

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

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

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.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

Army Form B-14

Use card

AF 31237-X2

AF 31237-1

AF B181-1

# DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Charlebois, Jean Baptiste

Regt. No. 252749 Rank Pte. **16172**

Corps 209th. O. Bn.

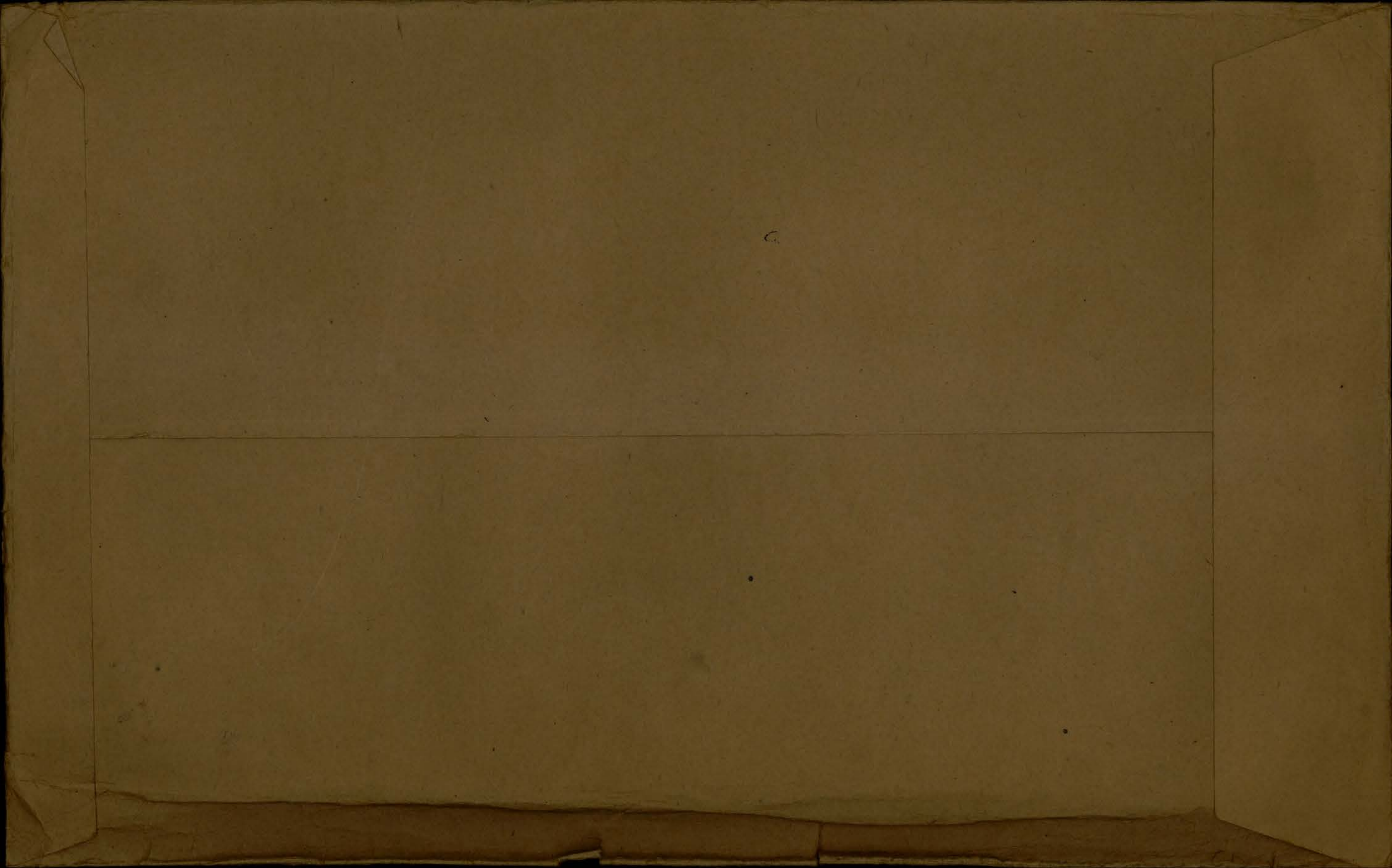
*Medically Unfit*



*Go BOC*  
*Spec. 6181*  
*d/20/5/20*  
*11/6/20*

|   |   |
|---|---|
|   | 2 |
| 7 | 5 |
| 7 | 5 |
| 1 | 5 |

*boom*  
*A.H.S.*



*Triplicate*

*Y. ref. 14015*

ATTESTATION PAPER

No. *2527119*  
Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION  
(ANSWERS.)

- 1. What is your surname?..... *Charlebois.*
- 1a. What are your Christian names? ..... *Jean Baptiste.*
- 1b. What is your present address? ..... *Gouverneur, Sask.*
- 2. In what Town, Township or Parish, and in what country were you born? ..... *St. Justine, Co. Quebec.*
- 3. What is the name of your next-of-kin?..... *George Charlebois.*
- 4. What is the address of your next-of-kin?..... *Co. Vaudreuil. (St. Justine) Quebec.*
- 4a. What is the relationship of your next-of-kin?... *Brother.*
- 5. What is the date of your birth?..... *6th. March. 1893*
- 6. What is your Trade or Calling?..... *Laborer.*
- 7. Are you married?..... *No.*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... *Yes.*
- 9. Do you now belong to the Active Militia?..... *No.*
- 10. Have you ever served in any Military Force?... If so, state particulars of former service. .... *No.*
- 11. Do you understand the nature and terms of your engagement? ..... *Yes.*
- 12. Are you willing to be attested to serve in the *Canadian Over-Seas Expeditionary Force?* ..... *Yes.*

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, *Jean Baptiste Charlebois*, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

*Jean Baptiste Charlebois* (Signature of Recruit)

Date ..... *April 6th 1916.* *R. E. Vincent* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION

I, .... *Jean Baptiste Charlebois* 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.

*Jean Baptiste Charlebois* (Signature of Recruit)

Date ..... *April 6th. 1916* *R. E. Vincent* (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 *Shaunavon* ..... this *6th* ..... day of *April* ..... 191 *6*

*Sack* *John F. Zille* (Signature of Justice)

8 FEB 1916

*called 15-6-17 in H*

Description of **Jean Baptiste Charlebois** on Enlistment.

Apparent Age .. **22** .. years ..... months.  
 (To be determined according to the instructions given  
 in the Regulations for Army Medical Services.)

Height ..... **5** feet .. **10** ins.

Chest measurement. { Girth when fully expanded ..... **37 1/2** ins.  
 Range of expansion ..... **37 1/2** ins.

Complexion ..... **Dark** .....

Eyes ..... **Brown** .....

Hair ..... **Black** .....

Church of England .....  
 Religious Denominations. { Presbyterian .....  
 Methodist .....  
 Baptist or Congregationalist .....  
 Roman Catholic ..... **Yes.** .....  
 Jewish .....  
 Other Denominations .....  
 (Denomination to be stated).

Distinctive marks, and marks indicating congenital peculiarities or previous disease

(Should the Medical Officer be of opinion that the Recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

**Scar above left thumb.**

**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 ..... **April 6th** ..... 191 **6**

Place ..... **Shaunavon Sask.** .....

*[Signature]*  
 Shaunavon  
 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**

..... **Jean Baptiste Charlebois** ..... 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.

