199TH BATTALION C.E.F.
IRISH CANADIAN RANGERS

Duplicate

ATTESTATION - PAPER.

No. 919048

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Foshre
1a. What are your Christian names? ..... James Francis
1b. What is your present address? ..... 99, Willibroard Ave
2. In what Town, Township or Parish, and in what Country were you born? ..... Verdun. Montreal
3. What is the name of your next-of kin? ..... Martha Foshre
4. What is the address of your next-of-kin? ..... 99 Willibrood Ave ~~Willibrordoff~~, Montreal, PQ.
4a. What is the relationship of your next-of-kin? ..... Mother
5. What is the date of your birth? ..... 20th Sept 1898
6. What is your Trade or Calling? ..... Machinst
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? ..... 3rd Victoria Rifles
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Francis Foshre, 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.

James F Foshre (Signature of Recruit)

Date March 2nd, 1916. W J McEvoy Capt (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Francis Foshre, 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.

James F Foshre (Signature of Recruit)

Date March 4½ 1916. W J McEvoy Capt (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 4½ day of March 1916.

(Signature of Justice)

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Fosbre

Description of James Francis Fosbre on Enlistment.

Apparent Age 20 years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 6 ins.

Chest measurement.
- Girth when fully expanded ..... ins.
- Range of expansion ..... ins.

Complexion Dark

Eyes Dark Brown

Hair " "

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

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

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 2nd March 1916.

Place Kingsmere

A A Bolduc Lieut
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.

James Fosbre 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.

N Lindsay Lt-Col (Signature of Officer)

Date March 4th 1916.

Original

ATTESTATION PAPER.

No. 919048

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1.	What is your surname?	Fosbre.
1a.	What are your Christian names?	James Francis.
1b.	What is your present address?	99 Willibrod Ave.
2.	In what Town, Township or Parish, and in what Country were you born?	Verdun, Montreal.
3.	What is the name of your next-of kin?	Martha Fosbre.
4.	What is the address of your next-of-kin?	~~99 Willibrod Ave.~~ St. Willibrods Que. Verdun P.Q. Can
4a.	What is the relationship of your next-of-kin?	Mother
5.	What is the date of your birth?	20th September 1898.
6.	What is your Trade or Calling?	Machinist
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.	3rd Victoria Rifles
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, James Francis Fosbre, 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.

James Fosbre (Signature of Recruit)

Date March 4th, 1916. M. J. McEvoy Capt. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Francis Fosbre, 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.

James Fosbre (Signature of Recruit)

Date March 4th 1916. M. J. McEvoy Capt. (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 4th day of March 1916

A. J. Tilley J.P. (Signature of Justice)

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841

Description of James Francis Fostre on Enlistment.

Apparent Age 20 years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 6 ins.

Chest measurement: Girth when fully expanded 38 ins.; Range of expansion 2 ins.

Complexion Dark

Eyes Dark Brown

Hair " "

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

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

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 2nd March 1916.

Place Montreal

A. A. Robertson Lieut
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.

James Fraser 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.

A. Bishop Lt Col (Signature of Officer)

Date March 4th 1916.

4th Bn, CANADIAN GARRISON REGIMENT, C. E. F.

MILITARY DISTRICT No. 4.

Duplicate

Demobilized 5/6/19.

ATTESTATION PAPER.

No. 19048

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? FOSBRE
1a. What are your Christian names? James Francis
1b. What is your present address? 92 Hadley St. Cote St. Paul, Que.
2. In what Town, Township or Parish, and in what Country were you born? Montreal, Que.
3. What is the name of your next-of kin? Mrs. Emily FOSBRE,
4. What is the address of your next-of-kin? 92 Hadley St. Cote St. Paul, Que.
4a. What is the relationship of your next-of-kin? Wife
5. What is the date of your birth? September 20th 1897.
6. What is your Trade or Calling? Machinist
7. Are you married? Married
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 or Naval Force? Yes 24th. Btn. 2 Mos.
If so, state particulars of former Service. 199th. " 2 Years
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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? Yes
14. If so, what was the nature of the disability Chest Wound
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? No
16. If so, what was the reason? Not Applicable

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, FOSBRE James Francis, 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.

J F Fosbre (Signature of Recruit)

Date May 12th 191 . Arthur Locas (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, FOSBRE James Francis, 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.

J F Fosbre (Signature of Recruit)

Date May 12th 191 . Arthur Locas (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, Montreal, Que. this 12th day of May 191 .

Major (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

9133 12/5/19

Description of FOSBRE ~~William~~ JAMES Francis on Enlistment.

Apparent Age 21 years 8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 5½ ins.

Chest measurement.
- Girth when fully expanded ..... 35 ins.
- Range of expansion ..... 3 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Dark Brown

Religious denominations.
- Church of England .....
- 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).

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. A2 for the Canadian Over-Seas Expeditionary Force.

Date May 12th 191 . R.B. Malcolm Capt

Place Montreal, Que. .....
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.

FOSBRE ~~William~~ JAMES Francis 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.

..... Major (Signature of Officer)
O.C. 4th Det. Can. Carr. Regt. CEF

Date May 12th 191 .

30/8/19

2 ENLISTMENTS

REGIMENTAL DOCUMENTS 1st Enl. 24th Batt

NAME L/Cpl Fosbre James Francis REGT. NO. 919048 UNIT 24th C6RB CMPC H.Q. FILE NO.

	CONTENTS 1st Enl		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)	1					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)	2				14695	Category
	TRAINING HISTORY SHEET (M.F.W. 113)						
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)						
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)	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)	2					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)	1					Category (1) Med Unfit
2	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)	2					Demob
1	MEDICAL EXAMINATION (M.F.W. 129)						
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)						
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)						
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)						DESERTION
1	LAST PAY CERTIFICATE (M.F.W. 44)	2					
2	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)	2					2
	PARTICULARS OF CHARACTER (A.F.W. 3226)						13-9
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)						13-9
1	MFW71						11-9
	AFB122	2					
	MBW399	1					
	Eng Med Board	1					
2	Form MBC						
1	BMB1348						
1	Leave Card						
			8-8-22				

MF 28/8/21

W. 2589

P. 539.

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Verdun, Montreal.

NAME AND ADDRESS OF NEXT OF KIN: Mrs A.M. Foster

99 Willibrod St Verdun PQ.

RELATIONSHIP OF NEXT OF KIN: Mother.

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.

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

DATE 1917.	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.
Jan 1.															870.							
Jan.	31	1.00/10	34	10											34 10							
Feb	28		30	80											30 80							
Mar	31		34	10											34 10	51 3 147 164	15/1 3/1 28/2 -"-	220	24/3 17/3	185		
apl.	30		33	.											107 70 33 .							
May 1/21	21		23	10											23 10	47 49 37	24/4 24/4 4/4					
22/31	10		11	00											11 00							
June	1/20		22	-											22 - 196 80							
21-30	10	1.10	11												11						11	31/5
July	31		34	10											34 10	296	24/6					
aug	31		34	10											34 10							
Sept	30		33												33						107	12/6

CPR Rem

OTIONS, &c.

EFFECTIVE DATE	AUTHORITY.

OSPITAL, &c.

NAME OF HOSPITAL

REG'L. NO. 919048 RANK Private NAME Fiebre J.J.

IF IN PERMT. CORPS WHAT UNIT | UNIT 199th Battn. TRANSFERRED TO 23rd Res. Bn. DATE 22-5-17 AUTHORITY SQ 127

PERMANENT FORCE ALLOWANCES TRANSFERRED TO 24th Bn. DATE 21.6.17. AUTHORITY B.O. 140 23/5/17.

PLACE OF ATTESTATION Montreal P.Q. TRANSFERRED TO 1st QRD. DATE 1-11-17 AUTHORITY n.R.

DATE OF ATTESTATION 4th March 1916. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 15.00 DATE EFFECTIVE 1st January 1917

PAYABLE TO Mrs. P.J. Fiebre, 99 Willibrod St. Verdun P.Q. RELATIONSHIP Mother.

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) Stopped EFFECTIVE 1/3/18 REASON Disch. to Can.

DISCHARGE DATE AND PLACE 21.2.18 Canada REASON AND AUTHORITY RO 3451 – 10/2/18 for Disposal.

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) C.D.

ACQUITTANCE ROLLS 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	C REMARKS
													8 70.				Balance from Canada
										15 -		15 .	27 80				
										15 .	3 30	18 30	46 30				Forfeits 3 days pay R.W. B.O. 4/9/17
220 24/3						4 87				15 .	5 50	49 69	24 71				5 days F.P. No 2 B.O. 55. 24/2/17.
185 14/3						4 86	4 86.					82 99					
						4 87	2 43			15		15	42 71				
						7 30											
						243											Trans to 23rd Res Bn. 23/5/17
						730				15 -		36 90	28 91				
						1217							39 91				
										15		15	46 91				To 24th Bn. 21.6.17
												149 89					
11 31/5 6 BB								4 46			1 34 2 20 2 84	10 84	47 07				Q 4005 11/77 29a – 18 19/5 Forfeits 2 days Pay 13.054 25.6.17 Q 4005 1482/203 – 17 19/5
						2 68				15		17 68	63 49			63 49	
	CPh 29/8								4 87								
	Rem 15/8								4 84	15		24 74	72 85				
107 12/6 2 BB.								4 46		15		19 46	86 39				

919048 Pte Postre J. F. A.P.C. 15.

DATE	PAY			FIELD ALLOWANCE			WORKING OR SPECIAL PAY			ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS			
	NO. OF DAYS	RATE	AMOUNT $	AMOUNT c.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT c.	NO. OF DAYS	RATE	AMOUNT $	AMOUNT c.			1		2		3		4		1	2	3	4
															No.	Date	No.	Date	No.	Date	No.	Date				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
Oct	Balce	~~86 39~~ 120.							8639		
	P.P.	34 10						15			
	S. Furlough 24/9/17 to 4/10/17. 130 266 26/9 23 Res	803									
		42 13		Dr. 23 Res AR 154 12/7/17.	9 74				103 78		
					9 74		15				
Nov				A.P.			15				
		33		AR. 1293. 23rd Res Bn. 14-11-17	9 73						
				AR. 1126 23rd Res Bn 13-10-17	9 73						
				" 1209 " " 29-10-17	7 30						
				" 1424 20th Res Bn 29-11-17	7 30						
Dec 1918	"	34 10		A.P. Can Dec		34 06	15		10682		
Jan		67 10		Q 4005. No 37. 24-12-17 1st Q Rd		4 16	30				
				A.P. Can Jan			15				
		34 10		AR. 451. 20 Res Bn 20-12-17		17 03					
				Dnak 3165 CCH Epsom 24-9-17		48 66			56 07		
		34 10				69 85	15		6		
Feb 21	P.P.	23 10		A.P. Can Feb			15		94 17		
				Dnak 437 CCH Work. 16-1-18		7 30					
				AR. 488. " " 29-1-18		7 30					
						14 60					
				" 548 " " 13-2-18		14 60					
				" 552 " " 13-2-18		7 30			27 67 c		
		23 10				36 50	15				
				A.P. Can Mar			15				
				AR. 1886. 28th Res. 28-2-18		9 73			2 94		
						9 73	15				

ASS

DA

9/15.

