

M. D. Depot Battalion Regiment

JGAF

Regtl. No. 8171484

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

- 1. Surname GOUDOUAS
2. Christian name Arthur
3. Present address 177 Wotkann St Montreal Que. Can.
4. Military Service Act letter and number 91736 DC
5. Date of birth March 24th. 1883
6. Place of birth St. Ami Co. Napierreville Que. Can.
7. Married, widower or single single
8. Religion romancatholic
9. Trade or calling machinist
10. Name of next-of-kin Mr. Leonidas Gadouas
11. Relationship of next-of-kin Father
12. Address of next-of-kin 276 des Seigneurs St Montreal Que. Can.
13. Whether at present a member of the Active Militia No.
14. Particulars of previous military or naval service, if any None
15. Medical Examination under Military Service Act:—
(a) Place Montreal Que. Can. (b) Date 20-8-18 (c) Category B2

DECLARATION OF RECRUIT

I, GOUDOUAS Arthur, do solemnly declare that the above particulars refer to me, and are true.

Arthur Gadouas (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 35b yrs. 4 mths.
Height 5ft 4 ins.
Chest measurement fully expanded 38 ins. range of expansion 4 ins.
Complexion Brown
Eyes Brown
Hair Brown

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

Commandant G. Gadouas Depot Btin.
2nd Quebec Reg't.

Place Montreal Que. Can. Date 7-8-18

REGIMENTAL DOCUMENTS

NAME

Gadomas Arthur

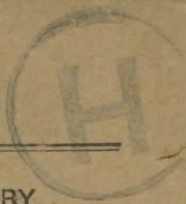
REGT. NO.

03171434

UNIT

2nd P.B. 2nd O.R.

H. Q. FILE NO.



CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

1 **ATTESTATION PAPER** (M.F.W. 23, 133, or 51)

1 **CASUALTY FORM** (M.F.W. 54 or A.F.B. 103)

1 **TRAINING HISTORY SHEET** (M.F.W. 113)

1 **FIELD CONDUCT SHEET** (M.F.W. 178 or A.F.B. 122)

1 **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)

1 **DENTAL HISTORY SHEET** (M.F.B. 465)

1 **MEDICAL REPORT** (M.F.B. 227 or A.F.B. 179)

2 **MEDICAL EXAMINATION** (M.F.W. 129)

1 **TRANSFER CLOTHING STATEMENT** (M.F.W. 97 or D.O.S. 2)

1 **PROCEEDINGS, COURT OF INQUIRY** (M.F.B. 303 or A.F.A. 2)

1 **DECLARATION, COURT OF INQUIRY** (M.F.B. 259 or A.F.B. 115)

1 **LAST PAY CERTIFICATE** (M.F.W. 44)

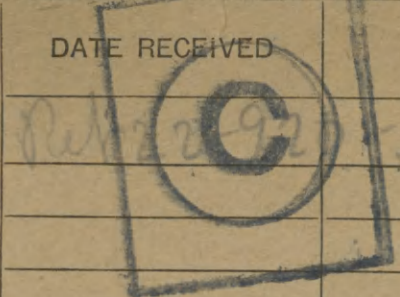
1 **PROCEEDINGS ON DISCHARGE** (M.F.W. 218 or A.F.B. 268)

1 **PARTICULARS OF CHARACTER** (A.F.W. 3226)

1 **COPY OF PARCHMENT DISCHARGE CERTIFICATE** (M.F.W. 39A)