*[Signature]* (Signature of Officer)  
 O.C. 2096 Shaunavon Sask.

Date ..... **April 6th** ..... 191 **6**

# MEDICAL HISTORY SHEET

Surname Charlebois Christian Name Jean Baptiste

Examined { on 6th day of April 1916.  
 at Shaunavon, Saskatchewan.  
 Birthplace { City or Town St. Justine.  
 County Quebec, Canada.

Approved by K. Cairns  
W. Swanston  
 Rank Captain M.O.

Apparent age 22 years

Trade or occupation Labourer

Height 5 feet 10 inches

Weight 155 lbs

Chest measurement { Minimum 34 1/2 inches  
 Maximum expansion 3 inches

Physical development fair

Small-pox Marks None

Vaccination Marks { Arm Right No Left No  
 Number None

When Vaccinated last X

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

| Date           | Fit or Unfit | EXAMINED FOR RE-ENGAGEMENT      |
|----------------|--------------|---------------------------------|
|                |              | M.O.                            |
|                |              | M.O.                            |
|                |              | M.O.                            |
|                |              | M.O.                            |
|                |              | M.O.                            |
|                |              | M.O.                            |
| Date           | Result       | VACCINATIONS                    |
| <u>9/17</u>    |              | <u>16cc serum</u> M.O.          |
|                |              | M.O.                            |
|                |              | M.O.                            |
| Date           | Result       | ANTI-TYPHOID INOCULATIONS, ETC. |
| <u>26/6/16</u> |              | <u>K Cairns</u> M.O.            |
| <u>3/7/16</u>  | <u>OK</u>    | <u>K Cairns</u> M.O.            |
| <u>13/7/16</u> |              | <u>K Cairns</u> M.O.            |

Enlisted on 6th day of April 1916 at Shaunavon, Sask.

|                      | CORPS                  | REG'TL NUMBER    | HABITS | DATE                     |
|----------------------|------------------------|------------------|--------|--------------------------|
| Joined on enlistment | <u>209th. O. Batt.</u> | <u>252, 749.</u> |        | <u>April. 6th. 1916.</u> |
| Transferred to       |                        | <u>252749.</u>   |        |                          |

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD

| STATION   | DATE                                  | DISEASE                | RESULT                        |
|---|---------------------------------------|------------------------|-------------------------------|
| <u>Orpington</u><br>A.D.M.S. CANADIANS,<br>LONDON AREA,<br>76. STRAND, LONDON, W.O. | <u>Jan 30/17</u><br><u>1 FEB 1917</u> | <u>Chr. Nephritis.</u> | <u>waived to O. Discharge</u> |

Approved: K. Macdonell Captain C.A.M.C.,  
 A.D.M.S., Canadian Forces

Montreal. June 12, 1917. Nephritis. Discharge Class "E"

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.

Surname Charles, Christian Name Jean Baptiste

| STATION  | Date of Arrival<br>at the<br>Station | DATES OF                   |       |      |                            |       |      | DISEASE               | Number of<br>days in<br>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<br>Medical Officer  |
|--|--------------------------------------|----------------------------|-------|------|----------------------------|-------|------|-----------------------|----------------------------------|--|--|
|  |                                      | Admission<br>into Hospital |       |      | Discharge<br>from Hospital |       |      |                       |                                  |  |  |
|  |                                      | Day                        | Month | Year | Day                        | Month | Year |                       |                                  |  |  |
| <p style="color: blue; font-size: small;">Moor's Barracks Hpt,<br/>Skornellife.</p> <p style="color: blue; font-size: small;">ONTARIO MILITARY HOSPITAL<br/>ORPINGTON, KENT.</p> | 23134                                | 6                          | 12    | 16   | 20                         | 12    | 16   | Scabies +<br>Impetigo | 15                               | Scabies cured. Transf. to<br>Orpington for further treatment.  | Jos. Ward Capt   |
|  |                                      | 28                         | 12    | 16   |                            |       |      |                       | Nephritis                        |  | Nephritis since Nov. 1916 - still<br>traces of albumin in urine - no<br>casts. General health very fair.<br>Chief complaints are pain in back & pain<br>on micturition - slight frequency.<br>He denies having had gonorrhoea. Slight<br>albuminuria has persisted with blood cells in<br>urine. |
| Montreal Que,  | G.N.C.H.                             | 26                         | 3     | 17   | 10                         | 7     | 17   | Nephritis             | 106                              | Discharged to M.O.1/c Clearing Station<br>as medically unfit P.C. 508.   | [Signature]  |

## MEDICAL CASE SHEET.\*

| No. in Admission and Discharge Book.          | Regimental No.   | Rank. | Surname.               | Christian Name.  |
|---|--|-------|------------------------|------------------|
| Year<br>1916                                  | 252749   | Pte   | Charlevoix             | John Baptist     |
|   |  | Unit. | 209 <sup>th</sup> Btro | Age.<br>23       |
|   |  |       |                        | Service.<br>9/12 |
| Station and Date.                             | Disease <i>Nephritis -</i>   |       |                        |                  |
| ONTARIO MILITARY HOSPITAL<br>ORRINGTON, KENT. | <p>Enlisted at Shawanovon, Sask. on April 7<sup>th</sup> 1916 - with 209<sup>th</sup> Batt - Came to England Nov 11/16 At Shorncliffe row seven - Paraded sick on Dec. 6 - complaining of itch (scabies), went into Hosp. (more Banacks), same day - Had been troubled with Kidneys for some months - burning pain in urination - very frequent - Pain across back while in Hosp. this month was aggravated. On admission - Rash on body - (scabies), pain across Kidneys - Had to urinate 3 times during night - emitting pain in urination - General health good. - no history of Gon, - Rt ear discharging - has been discharging for 2 weeks - also discharged 2 wks during Jul 1916 Slight inflammation of Rt eye</p> |       |                        |                  |
| Dec 23/1916                                   | Sent to Isolation ward suffering from scabies and Impetigo. Returned to Central Hospital cured Jan. 8 1917. - Alex Mackay nurse  |       |                        |                  |
| Jan 11/17                                     | Urinalysis shows trace of albumen & some hyaline casts   |       |                        |                  |
| Feb. 19/17                                    | Spit some albumen - General health good Invalided to Canada  |       |                        |                  |
|   | <p style="text-align: right;">K. Carson<br/>left Canada</p>  |       |                        |                  |

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.





**CLINICAL CHART.**

(To be attached to Case Sheet.)

Army Form B. 181.

