/16
April	1916			
May				
June				
July				
Aug.				
Sept.		N 17755	60	Account closed. Cas.
Oct.		Cancelled H20163	20	Stop 1/10/16, 3) x 30 & cancel 3/10
Nov.				
Dec.				
Jan.	1917			60.00 EFX 15 5/17.
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Casualties

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.				

D.H. Rank Pte. Name CHARLAND, Hector. Reg'l No. 417389.

Unit 42nd Bn. Off to 22nd If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Quebec Oct. 9th 1915. Place of Birth Fortier Ville Co Lotbiniere.

Name and Address, Next-of-Kin Mr. Phillippe Chandenais.

Porcupine, Ontario. Relationship Uncle.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Died of wounds 18.9.16 Bk a 333 27.9.16 Reason Character

Entered on N.E. Card Index ✓ M.S.

Checked by

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.
1915 Nov. 1	30	30	1.00	30	30	10	3 -	10	43	35 82		973 2920		3	3893	407	10 tal Oct 31/15.
Dec. 1	31	31	1.00	31	31	10	3 10		34 10	122 222		194 2437			1947	18 70	
1916 Jan 1.	31.	31	1.00	31	31	10	3 10		34 10	294		973			3406	18 74	
Feb 1.	29	29	1.00	29	29	10	2 90		31 90	341 388		730 1217			1947	31 17	Trans. 2nd Do. 53.
23rd Mch	1-31	31	1.00	31	31	10	3 10	31 17	65 27	1096 1953		973 730			1703	48 24	✓
Carried Forward to New Ledger				152 ✓			15 20	10	177 20 ✓			1289 6 ✓			1289 6	48 24	Balance

BALANCE TRANSFERED TO NEW LEDGER

Statement of Account rendered FEB 28 1917

Checked

Settled

Cash found in effects

152

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						

R—122

D.M. Rank Pte. Name CHARLAND, Hector. Reg'l No. 417289.

Unit 41st Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Quebec Oct.9th 1915. Place of Birth Fortier Ville Co Lotbiniere.

Name and Address, Next-of-Kin Mr. Phillippe Chandenais.

Porcupine, Ontario. Relationship Uncle.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

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.	R.W. BK REMARKS. Taken from Official Documents.
		Arrived in England per S.S. Saxonia		28 OCT 1915	
2.3.16.	O/C. 41st	Trans to 23rd Bn.	Shorncliffe	29.2.16.	C.R.O. D.O.53. (56 - 23rd Bn
15.4.16	O.C. 23	Trans. to 22nd Bn	Overseas	15.4.16	" 88 10 R - 22.4.15
30.4.16	22nd Bn.	Taken on strgth from 23rd Bn.	"	16.4.16	Pt. II - 18
23-9.16	"	Died of wounds	In the Field	18.9.16	" 41
27.9.16	"	Died of Wounds in 1st South Mid Can. Cl. Hal.		18.9.16	C.L.A. 333.

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.				

R. 149.

Name Charland. Hector. *Rank* Pte. *Reg. No.* 417289

Unit 22nd. Batt.

Next of Kin Canada.

RL 28. C. 1926

Date 1916.	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
18 9	1st. South. Mid. Cas. Clear. Station. DIED OF WOUNDS.			A333/01588/27.9		

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. L st

H. Q. FILE No. 649-

NAME Charland, Hector

REGT'L. No. 417789.

RANK AND CORPS Pte. 22nd Bn. Form 41st Bn.

CABLE		NATURE OF CASUALTY
NO.	DATE	
O1588	27-9-16.	Died of wounds 1st South Midland Cas. Cl. Stat. Sept 18th 1916. Nature of wounds not reported.
B2090a	Comm 23-9-16	Died of Wds. 18-9-16. 1st S. Mid. Cl. Stn. Hos

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 332.	1st South Mid. Cav. Cl. Stat.	18-9-16.	Died of Wounds

CHARLAND. Pte. Hector
#417289 22 Bn.

649. C. 5343

Not eligible for 1914-15 star.

Name & Address of Legatee

Phillip Chandonnet (uncle)
Porcupine
Ont.

Name & Address of Next of Kin
(Serial no. 765435)

Name & Address of Female Next of Kin

(Medals & Decorations)

57

Plaque & Scroll

a

~~C. of S.~~
765
Memorial C.

E.S.

(649-C.-5393)

CARD No. D

FOLL.

SURNAME. Charland:

CHRISTIAN NAMES Hector;

REGL. No. 417289. RANK Pte.

UNIT 41 St. Batt.

FORMER CORPS 9th. Volt. Quebec.

NEXT OF KIN.

NAMES IN FULL Chandonnais, Philippe.

RELATIONSHIP TO SOLDIER Uncle

ADDRESS Porcupine. Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Portierville DATE Dec 1st 1897.

PLACE OF ATTESTATION Quebec. DATE Oct-12. 1915.

Q/S 18-10-15 239/4

MARRIED SINGLE Yes WIDOWER

TRADE OR CALLING Laborer. RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 18. YEARS 10. MONTHS

HEIGHT 5'. FEET 4 1/2 INCHES

CHEST MEASUREMENT . 31. INCHES EXPANSION 3 1/2 INCHES

COMPLEXION Fair. EYES Blue. HAIR Auburn.

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE Quebec. DATE Oct. 9th 1915.

Number 417289 Rank Pte.

Surname CHARLAND

Christian Name Hector.