CASH PAYMENTS			ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4				CREDIT	DEBIT			

This balance cannot be certified correct owing to non-receipt of Active Service Pay Book.

CANADIAN
ASSIGNED PAY AUDITED

AUDIT CLERK

DATE 16.6.19

P 820
12474—3750—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:- 1.1.17		EFFECTIVE DATE:-	
AMOUNT:- $15 00 xx		AMOUNT:-	

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs P. J. Foobre (Mother)
99 Wellibrod St.
Verdun P.Q.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT

PARTICULARS OF RENDERING NON-EFFECTIVE:- Desb to Can. 21-2-18

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS
Mar 31	Bal Forward			
apl.	Ck. 0026 for £ 1-9-10 from estate of 841484 Pte Foobre P.P. C Inst 378 P.P.	33	7 26	Ap Can apl
				Dn. 2870 Eps: 7.9.
May		33	7 26	C.A.F.
		- -	- -	P. Pay Cr in April in Er
July	Cr note 953. Meth. apr May/18 ap. stopd in error.		45 - HS	

ASSI
DAT

~~ENGLAND or~~ CANADA.	SEPARATION ALLOWANCE	ENGLAND or CANADA.
7	EFFECTIVE DATE:–	
£	AMOUNT:–	

NAME:– FOSBRE J. J.

NUMBER:– 919048

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

[illegible] (Mother)
…libord St.
Verdun P.Q.

UNIT AND TRANSFERS

ORIGINAL UNIT:– 199th Battn

DATE ACCOUNT FIRST OPENED:– 1.1.17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			1st QRD

ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	– 10		

RENDERING NON-EFFECTIVE:– Disc to Can. 21-2-18

PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
…ward								2 94		
…21-9-10 from estate of …Fosbre P.G. [illegible] 378		7 26	A/P Can apl				15	12 06 (red) / 4 80 (red)		
	33							28 20		
	33 (red)	7 26 (red)	DN. 2870 Eps: 7.9.17 / C.A.P.	9 73 / 9 73 (red)			15 (red) / 15	18 47 / 3 47		
	– –	– –	P. Pay Cr. in April in error	– –	33 / 33 (red)		15 (red)	29 53 (red)		
…53. Mch apr May/18 AP. chgd in error.		45 – / 45 (red)						15 47		

CANADIAN
ASSIGNED PAY AUDITED
[signature]
AUDIT CLERK
DATE 16.6.19.

NUMBER RANK NAME

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

NAME

PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION

To be made out in duplicate. H.Q. 54-21-23-53

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 199th Duchess of Connaught's Own Irish Canadian Rangers

(2) Regimental Number 919048

(3) Full Name of Soldier Fosbre. James Francis.

(4) Place of Birth Montreal. Que

(5) Are you married, or not ? not

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

(b) Present Postal Address nil

(7) Are you a widower ? no

(8) Have you any children ? nil

If so, give number of boys and girls

Also their names and ages

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes.

If so, state name and address Pat. Jos. Fosbre. same as below.

(10) Is your Mother alive? Yes.

If so, state name and address Martha. Fosbre.
99. Willibroad Ave. Verdun Montreal Que

(11) If your Mother is a widow No

Are you her sole support, or not? Not

(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.

Nil

(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.....

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

Date Nov 30/16

Officer Commanding.

MEDICAL HISTORY SHEET. ORIGINAL

Surname Fosbre Christian Name James Francis

Examined on 2nd day of March 1916
at Montreal

Approved by A A Robertson
Rank Lieut M.O.

Birthplace City or Town Montreal
County

Apparent age 20 years 5 months

Trade or occupation

Height 5 Feet 5 Inches.

Weight 114 Lbs.

Chest measurement Minimum inches.
Maximum expansion inches.

Physical development

Small-Pox Marks

Vaccination Marks Arm Right. Left.
Number 1

When Vaccinated last 7 years ago

(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.
15/9/17	Fit	gas. 8 AUG 1917 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

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

Date.	Result.	Anti-Typhoid Inoculations, Etc.
5.7.16		J.P.B. M.O.
12.7.16		M.O.
21.7.16	Tab	J.P.B. M.O.

Enlisted on 4th day of March 1916 at Montreal MAY 17 1917

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	199th I.C.R.	919048		
Transferred to	23RD RESERVE BATTN C.E.F. TAKEN ON STRENGTH No. 4 CASUALTY U.K.			MAR 18 1918 Adjutant, No. 4 CASUALTY UNIT

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Bramshott.	13-11-17	G.S.W. Chest.	B III for 3 mos. Treasford PRESIDENT. MEDICAL BOARD, BRAMSHOTT.
Bramshott.	19-2-18.	as above.	B III A 7 D 149 days Treasford PRESIDENT. MEDICAL BOARD, BRAMSHOTT.
DISTRICT DEPOT No. 4 Peel Street Barracks, MONTREAL, QUE. MAY 28 1918	G.S.W. Chest D.A.H.	CATEGORY "D" Awaiting X-Ray + Surgical Opinion.	A.R. Robertson Lieut. M.O.

CANADIAN

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. P. B. - 313.
400M.—1-16.
H. Q. 1772-39-439.

C3 AUG 22 1918
H. Aubrey

Christian Name

Surname

STATION.	Date of Arrival at the Station.	Admission into Hospital. Day	Admission into Hospital. Month	Admission into Hospital. Year	Discharge from Hospital. Day	Discharge from Hospital. Month	Discharge from Hospital. Year	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.
Montreal	M.G.H.	1	11	16	9	12	16	Gonorrhoea Epid- orchitis	39	Rest- irrigations - Ice bags Urines clear - no discharge Prostate steel contains infection ~~flies~~ - Light duty Fit	H.B. Small
		5-8-17			4-9-17			G.S.W. Chest	30	R. Haemothorax. aspirated fluid repeat Negative. Transfered Canadian Hospital Epsom	Lord Taylor MAJOR R.A.M.C.
McGill Epsom		4	9	17.	24	Sep		G.S.W. Mid. Sternal Line / Nipple /	21	X Ray report attached. Fully recovered. no disability for full Physical training. CAT PT. A iii	H.H. Stewart CAPT: C.A.M.C. "A" DIVISION.
Drummond Mil Hosp.		29	5	18	20	6	18	Foreign body chest Irregular Heart	22	F.B. right side of chest below nipple and 2" deep. Irregular heart. M.T.W. 180 June 14/18 Discharged to O.C. District Depot #4 Category "C".	Geo. A. Fleet Lt.
ROYAL VICTORIA HOSPITAL, MONTREAL JUL 3 1918					JUL 6		1918	G.S.W. Chest	4	Healed G.S.W. Chest, with foreign body present. Removal of foreign body not recommended by Attending Surgeon. Recommend return to Unit to be brought forward for discharge.	W.A. Hurst Lieut. Capt. for M. O. i/c of Troops Royal Victoria Hospital

CANADIAN MILITARY HOSPITAL EASTERN COMMAND 4 SEP. 1917. EDMONTON, N. 18

Original

MEDICAL HISTORY SHEET

Surname FOSBRE Christian Name ~~William~~ JAMES Francis

Examined on 12th day of May 191 9 at Montreal, Que.

Approved by L. B. Malcolm

Rank Capt. M.O.

Birthplace City or Town Montreal, m County Que.

Apparent age 21 Yrs. 8 Mos.

Trade or occupation Machinsit

Height 5 feet 5½ Inches

Weight 123 lbs.

Chest measurement Minimum 32 inches Maximum expansion 35 inches

Physical development Good

Small-pox Marks None

Vaccination Marks Arm Right Left Number 1

When Vaccinated last Childy

(a) Marks indicating congential peculiarities or previous disease

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

Date	Fit or Unfit	Examined for Re-Engagement	
13/5/19	FIT	A2	M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
23/5/19		Dale Rees Major acc	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
23/5/19		Dale Rees Major acc	M.O.
			M.O.
			M.O.

Enlisted on 12th day of May 191 9 at Montreal, Que.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	4th.C.G.R.	919048		12.5.19
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

EXAMINING MEDICAL BOARD JUL 30 1919 MONTREAL, P.Q.

Station	Date	Disease	Result
		Civil	J. Gendron Capt

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 JAMES Christian Name William Francis

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				

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 4

NAME OF SOLDIER FOSBRE (JAMES) William Francis

REGIMENT 4th Det. C.G.R. C.E.F. RANK Private No. 919048

M.F.B. 465.
50M—2-18.
1772-39-960.

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.

X = Extraction

	Date	Amalgam	Temporary Filling (a)G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	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	1919																					
Fair	July 30					Ext		Discharge												Capt.	4.	R.T.

M.F.B. 465.
50M—2-18.
1772-39-960.

PENTASTOMY PLATINUM

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 2 Div. No. 919048

NAME OF SOLDIER Toohe [illegible] RANK pte

REGIMENT 24th

7/13

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	Pyrrhoea	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 Fair	27/7/18																			Capt Diamond		Cav 8-19-30-31 For discharge
	23/7/18																					Refuse treatment Discharged 23/7/18 Capt Diamond

M. 465
200M-1-17
1772-39-9

DENTAL HISTORY SHEET

CASE HISTORY SHEET.

ROYAL VICTORIA HOSPITAL, MONTREAL. Hospital. M.D. No.4 Station.

No. 919048 Rank Private Name J.F. Fosbre. Age 22

Unit DISTRICT DEPOT #4 (199th Battn) Completed years of service (Where and how long) C/9 E/10 F/3

Date of admission 3rd July 1918 Date of discharge 6th July 1918

Diagnosis G.S.W. Chest. Place of origin France.

CONDITION ON ADMISSION AND PROGRESS OF CASE

Patient complains of shortness of breath, Was wounded in chest (R) July 1917 by shrapnel bullet. Drainage was put in and wound healed in October 1917 Broke down three weeks later, discharged for a week or more then gradually healed. Was entirely healed by middle of november. Since then has remained healed. After being wounded his cough began, and since has had intermittent attacks of coughing. Cough is troublesom especially if walking any distance or exerting himself.

The attending Surgeon reports :-
Gunshot wound of chest with foreign body present.
No evidence of infection around bullet at present.
Do not recommend removal of bullet.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.) Negative.