Corps 209<sup>th</sup> Btro

Military Hospital \_\_\_\_\_

No. 252749

Rank and Name Pte J. P. Charlbois

Age 23

Service 9/12

Disease typhus

Date of admission 20 DEC 1916

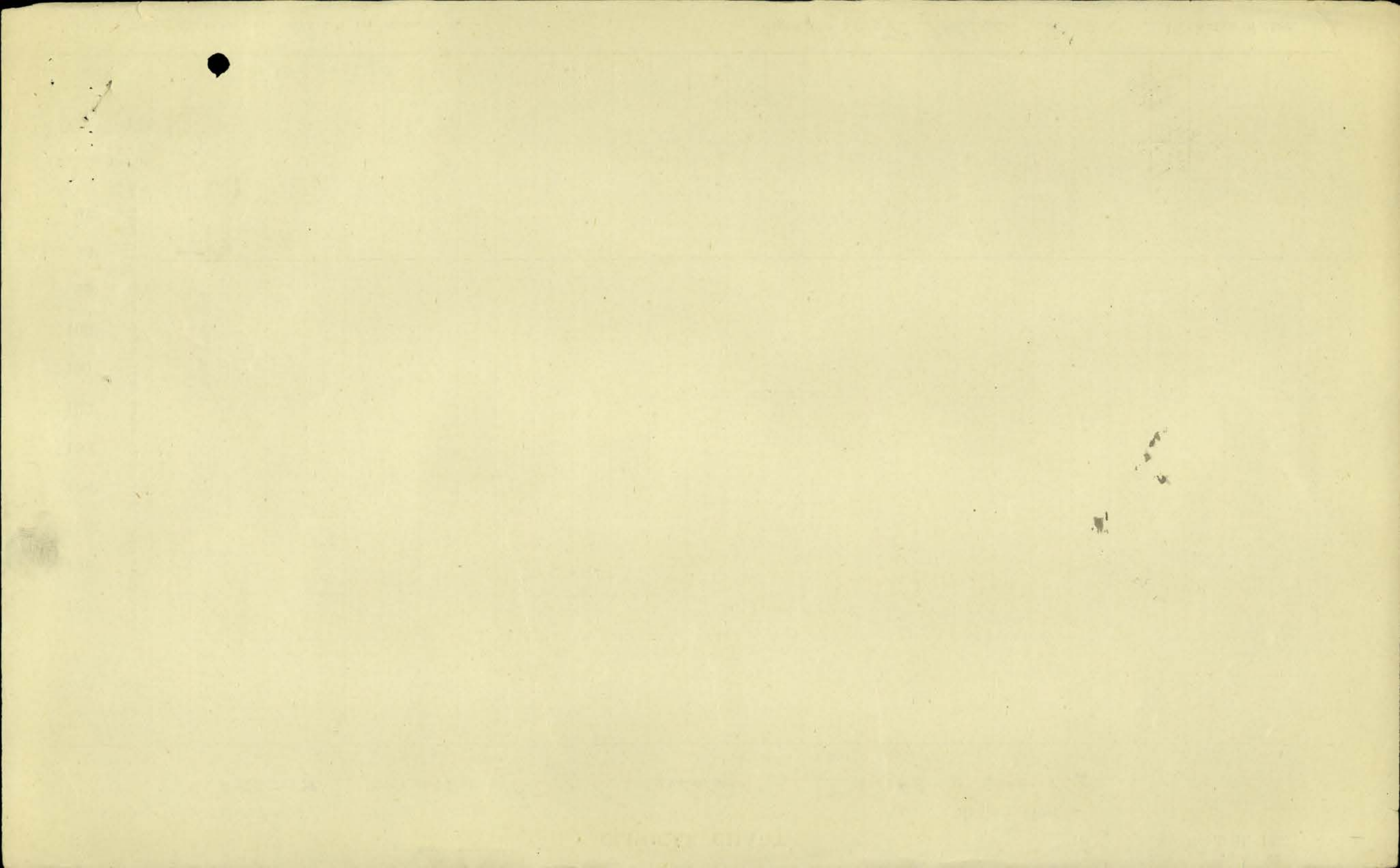
Date of discharge Feb 9. 17

Result sent to Canada

| Dates of Observation    | Time |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
|-------------------------|------|----|------|--|------|--|------|--|------|--|------|--|------|--|------|--|------|--|------|--|------|--|------|--|------|--|------|--|--|
|                         | A.M. |    | P.M. |  | A.M. |  | P.M. |  | A.M. |  | P.M. |  | A.M. |  | P.M. |  | A.M. |  | P.M. |  | A.M. |  | P.M. |  | A.M. |  | P.M. |  |  |
| 20 21                   |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| Days of Disease         | 1    | 2  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| Temperature Fahrenheit  |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| 107°                    |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| 106°                    |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| 105°                    |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| 104°                    |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| 103°                    |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| 102°                    |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| 101°                    |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| 100°                    |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| 99°                     |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| 98°                     |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| 97°                     |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| Pulse per Minute        | 74   | 74 |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| Respirations per Minute | 16   | 16 |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |
| Motions per 24 hours    |      |    |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |      |  |  |

discontinued

Signature N. Harper M.S. In charge of case.



MEDICAL CASE SHEET.\*

|   |                |       |          |                 |
|---|----------------|-------|----------|-----------------|
| No. in Admission and Discharge Book.<br><i>22817</i><br><del>252749</del> | Regimental No. | Rank. | Surname. | Christian Name. |
|   | Year           | Unit. | Age.     | Service.        |

*202749 P/2 Charles James B.*  
*1916. 219 Batt 23 9/2*

|                   |         |
|-------------------|---------|
| Station and Date. | Disease |
|-------------------|---------|

*6-12-16 Scabies on his body treated with Ung sulph Co. Impetigo on his face treated with Lassau's Paste.*  
*10-12-16 Face not doing well. Change to Oculat-Hg. Joswick Capt*

TRANSFERRED FROM MOORE BARRACKS.  
CANADIAN HOSPITAL to  
*Orpington 20/12/16*

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station  
and Date.

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins 209<sup>th</sup> Overseas Battalion

(2) Regimental Number 252749

(3) Full Name of Soldier Jean Baptiste Charlebois

(4) Place of Birth St. Justine Co. Quebec

(5) Are you married, or not? No

(6) If married, state,  
(a) Full name of your wife Nil

(b) Present Postal Address Nil

(7) Are you a widower? No

(8) Have you any children? No

If so, give number of boys and girls Nil

Also their names and ages

(9) Is your Father alive?..... *No.*

If so, state name and address..... *Nil*

(10) Is your Mother alive?..... *No.*

If so, state name and address..... *Nil*

(11) If your Mother is a widow..... *Nil*

Are you her sole support, or not?..... *Nil*

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

..... *Nil*

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

*George Charlebois (Brother)*  
*St. Gustave Co. Naudreau*  
*Quebec*

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

..... *Nil*

(15) Are you insured?..... *No.*

If so, in what Company?..... *Nil*

Have you made arrangements for payment of your Insurance premium..... *Nil*

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

*Shavelles Maj. F.* Lieut.-Col.  
O.C. 909th Overseas Battalion C.E.F.  
Officer Commanding.

Date..... *2/10/16*

Feb. 1st., 1917.

From:- A.D.M.S., Canadians,  
London Area.,

To:- Officer i/c Records,  
Green Arbour House,  
Old Bailey, E.C.

Name CHARLEBOIS, J.B. Reg.No. 252749 Rank Pte.  
Battalion 209th.

The above noted appeared before a Medical Board on 30-1-17 at Orpington. and the following entry has been made on the Medical History Sheet of this man :-

Board recommends:- Invalid to Canada.

Sgd:- F. A. C. Scrimger, Capt. C.A.M.C.,  
President Medical Board.

APPROVED:-

Sgd:- W. S. Macdonell. Capt. C.A.M.C.,  
for A.D.M.S., Canadians, London Area.,

Further entries are also contained on this Medical History Sheet, as follows :-

MOORE BARRACKS HOSP. SHORNCLIFFE. 6-12-16 to 20-12-16. Scabies and Impetigo. Scabies cured. Trans. to Orpington.