Units 2nd Bn Can Inf Theatre of War France

Date of Service 16-4-16

Remarks (Uncle) Phillip Chandonnet, Iroquois Falls, Ont.

Latest Address

Roll No.

200m.-6-21. B Page 22047

GRATUITY (IMPERIAL)

CHRISTIAN NAME SURNAME REG. NO.

SCHEDULE NO. LINE NO.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA IMPERIAL DEPOT NO.

DATE RECEIVED FROM REG. DEPOT. DATE FORWARDED TO OTTAWA

DESP. MAR 28 1923 41764

868—D.P.—40M-1-12-19.

D.M.S. 1300.

Surname: Charland
Christian Name or Names: H.
Reg. No.: 417289

Rank: Pte.
Unit: 22nd. Bn.
Co.
Troop
Batty

Hospital: 1st. South Midl. C.C.S.
Date of Admission

Transferred Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Died of Wounds.
18-9-16

DISPOSITION

Date

C.L. 27-9-16 a 333

REMARKS

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

EPITOME OF HOSPITAL TREATMENT.

Hospital	Adm.
1.	
2.	
3.	
4.	
5.	
6.	
7.	

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
1906	Vaccinations
Aug 29	Inoculations A Gaboury Capt
8-9-15	" "

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

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

C.A.M.C.
For the Officer in Charge of Records
Canadian Contingent.

ED. 417289

DUPLICATE.

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 CHARLAND *Christian Name* Hector

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Fortheinlb County P.Q.

Examined ... ... on 9th day of Oct 1915 at Q?

Declared Age ... ... 18 years days.

Trade or occupation ... Labourer

Height ... ... 5 feet 4½ inches.

Weight ... ... 139 lbs.

Chest Measurement: Girth when fully Expanded 34½ inches. Range of Expansion 3½ inches.

Physical Development ... Good

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

When Vaccinated ... 1906

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*) A Gaboury

(*Rank*) Capt. A.M.C. *Medical Officer.*

Enlisted ... ... at ? on 9th day of Oct 1915.

	Corps.	Regtl. No.
Joined on Enlistment ...	57th Battn C.E.F.	417289
Transferred to	41st Battn C.E.F.	

Became non-effective by

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

on day of 191 .

(*Signature*) Lieut.-Col.

(*Rank*) In Charge of Records, Canadian Contingent.

(5506.) W. 14971/M. 89. 750M. 1/16. C. P., Ltd. Forms B. 178 39

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				

Married or Single S.

Place of Birth Fortier Ville Co Lotbiniere

Name and Address of Next of Kin Mr Phillippe Chandenais
Porcupine, Ontario

Relationship of Next of Kin Uncle.

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
Died of wounds	18.9.16	G.O. List A333 27.9.16

Admissions to Hospital, &c.

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

Reg'l No. 417289 Rank Pte Name Charland, Hector

If in Permt. Corps What Unit Unit 23rd

Permanent Force Allowances

Place of Attestation Quebec

Date of Attestation 9 Oct 1915

Transferred to 22nd Bn Date 27.5.16 Authority B.O. 88

Transferred to N.E.B. Date 19.9.16 Authority C.A.O. 333 27.9.16

Transferred to Date Authority

Transferred to Date Authority

PAY OFFICE, N.E. BRANCH NOV 21 1916 CANADIAN CONTINGENT

Assigned Pay Monthly $ ~~20.00~~ RSW. Date Effective 1-7-16

Payable to Philippe Chandonnet Porcupine Ont. Relationship Uncle

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) 27.9.16 Effective 1.10.16 Reason Died of wounds 18.9.16 G.O. A333 27.9.16

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date) 10/11/16

Account Transferred to Officers' Pay Branch (Date)

Entered on N.E. Card Index ✓ ...

Checked by E.A. Tripp

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
1916															177 20															128 96	48 24				
April 1.30	30	1.00	30		30	.10	3								33									7 30					1 61	8 91	72 33				Clothing Chgs C/577
1.31/5	31	1.	31		31	.10	3	10							34 10			987	31/5	2932	6/5	683			255	426				681	99 62				
1.30/6	30	1	30		30	.10	3								33			1034	30/6						511					511	127 51				
1.31.7	31	1	31		31	.10	3	10							34 10													20		20	141 61				
1.31/8	31		31		31		31	0							34 10	1114	30/7							5 73				30		35 73	150 48				Pension R.P. C/584 15/5
1.30/9	30	1.	30		30	.10	3								33	1141	30/8	1241	14/9					7 67											
																1161	10/8							7 67	7 67			20	1 65	33 51	149 97				Died of wounds 18.9.16
1.31/10																													1 320	13 20	136 77				P.O. 411-23.9.16
																															136 77				12 days D.A. over Cr. Sepa Off
																																			Sgt. 411B. 19.9.16
April 1917																								136 77						136 77					136 77 To Canada for Sett. 11-4-17.

Balance transferred to N. E. Branch 17 77 10 28 4 26

Checked Edwards

Statement of FEB 22 1917 Account rendered

Cash found in safe MR

Small Ledger Sheet

Date	Pay				Field Allowance				Working or Special Pay				Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls								Cash Payments				Assigned Pay	Other Charges	Total Debits	Balance		Pay Withheld or Deferred	Pay Available for Issue	Remarks
	No. of Days	Rate	Amount		No. of Days	Rate	Amount		No. of Days	Rate	Amount					1		2		3		4		1	2	3	4				Credit	Debit			
			$	c.			$	c.			$	c.				No.	Date	No.	Date	No.	Date	No.	Date												