TREATMENT (Especially any specific or special form.) Not Treated. Removal of foreign body not recommended by attending surgeon.

CONDITION ON DISCHARGE, (and disposal made of case.) Same as on admission. Recommend transfer back to D.D. #4 to be brought forward for discharge.

Date 6th July 1918

W. H. Hunter Lieut Capt.
Medical Officer i/c case.
M. O. i/c of Troops Royal Victoria Hospital.

M. F. B. 313a.
50M.—3-18.
1772—39-439.

17

CASE HISTORY SHEET.

DRUMMOND MILITARY Hospital. D/D/#4. Station.

No. 919048 Rank Pte. Name Fosbre. Age 22

Unit D/D/#4 Completed years of service (Where and how long) C-11/12. E-7/12. F+2/12.

Date of admission May 29/18. Date of discharge June 20/18

Diagnosis G.S.W. chest Place of origin France.

CONDITION ON ADMISSION AND PROGRESS OF CASE

Complaints - Cough and expectoration. Dyspnoea on exertion.

History - Shrapnel wound July 9/17 at Lens. Shrapnel entered over sternum and has never been extracted. Haemothorax followed. In bed 3 months. Wound healed permanently in 3 months. Patient states that he has had a cough with expectoration since he was wounded and dyspnoea onexertion.

Pres. Cond - There is a small healed depressed adherent scar over centre of sternum at level of 5th. rib. Examination of chest - Chest rather narrow. Expansion 3½". Resonant throughout and no adventitious sounds. V.R. = no evidence of tuberculosis.

X-Ray of chest shows the presence of a foreign body, resembling shrapnel ball, on the right side on a level with the 9th. rib near the axilla. - below right nipple 2" deep.

Examination of heart - P.M.I. seen and felt in 5th. and 6th. spaces. 8 c.m. from M.S.L. No thrill. R.C.D. 3 sp. L.S.M. 9½ Sounds irregular. No adventitious sounds.

Pulse - rapid, markedly irregular, low tension.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.) Neg-

TREATMENT

(Especially any specific or special form.) X ray-

CONDITION ON DISCHARGE. Same as on admission

(and disposal made of case.) M.F.W. 180 June 14/18 C.

Date.....

Medical Officer i/c case.

M. F. B. 313a.
50M.—3-18.
1772—39-439.

2536

CASE HISTORY SHEET.

ROYAL VICTORIA HOSPITAL, MONTREAL. Hospital. M.D. No.4 Station.

No. 919048 Rank Private Name J.F. Fosbre. Age 22

Unit 199th Batt'n DISTRICT DEPOT #4 Completed years of service (Where and how long) C/9 B/10 F/3

Date of admission 3rd July 1918 Date of discharge 6th July 1918

Diagnosis G.S.W. Chest. Place of origin France.

CONDITION ON ADMISSION AND PROGRESS OF CASE

Patient complains of shortness of breath. Was wounded in chest (R) July 1917 by shrapnel bullet. Drainage was put in and wound healed in October 1917 Broke down three weeks later, discharged for a week or more then gradually healed. Was entirely healed by middle of november. Since then has remained healed. After being wounded his cough began, and since has had intermittent attacks of coughing. Cough is troublesom especially if walking any distance or exerting himself.

The attending Surgeon reports :-
Gunshot wound of chest with foreign body present.
No evidence of infection around bullet at present.
Do not recommend removal of bullet.

FAMILY HISTORY Negative.

(Tuberculosis, mental or nervous diseases.)

TREATMENT Not Treated. Removal of foreign body not recommended by attending surgeon.

(Especially any specific or special form.)

CONDITION ON DISCHARGE Same as on admission. Recommend transfer back to D.D. #4 to be brought forward for discharge.

(and disposal made of case.)

Date 6th July 1918

W. H. Hurstle Lieut. Capt.
Medical Officer i/c case,
M. O. i/c of Troops Royal Victoria Hospital.

M. F. B. 313a.
50M.—3 18.
1772—39-439.

6
320
2574
6

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 919048 Rank L./Cpl. Surname Fosbre. James. Francis
(Given name in full)

Unit or Corps 4th. C. G. R. Birthplace Montreal. P. Q.

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. **GENERAL DESCRIPTION:**

Physique Good Weight 123 lbs. Height 5 ft. 5½ in. Colour of Eyes Blue

Nutrition Good

Pulse 72

Condition of arteries Good

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 22 ft.

Left 22 ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)

Blue mole on Back
Scar on centre of Chest

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System No. Genito Urinary System No. Cardio-Vascular System No.

Special Senses No. Integumentary System No. Respiratory System No.

Disturbance of mentality No. Muscular System No. Digestive System No.

Osseous and Joint System No. Any other general condition No.

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Fit for Discharge

EXAMINING MEDICAL BOARD M.D. 4. JUL 30 1919 MONTREAL, P.Q.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

Date ..... Signed .....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

EXAMINING MEDICAL BOARD
JUL 30 1919
MONTREAL, P.Q.

Examined at ..JUL. 30 1919 (Canada)

Date ..... Signed .....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

M.F.W. 129
1033 (D.P. 500M-11-18.)
1772-39-1142.

M.F.W. 44.
200M-3-19 (D.P. 254).
1772-39-903 (9986).

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 919408 Rank L/Corpl. Name Fosbre, J.F.
(Surname first)

Unit C.M.P.C. No.4. Det. who was* Discharged

On July 31st 191 9, to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from July 1st to July 31st 191 9 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		
Regimental Pay 31 days at $ 1 c 05		32 55
Field Allowance 31 days at $ c 10		3 10
Separation Allowance July 1919.		30 00
Clothing Allowance Ex. Duty.----31 days at 1.00		31 00
War Service Gratuity		
*Other Credits 31 days Subs at 80¢		24 80
Advances Ch. No. 273	25 00	
Separation Allowance and Assigned Pay Cheque No. 388	45 00	
*Other Charges		
Balance on transfer or on discharge, cheque No. 442	51 45	
Total	121 45	121 45

*Give particulars.

A monthly stoppage of $ 15.00 (†) has Been (‡) been paid on account of Assigned Pay for the month of July 191 9 and Separation Allce. for month of July 191 9 (to) Assignee Mrs. E.M. Fosbre,

(Address) 92 Hadley St, Cote St Paul, Montreal, Que.

(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

Outfit Allowance of $..... has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment 12/5/1919 married or single Married

(2) Separation Allowance, entitled or not Yes (3) Reason for discharge Demobilization

(4) Authority for discharge or transfer R.O. 1328 Dated 18-11-1918

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date July 31st 1919 R Bastard Capt. Paymaster

Place Montreal, Q, Que. No. 4 Det., Canadian Military Pay Corps Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Articles 122 and 130) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.

SUPPLEMENTARY CREDITS, DEBITS, ADVANCES, Etc.

Credits, Debits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	A.R. No. or Cheque No.	Amount in Words	AMOUNT				Signature of Officer Making Payment.
				Dr.		Cr.		
.....	.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	.....	....	.....	....	.....

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 919048 Rank Pte. Name Fosbre James

Corps 199th Bn who was* discharged

On 2nd Sept 191 8, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1st Sept 191 8 to 2ns Sept 191 8, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month	20	50	Bal. Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay 2 days at $ 1 c. 00	2	00
Advances by Cheques No.			Field Allow. 2 days at $ c. 10		20
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances* Civ clothing	35	00
Payment on transfer or discharge No 5101	51	30	Other Credits* Subs 2 dys @80¢	1	60
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit) P.D.P.	33	00
Total	71	80	Total	71	80

*Give particulars.

A monthly stoppage of $15.00 (†) has been (‡) been paid on account of Assigned Pay for the month of August 191 8 and Sep'n Allce. for month of Nil 191 (to) Assignee M.s. P.J. Fosbre

(Address) 99 Willibrod St Verdun

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of $..... has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment 4-3-16

(2) if married and if a Separation Allowance Card has been submitted Nil

(3) cause of discharge ..... authority MD4 22-F-47

(4) authority for transfer .....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date .....

Place .....

MILITARY DISTRICT No. 4 SEP 2 1918 DEMOBILIZATION

Capt. A.V.
O.C.—Demobilization Pay Division-Military Dist. 4

Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

300M—2-18.
H. Q. 1772-39-903.

Form P. 85.
1918—[illegible]—29-11-16.

Montreal

MD 4

FORM OF WILL. 124164

Name in full.

I Pte. Jim Fosbre

Regimental Number 919048 serving in 2 C.R.D.C.O

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

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

I DEVISE and BEQUEATH all my real estate unto

Mrs. Martha Fosbre
99 Willibrord ave Verdun
Montreal. Can

absolutely, and my personal estate I bequeath to

Name & Address of persons or person to receive personal estate (see Note 1.)

Mrs. Martha Fosbre
99 Willibrord ave Verdun
Montreal. Can

Fill in Date and Year.

IN WITNESS WHEREOF I have hereunto set my hand this day of A.D. 191.

Pte Jim. Fosbre
(Signature)

Signed by the said Testator as his last Will and Testament, the same having been read over and explained to him, in the presence of us both present at the same time who at his request and in his presence and in the presence of each other have subscribed our names as witnesses.

Name of Witness W. D. Doyle
Address of Witness 199th Bn. D.C.O. & C.R.
Occupation of Witness Capt. 199th Bn
Name of Witness J. T. Foley
Address of Witness 199th Battn.
Occupation of Witness Lieut. 199th Battn.

N.B.—Personal Estate includes pay, effects, money in Bank, insurance policy, in fact everything except real Estate.

Recd.
May 28/17

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 919048 (Rank) Private

Name (in full) FOSBRE James Francis. enlisted in the 199th Battalion

CANADIAN EXPEDITIONARY FORCE at Montreal QUEBEC on the 4th day of March 1916.

HE served in 19 France.

and is now discharged from the service by reason of KRAO 377 (10) CM 1917

MD 4 22-F-47 Category "E" Medically Unfit A.O. C668

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows :—

Age 23 years 11 months	Marks or Scars Mole in centre of back.
Height 5 feet 5½ inches	
Complexion Fair	
Eyes Blue.	
Hair Dark Brown.	

J. F. Fosbre
Signature of Soldier

R. W. Lyce
Issuing Officer

Lieutenant,
Rank
Officer i/c Discharge Section, District Depot No. 4,
Appointment

Date of Discharge September 2nd 1918

Signed at Montreal QUEBEC this 2nd day of September 19 18

in Military District No. 4

File Reference No. DD19-F-13

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 919048 (Rank) Private Name FOSBRE, James Francis.

Unit 199th Battalion.

Address on Discharge 99 Williboard Ave Verdun QUEBEC.

Character and Conduct — Good —

Former Occupation Machinist.

