

0588718

L

Handwritten signature or name

Handwritten initials or mark

2-11-18 J.N.

Deceased

DISCHARGE DOCUMENTS

R. O. No. _____
H. Q. No. 92-G-2700

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 2
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... 1
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... 2
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

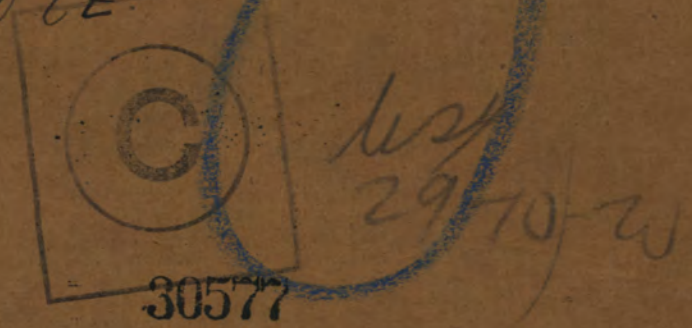
a 7 B 123 - 1
m 7 W 113 - 1
m 7 B 465 - 1

med 100g

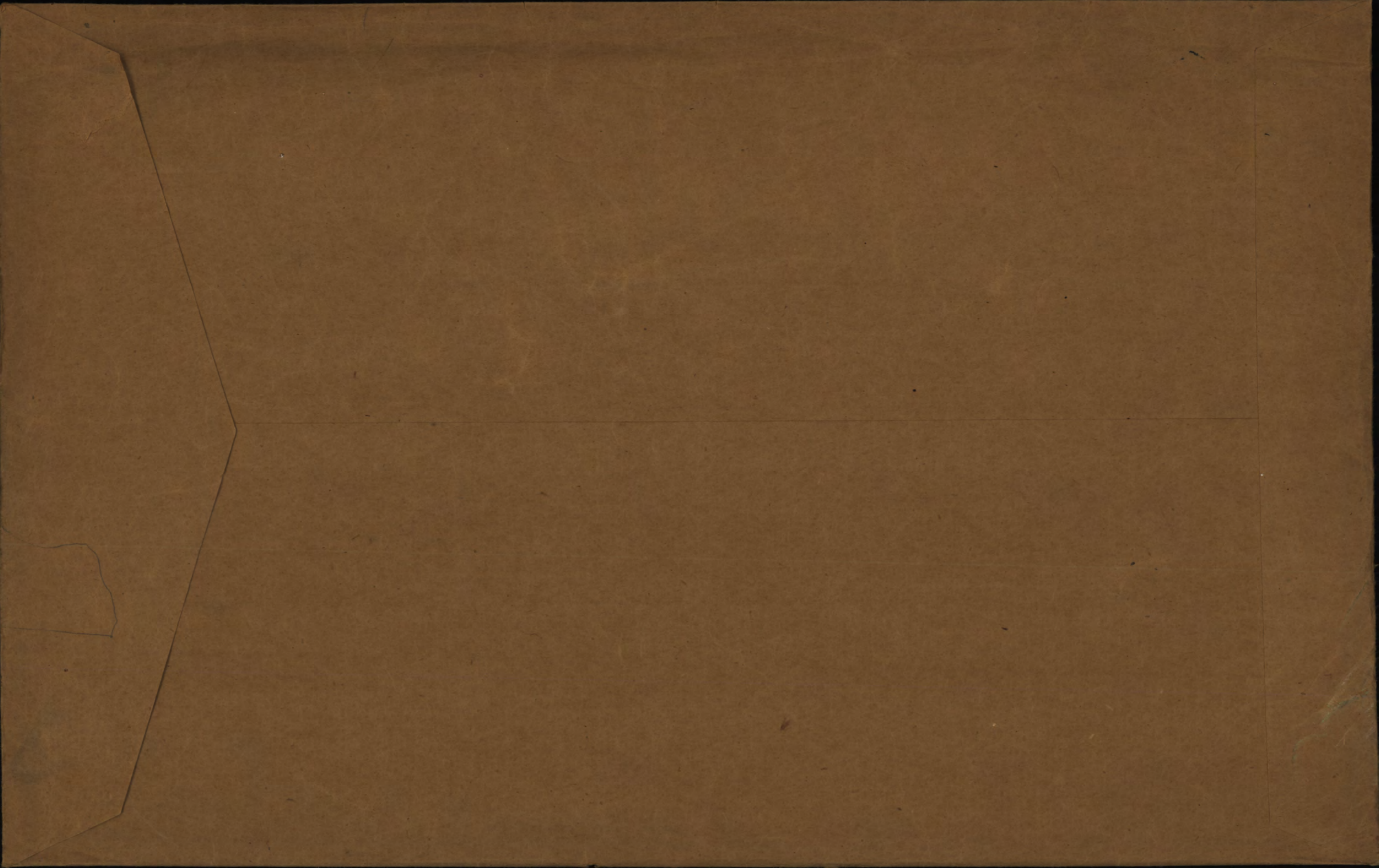
M.X.
19-8-21
R.R.