1 *M. F. W. 71*

1 *Misc*



Ret 22-9-20
26-4-20
Ret 17-5-20

00155

Category

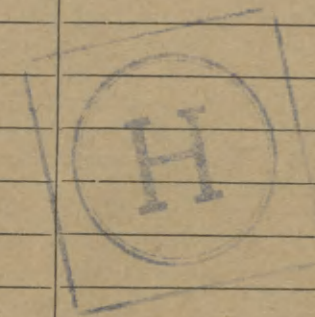
DEATH

DISCHARGE

Category

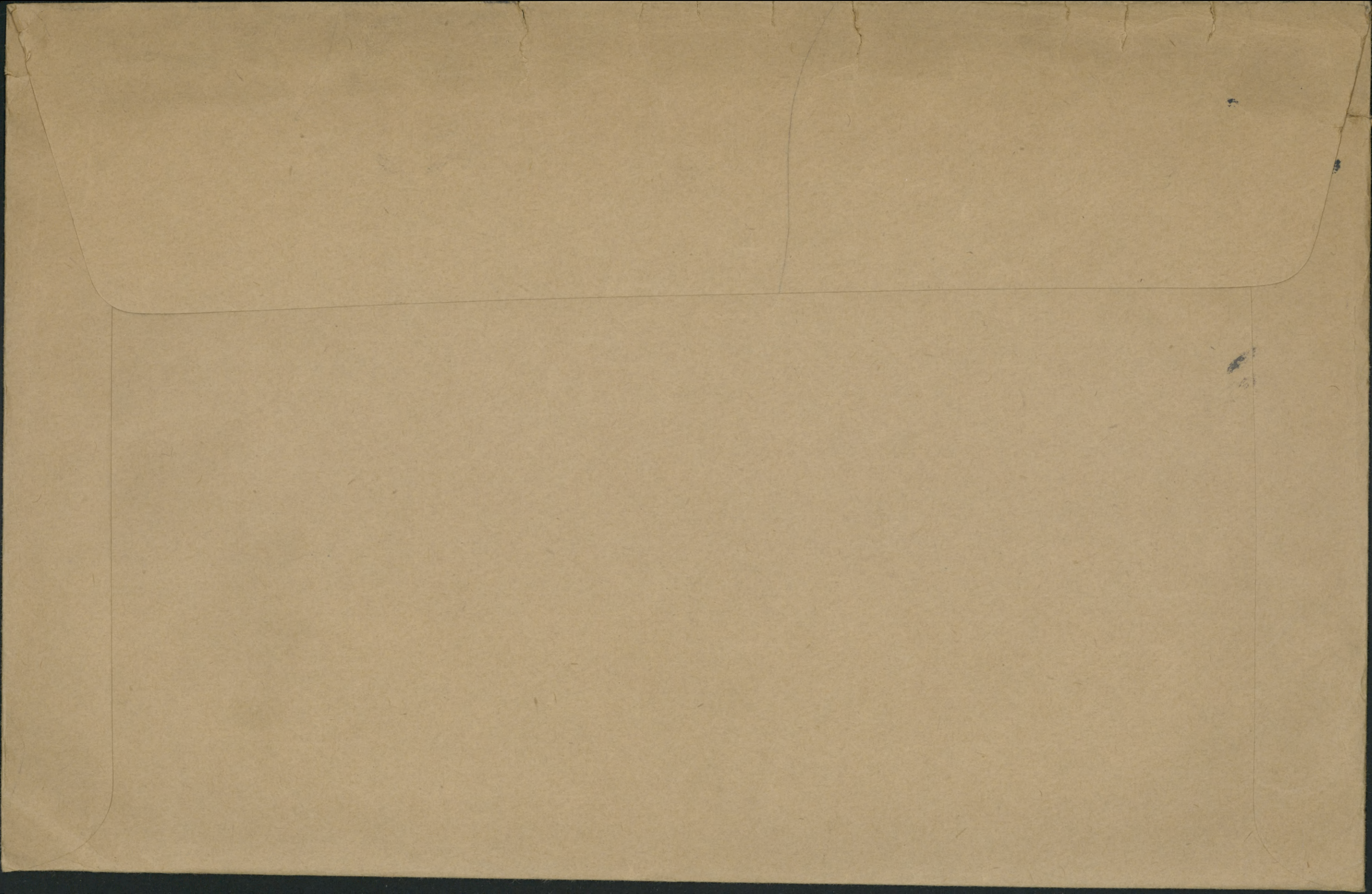
Demob.

DESERTION



W. 8/20
22-9-20

M.F.W.
3/2/21



CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3171434 (Rank) Private.

Name (in full) GADOUAS, Arthur. enlisted in
the 2nd. Depot Battalion 2nd. Quebec Regiment.

CANADIAN EXPEDITIONARY FORCE at Montreal, P. Q. on the 7th.
day of August, 1918. 19

HE served in C A N A D A .

and is now discharged from the service by reason of General Demobilization

R.O. 1420 para 'C' dated 12th. December, 1918.

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

Age 36 years 4 months.

Height 5 feet 4 inches.

Complexion Dark.

Eyes Brown.

Hair Brown.

Marks or Scars.....

N I L .

Arthur Gadouas
Signature of Soldier

O. C. Ste. Anne de Bellevue
Issuing Officer Colonel

Date of Discharge August 5th., 1919.

O. C. Ste. Anne de Bellevue
Rank MILITARY HOSPITAL.

Appointment

Signed at Ste. Anne de Bellevue, 5th. day of August, 1919

in Military District No. 4. P.Q.