Special Qualifications of Value in Civil Life Machinist.

Medals and Decorations Entitled to wear one Casualty Stripe21-7-17.

Remarks European War, served in France. 11-6-17 to 4-8-17

Signed at Montreal QUEBEC this 2nd day of September 1918

R Wigle

Name of Officer ~~Lieutenant~~,
Officer i/c Discharge Section, District Depot No. 4.

Rank

Appointment

COPY.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 219048 (Rank) Lance-Corporal

Name (in full) James Francis FOSBE enlisted in the 4th.C.G.R. & Canadian Military Police Corps No.4.Detachment.

CANADIAN EXPEDITIONARY FORCE at Montreal,Quebec on the Twelfth.

day of May 19 19.

HE served in C A N A D A

and is now discharged from the service by reason of DEMOBILIZATION. AUTH.P.C.O.1326.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows :—

Age 21 Years, 10 Months.

Height 5 Feet 5½ Inches.

Complexion Fair.

Eyes Blue.

Hair Dark Brown.

Marks or Scars N I L

J.F.Fosbe
Signature of Soldier

Dick Worsfold Lieut.-Col.
Issuing Officer
Assistant Provost Marshal M.D.4.
Rank

Appointment

Date of Discharge July 31st,1919.

Signed at Montreal,Quebec. this Thirty-First day of July 19 19.

in Military District No. Four.

File Reference No. 22-F-47

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39
200m.—2-18.
H.Q. 1772-39-582

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. 919048 (Rank) Lance-Corporal Name James Francis FOSBERY

Unit Canadian Military Police Corps No. 4. Detachment.

Address on Discharge 1260 Ethel St., Verdun, P.Q.

Character and Conduct Very Good — A hardworking reliable man

Former Occupation Machinist

Special Qualifications of Value in Civil Life Machinist

Medals and Decorations N I L

Remarks

Signed at Montreal, Quebec. this Thirty-First day of July 1919.

Dick Worrall Lieut.-Col.

Name of Officer

Assistant Provost Marshal M. D. 4.

Rank

Appointment

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

M. F. W. 54. (A. F. B. 10s.
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 4th.Det.Can.Garr.Regt., CEF

Regimental No. 919048 Rank Private C. E. F. Name FOSBRE (JAMES) William Francis

Enlisted (*a*)..... Terms of Service (*a*)..... Service reckons from (*a*) 12.5.19

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*) Machinist

Report: Date	Report: From whom received	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
		TAKEN ON STRENGTH 4TH BN. C, G, E, C, B, F, AUTH, PT, H D, Q, 133		12-5-19.	
		STRUCK OFF STRENGTH 4TH BN. C, G, E, C, E, F, AUTH, PT, H D, Q, 148		27-5-19	
28-5-19.		TOS.CMPC.No.4.Det.on transfer from 4th.C.G.R. effective 28-5-19.Pt.2. Orders, No.149,29-5-19.	Montreal.	29-5-19.	
28-5-19.		Promoted L/Cpl.effective 28-5-19. Pt.2. Orders 149 dated 29-5-19.	Montreal.	29-5-19.	
31-7-19.		S.O.S.C.M.P.C. No.4.Det. on Demobilization Auth. R.O.1328,effective 31-7-19,Pt.2.Orders 212,dated 31-7-19.	Montreal.	31-7-19.	

(*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				

Army Form B. 103.

Casualty Form—Active Service.

Regiment or Corps 199th Battalion, Irish Can. Rangers. C.E.F. Regimental Number 919048

Rank ~~919048~~ Pte Surname Roslee. Christian Name James. Francis

Religion R. C. Age on Enlistment 20 years 5 months.

Enlisted (a) 4-3-16 Terms of Service (a) D of. War. Service reckons from (a) 4-3-16

Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended { _____ } Re-engaged { _____ } Qualification (b) Machinist

or Corps Trade and Rate _____

_____ Signature of Officer i/c Records.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ...	Canada	16-12-16	
		Disembarked...	England	26-12-16.	
14-2-18	6.C.H. Bearwood	Ceases to be attached to 6.C.H. Bearwood on return to 1st Que Reg. Depot	Bramshott.	14-2-16	Att'd Do No 46 of 15-2-18.
22-2-18	1st Que Regt'l. Depot	ON COMMAND TO C.D.D. Burton	Pl. H.B.C. 48	23-2-18	
MAR 1 8 1918		TAKEN ON STRENGTH No. 4 CASUALTY UNIT			
		Adjutant, No. 4 CASUALTY UNIT			

Jno. Drake Capt. ADJUTANT, 1ST. QUEBEC REGT'L. DEPOT.

(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) Signaller, Shoeing-smith, &c.

[P.T.O.

(B99130) W 15012—5156 J. P. & Co., Ltd. Forms/B103/3.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
APR 18 1918	T. O. S. District Depot No. 4			AUTHY. PT. II D. O. No. [illegible] 18/4/18	
Discharged September, 2nd, 1918. Auth. K.R.&.O. 377 (10) C.M. 1917.					
MD4. 22-F-47. Category "E". Medically Unfit. R.O. #668.					

[illegible] Gaynor
Lieutenant,
Officer I/c Discharge Section, District Depot No. 4.

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 199th Battalion, Irish Canadian Rangers, C.E.F.

Regimental No. 919048 Rank Private. Name Fosbre, James Francis

Enlisted (a) 4/2/16 Terms of Service (a) Dofw & Hmw Service reckons from (a) 4/2/16

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

Extended Re-engaged Qualification (b) Machinist

Report Date	Report From whom received	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.
		Embarked Disembarked	Canada England	16-12-16 26-12-16	S.S. Olympic
		10-5-17. 00. 199th Transferred to the 23rd Reserve Bn. Shoreham.	Witley.	10-5-17.	Part II D.O. 130/17.
					Capt. & Adjt. For Lieut. Col. O. C. 199th Bn. C. E. F.
12-5-17	10/5/17 23rd. R. Bn.	Taken on strength	Shoreham	10.5.17	A.F.W. 3210 No 127
23.5.17	23rd. R. Bn.	Posted to 24th. Bn.	Shoreham	23.5.17	A.F.W. 3210 No 140
					W.H. Chalmers Lieut. for OC 23rd. Res. Bn. C. E. F.
24.5.17	2 C.I.B. Dep	Reinfmt. ex 23rd Bn	2 C.I.B. Dep	23.5.17	NR 1149. 920.52 dd 18/6/17
14.6.17	2 C.I.B. Dep	Forfeit 2 days pay for (1) Breaking away from Training Camp (2) Bathing in River Contrary to S.A.B.R. 1149 dd 14/5/17		8.6.17	B 2069. 920.54 dd 25/6/17

(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.

CERTIFIED CORRECT. 6 JUN 17 LONDON.

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				
11.6.17.	2 CIB.D.	Left join 24th. Cdn. Bn.	Field	11.6.17.	NR.307.
15.6.17.	24 C.Bn.	Joined 24th. Cdn. Bn.	"	12.6.17.	B213. 323 d/-7.7.17.
11.7.17	. . .	Wounded	Not stated	10.7.17	K1.16/13454 3264 d/-7/7/17
21.7.17	7 Gen	sm-shed	7 Gen.	21.7.17	W3034 W.5761
21.7.17	7 CCS.	6. . .	7 CCS	9.7.17	2a36 334 dt 10/8/17
21.7.17	. . .	. . .	106 Barge	20.7.17	
4.8.17	7 Gen.	P. Haemothorax. Posted to 1st. Queb. Reg. Dep. D'ham	Patrick	4.8.17	W3083-3658 P2041 dt 18/8/17

J. O'Hogan Major for Lt.-Col., A.A.G.
Canadian Section G.H.Q. 3rd Echelon B.E.F.

13.8.17	pt O.R.D.	T.O.S on posting from 84th Bn	Shoreham	5.8.17	D.0139

for Colonel i/c Records. Lieut.

	23rd. CAN. RES. BN.	TAKEN ON STRENGTH	SHOREHAM	24/9/17	D.R.H.Q. No. 266.
26/9/17 16/11/17	23rd. CAN. RES. BN.	POSTED TO 1st. QUE. REG. DEPOT.	B. Shott	16/11/17	D.R.H.Q. No. 317 for O.C. 23rd. Can. Res. Bn.
17.11.17.	1st 2 R.D.	Att. Depot from 23rd Res.	Bramshott.	17.11.	Do 224. 16.11.17.
16.1.18	1st. Que. Regt'l. Depot.	ON COMMAND TO Can. Convalescent Hospitals Bearwood & Wokingham			D.R.H.Q. 16.1.18.

MAR 1 81918

1ST. QUEBEC REGT'L DEPOT.

ADJUTANT,

Adjutant,

No. 4 CASUALTY UNIT

ON STRENGTH No. 4 CASUALTY UNIT

Form R 122.
2353—100M—9-12-16.

J.P. Rank Pte Name FOSBRE, James Francis - Reg'l No. 919048 -

Unit 199th Bn. If in perm. Corps What Unit? Married or Single Single. -

Place and Date of Enlistment Montreal. 4th March.1916. - Place of Birth Verdun.Montreal. -

MX 24/10/21 mj

Name and Address, Next-of-Kin Martha Fosbre. -

St.Willibrods Ave. Verdun. P.Q.Canada. - Relationship Mother. -

Assigned Pay Monthly $ Payable to

Relationship

N/S No. 11933.
File R.L.
Category OK Canada.

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. V., Ld.—9546-16.

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		26 DEC 1916	
10.5.17	23rd Res	T.O.S from 199th Bn	Shoreham	10.5.17	P.C.-I.O 127 4 P.O 1302 d/5.5.17 of 199th Bn.
22.5.17	"	S.O.S to 24th Bn	"	22.5.17	— 140 4 D.O 52 d/18.6.17 of 24th Bn
12.7.17	24th Bn	No 7 Cas Clearing Stn. "Dangerously Wounded		10.7.17	C.C.S. 561
9.8.17	" "	Gen. Mily. Hosp. Silver St. Edmonton N.		5.8.17	C.L.B 434 G.S.W. Chest.
30.7.17	" "	7 Gen. Hosp. St. Omer.		21.7.17	C.C.S. No. — —
13.8.17	1st Q.R.D.	T.O.S. from 24th Bn.	Shoreham	5.8.17	P.C. 139 D.O. 71 d/16.8.17 24th Bn
7.9.17	1st Q Regt.	Trans Mil Conv Hosp Woodcote Pk	Epsom	5.9.17	C.L.B.
27.9.17	"	Disch " " " "	Epsom	24.9.17	C.L.B 22
27.9.17	1st Q.R.D.	S.O.S to 23 Res Bn	S'ham	24.9.17	D.O 178 4 P.O 266 d/26.9.17 of 23rd Res.