Name GUAY PAUZANATOZE
3173320
Regt. No. _____ Rank Pte
Corps 2nd / 2nd I.R.

Deceased
Auth Letter M 154 #4
S.O.S. 25-10-18



1-7
1-7



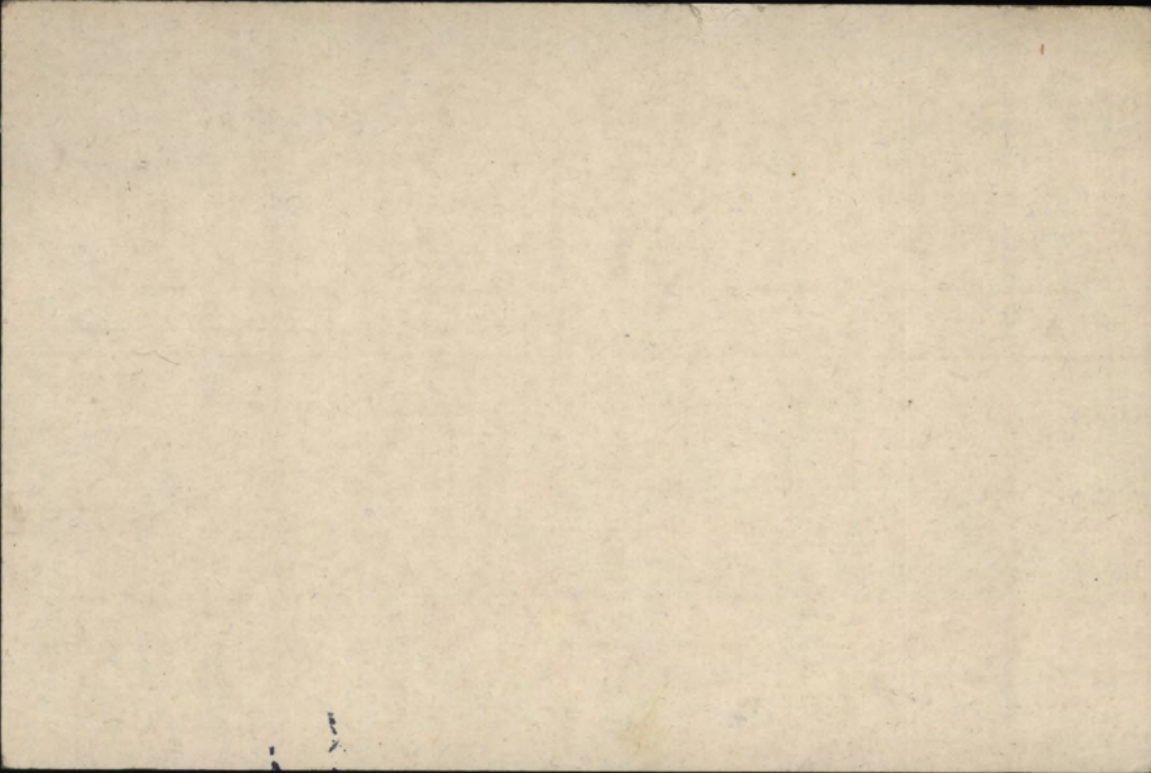
15 TO 17

Surname *Guay*
Christian names *Paul Amatoles*
Regtl. No. *317 3320* Rank *Pte.*
Unit *2nd Que Regt 2nd Dep. Bn*