Sgd:- J. Wark, Capt.

ONT. MIL. HOSP. ORPINGTON. 20-12-16. Nephritis. Nephritis since Nov. 1916. Still traces of Albumin in urine. No casts. General health very fair. Chief complaints are pain in back and pain on micturition with slight frequency. He denies having had gonorrhoea. Slight albuminuria has persisted with blood cells in urine.

Sgd:- J. A. Carson, Capt. C.A.M.C.

I hereby certify that the entries as above noted are true copies.

*W. S. Macdonell*  
Captain. C.A.M.C.,  
for A.D.M.S. Canadians,  
London Area.,



*Handwritten signature or scribble at the bottom of the page.*



# DUPLICATE MEDICAL HISTORY SHEET

Surname Charlebois Christian Name Jean Baptiste

Examined { on 6th day of April 1916.  
 at Shaunavon, Saskatchewan.  
 Birthplace { City or Town St. Justine.  
 County Quebec, Canada.

Approved by K. C. Cairns  
C. B. Swanston  
 Rank Captain M.O.

Apparent age 22 years.  
 Trade or occupation Labourer.  
 Height 5 feet 10 inches.  
 Weight 155 lbs.  
 Chest measurement { Minimum 34½ inches  
 Maximum expansion 3 inches.  
 Physical development fair.  
 Small-pox Marks None.

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

Vaccination Marks { Arm Right No Left No.  
 Number None.

| Date        | Result | VACCINATIONS        |
|-------------|--------|---------------------|
| <u>0017</u> |        | <u>Measles</u> M.O. |
|             |        | M.O.                |
|             |        | M.O.                |

When Vaccinated last X.  
 (a) Marks indicating congenital peculiarities or previous disease None.

| Date           | Result | ANTI-TYPHOID INOCULATIONS, ETC. |
|----------------|--------|---------------------------------|
| <u>26/6/16</u> | } OK   | <u>K. Cairns</u> M.O.           |
| <u>3/7/16</u>  |        | <u>K. Cairns</u> M.O.           |
| <u>13/7/16</u> |        | <u>K. Cairns</u> M.O.           |

(b) Slight defects but not sufficient to cause rejection None.

Enlisted on 6th day of April 1916 at Shaunavon, Sask.

|                      | CORPS                  | REG'TL NUMBER    | HABITS | DATE                     |
|----------------------|------------------------|------------------|--------|--------------------------|
| Joined on enlistment | <u>209th. O. Batt.</u> | <u>252, 749.</u> |        | <u>April. 6th. 1916.</u> |
| Transferred to       |                        |                  |        |                          |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD

| STATION | DATE | DISEASE | RESULT |
|---------|------|---------|--------|
|         |      |         |        |
|         |      |         |        |
|         |      |         |        |

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



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

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

250M.—1-16.

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps

209th Overseas Battalion

Regimental No. 252749

Rank

Pte

Name

Jean Baptiste Charlebois

C. E. F.

Enlisted (a) 6/4/16

Terms of Service (a) Period of War

Period of War

Service reckons from (a) 6/4/16

6/4/16

Date of promotion to present rank. } \_\_\_\_\_

Date of appointment to lance rank } \_\_\_\_\_

Numerical position on roll of N. C. Os. } \_\_\_\_\_

Extended \_\_\_\_\_

Re-engaged \_\_\_\_\_

Qualification (b) Labourer

Labourer

| 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        |  |  |                                |  |
| 5.12.16                      | O.C. 209th                | 1 Embarked<br>2 Arrived<br>3 Tsfd. to 9th Res. Batt  | Canada<br>England<br>St. Martins Plain | 1/11/16<br>11/11/16<br>5.12.16 | Pt. 2 Orders #254.<br>Certified correct  |
| 7.12.16                      | O.C. 9th Res. Bn<br>R. Bn | Taken on Strength 9th Res. Bn  | St. Martin Plain                       | 5.12.16                        | Pt. II 342   |
| 21.2.17                      | O.C. 9th Res. Bn          | Struck off Strength to C.C.A.C   | Bramshott                              | 4.2.17                         | Pt. II 27 C.C.A.C. 0.87  |
| ATTACHED                     |                           | Taken on Strength C.C.A.C. Pt. II D.O. No. 80, 16/2/17   |  |                                |  |
| TRANSFERRED FROM C.C.A.C. TO |                           | Can for Disc. PART II D.O. No. 10/15 28/2/17   |  |                                |  |
|                              |                           | by name for C.C.A.C.   |  |                                |  |

(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.]

19/2/17  
 21/2-13/14



A.G.R. Rank Name CHARLEBOIS, Jean Baptiste Reg'l No. 252749  
 Unit 209th Bn. If in perm. Corps, } Married or Single Single.  
 What Unit? }  
 Place and Date of Enlistment Shumavoh, 6th April, 1916. Place of Birth Ste. Justine, Co. Quebec.

*MX  
17/6/97/1*

Name and Address, Next-of-Kin George Charlebois, St. Justine Co., VAUDREUIL, Que. Relationship Brother.

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to



Relationship

Relationship

*ccac*  
N/E. R.B. No. 3772  
File R.L.  
Category *Can. M.V.*

Discharge, Date and Place Reason Character

| Report.  |                                 | Record or promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place.          | Date.    | REMARKS.<br>Taken from Official Documents. |
|----------|---------------------------------|--|-----------------|----------|--|
| Date.    | From whom received.             |  |                 |          |  |
|          |                                 | <i>Arrived in England.</i>   |                 |          |  |
| 13.12.16 | Ch 209th Adm Moore B.Ks Hosp    |  | Shancliffe      | 11/11/16 | pa 88 Caronia                              |
| 5-12-16  | 209th Bn S.O.S. to 9th Res Bn.  |  | "               | 7-12-16  | Ch 18. Imp. Contagiosa                     |
| 7-12-16  | 9th Res Bn                      | <b>Taken on strength</b>   | "               | 5-12-16  | D.O. 254.                                  |
| 30-12-16 | 209th                           | Transfd to Ont Mil Hosp.   | Orpington Knid. | 5-12-16  | Pt II D.O. 342                             |
| 25-1-17  | 9th Batt                        | STUCK Off TO 9 CAN RES BATT  |                 | 21-12-16 | G.S. 26 (Impetigo)                         |
| 26-1-17  | 9th Res Bn                      | <b>Taken on strength</b>   | Bramshott       | 25-1-17  | P.D.O. 26                                  |
| 21-2-17  | "                               | SOS to Ch 18 with effect   | do              | 25-7-17  | Pt II 27 (can 81)                          |
| 16-2-17  | C.C.A.C. Adm. to Ont. Mil Hosp. | T.O.S.   | Hartings        | 7-2-17   | Pt II 0 81.                                |
| 28-2-17  | "                               | SOS to Can for Res   | Hartings        | 19-2-17  | — 99 101                                   |

| Report.  |                      | Record of promotions reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Place.                       | Date.             | REMARKS<br>Taken from Official Documents. |
|----------|----------------------|---|------------------------------|-------------------|---|
| Date.    | From whom received.  |   |                              |                   |   |
| 31-10-17 | Dis Dep<br>A.R. G.L. | To home<br>Discharged no 16 ban<br>Hospital (Inv. ban)  | MS # 4 Montreal<br>Orpington | 5.3.17<br>17.2.17 | nr. 217.<br>G.L. C 51 Impetip             |

# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

3086-J-4

Name **Charlebois, Jean Baptiste**  
Surname Christian Name

Regimental Number **252749** Rank **Pte.**

Address (in full) **St. Justine Station, P.Q.**

Unit **209th Bn. C.C.A.C.**

Original Unit

District where paid **M.D. 4.**

Date of Discharge **31-8-17.**

P. D. P. Filing Number **5-45-4.**

Rates:—Regimental pay \$ **1.00** per diem: Field Allowance \$ **.10** per diem. Separation Allowance \$ \_\_\_\_\_ per month.