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.
					Pte 224 d. 17.11.17 of 1st QRD
16-11-17	23 Res.	S.O.S. to 1st QRD	Bshott Pte	16.11.17	Pte 237.
17-1-18	1QRD	Ch Con b&H Bearwood	✓ Pte	15-1-18	DO 15
16-2-18	"	cease con at above	— —	15-2-18	DO 42
16-2-18	23 Res	Attd for QRCD & P	— —	15-2-18	DO 47.
23-2-18	1QRD	On Com CDD. cease con at CDD is	— —	25-2-18	DO 48
11-3-18	"	SOS to Canada A.F.	— —	26-2-18	DO 61

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

29246-1-83

W.L.H.

Name FOSBRE. James Francis,
Surname Christian Name

Regimental Number 919048 Rank Pte.

Unit 24th. Battn.

Original Unit

District where paid M.D. 4.

Date of Discharge

P. D. P. Filing Number 4-182-4.

Address (in full) 99 Willibroad St., Verdun, Que.

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

L. L. 46038—M. & D. 9245.

Total Credits 91 days	FIRST PAYMENT Cheque No. A	Date	Amount 30 days	SECOND PAYMENT Cheque No. B	Date	Amount 30 days	FINAL PAYMENT Cheque No. C	Date	Amount 31 days	Balance Over-payments to be Recovered	Total Amount Paid
100 10	6487	Oct.1918 2	33 00	C3603	Nov. 1918 4.	34. 10				33. 00	67 10

M. F. W. 127.
25M.—8-18.
1772-30-1140.

Remarks: First Pay D.D. 4.

99 Willibrod Ave
Verdun
Que.

Dec'n No 29246/B.88 W. S. G. File No .....

Award ..... days at $ 70 ~~per day~~ $

S. A. ..... months at $ ... per mo. $ ..... $ 350

Less P. D. P. Credited $ 100.10

$

Less further debit balance $.....

Net due [illegible] 249.90

TO SOLI... PENDENT

	Ag. No	[illegible]		[illegible]	Amount	
1	2762	432602	70 00			
2	2353A	434029	20 00			
3	1963B	437315	70 00			
4	1696	442761	39 90			
5						
6						
	Total		249.90	Total		

12 4/19
19.4.19
23/5/19

GEN'L AUDITOR
Posting checked by
[signature]
Date 22-7-19

E.

L-L. Job 5470—M. & D. 68

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

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

Fosbre

To Whom Mrs P. J. Fosbre
Address 99 Millibrod
Verdun Que

By Whom Assigned Fosbre J
Regtl. No. 919148
Rank Pte
Corps 199 Bn C.E.F. L.C.R

Rate 1500

DEC 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				Consolidated Aye
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—6-16.
1772—39—819.

Sheet No. 2. Mrs P. J ~~Fosbre~~ Fosbre

L. L. Job 4503. - Req. 6832.

Name of Soldier Fosbre J #919048 Pte / 199 Bn

15 00

DEC 1 1916

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1917	U 36124	30	3	
Feb.		A 45107	15		15 P.
March		U 46377	15		15 W.
April		F 1517	15		15 W.
May		U 7858	15		
June		T 14999	15		15 W
July		B 23206	15		C
Aug.		N 28774	15	16 3	03
Sept.		T 35713	15	1	2
Oct.		W H 33 ~~54~~ 51	15	1	196
Nov.		A 27401	15		
Dec.		I 5405D	15		
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE 16-6-19

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
ıg.	1918			
pt.				
t.				
ov.				
ec.				
n.	1919			
b.				
ırch				
ril				
y				
ıe				
y				
g.				
t.				
r.				
	1920			
ch				
l				

D 28/8/21 4

NAME Fosbre, James Francis

S.O.S. 31-7-19 Demob.

Tor. D.O. Pt. II 212 of 31-7-19. C.M.P.C. No 4 Det.

S.O.S. M.D. 2-9-18

D.O. 139-9-9-18 No 4 Det.

RANK & NO. Pte. 919048

Y.O.S. 12-5-19

CORPS ~~199 th~~ C.M.P.C. Batt.

D.O. 133. 14-5-19. 4/C.G.R.

ENLISTMENT. PLACE Montreal P.Q. DATE March 4th. 1916.

FORMER CORPS 3 rd. Victoria Rifles

COUNTRY OF BIRTH Canada, Verdun, P.Q.

NEXT OF KIN Fosbre, Mrs Martha (Mother)

ADDRESS OF NEXT OF KIN 99, Willibrords St., Montreal, P.Q.

DISCHARGE, PLACE

DATE

R/C 16/3/18 8/15 4

H.J.

L. L. 85093—M. & D. 5952.

M. F W. 22.—50m.—1-15.
H. Q. 1772—39—839

From Halifax per S.S. Olympic 13-12-16.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Machinist RELIGION R.C.

DESCRIPTION.

APPARENT AGE 20 YEARS 5 MONTHS

HEIGHT 5 FEET 6 INCHES

CHEST MEASUREMENT Not INCHES Stated EXPANSION ——— INCHES

COMPLEXION Dark EYES Dk. Brown HAIR Dk. Brown

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION. PLACE Montreal P.Q. DATE March 2nd 1916

REMARKS:

REGT'L No. 919048

NAME Foskett, James Francis

H. Q. FILE No. 649.

RANK AND CORPS Pte. 24th Bn. (Form 199th Bn)

FOLLOWS NO.

FOLLOWS

CABLE NO.	CABLE DATE	"C" NATURE OF CASUALTY
M. 5709	12-7-17	Dangerously wounded, 7. Gen. Hosp. July. 10th 1917.

L. L. 20497—M. & D. 7908

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-S93.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 561	No 7 Cas. Cl. Stat.	18-7-17	Daug. Wd. 21-8-17
A 576	7 Gen., St. Omer	21-7-17	G.S.W. chest ser.
B 434.	Gen. Mil. Silver st. Edmonton. N.	5-8-17	" " " 3-9-17.
B 5-2,	to Mil. Con, White Pk. Epsom	5-9-17.	" " (1st Duer Regt 5-10-17
B 22	Discharged	24-9-17	G.S.W. & chest.

S.O.S. Demob. 31-7-19-MD.4.

649-F-5865

FOSBRE, James F. (Pte) No.919048 formerly 199th Bn. 24th Bn.

Medals and Decorations (Widow) Mrs. Emily Fosbie, Fosbre
1/1/22 205-9 ~~2045~~ Jacques Hertel St.
Ville Emard, Montreal, P.Q.

Plaques and Scroll (Widow) same as above. Death due to Service auth. B.P.C.

Ser 99799

Memorial Cross ~~(Widow)~~ Died after 11.11.20.

(widow) D.R. Mrs Emily Fosbre 205-9 Jacques Hertel St. Ville Emard Montreal P.Q.

not eligible for star (see HQ file re mother) Death due to Service Montreal P.Q.

Elig. V.M. Cross auth B.P.C. 57479

Elig. B.W.M. (married before attestation)

Scroll Desp. AUG 29 1924 Regn. No 803

Plague Desp. FEB 5 1925 Regn. No 1707

20 JUN. 1922

b 52 856

REG. NO. 190418 NAME (SURNAME FIRST) Foster 0439 2556 2273

RANK Private CORPS R.A.M.C. #4 43

AGE 22 SERVICE 2/1/3

NAME OF HOSPITAL Drummond PLACE Montreal

DATE OF ADMISSION May 29 18 3 7 18

DISEASE G.S.W. Chest. G.S.W. Chest

DISCHARGE June 20 18 6 7 18

OPERATION

DISCHARGED TO DUTY Yes

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS

Gun

Number 919048 Rank ~~Pte~~ Gnr

Surname FOSBRE

Christian Name James Francis

Units 24th Bty C.A.N. Inf. Theatre of War France

Date of Service 22-5-17

Remarks Mrs. E. Foster (wife) 2059 Jacques Hertel St. 99 Willibord Ave

Latest Address Ville Emard Montreal P.Q. ~~Verdun~~ Que

Roll No B Page 17593

[illegible] .-2-21. .

3/2/23

M 83-29

BBV, Ref 10-1-23

DESP OCT 12 1922
EGYPT No. 13530

No. 53 78 RANK Pte NAME Forbes J. F.

T.O.S. 29-4-15 UNIT 5th Canadian Mounted Rifles
July paylist

M. D. 4.

PAID FROM	PAID TO	SIG. OR REC'T
1915	1915	
June 29	June 30	n.
July 1	July 16	

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS	AUTHORITY

UNIT SAILED
JUL 18 1915

No. 919048 Rank Pte Name Foster James Francis

T. O. S. 4-3-16 (Do # 17-4-3-16) Unit 199th Battalion (Sixth Canadian Rangers)

M. D. 4

PAID FROM 1916	PAID TO 1916	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
Mar 4	Mar 31	✓		
April		✓		
May		✓	Forfeits 1 days pay	Do 89 of 29-5-16.
June		✓	Forfeits 10 days pay	Do 94 of 3-6-16.
July		✓		
Aug		✓		
Sept		✓	Forfeits 1 days pay	Do 197 of 30-9-16.
Oct		✓	Forfeits 2 days pay	Do 210 of 17-10-16.
Nov		✓		
Dec		✓		

UNIT SAILED
DEC 15 1916

CANADIAN MILITARY POLICE CORPS
No. 4 Detachment C. E. F.

M. F. W. 71—500M.—6 13.
1772—39—961.

NAME FOSBRE, James Francis.

REGIMENTAL NO. 919048 RANK

ENLISTED AT Montreal, 4th.C.G.R. PROMOTIONS, &c. AND DATE

DATE TOS.CMPC.on transfer 28-5-19.Auth. DO.Pt.2.No.149

IF SERVED PREVIOUSLY. STATE UNIT. &c. dated 29-5-19. (with subsistence)

MARRIED, WIDOWER, OR SINGLE Married.

NEXT OF KIN RELATIONSHIP

ADDRESS OF

ASSIGNMENT OF PAY $ C. TO

ADDRESS

SEPARATION ALLOWANCE. ENTITLED OR NOT Category "A2"

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

CASUALTIES, &c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	NO.	DATE	
Pr.L.cpl. 28-5-19.	149	29-5-19.	
E.D.Pay 28-5-19.	149	29-5-19.	
On duty to St.Anne 31-5-19.	152	1-6-19.	
Ret.to duty,14-6-19.	166	15-6-19.	
S.O.S. 31-7-19.	212	31-7-19.	

FORM R. 149.
7106—250m—7/2/17.

Name FOSBRE. James. Francis. *Rank* Pte. *Reg. No.* 919048.