H. Q.
M. D. No. *4*
T. O. S. *Sept. 19th 18*
D. O. Pt. *11 260* of *18915*
S. O. S. *10-10-18*
Reason *Dis.*
Auth. *100 293 of 11-10-18 2/2 QR*

Next of kin *Guay Mrs Alice* Relationship *Wife*
Address *Cos 26th Ave Notre Dame St Lachine* Also notify: *Mr. Guay*
P.Q. 46 St Jean Baptiste St-
Parque Pointe
Montreal P.Q.

BORN—Place *Canada Pte aux Trembles P.Q.* Date *July 23rd 1892*
ATTESTED—Place *Montreal P.Q.* Date *Sept 19th 1918*
O/S R/C



~~Serial Desp.~~

~~Regn. No.~~

2 53247

OCT 13 1921
JAN 27 1922

✓ Guay. Paul. A., Pte. ✓ 73320 ✓ 2nd Dpt. Bn. 649-G-14892

✓ 227030
2nd Que Regt.

Med. & Dec. (Widow) Mrs. Alice Guay.
360 St. Joseph St.,
Lachine. P. Q.

#4

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

(Ser. # 807346)

Mem. Cross. (Widow) Address as above.

Mem. Cross. (Mother) Mrs. Pierre Guay.
75 St. Jean Baptiste St.,
Pointe Aux Trembles. P.Q.

Canada Only

55837

R.R. 2

~~W~~

C 51514 22-8-21

909

~~M~~

C 51515 22-8-21

LEDGER NO. ¹3020 - [✓]176.

SERIAL NO.

REG. NUMBER 3173320 NAME Guay P.

RANK Pte CORPS 2/2 DR.

AGE SERVICE

NAME OF HOSPITAL G. G. E. H. PLACE Montreal

DATE OF ADMISSION 3-10-18

DISEASE Influenza (Pneumonia)

TRANSFERRED TO OTHER HOSPITALS

Died 10-10-18.

OPERATION

DISCHARGED TO IN CATEGORY

REMARKS:.....

.....

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.....

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.....

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M.X.
19-8-2
RR
EP

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-970.

3173320

Casualty Form 2 Active Service.

2nd DEPOT BN. 2nd QUEBEC REGT.

Unit, Regiment or Corps.....
 Regimental No. D- 3173320 Rank Pte Name GUAY Paul Anatole
 Enlisted (a) 19-9-18 Terms of Service (a) C.E.F. Service reckons from (a) 1999-18
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }
 Extended..... Re-engaged..... Qualification (b) Machinist

Report		Rec.rd of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 38, 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. 38, or other official documents
Date	From whom received				
26.9.18	2/20w	awh from 19.9.18 to 21.9.18 for 3 days pay	Montreal	21.9.18	Pt II No. 265
11.10.18	2/20w	Sgt. Deceased	"	10.10.18	Pt II 283

D. Rutledge
Capt. for Dept.

let

(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.]

Register No. DY 633

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 7568-P-3

Regt'l No. 3173320 Name Paul A. Guay
(Christian Name) (Surname)
Unit 2nd Dep. Bn Que. Rank Pte. Date of enlistment.....
Date of casualty 10-10-18 B.P.C. File No. 57340
Was service performed overseas? Yes no

DEPENDENT

Name Mrs. Alice Guay Relationship Widow
Address 418 St Joseph St,
Lachine,
P.Q.

Amount of Special Pension Bonus \$ 80.⁰⁰ Abstracted by J. Pratt

Eligible for Gratuity \$ 90-

Less amount of Special Pension Bonus paid..... \$ 80

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

Total deductions \$ 80

Balance due \$ 10- Sen only

Cheque No. 51903685 Date issued DEC 15 1920

Clerk [Signature]

REMARKS :
.....
.....
.....
.....