L. L. 22573—M. & D. 8009.

| Total Credits<br>91 days | FIRST PAYMENT   |          |                   | SECOND PAYMENT  |         |                   | FINAL PAYMENT   |         |                   | Balance Over-<br>payments<br>to be<br>Recovered | Total<br>Amount<br>Paid |
|--------------------------|-----------------|----------|-------------------|-----------------|---------|-------------------|-----------------|---------|-------------------|---|-------------------------|
|                          | Cheque No.<br>A | Date     | Amount<br>30 days | Cheque No.<br>B | Date    | Amount<br>30 days | Cheque No.<br>C | Date    | Amount<br>31 days |   |                         |
| 100 10                   | 887             | 13-12-17 | 33 00             | 876             | 17-1-18 | 33 00             | 886             | 21-2-18 | 34 10             |   | 100 10                  |

**M. F. W. 127.**  
60M-6 17.  
1778-88-1140.

Remarks:

# WAR SERVICE GRATUITY.

File No. ....

Register No. ....

Reg. No. .... Dependent .....

Name ..... Address .....

Address .....  
Dec'n No. .... V.S.G. File No. ....

Award ..... days at \$ ..... per day \$ .....  
 S. A. .... months at \$ ..... per mo. \$ .....  
 Less P. D. P. Credited

\$ .....  
 \$ .....  
 \$ .....

Pay Soldier \$ ..... Pay Dependent \$ .....

Less further debit balance  
 Not due to draw

Clerk .....

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

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

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

Net .....

| TO S |        | DEBIT |        |
|------|--------|-------|--------|
| Date | Amount | Date  | Amount |
|      |        |       |        |
|      |        |       |        |
|      |        |       |        |
|      |        |       |        |
|      |        |       |        |
|      |        |       |        |
|      |        |       |        |
|      |        |       |        |
|      |        |       |        |
|      |        |       |        |

| 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 .....



Name Charlebois H. J. B.

M. E. W. 41  
1 CM-7-16  
1772-39 889.

1768

Regimental No. 252749

~~Name and address of next of kin~~

Unit 209 Bn

Date of enlistment

St Julien Str  
Quebec

Place of

Married (yes or no) No

Date and place discharged

31/8/14.

Amount of pay assigned monthly \$ Nil

Reason for discharge

649. b. 9489.

To whom payable

Character on discharge

Essequito. 5 17.

L. L. Job 6351-M. & D. 6880.

| Date  |                     | No. of Days | PAY  |        | Field Allowance |      | Other Credits | Total Credits | Voucher |     | Cash Payments | Assigned Pay | Other Charges | Total Debits | Remarks, Casualties, etc. |
|---|---------------------|-------------|------|--------|-----------------|------|---------------|---------------|---------|-----|---------------|--------------|---------------|--------------|---------------------------|
| From  | To                  |             | Rate | Amount | No. of Days     | Rate |               |               | Amount  | No. |               |              |               |              |                           |
| 13 <sup>th</sup> 17                                 | 12 <sup>th</sup> 17 | 47          | 1    | 47     | 47              | 10   | 4             | 70            | 65      | 73  |               |              |               |              | Quebec                    |
|   | 31 <sup>st</sup> 17 |             |      |        |                 |      |               |               |         |     |               |              |               |              |                           |
| <p>6pm. Last No 3 Int on Def<sup>n</sup> Pay 37</p> |                     |             |      |        |                 |      |               |               |         |     |               |              |               |              |                           |
| <p>P.P.P. 11/19/17</p>                              |                     |             |      |        |                 |      |               |               |         |     |               |              |               |              |                           |

Pensioned  
fr 1/9/17 288<sup>00</sup>/p.a.



Surname  
Charlebois

Christian Name or Names  
J.B.

Reg. No.  
252749

Rank Unit Co. Troop Batty.  
Pte. 209th Bn.

Hospital Date of Admission  
Ontario Military *Arpington* 21.12.16  
Transferred *Moore Barr.* Hosp. 7-12-16

Hosp.

Hosp.

Hosp.

Diagnosis *Impetigo.*  
(1) *Impetigo Contagios.*  
Later Diagnosis (if changed)  
(2)  
(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

C.L. 30.12.16 26  
" 13-12-16 # 18

REMARKS

*1. 11. 17. C 51. Invalided to Canada. 17. 2. 17.*

A.M.D. 2 Dept.

Beh. of D.G.M.S. O.M.F.C. London

*W.*

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

S.O.S. M. U. 31/8/17. M.D.A.

Scroll Desp. \_\_\_\_\_ Reqn. No 252777 M

FEB 14 1923

Plaque Descri. \_\_\_\_\_ Reqn. No 8743  
9th. Res. B.W.

Charlebois. Jean B., Pte. 252749. C.E.F. 649-C-9489

Med. & Dec. ( Brother ) Geo. Charlebois, Esq.,  
St. Justine, <sup>STATION</sup>  
Co., Vaudreuil. P.Q.