Unit 24th. Battalion.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
10.7.17						
2.10-7-17.7.	CCS. DANG.	WOUNDED.	A561. M5709.	12-7-		
21-7	7 Gen Hosp St Omer		GSW Chest	A576		
5.8.17.	Gen. Mil Edmonton	Hosp.				
	Silver St	Edmonton	"	B434		
5.9.	M.C.H. Epsom (BC.1590)		do	135		
24.9.17.	Discharged	BC.409.	"	B22.		

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

No. 919048. RANK Pte NAME Foshee, J.

T. O. S. UNIT 4th District Depot.

M. D. 4.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918.			
apl. 18	apl. 30	✓	199th Bn.	

*Name ....FOBRE....J.....Rank ..Pte....Regtl. No. ..919048.....

Original unit ...199th.....Present unit ...24th.Batt..M. or S. S Age..23. Religion..R.C. Fyle Depot .....F-13.....Ref. H.Q. .....

Port, ship, and date of arrival.....Halifax 16-3-18.....

Next of kin .....Mrs. Martha Fabre (Mother).....

Address on leave .....99 Willebord Ave., Verdun, Montreal.....

Address on discharge .....

Transportation issued Yes No Date..... Character on discharge .....

Previous occupation Mechanist..... Date and place of enlistment .....4-3-16....Montreal.....

Diagnosis .....Cat.E..... Date of Medical Boards .....

Date.	Remarks.	Pt. 2 Order No.
14-5-18	T.O.S. D.D.#4 Posted to Casualty Coy. eff. 18-4-18	26P1
27-5-18	Forfeits 14 days pay (R.W.)	39-4
29-5-18	Trans to Hosp. Sect. 28-5-18	41-P2.
	Adm. to D.M.H. #1 Conv. Hosp. 29-5-18	

*—Name will be given in full; surname first.

(over)

Date.	Remarks.	Pt. 2 Order No.
22-6-18	S.O.S. Hosp. Sect. to Casualty Sect. 20-6-18	65-P 3
4-7-18.	S.O.S. on transfer to Hospital Sec. eff 3-7-18.	77 P 1
11-7-18.	Leave Granted from 11-7-18 to 15-7-18 W/S	84-P-4
5-7-18.	Hospt. Sect. To Dis. Sect. Effect 25-7-18. W-S.	98-P-3
2-9-18	Discharged Auth KR&O 377 (10) CM 1917 MD 4 22-F-47	
	Cat. "E" Medically Unfit R.O. #668	

M.F.W. 192.
60M.—3-18 (D.P. 353).
1772-39-1243.

FORM D.M.S. 1200.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Fosbre	J.F.	919048

Rank	Unit	Co.	Troop	Batty.
Pte	24th Bn	1st Quebec Reg.		

Hospital — Date of Admission

7 Gen St. Omer — 21-7-17

Transferred Can. Mil. Silver St. Edmonton — Hosp. 5-8-17.

Woodcote Park Mlty Epsom — Hosp. 5-9-17

Hosp.

Hosp.

Diagnosis: GSW Chest Sev. R

Later Diagnosis (if changed)
(1)
(2)
(3)

Additional Diagnosis: if more than one state present

DISPOSITION — Dis 24.9.17. Date.

CL.30-7-17 ..576

REMARKS

9.8.17. B434.

8.9.17 BS

28.9.17 B22. (3).

A.M.D. 2 Dept.
Boh. of D.G.M.S. O.M.F.C. London

EPITOME OF HOSPITAL TREATMENT.

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

AUDITOR | PAYMASTER

M. & R S.

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

REGT. No. 919408 RANK ~~Pte~~ Lc NAME (IN FULL) FOSBRE. J.F. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP —

ADDRESS

IS SEPARATION ALLOWANCE PAID? Yes DATE EFFECTIVE 12-5-19

TO WHOM PAID Mrs Emily Mary Fosbre RELATIONSHIP Wife

ADDRESS 92 Hadley St. Cote St. Paul Montreal.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Tos.	28/5/19	Do.169

ORIGINAL UNIT C.E.F. 199th. IF IN P.F. WHAT UNIT? 4th Det. Canadian Garrison Regt.

PLACE OF ATTESTATION Montreal. P.Q. TRANSFERRED TO C.G.C.C. DATE 27-5-19 AUTHORITY D.O. 1036 d/26-5-19

DATE OF ATTESTATION 12-5-19. TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY $ 15.00 DATE EFFECTIVE 12-5-19.

PAYABLE TO Mrs Emily Mary Fosbre RELATIONSHIP Wife

ADDRESS 92 Hadley St Cote St Paul. Montreal

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED PLACE Montreal DATE 31/7/19 REASON Demobilization AUTHORITY R.O. 1328 IF ENTITLED TO POST DISCHARGE PAY Nil

MONTH	PAY AND F.A. No. of Days	Rate	Amount $ c.	Other Credits $ c.	$ 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.	Balance Credit $ c.	Particulars or Remarks
Balance from previous account																							TOS12-5-18 and det to CMPC DO. Pt 2#133.
May	20	1.10	22.00		20.00	42.00	53/1453	30					12.00			10.00 / 20.00				42.00			20 Dys. [illegible]
June	30	1.15	34.50	3.20 / 3.30 / 38.00 / 34.00	30.00	125.90	30	13			180	21	25.00		44.70	15.00 / 30.00		[illegible]		125.90			[illegible]; Sub. [illegible] D & Life. 28/5/19 Do.169 3.30 4.00 .20
July	31	1.15	35.65	31.00 / 34.80	30.00	121.45	373	11			442	29	25.00		51.45	15.00 / 30.00				121.45			[illegible] 31/5/19 Do.15 [illegible] 1/6/19 Do 166 = 11.30; [illegible] June [illegible] 110. [illegible] July [illegible] 388; Disch. 31/7/19 Do. 215

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

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

Dec 1/16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 919048

Rank Pte. Promoted Reverted Discharge

Soldier's Name J. Hosbre

Battalion 199 Battn C.E.F. D.C.R.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs P. J. Hosbre

Address 99 Willibrod Verdun Que.

Change of Address

1

2

3

4

6246-J-5

Date	Cheque No.	Amount S/A	Amount A/P	Total	
1917					
Dec. 31.			195	195	
1918			—	—	
Jan	676440		15	15	S.
Feb	95793 R		15	15	
Mar	135629 a		15	15	S
			240	240	

REMARKS

A/c Closed 31-3-18

$240 00 Rec'd per Canada

Date 21-3-18 E.F.X. 27-3-18

Clerk Wabollan

CANADIAN
ASSIGNED PAY AUDITED
AB Fraser
AUDIT CLERK
DATE 16-6-19

M R02B
27-3-18

M. F. W. 128
400M.—6-17—177-239-1141
L. L. 22320—M. & D. 7983.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
400M.—6-17—172-38-1141
L. L. 22320—M. & D. 7993.

This space to be for numbers

Proceedings on Discharge.

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

No. 919048

Rank Private.

Surname FOSBRE

Christian Name James Francis

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) 24th Battalion

Date of Discharge September 2nd 1918

Place of Discharge Montreal QUEBEC

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 23 years 11 months.	Descriptive Marks
Height 5 feet 5½ inches.	Mole in centre of back.
Complexion Fair	
Eyes Blue	
Hair Dk. Brown	
Trade Machinist.	
Intended place of residence (To be given as fully as practicable.) 99 Williboard Ave. Verdun, QUEBEC	

2. The above-named man is discharged in consequence of

KR&O 377 (10) CM 1917 MD 4 22-F-47 Category "E"

Medically Unfit R.O.#668

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

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

3. Conduct and character while in the service have been, according to the records, etc.

Good

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.)

Machinist.

3-4-19 RE

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

W.D. y comp.

H.C.D.-10-1919

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.....

Served in France
11-6-17 to 4-8-17

Entitled to wear one
Casualty Stripe 21-7-17

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

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

(Place) Montreal QUEBEC

(Date) September 2nd 1918

R.W. Lee
Lieutenant,
Officer i/c Discharge Section, District Depot No. 4.
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 QUEBEC J.A. Fairbairn *(Signature of Soldier.)*

(Date) 2nd September 1918 F.J. Patterson *(Signature of Witness.)*

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

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

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

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

10. **Statement of Service.**

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

Total.....years.....days.

11. **Confirmation of Discharge.**

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

(Place) Montreal QUEBEC

(Date) September 2nd 1918

R.W. Lee
(Signature) .....*Lieutenant,*
Officer i/c Discharge Section, District Depot No. 4.

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 reservation.

Jno F Fasler

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.
Copies of Convictions, by C. P.	in MS.
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."

Attestation Paper,	Militia Form B. 235.
Proceedings on Discharge	" B. 218.

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

(*a*) Proceedings on Discharge.

(*b*) Attestation.

(*c*) Medical History Sheet (in the event of such having been prepared.)

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.

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 soldier 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 soldier'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 soldier concerned, from witnesses, or from documents.
4. Special care is required in answering question 13. Please read the questions carefully. All questions must be answered.
5. If space provided under any sections is insufficient use blank space, page 4 or add another sheet. Such entries or 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 8, 9 and 10 be communicated to the soldier, 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. DATE Aug. 19th. 1918.

1. 1 (a) Unit District Depot No4. (b) Regimental No. 919048. (c) Rank Pte.

(d) Surname FOSBRE. (e) Christian name J.F.

2. Age last birthday 23. Date of birth Sept. 20th. 1895.

3. Enlisted at Montreal. on March 4th. 1916.

4. Personal description:—

(a) Height 5'-5½". (b) Weight 127lbs. (stripped) (c) Complexion Fair.

(d) Colour of hair D.Brown. (e) Colour of eyes Blue. (f) Identification marks Small mole on back in centre.

5. Address after discharge (for the use of the Board of Pension Commissioners) 99 Williboard Ave. Verdun. P.Q.

6. Former trade or occupation Machinist.

7. (a) Service	Years	Days	Periods From	Periods To
199th. Batt.			4-3-1916.	18-3-1918.
District Depot No.4.			18-3-1918.	To date.

(b) Has he been overseas? Yes. 8. Original disease or disability (1) Dyspnoea.

(2) D.A.H.

(a) Date of origin Sept. 1917. (b) Place of origin Epsom, England.

(c) Cause* G.S.W. in centre of sternium in line with 4th. rib.

(d) Present disease or disability Dyspnoea, on exertion.

9. Present condition (a) (Important to be a full description of the present disabling condition or conditions only.) "History" must be recorded in Section 10.