Audited by
[Signature]
Date 11/12/20

M.F.W. 2652
25M-6-20.
H.Q. 1772-86-1473

DY 134
22-12-20

EP

NOV 10 1918

MILITIA & DEFENCE

OCT 17 1918

H.C. CANADA

If you do not specifically mention your life insurance it will be assumed to pass by this will.

Name. I, GUAY Paul Anatole
Regimental Number D-3173320 Rank Pte Serving in
2nd DEPOT BN. 2nd QUEBEC REGT Canadian Expeditionary force
I declare this to be my last will revoking all previous will if any.

Executor. I appoint Nil
whose address is nil
to be the executor of this my last will.

General Gift. I give to My wife Mrs Alice GUAY
whose address is Corner 26th & Notre Dame St. Lachine P.Q. Can
all my property not disposed of above.

Date Dated at Montreal P.Q. Can This Sept. 19th 1918 1918

Signature. Paul Anatole Guay
Signature of soldier.

Signed and acknowledge by the testator as and for his last will in the presence of us both present at the same time, who at his request in his presence, and in the presence of each other have hereunto subscribed our names as witnesses.

1st Witness Signature E. Lorrain 2nd Witness Signature E. Lorrain
Address Pub. Bk. Address 100 St. Jacques
Occupation Soldier Occupation Soldier

OCT 23 1918

6175-17-10-1A

8/10/11
E
K

DEPT. OF THE ARMY
WASHINGTON, D. C.

Postmaster, please

William
H. ...
...

Wm. ...
...

CASE HISTORY SHEET.

44 E Hospital. montreal Station.
 No. 3773 320 Rank. Plt Name. Guay Age. 26
 Unit. 2/2 Completed years of service 2 weeks Canada } Where and how long
 Date of admission 7/10/18 Date of discharge 10/10/18 Dies
 Diagnosis Pneumonia Place of origin Montreal

CONDITION ON ADMISSION AND PROGRESS OF CASE

Complaints: Cough, chill, Expectorated, Headache, etc.
(etc.)

Where contracted Quel St Basile

Present Conditions

Attitude: Downy Expression, Dull, Calves, Pale Mutation: nil
 Temp. Pls Resp Pls
 Eyes: Pupils equal, Roset, Sluggish
 Ears: nil Nose: nil Mouth: nil
 Lymph Sys: nil
 Resp Sys: Whispering dry rales throughout chest

Circ Sys: nil

Reflexes: KK = + Babinski = 0 Doble clonus = 0 Romberg = 0

Abdomen: Diarthrosis

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)
Oct 8/18 Major Army
9/17 Major, hospital, on duty, heading at 10th
17 number, day, etc. at 1st Mount PS, Quebec
was under V.R.T.