P. & S. ( Brother ) Address as above.

*( Ser. # 845538 )*

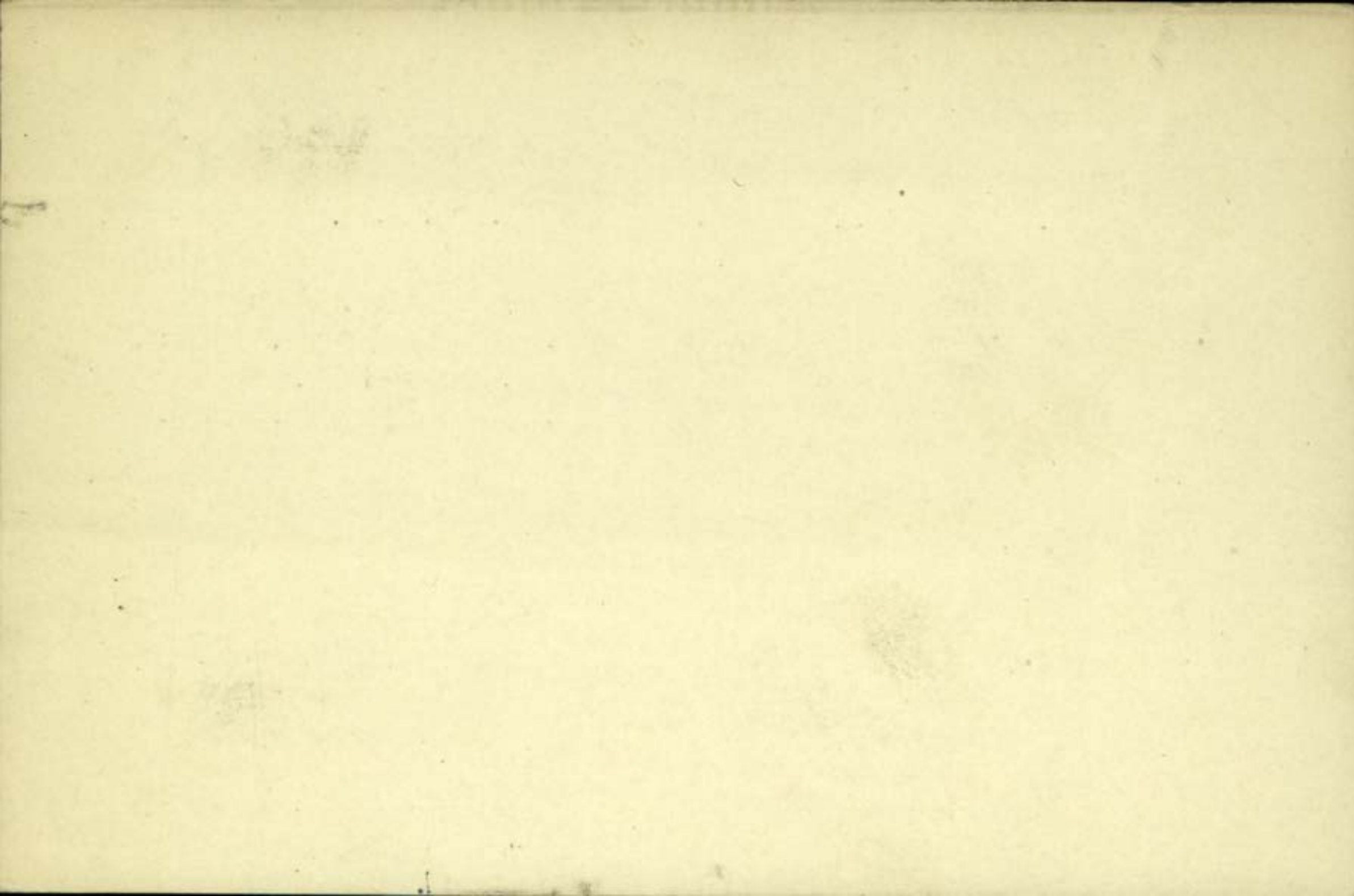
Mem. Cross. ( NIL )

*Canada*

54686

*England only  
Eligible for B.W.M.  
M.D.*

*L.*



NAME

Charlebois J. B.

REGT'L No.

252749.

H. Q. FILE No. 649.

RANK AND CORPS

Plt. 9th

FOLLOWS

No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST NO.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

C 51.

McCauley Orpington

17.2.17

Impetigo. Inv. to Canada

209

M.H.C.C. Montreal

17-8-17

Dise H.I. A Unit



No. 252749 RANK

Pte.

NAME

Charlebois, J.

B.

T. O. S.

UNIT

Discharge Depot. Dubuque

M. D.

5.

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PAID FROM

PAID TO

SIG. OR REC'T

PARTICULARS

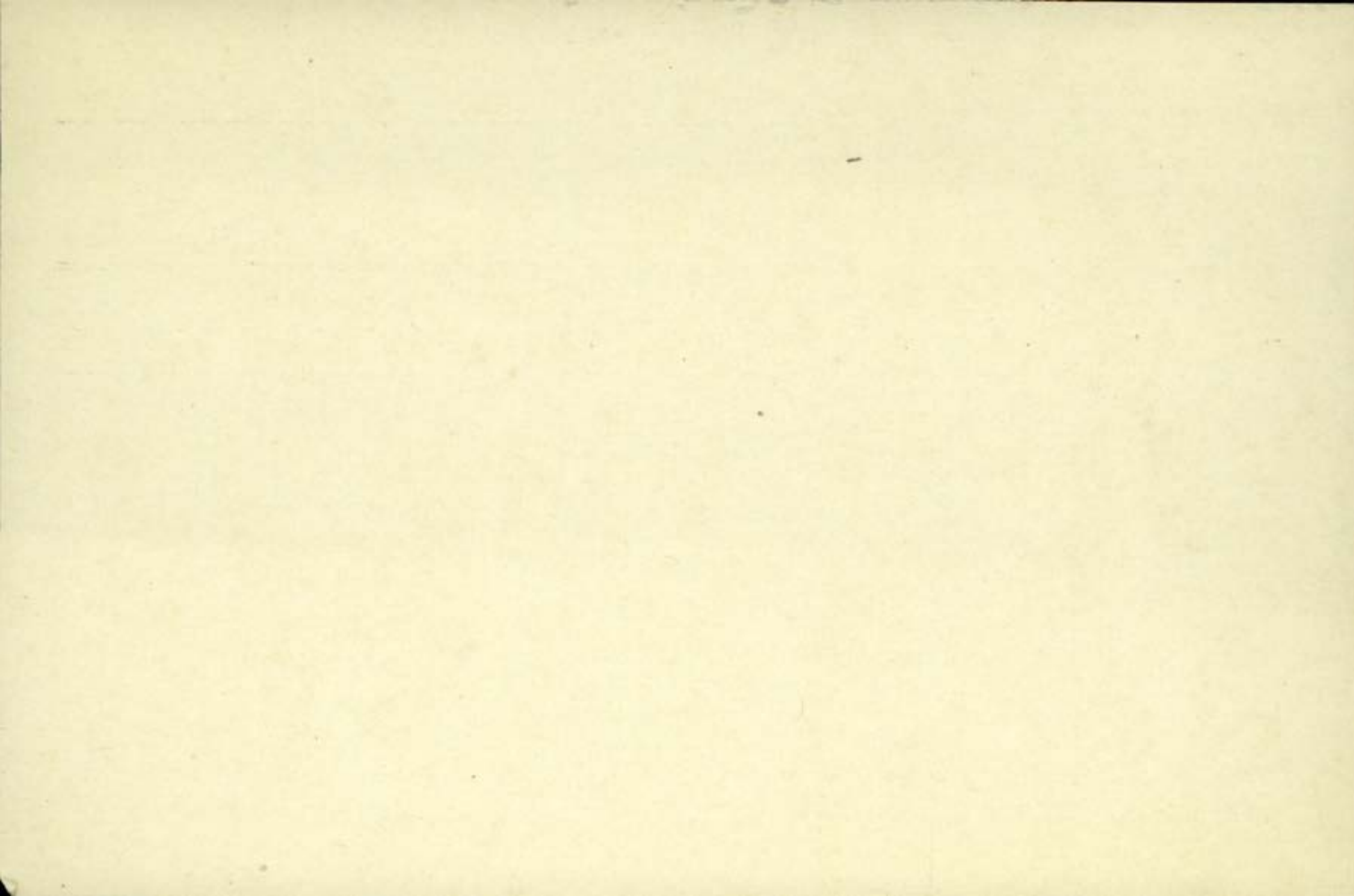
AUTHORITY

1917  
Mar.

1917.  
no dates

-

209th.



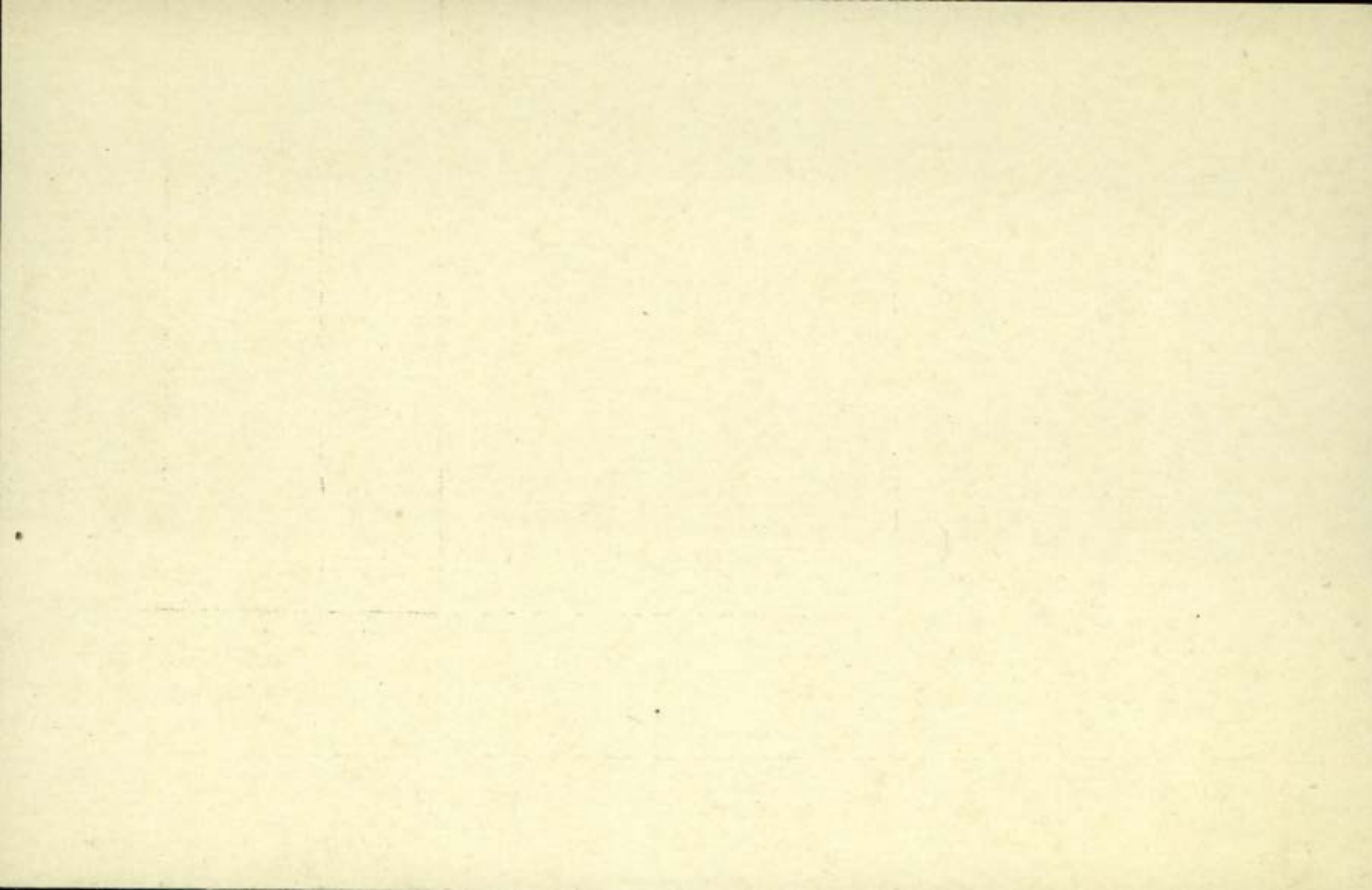
No. 252749 RANK *Pvt.*

NAME *Charlebois, J.* *B.*

T. O. S. *6-4-16* UNIT *209<sup>th</sup> Battalion, 66<sup>th</sup>*  
*(D.O. 49 of 11-4-16)*

M. D. *10<sup>th</sup> 12<sup>th</sup> 16*

| PAID FROM                    | PAID TO                       | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. |                |
|------------------------------|-------------------------------|---------------|---|----------------|
|                              |                               |               | PARTICULARS                             | AUTHORITY      |
| <i>1916</i><br><i>Apr. 6</i> | <i>1916</i><br><i>Apr. 30</i> | <i>✓</i>      | <i>Perfects 13 days pay.</i>            | <i>BO#203.</i> |
| <i>May</i>                   |                               | <i>✓</i>      |   |                |
| <i>June</i>                  |                               | <i>✓</i>      |   |                |
| <i>July</i>                  |                               | <i>✓</i>      |   |                |
| <i>Aug</i>                   |                               | <i>✓</i>      |   |                |
| <i>Sept.</i>                 |                               | <i>✓</i>      |   |                |
| <i>Oct.</i>                  |                               | <i>✓</i>      |   |                |
| <i>Nov</i>                   |                               | <i>✓</i>      |   |                |



NAME

Charlesbois B.

REGT'L No 252749.

RANK AND CORPS

Pte. 209th Bn

H. Q. FILE No. 649-

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

J. 318.

25-3-17.

Sailed from Liverpool for Canada per  
 the Hosp. Ship "Esquibo" on the  
 19<sup>th</sup> inst. - (Nephritis)

| LIST No | HOSPITAL                | DATE OF ADMISSION | REMARKS  |
|---------|-------------------------|-------------------|--|
| 18      | Moose Barr. Shorncliffe | 7-12-16           | Impetigo Contagiosa                              |
| 26      | Out. Mil. Drington Kent | 21-12-16          | Impetigo   |
| 87      | M. H. C. C. Montreal    | 26-3-17           | Admitted. Class 2.                               |
| 192     | " " " " "               | 28-2-17           | Transferred Unfit                                |
| 181     | " " " " "               | 17-7-17           | Out pat, H. Q. "A" Unit <sup>P.C. 508</sup> Edne |

10  
Number 252749

Rank

Pte

~~B~~

Surname CHARLEBOIS

Christian Name

Jean Baptiste

Units

209<sup>th</sup> Bn Can Inf Theatre of War England

Date of Service

11-11-16

Remarks

(D) Geo. Charlebois, Esq.,

Latest Address

St. Justine,  
Co. Vandrevil,

Roll No.

A Page 4864 P.Q.

200m.-6-21..1.

# GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

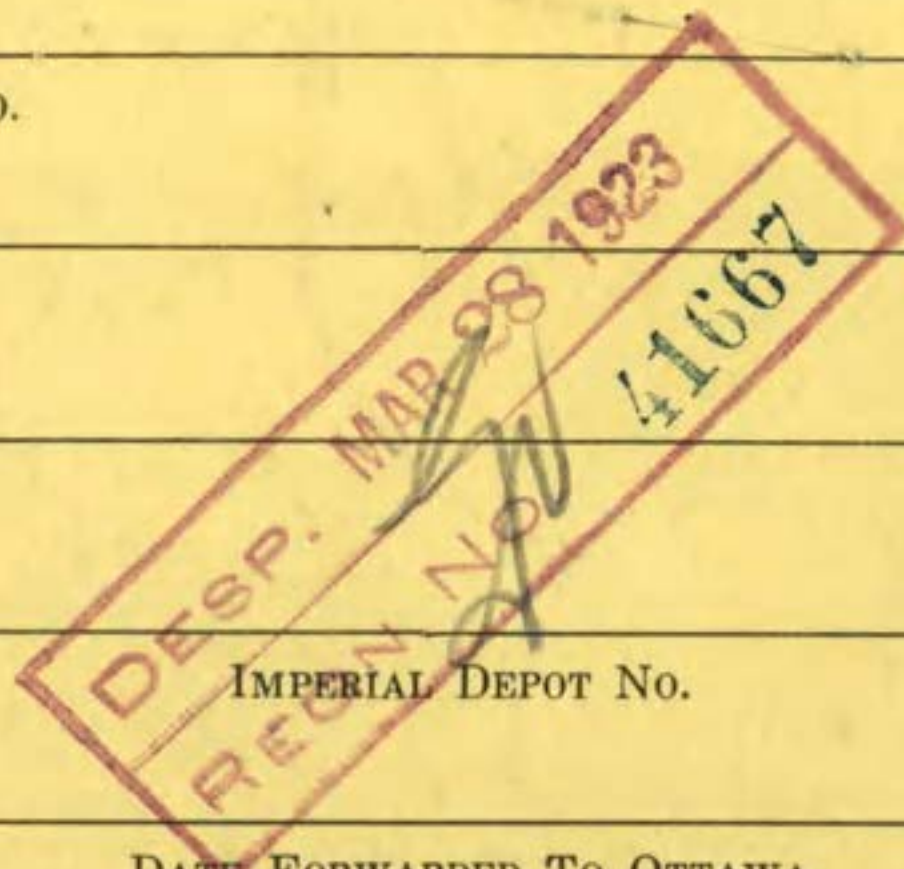
PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA





649-C-9489.

CARD NO.

SURNAME. *Charlebois*

*over*

CHRISTIAN NAMES *Jean Baptiste*

*S.O.S. Disch 31/3/17 = 4*

REGL. No. *252749*

RANK *Pte*

UNIT *209th.*

*Deceased - 6-11-18*

*Bn.*

FORMER CORPS *nil*

*with Doc 4 - 2200 23-3-25*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Charlebois, George*

RELATIONSHIP TO SOLDIER *Brother.*

ADDRESS *St Justine Co. Vaudreuil, P. Q.*

COUNTRY OF BIRTH *Canada, St. Justine Co. P. Q.* DATE *March 6th 1893*

PLACE OF ATTESTATION *Shaunavon, Sask.* DATE *April 6th 1916.*

*Returned to Canada Rev. S.S. "Esquibo," 19-2-17.*

*Medical Unfit.*

*(Auth 238)*

Sailed from Halifax 31/10/16

Per. S. J. Caroneq

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

22

YEARS

—

MONTHS

HEIGHT

5'

FEET

10

INCHES

CHEST MEASUREMENT

37½

INCHES

EXPANSION

—

INCHES

COMPLEXION

Dark

EYES

Brown

HAIR

Black

DISTINGUISHING MARKS

scar above left thumb

MEDICAL EXAMINATION.

PLACE

Shaunavon, Sask.

DATE

April 6<sup>th</sup>. 1916.

Present address— Gouverneur, Sask.

ADMITTING CARD.

Regt. No. 252749 A. & D. No. 22817  
Rank Pte  
Name Charlebois Jno B.  
Corps 209 Batt. Army  
Religion M. Age 33  
M. H. Rec'd M. H. Requested M. H. Ret'd  
Disease Scabies & Impetigo Contagiosa  
Admitted 6/2-16  
Discharged  
Place in Hospital 22  
Transferred to Orpington DEC 20 1916  
Results 9/12 Pointers no. 20-1050

REMARKS:

MEDICAL HISTORY SHEET

Admitted to Hospital on 20<sup>th</sup> Dec 1916

Dep. sent to Orpington 20/12/1916

Received from Registrar this 19<sup>th</sup> 1916 1916

C. H. Williams, Sgt. Ward



OPINION OF THE MEDICAL BOARD.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Two inch scar on left hand.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes.

11. Yes. In addition blood pressure 90 - 140.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held?

Not applicable.

12. Aggravated by service.

15. Yes.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

No exceptional exposure.

16. Yes.

17. Yes.

14. Treatment. In Moore Barracks Hospital and in Ontario Military Hospital,

Orpington, Kent, England. G. N. C. H., Montreal.

18. Is he unfit for Military Service. Yes.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

- a. Probably yes.
- b. Yes.
- c. 75%.

Recommendations: The Board having met and examined Private J. B. Charlebois, #252749, 209th Battalion, C. E. F., recommends that he be discharged as medically unfit - Class "E", with compensation of 4/5 for six months. To be reexamined at end of six months for readjustment.

and that he pass under his own Control A.H.

His permanent address will be:- Gouverneur, Sask.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

Six months for readjustment of disability.

Signatures: -

*A. M. D. H. S.* President.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

4/5.

*A. J. H. S.* Members.

18. State if for discharge on account of unfitness for Service.

Yes, medically unfit for all

Station. Montreal, Que.

Date. June 12th, 1917.

Date. 4.7.17

Approved.

Date. 9/7/17

Military Service.

*A. R. Robichaud Capt*

Medical Officer by whom the case is brought forward.

*A. J. H. S.* Asst. Director of Medical Services.

*D. B. H. S.* Director-General of Medical Services.

**List of Discharge Documents.**

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

\*Only if discharged "Medically unfit."

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

This space to be for numbers


**Proceedings on Discharge.**

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

6181 Bp6 135-14

MILITIA REGIMENT AUG 1917

649-C-9489

|   |   |
|---|---|
| No.   | 252749  |
| Rank  | Private   |
| Surname   | Charlebois  |
| Christian Name  | Jean Baptiste   |
| NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.   |   |
| Corps (Squadron, Battery or Company)  | 209th Bn.   |
| Date of Discharge   | 31/8/17.  |
| Place of Discharge  | Montreal.   |
| 1. DESCRIPTION AT THE TIME OF DISCHARGE.  |   |
| Age.....24.....years.....5.....months.  | Descriptive Marks<br><br> Scar above left thumb |
| Height.....5.....feet.....10.....inches.  |   |
| Complexion Dark   |   |
| Eyes Brown  |   |
| Hair Black  |   |
| Trade Laborer   |   |
| Intended place of residence } St Justin & Statio.   |   |
| (To be given as fully as practicable.) } Que.   |   |
| 2. The above-named man is discharged in consequence of Medical Unfitness  |   |
| Authority 4D. 22-C-578 dated 6th Aug. 1917.   |   |
| N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted. |   |
| 3. Conduct and character while in the service have been, according to the records, etc.   |   |
| N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.  |   |
| 4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)   |   |

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

auth

M. F. B. 218.

100M.—1-17.  
H. Q. 1772-39-113.

(OVER)

Dis Sect  
30-8-17  
CH 4

B.B.

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

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

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date)..... Commanding .....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Montreal. J B Charlebois (Signature of Soldier.)

(Date) 31/8/17. S. Wilton (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....(Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total...1...years...120...days.

11. Confirmation of Discharge.

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

(Place).....

(Signature) G. E. Hall

(Date).....

MAJOR

O. C. "A" Unit

Military Hospitals Commissions Command.

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.)

No Reservations.

J B Charlebois