[After describing all abnormalities, anatomical and functional, contributing to present disability (see section 11) state whether such disability is directly due to (a) weakness, (b) loss (complete or partial) of any organ or member of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

He states that he weighed about 140lbs. when he enlisted March 4th, 1916. and 140lbs in May 1918. and to-day Aug.19th.1918. 122lbs, - 18lbs. loss of weight in 2 years. Fairly well nourished and muscles in fair condition. He complains of pain in region of right nipple when he walks fast, also shortness of breath. He states that the pain feels like a knife being run into

9. Present condition.—(*Continued.*)

him, only for a moment, also that this pain and breathlessness do not trouble him when quiet or when he walks with an easy pace. He complains of nothing furthermore.

On patient toughing his toes 10 times, pulse rose, from 75 to 85, and his breathing is short. It is difficult to count the pulse rate accurately.

(b) Are the following systems normal ? If not, briefly state abnormality

Nervous Somewhat nervous. Digestive O.K. Respiratory Dyspnoea. Cardiac D.A.H.

Genito-Urinary O.K. Skin, Middle Ear, Eye or any other part O.K.

Respiratory system: Chest resonant throughout, but somewhat impaired resonance ? up right axilla and breath sounds perhaps a little less clear over this area. Cariac system: Heart action intermittent and very rapid at times. No murmurs. Pulse: small volumn, irregular and intermittent and thready.

10. History: (*a*) of Condition referred to in "a" section 9.

Wounded in chest, G.S.W. in centre of sternium, about in line with 4th. rib, in France 11-7-1917. In No7. General Hospital, 4-8-1917. right haemothorax. Piece of shrapnel still in chest, he states.

(*b*) Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination.

Noticed shortness of breath while at convalescent hospital, This condition is still about the same.

In Montreal Gen.Hosp. for Gonorrhoea and orchitis. 1-11-1916 to 9-12-1916.

11. If the disabling condition had its origin before enlistment, has it been aggravated on service ?

N.A.

12. Was the disability caused or aggravated by negligence, by vice or by misconduct, or 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 ? (1.) 23 Months, and (2.) Uncertain.

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

M.C.H. 39 Days. General M.Hopp. 30 Days. M.C.H.Epsom, 21 Days.

D.M.H. 28 " R.V.H. 4 Days.

OPINION OF THE MEDICAL BOARD

14. (*Continued*).

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

No.

16. Can the former trade or occupation be resumed ? No.
(If not, briefly state why.)

17. Recommendations

Fit for service in Canada.
Cat. C111

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

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

I, the undersigned Man 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.

Signature of soldier examined.

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 criticized.

We concur

19. Is the soldier 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 soldier
(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration).

(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).

OPINION OF THE MEDICAL BOARD—(*Continued*).

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

Placed in Category C.3.

Before signing the President of the Medical Board will read the certificate signed by the soldier, to the soldier, and if no change is indicated will initial the certificate.

H. Anbury Maj. *President.*

PLACE [redacted]

DATE [redacted]

A. E. Worthy } Members.

APPROVED BY

Assistant Director of Medical Services.

DIRECTOR MEDICAL SERVICES M.D. No. 4 APPROVED MAJOR for D.M.S. MONTREAL, Que.

APPROVED BY

Director-General of Medical Services.

DATE

DATE

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 soldier 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.

20/212

This space to be for numbers.

H

129

Proceedings on Discharge.

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

No. 919048.

Rank Lance-Corporal.

Name James Francis FOSBRE.

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) C.M.P.C.No.4.Detachment.

Date of Discharge July 31st, 1919.

Place of Discharge Montreal, Que.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 21 years 10 months.	Descriptive Marks
Height 5 feet 5½ inches.	NIL.
Complexion Fair.	
Eyes Blue.	
Hair Dark Brown.	
Trade Machinist.	
Intended place of residence (To be given as fully as practicable.)	1260 Ethel St., Verdun, P.Q.

2. The above-named man is discharged in consequence of

DEMOBILIZATION. AUTH.R.O.1328.

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

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

3. Conduct and character while in the service have been, according to the records, etc.

Very Good

Lick Wortall Lieut.-Col.

Assistant Provost Marshal

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Machinist

Lick Wortall Lieut.-Col.

Assistant Provost Marshal

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

(OVER)

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

N I L.

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

6. Medals and Decorations..... N I L.

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

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

(Place) Montreal, Quebec.

(Date) July 31st, 1919.

Dick Wordall Lieut.-Col.
Assistant Provost Marshal
Commanding CANADIAN MILITARY POLICE CORPS
Canadian Expeditionary Force

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, Quebec. J. F. Fasby *(Signature of Soldier.)*

(Date) July 31st, 1919. [illegible] *(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 80 Days.

May 12th, 1919, to July 31st, 1919. Total.....years 80 Days.

11. **Confirmation of Discharge.**

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

(Place) Montreal, Quebec.

(Date) July 31st, 1919.

(Signature) Dick Wordall Lieut.-Col.
Assistant Provost Marshal

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

— Nil —

J. F. Fashe

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.		
Squadron / Battery / Company } Conduct Sheet,	"	B. 263a.	
Copies of Convictions, by C. P.		in MS.	
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."

Attestation Paper,	Militia Form B. 235.	
Proceedings on Discharge	"	B. 218.

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

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.

Reserved for M.H.C.

Regt. No. 91904 Rank Pte Surname Foster, Christian Name James Francis

Unit or Corps—(*a*) Overseas from United Kingdom 24th Bn (*b*) In United Kingdom 1st C.R.D.

Born at—Town Montreal County or Province Quebec Country Canada

Date of Birth—Day 20th Month September Year 1895 Age 22 yrs 6 months.

Joined at Montreal, Canada Date March 4th 1916.

Former Trade or Occupation Machinist

Permanent marks or peculiarities that will serve for future identification:
One vaccination mark on left arm.
Scar over lower end of sternum from S.S.W.

Height—feet 5 inches 5 Colour of eyes Blue

Signature of Soldier (*for identification purposes*) J. Foster

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*) Dyspnoea.

Disabilities Group (*b*) Nil

Disabilities Group (*c*). Nil

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	D. A. H.	Lens	July 1917
(*ii.*) As to Group (*b*) above.	Not applicable		
(*iii.*) As to Group (*c*) above.	Not applicable		

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service? No.

(*i.*) As to Group (*a*) above? No. If yes, has Active Service aggravated it? Not Applicable

(*ii.*) As to Group (*b*) above? Not Applicable If yes, has Active Service aggravated it? Not Applicable

(*iii.*) As to Group (*c*) above? Not Applicable If yes, has Active Service aggravated it? Not applicable

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above? Yes.

(*ii.*) As to Group (*b* above? Not Applicable

(*iii.*) As to Group (*c*) above? Not Applicable

PART I. *(continued)*.

5. If a cause of disability was an injury received on Active Service, was it received—

(*i.*) While on duty? Yes. (*ii.*) While off duty? No.

(*iii.*) Was a Court of Inquiry held? No. (*iv.*) Where? Not applicable (*v.*) When? Not applicable

(*vi.*) Opinion of the Court? Not applicable

6. HISTORY OF THE CASE. *(State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records).*

Was wounded by shrapnel in the chest over lower part of sternum on 11-7-17 & in No 7 General 4-8-17 "Right haemothorax.

In General Civic Hospital Edmonton Alta 5-9-17 to 4-9-17 "Right haemothorax aspirated. No history of the shrapnel being removed. He noticed shortness of breath when at convalescent hospital and states that there has been no improvement.

In Montreal General Hospital 1-11-16 to 9-12-16. Gonorrhea and orchitis.

7. PRESENT CONDITION. *(Give previous and present weight if likely to indicate progress of disability.)*

General condition good. Respiratory system normal. Genito urinary system normal. Gastro intestinal system normal.

Nervous system normal.

Cardio vascular system. Pulse irregular in rythm.

8. OPERATION. (*i.*) Was one performed? No.

(*ii.*) If so, state what. Not applicable

(*iii.*) Was one advised and declined? Not applicable

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (*i.*) Is there loss or decay of teeth attributable to Active Service? No.

(*ii.*) If so, describe. Not applicable

10. DO YOU RECOMMEND:—

(*a*) Fit for duty? No

(*b*) Fit for base duty? Yes B III Likely to be raised within six months.

(*c*) Invalid to Canada? No

(*d*) Discharge from the Service as permanently unfit? No.

Date of Report February 17 1918. Signed J.M. Baldwin Capt.
Officer in medical charge of case.

Station Bramshott.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except

xxx

M. MacKay, Capt. CAMC for [Officer i/c Hospital / O.C. Brigade] Strike out one of these.

Dated at Bramshott Station, on 18th. Feb. 1918.

* Delete if inapplicable.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

☞ *Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.*

11. Is the disability fully indicated in Part I. (1)?
If not, indicate it.

Yes

12. Is the cause of the disability fully indicated in Part I. (2)?
If not, indicate it.

Yes

13. Was the disability caused or aggravated by—
(a) Negligence of the Soldier — Caused? No; Aggravated? No
(b) Misconduct of the Soldier — Caused? No; Aggravated? No

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)

Not applicable

15. THE PENSIONABLE DISABILITY.—*see Part I.* (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate).*
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)

Not applicable

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent?

Not applicable

(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? Not applicable

18. Remarks.

19. Recommendation:—(*a*) Fit for duty? No
(*b*) Fit for base duty? Yes Biii, not likely to improve within six months.
(*c*) Invalid to Canada? No
(*d*) Discharge from service as permanently unfit? No

Classification for the Military Hospitals Commission.

Date of Board 19th. Feb. 1918.

Signatures of the Board. F.H. Mayhood, Major *President.*
W.H.T. Baillie, Capt.
W.R. Stackhouse, Capt.

Station Bramshott

Approved [signature] Colonel A.D. for G.O.C. & A.D.M.S.
Canadian Troops, Bramshot Camp.

Dated at Bramshott Station 19th. Feb. 1918. 191

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board:—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend:—

Dated at this day of 191

Signatures of the Board

.....
President.

.....

.....

.....

(COPY.)

Montreal. P.Q. Aug. 22nd. 1918

Capt. W.Bourne. A.M.C.
M.O. D/DNo.4.
Peel St. City.

Pte. Fosbre. 9i9048.

Herewith X-ray report on the marginally named man:
X-ray of chest shows the presence of a foreign body resembling shrapnel ball, on the right side on a level with the 9th. rib near the axilla.

(Signed) W.A. Wilkins, Capt. A.M.C.
M.C. Xray Dept. D.M.C.H.

May 30/18.

2

CON. HOSP. WOODCOTE PARK
EPSOM

McH Epsom

50,000 bks.—John Rissen, Ltd.—3067/2/17—Forms W 3172/3.

5 SEP 1917

Army Form W. 3172.
(In pads of 50.)

Hospital.

~~Ward~~ Divn B ~~No. of Bed~~ Hut D 3 Date 5 SEP 1917

Regl. No.	Rank and Name	Corps	Part to be X-Rayed
919048	Pte Fasbre J	24 Btn	Chest

Short History of Case.
(To be completed by M.O. i/c case.)