TREATMENT

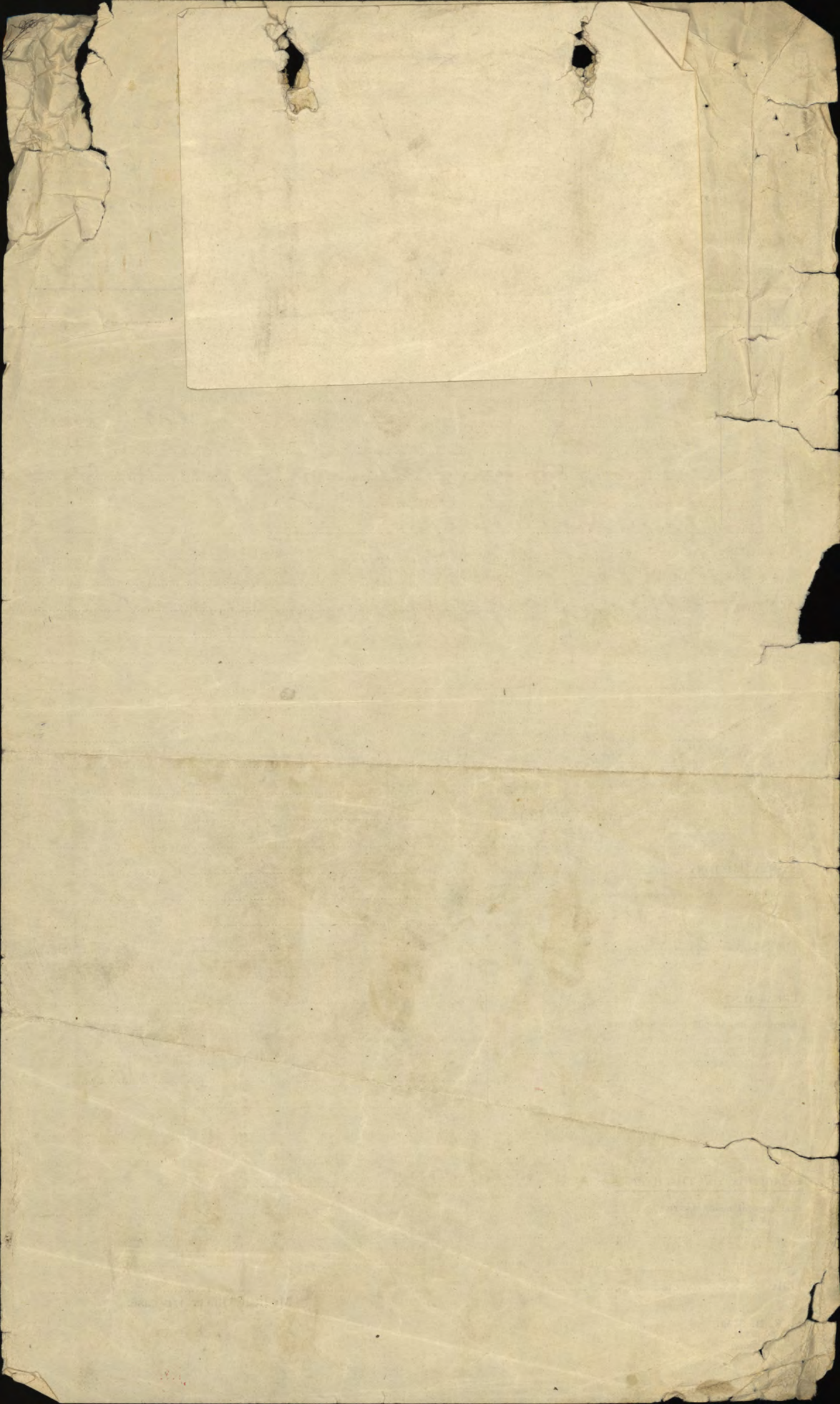
(Especially any specific or special form)
out of hospital

CONDITION ON DISCHARGE

(and disposal made of case.)

Date 10/10/18

[Signature]
 Medical Officer i/c case.



SUPPLEMENTARY LEDGER SHEET.

AUDITOR _____ PAYMASTER _____

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

REGT. No. 3173320

RANK Pte.

NAME (IN FULL)

GUAY, Paul Anatole.

M. OR S.

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS					ed. Quebec Reg.	TRANSFERRED TO	DATE AUTHORITY
						TRANSFERRED TO	DATE AUTHORITY
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$	DATE EFFECTIVE	
TO WHOM PAID Mrs. Alice Guay,	RELATIONSHIP <i>wife</i>						
ADDRESS 418 St. Joseph St.,							
	Lachine, P.Q.						
	<i>C. Gougal 8/12/20</i>						
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE.	
					DISCHARGED	PLACE DATE REASON AUTHORITY	IF ENTITLED TO POST DISCHARGE PAY
						<i>Dec'd 10/10/1918. Inflexa. - 1-11-18.</i>	<i>Reversion Effective!</i>

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		CREDITS		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3		DEBIT	CREDIT		DEBIT	CREDIT			
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.							\$	C.	
1920 all of					4200		4200					4200					4200	NIL		Cheque No. 56244 19.9.18 to 31.10.18. @ \$30.00 per month \$42.00. Auth. P.A.B. ruling dated 5.11.20. See file No. A.P. 7508-P. Gougal. 8/12/20	
1920 9-18	2	1 ¹⁰	220		220		220					220					220	NIL		Lpb to Estates Behf 8/12/20. Gougal. 8/12/20 No delay 2 days under credit G.W.S.	