File Reference No. 1-G-4.

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.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

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. **3171434** Rank **Private** Surname **Gadouas, Arthur**
(Given name in full)

Unit or Corps **Ste. Anne de Bellevue** Birthplace **Quebec**

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

1. GENERAL DESCRIPTION:

Physique **Good** Weight **144** lbs. Height **5** ft. **7** in. Colour of Eyes **Dark Brown**
 Nutrition **Good**
 Pulse **72**
 Condition of arteries **Good**
 Vision Rt. **20/20** Left **20/20**
 Hearing (conversational voice) Rt. **OK** ft.
 Left **OK** ft.

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

Nil

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 **Yes** any other general condition

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.

**Bunion on left foot
 (present before enlistment)**

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at(Overseas)

Date SignedM.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—

Examined at Ste. Anne de Bellevue

Date 4th August, 1919.....

SignedM.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 Gadonas Arthur.....

(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.)

[OVER]

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
200M-3-19 (D.P. 254).
1772-89-903 (9986).

LAST PAY CERTIFICATE

Regimental No. 3171434 Rank Pte^{3U} Name Gadouas, Arthur,
(Surname first)
Unit Ste Anne de Bellevue M. Hospital^{3U} who was Discharged
On August 5th, 1919 191..... to.....
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1st. August to 5th. August. 191.9
the inclusive date of ~~transfer~~ or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month.....		
Regimental Pay..... <u>5</u> days at \$..... <u>1</u> c. <u>00</u>		<u>5</u> <u>00</u>
Field Allowance..... <u>5</u> days at \$..... c. <u>10</u>		<u>50</u>
Separation Allowance.....		<u>30</u> <u>00</u>
Clothing Allowance.....		<u>35</u> <u>00</u>
War Service Gratuity.....		
*Other Credits.....		
Advances.....		
Separation Allowance and Assigned Pay Cheque No. <u>1535</u>	<u>30</u> <u>00</u>	
*Other Charges.....		
Balance on transfer or on discharge, cheque No. <u>1534</u>	<u>40</u> <u>50</u>	
Total	<u>70</u> <u>50</u>	<u>70</u> <u>50</u>

*Give particulars.

A monthly stoppage of \$ 7.00 (†) has..... (‡) been paid on account of
Assigned Pay for the month of..... 191..... }
and Separation Allee. for month of..... 191..... } (to) Assignee. Mr. L. Gadouas^{3U}
(Address) 296 Des Seigneurs St Montreal^{3U}
(†) 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. 7.8.18..... married or single Single
(2) Separation Allowance, entitled or not. Yes..... (3) Reason for discharge. Demobilization
(4) Authority for discharge or transfer. R.O. 1420 Para "C" D/12.12.18

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 5th August 1919

Place Montreal, Que.

Paymaster
Crd. Paymaster
Ste Anne de Bellevue Military Hospital M. D. No. 4 (Personnel)

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.

8171434

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

M. F. W. 54. (A. F. B. 103)

500M.—9-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

2nd DEPOT BN. 2nd QUEBEC REGT.

Unit, Regiment or Corps.....

Regimental No. ^D..... Rank ^{Pte.}..... Name **GADOUAS Arthur**
C. E. F.Enlisted (a) **20-8-18** Terms of Service (a) **C.E.F.** Service reckons from (a) **20-8-18**Date of promotion to } Date of appointment } Numerical position on }
present rank } to lance rank } roll of N. C. Os. }Extended..... Re-engaged..... Qualification (b) **Farmer**

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Transferred to No. 4 Bn. C. G. R. Authority D.O. 1586		SEP 24 1918	
25.9.18	2/2nd	TAKEN ON STRENGTH 4TH BN. C. G. R. C. E. F. AUTH, PT, II D. O. 148		5.9.18	<i>H. G. Melville</i> ^{Cap't.} Adjutant 2nd Depot Bn. C. G. R. Lieut. Adjutant, 4th Bn, Canadian Garrison Regiment C, E, F.
4-11-18	4th CGR	STRUCK OFF STRENGTH 4TH BN. C. G. R. C. E. F. AUTH, PT, II D. O. 189		5-11-18	<i>H. G. Melville</i> ^{Cap't.} Lieut. Adjutant, 4th Bn, Canadian Garrison Regiment C, E, F.

(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.]

684718

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				
NQV 5 1919	4th A.C.G.R.	S.O.S. 2d Lt. P. L. 4 th Nov. 1918. S.A.B. D.O. P+2 No 29 d/ 5/11/19.	St. Anne's.	5/11/19.	<i>Renalan</i> Captain Adjutant, Ste. Anne de Bellevue MILITARY HOSPITAL.
AUG 5 1919	S.A.B. M.H.	S.O.S. on General Demob. ilization S.A.B. D.O. P+2 No 217 d/ 5/8/19.	St. Anne's.	5/8/19.	<i>Renalan</i> Captain Adjutant, Ste. Anne de Bellevue MILITARY HOSPITAL.

ORIGINAL

MEDICAL HISTORY SHEET.

1. Surname GOUDOUAS Christian name Arthur **8171434**
 2. Number of report for service or claim for exemption according to Postmaster's Receipt, or schedule 91736 DC
 3. Consecutive number on schedule of men reporting for service (if he appears on it) -----
 4. Address (including street and number if any) 177 Workman St. Montreal Que. Can.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 20th day of August 1918, by the undersigned medical board sitting at Montreal Que. Can.

5. Age as stated 35 Years 4 Months. 6. Apparent age 35 Years 4 Month
 7. Height 5 Feet 4 Inches. 8. Weight 122 Pounds.
 9. Chest measurement { Minimum 34 Ins. 10. Complexion Brown { Eyes Brown
 { Maximum 38 Ins. { Hair Brown
 11. Physical development Good { Good
 { Fair
 { Poor 12. Smallpox marks Child
 13. Number of vaccination marks { Right arm 1
 { Left arm 1 14. When vaccinated last Child
 15. Distinctive marks and marks indicating congenital peculiarities or previous disease -----

16. Slight defects but not sufficient to cause rejection -----
 The man denies having had { Rheumatism, Epilepsy, We find { Rheumatism, Epilepsy
 { Tuberculosis, Syphilis, no evidence { Tuberculosis, Syphilis
 { Nervous or Mental disorder. Asthma. of past { Nervous or Mental disorder. Asthma.
 (Strike out disease admitted or suspected)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category **B²**

McLennan Capt Member. Alford Capt President.
A Ship Member.

Signature of Man Arthur Goudouas

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>2/8/18</u>		<u>Ereest Chabot H</u> M. O.	<u>2/8/18</u>		<u>Ereest Chabot H</u> M. O.
		M. O.	<u>12/9/18</u>		<u>Ereest Chabot H</u> M. O.
		M. O.			M. O.

Joined 20th day of Augusta 1918 at Montreal Que. Can.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment		8171434		
Transferred to		<u>D-</u>		<u>20-8-18</u>
	2nd DEPOT BN. 2nd QUEBEC REG'T.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

N.B.—This sheet is 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.

If raised in category, record category in a square. The M. O. will initial and date.

S. O. S. Demob. 5/8/19.

M.D.4.

H. Q. 649-G-17358.

GADOUAS, Pte. Arthur, #3171434,

2nd. Dep. Cn. 2nd. Que. Regt.
C.E.F.

Supp Canada

Med ^{or} D (Brother)

Mr. Albert Gadouas,
1363 Notre Dame Street, West,
Montreal, Que.

Ser. #

986143
P & S

(Brother)

Address as above.

Mem Cross (Nil)

50457

Canada only.
m.j.

B-

NOV 13 1923

JUL 10 1923

56531

Scroll Desc. _____ Reqa. No. _____

NOV 13 1923

Reqa. No. _____

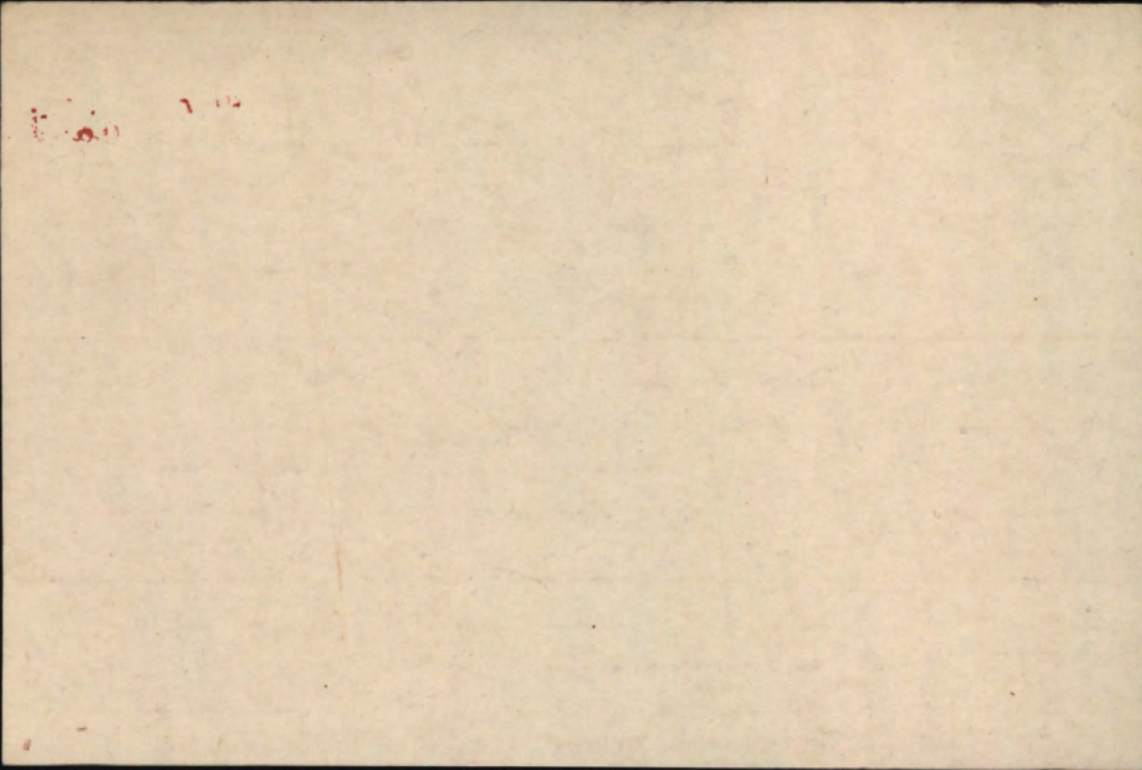
49961

Scroll ret'd 20-7-23.

Surname Gadouas H. Q.
Christian names Arthur M. D. No. 4
Regtl. No. 3171434 Rank Plé. T. O. S. Aug 7th 1918
Unit 2nd Que. Regt. 2nd Opa. Bn. D. O. Pt. II 218 of 7-8-18
S. O. S. 5-8-1919
Reason demob.
Auth. D.O. 2170 5-8-19
Lieutenant Bell. Co. Ft.

Next of kin Gadouas Leonidas Relationship Father
Address 276 Seigneur St.
Montreal, P.Q.
Also notify: Oncl 313.20 M24
auth. S.L. 6.5.6. 9-5-
3-11-19

BORN—Place Canada St. Remi, P.Q. Date Mar. 24th 1883
ATTESTED—Place Montreal, P.Q. Date Aug. 7th 1918
O/S..... R/C.....



1-G-4

B2
M. F. W. 71-500M.-61k
1772-39-93L

✓ NAME Goudouas, Arthur.

REGIMENTAL NO. 3171434

RANK Private.

ENLISTED AT Montreal.P.Q.

PROMOTIONS, &c.
AND DATE

DATE 20/8/18 Trans. Ste. A.B. 4/11/18 D.O. Pt.2 #29

IF SERVED PREVIOUSLY. STATE UNITS, &c. S.O.S. Ste. A.B. 5-8-19 D.O. Pt. #217.

MARRIED, WIDOWER, OR SINGLE Single

NEXT OF KIN Mr. L Goudouas.

RELATIONSHIP Father

ADDRESS OF 276 Seigneurs St. Montreal, P.Q.

ASSIGNMENT OF PAY \$ C. TO

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

File No. 6561 A. 11.

WAR SERVICE GRATUITY.

Register No. Spec Reg.
64
1902

Reg. No. 317 1434.

Dependent nil

Name Yadbois A.

Address _____

Address Deceased.

Pay Soldier \$ _____

Pay Dependent \$ _____

Days _____ Rate _____ Due _____

Less P.D.P. credited _____

Clerk nil

Less further Dr. Bal. or overpayment. _____

Net _____

R
20134
14/10/20

Date	Ck. Order	Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount
1				<i>not eligible under P.C. 3165.</i>				
2					2			
3					3			
4					4			
5					5			
6					6			

A M White
7 10/20

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

6000-400
217

BPC 199672

129
6022

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.	3171434.
Rank	Private.
Name	Gadouas, Arthur.
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	Canadian Army Medical Corps.
Date of Discharge	August 5th., 1919.
Place of Discharge	Ste. Anne de Bellevue Mil. Hospital.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age.....	36	years.....	4	months.
Height.....	5	feet.....	4	inches.
Complexion	Dark.			
Eyes	Brown.			
Hair	Brown.			
Trade	Machinist.			
Intended place of residence	Montreal, P. Q.			
<small>(To be given as fully as practicable.)</small>				

Descriptive Marks

N I L .

2. The above-named man is discharged in consequence of **General Demobilization**
 Routine Order 1420 para 'C' dated 12th., December, 1918.

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

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

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the 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.)

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

E. R. J.

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

X X X

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

6. Medals and Decorations.....

X X X

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) Ste. Anne de Bellevue, P.Q.

Kenub Jamison
Colonel

(Date) August 5th., 1919.

O. C. Ste. Anne de Bellevue
Commanding MILITARY HOSPITAL.

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) Ste. Anne de Bellevue, P.Q.

Arthur Gadonas (Signature of Soldier.)

(Date) August 5th., 1919.

C. M. Callum (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.

Arthur Gadonas (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days. 363.

Total.....years.....days. 363.

11. Confirmation of Discharge.

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

(Place) Ste. Anne de Bellevue Mil. Hosp.

Kenub Jamison
(Signature)
Colonel

(Date) August 5th., 1919.

O. C. Ste. Anne de Bellevue
MILITARY HOSPITAL.

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.)

Arthur G. Adams

List of Discharge Documents.

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

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

REGT. No. 3171434 RANK *Pte* NAME (IN FULL) *Gadonas Arthur*

M. OR S.

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F. <i>2nd Dep't Bty 2nd Quebe Regt.</i>	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS					PLACE OF ATTESTATION <i>Montreal</i>	TRANSFERRED TO	DATE
					DATE OF ATTESTATION <i>7-8-18</i>	TRANSFERRED TO	DATE
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE <i>1-6-19</i>				ASSIGNED PAY \$ <i>20.00</i>	DATE EFFECTIVE	
TO WHOM PAID	RELATIONSHIP <i>father</i>				PAYABLE TO <i>Mr L. Gadonas</i>	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
ADDRESS <i>Mr L. Gadonas 296 Des Seigneurs Montreal</i>					ADDRESS <i>296 Des Seigneurs St. Montreal Que</i>		
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
					DISCHARGED <i>S.O. Montreal</i>	PLACE DATE	REASON <i>Demobilization R.O. 1420 para 2</i>
							AUTHORITY <i>R.O. 1420 para 2</i>
							IF ENTITLED TO POST DISCHARGE PAY <i>nil</i>

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT		CREDIT
<i>Mar</i>																	<i>nil</i>	
<i>Apr</i>	<i>30</i>	<i>1¹⁰</i>	<i>33 00</i>		<i>207</i>	<i>11/22</i>	<i>113</i>	<i>23</i>	<i>5 00</i>	<i>8 00</i>		<i>20 00</i>		<i>33 00</i>			<i>A.P. 62861</i>	
<i>May</i>	<i>31</i>	<i>1¹⁰</i>	<i>34 10</i>		<i>203</i>	<i>12/5</i>	<i>130</i>	<i>528</i>	<i>5 00</i>	<i>4 70</i>		<i>20 00</i>	<i>4 40</i>	<i>34 10</i>			<i>A. Pay cheque no 2615</i> <i>A. W. 21 days pay R.O. 1421</i>	
<i>June</i>	<i>30</i>	<i>1¹⁰</i>	<i>33 00</i>		<i>104</i>	<i>18/19</i>	<i>159</i>	<i>26</i>	<i>5 00</i>	<i>8 00</i>		<i>20 00</i>		<i>33 00</i>			<i>A. Pay 6 cheque no 329</i>	
<i>July</i>	<i>31</i>	<i>1¹⁰</i>	<i>34 10</i>	<i>30 00</i>	<i>180</i>	<i>14/19</i>	<i>132</i>	<i>29</i>	<i>5 00</i>	<i>8 44</i>		<i>20 00</i>	<i>66</i>	<i>94 10</i>			<i>Separation allowance from 1-6-19 withy</i> <i>A.P. 6561-A-11 of ch 50-66 G.M. 84</i> <i>S.W. 90 P. ch no 1108</i>	
<i>Aug</i>	<i>5</i>	<i>1¹⁰</i>	<i>5 50</i>	<i>35 00</i>	<i>1334</i>	<i>5/19</i>			<i>40 50</i>			<i>30 00</i>		<i>70 50</i>			<i>S. U. ch. no 1535 of ch 35-00 bis 2 clothes</i> <i>Discharged R.O. 217</i>	

Gadona
Gadonas
Gadbois