E.L.W. 7.7.17
Expectorated blood for 3 days.

J C Meador
CAPT: C.A.M.C.
B DIVISION.

Signature of M.O. ____________

Date ____________

Report on Result of X-Ray Examination.
12/10. (To be completed by Radiographer.)

No. of Plate (10475) A.P.

No evidence of injury.

Signature of Radiographer McGuy

Date 8/9/17

A 6

1. L.I.C. issued, date 21. 2. 18

2. Authority R03451 8-2-18

3. Discharged to Canada

4. Pay Book verified Yes.

5. Balance shown on L.P.C. $ 1.61

6. Balance shown in Ledger Sheet $ 64.17

7. Full particulars of entries making difference between 5 and 6 if any.

No.	Date.	Unit & particulars of entries.	Amount. Debit	Credit.
437	16.1.18	6th H'wood	7 30	
488	29 1 18		7 30	
548	9.2.18		14 60	
552	13 2 18		7 30	
1286	20 2 18	Bishott	9 73	
2870	4 9 17	Strom	9 73	
	9 2 17	Feeds 6d Pay No 82 19/3.	6 60	
		Net Difference $ 62.56		

8. Assigned Pay cancelled A.3.M. Forms rendered. 21. 2. 18

or

9. Separation Allowance and Assigned Pay continued to dependent in England and transferred to Accounts Branch for payment.

This balance cannot be certified correct owing to non-receipt of Active Service Pay Book.

Certified correct

Officer i/c Group

East

This balance cannot be certified correct owing to non-receipt of Active Service Pay Book.

Jan 1/17 – Feb 21/18

365
52
417 1.00

10⁰

Bal for barn

9.10
8F

417
41.70
8.70
467.40
8.03

~~467.40~~
475 43

46.48 ✓
7.29 ✓
8.92 ✓
9.74 ✓
109.49 ✓
181.92 + 9.73

Cash Rcts

as pay
1/1/17 – 28/2/18 14 mos.

Chgs

15.18 ✓
16 ✓

Cr Bal

181.92
9.73
46.23
237.88

237.88 ✓
~~19.65~~
210.09 ✓
19.34 ✓
~~9.9~~
467.22
8.21
475.43

46.23
9.73
55.96

64.17
55.96
8.21

L/Cpl. Fosbre. James Francis A 919048

CMPC. #4. Dete.

Died at Montreal 28/8/21
Cause - Myocarditis (traumatic)
and Cardiac failure

NK. Mrs Emily. May Fosbre (W)
2045 Jacques Hertel St.,
Montreal, PQ

Auth letter
SCR dated 4/10/21

Form D.M.S. 1348 (Revised).
3075—30m—2/12/16.

EXAMINATION
BY
STANDING MEDICAL BOARD, BRAMSHOTT.

13 - 11 1917

No. 919048 Rank Pte Name Fosbre J F.

Local Unit 23 Res Bn Overseas Unit 24 Bn Age 22.

Examination held in Bramshott area.

DISABILITY. G S W - CHEST

Overseas—~~Local~~. D.A.H.
(scratch one out)

PRESENT CONDITION.

Depressed scar in mid sternal line middle 1/3 - F.B. not removed - gave rise to haemothorax - Breathsounds of ~~left~~ right chest over lower lobe indistinct - as if pleura was thickened. Has a rapid heart with irregularity of rate. Complains of pain in right chest and shortness of breath on walking.

Board recommends: BTT for 3 months -

1. Fit for Duty.
2. Fit for duty after ______ weeks physical training.
3. Fit for Base duty ______ weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures:

F.T. Mayhood Major Pres.

Members { W.H.T. Baillie Capt
W.B. Stackhouse Capt

Approved.

Bramshott 13th Nov 1917 M. MacKay Lt.-Colonel

for A.D.M.S. and G.O.C.,
Canadian Troops, Bramshott.

18

EXAMINATION
BY
STANDING MEDICAL BOARD, BRAMSHOTT.

No. Rank Name

Local Unit Overseas Unit Age

Examination held in Bramshott area.

DISABILITY.

Overseas—Local.
(Scratch one out)

PRESENT CONDITION.

Board recommends:

1. Fit for Duty.
2. Fit for duty after weeks physical training.
3. Fit for Base duty weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures:

Pres.

Members

Approved.

Bramshott 19

for A.D.M.S. and G.O.C.
Canadian Troops, Bramshott.

EN.

CONFIDENTIAL INFORMATION

Report No.	Category D or E	No. of M. H. C. File	No. of Local File	No. H. Q.
6619.	Fosbre. James Francis. 99 Willebroid Ave. Verdun. Montreal.			

M. D. No.4.

No. 919048 Rank Pte Original Unit 199th Present Unit 24th

Age 23 Height 5 ft. 5 ins. Complexion Eyes Brown Hair Character

Date of enlistment 4/3/16. Where enlisted Montreal Where seen service France

Ship returned by Canada. Date of arrival 16/3/19 Port of arrival Halifax.

Birthplace Canada. Religion R.C.

Name and address next of kin Mother. Mrs Martha Fosbre.

Notification of return to be sent to above address.

Cause of disability Dyspnoea (D.A.H.).

Condition in detail which prevents the soldier from earning a full livelihood Pro. Eng. Md Bd. General condition good. Respiratory system normal. Genito-urinary system normal. Gastro intestinal systemm normal. Nervous system normal. Cardio vascular system. Pulse irregular in rythm. Was wounded by shrapnel in the chest over lower part of sternum on 11/7/17 In Ho 7 Gen 4/8/17. right harmothorax. No history of the shrapnel being removed. He noticed shortness of breath while at a Convalescent Hosp. and that there has been no improvement. In Montreal General Hospital 1/11/16 to 9/12/16. Gonorrhea and orchitis.

E. 1. Discharge, no pensionable disability.
E. 2. Waiting Reclassification.
E. 3. Discharge with claim for pension.

Degree of incapacity (Please state in fractions) Eng. Board not estimated. Canadian Board

Probable duration of incapacity not likely to improve within six mos.

Does it render him permanently unfit for Military Service? Fit for base duty.

Would operation, Special treatment, or use of appliances etc., lessen incapacity? Returned to Canada recommended fit for base duty

Destination to which transportation issued Montreal.

Members of Board F.H.Mayhood Major. W.H.T.Baillie Capt. W.R.Stackhouse Capt. Bramshott 19/2/19.

C. Service in Canada.
D. Treatment.

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment Mechanist. (3 Years).

Regular trade or profession Plumbing.

Average earnings previous to enlistment Any other income?

Name and address of last employer Father. M.J. Fosbre.

Rent per month If purchasing property amount due and annual payment, $ $

Taxes If Homestead, when is patent due?

If carrying life or accident insurance, annual premium Mother Pays.

If in receipt of sick benefits or other insurance—name of society Metropolitan Amt. per mo. $

If unable to follow previous occupation, name preference

At what age soldier left school? What grade, standard, &c., was he in?

Has he taken any Technical or Continuation Classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References

Witness N.A. H.L.Fisher.

I declare that the above statement is correct.

Date 23/3/19. Montreal. Signature J. Fosbre.

A. General Service.
B. Service abroad, not general.

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot H.Q., $ L. P. C. leaving Depot, $

Amount forwarded to H. Q. Unit, $ Credit Clothing allowances, $

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date

PENSION—Class..... Amount per year, $..... Period granted for..... Dating from.....

First payment date.....

Form No. 5a.

CONFIDENTIAL INFORMATION

Report No. | Category D or E | No. of R. C. Pile | No. of Local File | No. of H. Q. File

No | Rank | Original Unit | Present Unit

Age | Height | Fr. | ms. | Complexion | Eyes | Hair | Character

Date of enlistment | Where enlisted | Where seen service

Ship returned by | Date of arrival | Port of arrival

Birthplace | Religion

Name and address next of kin

Notification of return to be sent to

Cause of disability

Condition in detail which prevents the soldier from earning a full livelihood

Degree of incapacity (Please state in fractions) Reg. Board | Canadian Board

Probable duration of incapacity

Does it render him permanently unfit for Military Service?

Would operation, Special treatment, or use of appliances etc., lessen incapacity?

Destination to which transportation issued

Members of Board

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1					
2					
3					
4					
5					

Occupation prior to enlistment

Regular trade or profession

Average earnings previous to enlistment | Any other income?

Name and address of last employer

Rent per month | If purchasing property amount due and annual payment, $

Taxes | If Homestead, when is patent due?

If carrying life or accident insurance, annual premium

If in receipt of sick benefits or other insurance—name of society | Amt. per mo. $

If unable to follow previous occupation, name preference

At what age soldier left school? | What grade, standard, &c., was he in?

Has he taken any Technical or Continuation Classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References

Witness | I declare that the above statement is correct.

Date | Signature

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. Cr., $ | Dr., $ | Amount paid at Depot H.Q. $ | L. P. C. leaving Depot, $

Amount forwarded to H. Q. Unit, $ | Credit Clothing allowances, $

Transf'd to | Unit—Date | Transf'd Class 1—Date | Transf'd Class 3—Date

DISMISS—Class ..... Amount per year, $ ..... Period granted for ..... Dating from .....

First payment due .....

Form No. 8a.

A Service abroad, not Active.

B Service abroad with Medical Board's certificate of disability.

C Service in Canada.

D Treatment.

Form C.M.S. 1348 (Revised).
20/5—30m—2/12/16.

EXAMINATION
BY
STANDING MEDICAL BOARD, BRAMSHOTT.

13 - 11 1917

No. 919048 Rank Pte Name Fosbre J F.

Local Unit 23 Res Bn Overseas Unit 24 Bn Age 22.

Examination held in Bramshott area.

DISABILITY. G S W - CHEST.

Overseas—~~Local~~. D.A.H.
(scratch one out)

PRESENT CONDITION.

Depressed scar in mid sternal line - middle 1/3 - F.B. not removed - gave rise to haemothorax - breathsounds of ~~left~~ right chest over lower lobe indistinct - as if pleura was thickened - Has a rapid heart with irregular irregularity of rate - Complains of pain in right chest and shortness of breath on walking.

Board recommends: B III for 3 months -

1. Fit for Duty.
2. Fit for duty after ______ weeks physical training.
3. Fit for Base duty ______ weeks.
4. Fit for Permanent Base Duty.
5. Discharge.

Signatures:

H. H. Maybood Major. Pres.

Members W. H. T. Baillie Capt.
W. R. Stackhouse Capt.

Approved.

Bramshott 13th Nov 1917 M. MacKay Lt. Col.

for A.D.M.S. and
Canad[illegible]

EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT.