DUPLICATE

5th M. D. FIRST Depot Battalion SECOND QUEBEC Regiment

Regtl. No. 3281521

Rd. 6-7-18

# PARTICULARS OF RECRUIT

## DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE)

1. Surname: Guenette
2. Christian name: Jean-Bte Louis
3. Present address: 65 Guenette St., Notre-Dame de Levis P.Q.
4. Military Service Act letter and number: 182889
5. Date of birth: January 19th 1896
6. Place of birth (town, township or county and country): 65 Guenette St, Notre-Dame de Levis P.Q
7. Married, widower or single: Single
8. Religion: Roman Catholic
9. Trade or calling: Stenograph
10. Name of next-of-kin: Mde Roseline Lesnier, Guenette
11. Relationship of next-of-kin: Mother
12. Address of next-of-kin: 65 Guenette St., Notre-Dame de Levis, P.Q.
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: 5 years 6th Regt.
15. Medical Examination under Military Service Act:—

(a) Place Quebec (b) Date 29-5-18 (c) Category A 2

## DECLARATION OF RECRUIT

I, Jean-Bte Louis Guenette, do solemnly declare that the above particulars refer to me, and are true.

Jean Bte Louis Guenette (Signature of Recruit)

## DESCRIPTION ON CALLING UP

| | | | | |
|---|---|---|---|---|
| Apparent age | 22 | yrs | 4 | mths. |
| Height | 5 | ft | 5 | ins. |
| Chest measurement — fully expanded | 33½ | | | ins. |
| Chest measurement — range of expansion | 2 | | | ins. |
| Complexion | Fair | | | |
| Eyes | Blue | | | |
| Hair | Blond | | | |

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

Lt.-Col. O. C. 1st DEPOT BATTALION, 2nd QUEBEC REGIMENT

O. C. FIRST Depot Btln.

SECOND QUEBEC Regt.

Place Quebec Date 29-5-18

M. S. A.

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

# PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

A C 19
15-8

REGIMENTAL DOCUMENTS

NAME Guenette Jean-B.-L. (Pte) REGT. NO. 3281521 UNIT 1st D.B. 2nd A.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) | | M | | | DEATH |
| 1 | CASUALTY FORM (M.F.W. 54 or A.F.B. 103) | | | | | Category |
| | TRAINING HISTORY SHEET (M.F.W. 113) | | | | | |
| 1 | FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122) | | ~~[illegible]~~ | | | |
| | REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120) | | | | | |
| | COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121) | | | | 30679 | |
| 4 | MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178) | | Ret 22/5/21 | | | DISCHARGE |
| 1 | DENTAL HISTORY SHEET (M.F.B. 465) cert. | | | | | Category |
| | MEDICAL REPORT (M.F.B. 227 or A.F.B. 179) | | | | | Demob. |
| 2 | MEDICAL EXAMINATION (M.F.W. 129) | | | H | | |
| 2 | 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 |
| | LAST PAY CERTIFICATE (M.F.W. 44) | | | | | |
| 1 | PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268) | | | | | |
| | PARTICULARS OF CHARACTER (A.F.W. 3226) | | | | | |
| 1 | COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A) | | | | | |
| 1 | Disp. cert. | | | | | |
| 1 | S.C.R. 132 | | | | | |
| 1 | R 122 | | | | | |

Deceased 24-7-61

W. 2[illegible]
100M-11-18
[illegible]

H. Q. V

M. D. No. 5 "F" 4

Surname Guenette

T. O. S. May 29th 1918

Christian names Jean Baptiste Louis

D. O. Pt. II 148 of 28-5-18

Regtl. No. 32 8 1521 Rank Pte

S. O. S. 11/7/19 19

Unit 2nd Que Regt 1st Dpo Bn

Reason Demob

Auth. D.O. 202 of 21/7/19 4 DD.

Next of kin Guenette, Mrs Roseline L

Relationship Mother

Address 65 Guenette St
Notre Dame de Levis P.Q.

Also notify:

BORN—Place Canada Notre Dame P.Q. Date Jan. 19th 1896

ATTESTED—Place Quebec P.Q. Date May 29th 1918

O/S

R/C 9/7/19 367 Pte
70

W. 22—75M-5-18. 1772-39 839.

Can reg

Number 3281521 Rank Pte

Surname GUENETTE

Christian Name Jean-Bte Louis

Units Qué Rgt Theatre of War ~~France~~ England

Date of Service 25-9-18

Remarks 22 St. George

Latest Address ~~65 Guenette St~~

~~Notre Dame de~~ Lévis

Roll No. a Page 2761 Quebec

200m.-2-21.M.

DESP. MAY 3 1923
REGN. NO. 10843

Temp Sheet

Army Form B. 178.

# MEDICAL HISTORY of—

*Surname* Guenette *Christian Names* L. S

## TABLE I.—General Table.

Birthplace { Parish ..... County .....

Examined { on ..... day of ..... 191 , at .....

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

Trade or Occupation .....

Height ..... feet ..... inches. Weight ..... lbs.

Colour of Hair ..... Complexion .....

Eyes .....

Chest Measurement { Girth when fully expanded ..... inches. Range of expansion ..... inches.

Physical Development .....

Vaccination Marks { Arm, RIGHT | LEFT ; Number ..... | .....

When Vaccinated .....

Vision { R.E.—V = ..... L.E.—V = ..... With Glasses { R. ..... L. .....

Identification Marks, such as Tattoo, Moles, Scars, etc :—

.....

.....

Defects or Ailments :—

.....

.....

Examined and found—

**Fit for Grade** { I. II. III. IV.

(Strike out those which do not apply.)

Signature .....

Chairman of Medical Board.

Re-examined for posting at .....

On ..... day of ..... 191 .....

Enlisted { at ..... on ..... day of ..... 191 .....

| | Corps | Regtl. No. |
|---|---|---|
| Joined on enlistment | O.F.C. Laval | [illegible]1527 |
| Transferred to | | |
| | | |
| | | |

## TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service; Extension, Re-engagement, or Prolongation of Service, Issue of Surgical Appliances, Particulars of Dental Treatment, etc.

| Date | Brief details and Signature |
|---|---|
| | |

Special Remarks : state if a discharged Soldier

.....

.....

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## TABLE IV.—Service Table.

| Station or Troopship | Date of arrival or embarkation | Date of departure or disembarkation |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Became non-effective by .....

on ..... day of ..... 191 .....

(*Signature*) .....

(*Rank*) .....

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
[18] W463/P943 200m 4/18 45 G & S 59

## TABLE II.—Only for admissions to Hospital or to the Sick List in Case of Warrant Officers treated in quarters.

| Name of Hospital | Admitted to Hospital | | | Discharged from Hospital | | | Disease | Number of days in Hospital | Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet. | Signature of Medical Officer |
|---|---|---|---|---|---|---|---|---|---|---|
| | Day | Month | Year | Day | Month | Year | | | | |
| Kinmel Park Military Hospital | 9 | 10 | 18 | 17 | 10 | 18 | Scabies 154 | 8 | Baths Ung Sulph Cured | H. Lemau [illegible] Capt [illegible] |

C.A.D.C. 5009A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

# DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

MD4

NAME OF SOLDIER (Block Letters) GUENETTE, L.

REGIMENT C.O.T.C. RANK PTE No. 3281 5-21

Date of Examination in England 22/5/19 Date of Examination in France

**DIRECTIONS TO DENTAL OFFICERS**

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated

## PRESENT DENTAL REQUIREMENTS

1. FILLINGS 2 7 & 9
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (a) In Canada
- (b) In England No
- (c) In France

F. J. Sloan Lieut. ~~Col.~~
A. D. D. S., M. D. 4

KINMEL PARK, NORTH WALES.

*Signature of Dental Officer* W. C. Spragur Capt.

127-8

Canadian Form D.M.S. 1375.

# Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

*Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.*

Rank Sergeant Name Guinette Surname Louis

Unit or Corps Laval O.T.C. (If a soldier) Regtl. No 3281521

Born at Levis P.Q. on, date 19 Jan. 1896.

Signature (for identification) Louis Guinette

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**---Any deformity, maiming or lameness? If so, describe. no

Weight 147 lbs.

Height 5 ft. 4 in.

2. **NUTRITION AND DIATHESIS?** Good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?** normal

4. **RESPIRATORY SYSTEM?** normal

5. **HEART?** normal

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 80 Intermittence or Irregularity? no

6. **ARTERIES**---Any hardening? no

7. **DIGESTIVE SYSTEM?** Good

8. **GENITO-URINARY SYSTEM?** normal

Urinalysis---s.g.? 1020 Reaction? alkali Albumen? nil Sugar? Nil

9. **SKIN, MIDDLE EAR, EYE, or any other part?** normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so describe. no

11. Opinion as to the health and physical condition of the one examined? Good.

Examined at Kinmel Park N. Wales Signed [illegible] M.O.

Date Nov. 28/18 Signed [illegible] M.O.

*If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.*

Temporary

# MEDICAL HISTORY OF—

A.F. B.178.

*Regional No.*.....

*Regimental No.* 328521

*Region*.....

*Surname* Suennette *Christian Names* Louis

## TABLE I.—General Table.

Birthplace { Parish..... County.....

Examined { on.....day of.....191..., at.....

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

Trade or Occupation.....

Height.....feet.....inches. Weight.....lbs.

Colour of Hair.....Complexion.....

,, Eyes.....

Chest Measurement { Girth when fully expanded .....inches. Range of expansion.....inches.

Physical development.....

Vaccination Marks { Arm, RIGHT. | LEFT. Number .....

When Vaccinated.....

Vision { R.E.—V=..... L.E.—V=..... With Glasses { R..... L.....

Identification Marks, such as Tattoo, Moles, Scars, etc.:—

.....

.....

Defects or Ailments :

.....

.....

Examined and found—

**Fit for Grade** { I. II. III. IV.

(Strike out those which do not apply.)

Signature .....

Chairman of Medical Board.

Re-examined for posting at .....

On.....day of .....191...

Enlisted { at ..... on.....day of.....19...

| | Corps. | Regtl. No. |
|---|---|---|
| Joined on enlistment | C.O.T.C. | 328521 |
| Transferred to | | |
| | | |
| | | |

## TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service; Extension, Re-engagement, or Prolongation of Service, Issue of Surgical Appliances, Particulars of Dental Treatment, etc.

| Date. | Brief details and Signature. |
|---|---|
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| | |

Special Remarks : state if a discharged Soldier

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## TABLE IV.—Service Table.

| Station or Troopship. | Date of arrival or embarkation. | Date of Departure or disembarkation. |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

Became non-effective by .....

on.....day of.....191...

*(Signature)*.....

*(Rank)*.....

M833 Wt.12046/437 400,000 7/18 CLdP 324.

## TABLE II.—Only for admissions to Hospital or to the Sick List in Case of Warrant Officers treated in quarters.

| Name of Hospital. | Admitted to Hospital. | | | Discharged from Hospital. | | | Disease. | Number of days in Hospital. | Remarks bearing on the cause, nature, or treatment of the case likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet. | Signature of Medical Officer. |
|---|---|---|---|---|---|---|---|---|---|---|
| | Day | Month | Year | Day | Month | Year | | | | |
| MILITARY HOSPITAL, KIMMEL PARK. | 19 | 10 | 18 | 18 | 11 | 18 | Influenza | 31 | Fit to rejoin Unit | [illegible] Capt. R.A.M.C. O. i/c. CONVALESCENT DIVISION, MILITARY HOSPITAL, KIMMEL PARK. |

ORIGINAL

on first 47

# MILITARY SERVICE ACT, 1917.

# MEDICAL HISTORY SHEET

~~3281522~~ 3281521

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Fresnette Christian name Louis
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 182989
3. Consecutive number on schedule of men reporting for service (if he appears on it) 857
4. Address (including street and number, if any) Notre Dame de Levis

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 4th day of May 1917, by the undersigned medical board sitting at Quebec

5. Age as stated 22 Years 4 Months. 6. Apparent age 22 Years 4 Months
7. Height 5 Feet 5 Inches. 8. Weight 117 1/2 Pounds.
9. Chest measurement Minimum 31 1/2 Ins. Maximum 33 1/2 Ins. 10. Complexion fair; Eyes Blue; Hair fair
11. Physical development fair (Good / Fair / Poor) 12. Smallpox marks —
13. Number of vaccination marks: Right arm —; Left arm One 14. When vaccinated last Childhood
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, Tuberculosis, Syphilis. We find no evidence of past: Rheumatism, Tuberculosis, Syphilis.
(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 A 1

17.
(a) Vision R. 20 L. 20
(b) Hearing R. Normal L.

A. M. Lorne Capt. President.

[illegible] Capt. Member. [illegible] Capt. Member.

Signature of Man: [illegible]

| Date | Result | Vaccinations | Date | Result | Anti-Typhoid Inoculations, Etc. |
|---|---|---|---|---|---|
| 28/6/18 | | Jos. Desjardins Lt. M.O. | 18/6/18 | | Jos. Desjardins Lt. M.O. |
| | | M.O. | 25/6/18 | | Jos. Desjardins Lt. M.O. |
| | | M.O. | 5/7/18 | | [illegible] M.O. |

*Joined* 29 *day of* Mai 1918 *at* Quebec

| | Corps | Reg'tl Number | Habits | Date |
|---|---|---|---|---|
| Joined on enlistment | 1st Depot Bn. 2nd. Quebec Rg't. | 3281521 | | 29/5/18 |
| Transferred to | C.A. Naval Res. | | | 30/5/18 |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| Station | Date | Disease | Result |
|---|---|---|---|
| Kingston | 22.5.19 | A cat nil | [illegible] E. Malcolm Capt. |

STANDING MEDICAL BOARD M.D. No. 4 MONTREAL JUL 11 1919

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.

M. F. B. 318.
300M.—10-17.
1772-39-439.

Surname Guenette Christian Name [illegible]

| 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 | | | | |

# 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. 32815·21 Rank Ste. Surname Guenette (Given name in full) Louis

Unit or Corps C.O.T.C. Laval Birthplace Notre Dame de Lewis Que.

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

1. GENERAL DESCRIPTION:

Physique Fair Weight 120 lbs. Height 5 ft. 6 in. Colour of Eyes blue

Nutrition Fair

Pulse 78

Condition of arteries soft

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 20 ft.

Left 40 ft.

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

1 vaccine left

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.

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

[OVER]

# EXAMINATIONS.

## THIS SECTION FOR USE OVERSEAS—

Examined at Runnel Pk. (Overseas)

Date 22.5.19 Signed [illegible] 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 Louis Guenette

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

## THIS SECTION FOR USE IN CANADA—

STANDING MEDICAL BOARD M.D. No. MONTREAL JUL 1 1919

Examined at ..... (Canada)

Date ..... Signed [illegible] Capt 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 Louis Guenette

(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]

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

# CANADIAN EXPEDITIONARY FORCE

# DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3281521 (Rank) Pte.

Name (in full) Jean-Baptiste Louis Guenette enlisted in the 1st Depot Bn., 2nd Quebec Reg't.

CANADIAN EXPEDITIONARY FORCE at Quebec on the 29th day of May 1918

HE served in 10th Reserve Bn. in England

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

~~Medical Unfitness~~.

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

Age 23 years

Height 5 ft. 6 inches.

Complexion Fair

Eyes Blue

Hair Fair

Marks or Scars 1 Vacc. mark Left arm

Louis Guenette

Signature of Soldier.

Date of Discharge

Dispersal Station "H" JUL 11 1919 Military District No. 4

Issuing Officer.

Lieutenant.

Officer i/c Discharge Section, Dispersal Station "H"

Rank

Date July 11th 1919

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.B. 39A.

**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 ~~1st DEPOT BATTALION 2nd. QUEBEC REGIMENT~~ Col C Laval Quebec

Regimental No. 3281521 Rank Private Name Jean-Bte Louis Guenette

Enlisted (a) 29-5-18 Terms of Service (a) ~~Can. Exp. Force~~ C. E. F. D of W Service reckons from (a) 29-5-18

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) Stenograph

| 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 | Canada | 10-9-18 | H. M. T. |
| | | Disembarked | England | 25-9-18 | Durham Castle |
| JAN 2 1919 | T.O.S. No 4 MDAW | G.C.C. Kinmel Park for return to Canada Part II Order No. 2 | | 10-12-18 | |
| 10-12-18 | | G.C.C. Kinmel Park for return to Canada Part II Order No. | | | |
| 2/7/19 | Sod | C.C.C. Kinmel Park on Embarking for Canada Part II Order No 149 | | | |

Jheach .....Lieut.
Officer I/c Records
No. 4 M.D. Concentration Wing.

EMBKD. SOUTHAMPTON 2-7-19
ARR HALIFAX JULY 3

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case. | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents. |
|---|---|---|---|---|---|
| Date | From whom received | | | | |
| 21-7-19 | O/S | T.O.S.D.D.#4 Disp.Stn."F" | Montreal. | 2-7-19 | D.O.Pt.II-202. |
| 21-7-19 | | S.O.S.D.D.#4 Demob. | " | 11-7-19 | D.O.Pt.II-202.R.O.1420. |

Lieut. Fletcher Lieutenant,
a/ Assistant Adjutant,
District Depot No. 4.

Form R 122.
2353—100M—5-12-16.

Rank | Name GUENETTE, Jean-Bte Louis. | Reg'l No. 328521

Unit 128th Dft-Laval Univ | If in perm. Corps, What Unit? | Married or Single Single

Place and Date of Enlistment Quebec 29th May 1918 | Place of Birth Notre Dame de Levis P.Q.

Name and Address, Next-of-Kin Mde Roseline (Lasnier) Guenette
65 Guenette St. Notre Dame de Levis P.Q. | Relationship Mother

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Category A R Can

Discharge, Date and Place | Reason | Character

H. W. & V., Ld.—9546-16.

| Report. Date. | 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 | | 25 9 18 | S S DURHAM CASTLE |
| 8. 10. 18 | 10 Re | T.O.S. | Seaford | 25.9.18 | Do #238 |
| 23-12-18 | Concentration Wing | attached | Kinmel Pk | 10-12-18 | D20 |
| 2-1-19 | ✓ | Ceases attd on posting to Perm Cadre | —11— | —11— | Do 2. |
| 2-1-19 | #4 Con Wing | T.O.S from 10 Res | Bgn 11 | —11— | Do 2. |
| 3-5-19 | 10th Res | S.O.S. to 4W. M.D.C. & | Ryl | 30-4-19 | DO 103 |
| | | SL 94- Y -229 | | 2.7.19 | |
| 2-7-19 | 4 Wing | SOS to Canada SL97 | " | 2-7-19 | Do 150 |

Misc

Que

| Report. | | Record of promotions, reductions, transfers casualties, etc., during active service. The authority to be quoted in each case. | Place. | Date. | REMARKS Taken from Official Documents | |
|---|---|---|---|---|---|---|
| Date. | From whom received. | | | | | |

P 820
12474—375M—13-2-18.

Strike out whichever inapplicable.

AUTHORITY
A.P. NOM. ROLL.

| ASSIGNED PAY. | ~~ENGLAND OR~~ CANADA. | SEPARATION ALLOWANCE. |
|---|---|---|
| EFFECTIVE DATE:– | 1 – 10 – 18 | EFFECTIVE DATE:– |
| AMOUNT:– | ~~10~~ 1/6/19 | AMOUNT:– |

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS WORD "SAME" ONLY T

Mrs Rosline Lasnier Guenette (Mother)
65 Guenette St, Levis, Que

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOU BY INSERTION OF DATE C

| DATE OF PAYMENT | NUMBER OF A.R. | UNIT PAID BY | AMOUNT | DATE OF PAYMENT | NUMBER OF A.R. | U |
|---|---|---|---|---|---|---|
| ~~25/11~~ | ~~6505~~ | ~~Kimmel £1-0-3~~ | ~~4 93~~ | 14 5/9 | 3006 | R Ay |
| 2/12 | 8919 | " £10-0-6 | ~~48 79~~ | 20 5/ | 3509 | |
| | | | ~~53 72~~ | | | |
| | | | | P870 issued | | |
| L.P.C. | ~~Bal.~~ | ~~30/12/18~~ 31.5.19 ~~4991~~ Cr 93 31 | | Dis. Canada 1 6/19 | | |

PARTICULARS OF RENDERING NON-EFFECTIVE:– Dis. to Can

| MONTH | PARTICULARS | CR 1 | CR 2 |
|---|---|---|---|
| | Bal. from Canada | | |
| 30-9-18 | PP. Oct. | 34 10 | |
| | Cr note 725 – 22.10.18 Amended L.P.C. Canada #33. to 37.30. | | 4 30 |
| | | 34 10 | 4 30 |
| Nov | PP | 33 | |
| Dec | " | 34 10 | |
| | | 67 10 | |
| | Jan. & Feb. | 64 90 | |
| Mch | P.P. | 34 10 | |
| | | 99 | |
| Apl | " | 33 | |
| May | Pra | 34 10 | |
| | Int. on Def Pay | 70 | |
| | | 67 80 | |

PARATION
LOWANCE.

ENGLAND OR CANADA.

FECTIVE
TE:-

OUNT:-

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

NAME:- GUENETTE Jean Babtiste Louis

NUMBER:- 3281521

PARTICULARS OF RANK OR APPOINTMENT

| AUTHORITY | DATE EFFECTIVE | RANK OR APPOINTMENT |
|---|---|---|
| L.P.C. from Canada | 1-10-18 | pte |

UNIT AND TRANSFERS

ORIGINAL UNIT Draft No. 128 COTC Laval.

DATE ACCOUNT FIRST OPENED:- 1-10-18

| AUTHORITY | DATE EFFECTIVE | DATE LEDGER SHEET T'SF'D | UNIT TRANSFERRED TO |
|---|---|---|---|
| | | | 10 Res |

UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

| E OF MENT | NUMBER OF A.P. | UNIT PAID BY | AMOUNT |
|---|---|---|---|
| 5/19 | 3006 | Rhyl Lr. | ~~9 70~~ |
| 5 | 3509 | " r. | ~~9 70~~ |

DAILY RATES OF PAY AND ALLOWANCES

| AUTHORITY | PAY | F.A. | P.F.A. | SUBS'CE ALL'CE |
|---|---|---|---|---|
| L.P.C. from Canada | 1 | 10 | | |

P870 issued 11/1/19 Dr. 41d Bal Cr. 49.50

Canada 1 6/19 N.R.D 9649 vr 5/19 Rhyl to Rhyl M.D.4 Comp 26 5/19

Dis. to Can 1/1/19 Rhyl UR 3/12/18 Disposal. LPC compiled 5/2/18.

| CR 1 | CR 2 | PARTICULARS | DR. 1 | DR 2 | DR. 3 | DR. 4 | BALANCE | DEFERRED | SEPARATION |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | 33.00 | | |
| | | | | | | | ~~20 20~~ | | |
| 34 10 | | ap. | | | | 10 | | | |
| | 4 30 | AR 254 Kinnell 1/10 | 4 87 | | | | 56 53 | 5 - | |
| 34 10 | 4 30 | | 4 87 | | | 10 | | | |
| 33 | | ap | | | | 10 | 79 53 | | |
| | | AR 6505 " 25/11 | 4 93 | | | | | | |
| | | " 8919 " 2/12 | 48 79 | | | | | | |
| | | | | 53 72 | | | | | |
| 34 10 | | ap. | | | | 10 | 49 91 | | |
| | | Hosp Adv. " Nov. '18 | 41 | | | | 49 50 | | |
| 67 10 | | | 54 13 | | | 20 | | | |
| | | AR 530 " 23/12 | 9 73 | E on LPC | | | 39 77 | | |
| | | " 2597 " 21/1 | 14 60 | E on LPC | | | 25 17 | | |
| | | " 4234 " 27/1 | 4 87 | 29 20 | " | | 20 30 | | |
| | | " 900 " 15/2 | 19 47 | " | | | - 83 | | |
| | | | 48 67 | | | | | | |
| 64 90 | | C.A.P. | | | | 20 | 45 73 | | |
| 34 10 | | CAP | | | | 10 | 69 83 | | |
| 99 | | | | | | 30 | | | |
| 33 | | ap | | | | 10 | 92 83 | 35 | |
| | | AR 614 " 12/4 | 2 43 | | | | 90 40 | | |
| 34 10 | | Cat | | | | 10 | 114 50 | | |
| | | AR 4336 K Park 28 4/19 | 2 43 | | | | 112 07 | | |
| | | | 4 86 | | | | 112 77 | | |
| 70 | | | | | | | | | |
| | | ✓3006 " 14 5/19 | 9 73 | | | | 103 04 | | |
| 67 80 | | | 14 59 | | | 20 | | | |
| | | ✓3509 ✓ 20 5/19 | 9 73 | | | | | | |
| | | ✓13660 ✓ 3 6/19 | 48 67 | E on L.P.C. | | | | | |

L.P.C.

NUMBER 3281521. RANK NAME GUENETTE

| MONTH | PARTICULARS | CR. 1. | CR. 2. | PARTICULARS |
|---|---|---|---|---|
| | B1 forward. | | | |
| | | | | A.R. 14777 K.P. 13 6/19 |
| | | | | ✓ 15850 ✓ 24 6/19 |

A.O.S 2/7/19

RJC

ETTE J.B.L.

| | Dr. 1 | Dr. 2 | Dr. 3 | Dr. 4. | Balance | Deferred | Separation |
|---|---|---|---|---|---|---|---|
| | 58 40 | | | | 44 64 | | |
| 13 6/19 | 24 33 | L.P.C. end. | | | 20 31 | | |
| 24 6/19 | 9 73 | ✓ | ✓ | | 10 58 | | |
| | 92 46 | | | | | | |
| | 92 46 | | | | | | |

7/19

Date of Enlistment 29-5-18.

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

G 10302

Date of Assignment 14 Oct 1918.

RATE OF SEPARATION ALLOWANCE

| | | | |
|---|---|---|---|
| | | | |

RATE OF ASSIGNMENT

| | | | |
|---|---|---|---|
| 10.00 | | | |

## PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion C.O.T.C. Laval Quebec Dft 128.

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

ROSELINE LASNIER GUENETTE,
65 RUE GUENETTE,
QUEBEC, QUE. 10 10.00
% 3281521 SGT LOUIS GUENETTE
TEN DOLLARS

| Date | Cheque No. | Amount S/A | Amount A/P | Total | | REMARKS 2577 - L.3. |
|---|---|---|---|---|---|---|
| Oct | W 52773 | | 10 | 10 | H | |
| Nov. | V 61775 | | 10 | 10 | H | |
| Dec | X. 65901 | | 10 | 10 | H | |
| Jan | R. 75312 | | 10 | 10 | B | |
| Feb. | Y. 81346. | | 10 | 10 | H | |
| March | M 83450 | | 10. | 10 | H | |
| Apr | S 1693. | | 10 | 10 | H | |
| MAY | P 1754 | | 10 | 10 | ✓ | |
| June | O 10507 | | 10 | 10 | | |
| July | O 11752 | | 10 | 10 | T | |

A/c Closed 31 7/19

Ret'd per Olympic

Date 9 7/19 M.F.W. 187 18 7/19 M.D. #4

Closed

MK 099698 sent 18 7/19

M. F. W. 128.
400M—6-17—1772-39-1141
L. L. 22320—M. & D. 7963.

AUTH... FOR NEW ACC'T. M.D. 5 B.T. W. Lowrie 23-9-18.

AUDITED.

Date of Enlistment

MILITIA AND DEFENCE

# Separation and Assigned Pay Branch K

OVERSEAS CONTINGENTS

CANCELLED 4 SEP 26

Date of Assignment

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.—4-17—1772 39-1141
L. L. 22820—M. & D. 7993.

AUTHORITY FOR NEW ACC'T. .....

G1704 / PB

M. OR S. NG

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

REGT. NO. 3281521 RANK Pte NAME (IN FULL) GUENETTE. J B L (BLOCK LETTERS SURNAME FIRST)

AUDITOR | PAYMASTER

| NEXT OF KIN | RELATIONSHIP |
|---|---|
| ADDRESS | |
| IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE |
| TO WHOM PAID: Nil | RELATIONSHIP |
| ADDRESS | |

| PARTICULARS | EFFECTIVE DATE | AUTHORITY |
|---|---|---|
| SOS | 2. 7. 19 | DO 202 - HR 94 / 98 B |

Dept. of Lands & Forest, Government Building, Quebec. 8th / 9 / 19

ORIGINAL UNIT C.E.F. QRD — IF IN P.F. WHAT UNIT? X

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 29. 5-18 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 10 00/x — DATE EFFECTIVE 1. 8-19

PAYABLE TO R L Guenette — RELATIONSHIP Wife

ADDRESS 65 Rue Guenette Quebec Cancelled

ANY CHANGE IN ASSIGNEE OR ADDRESS: Wife ~~Banque Nationale~~ ~~Levis P.Q.~~

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Montreal — DATE 11. 7. 19 — REASON Demob — AUTHORITY DO 202 - HR 94 / 98 B — IF ENTITLED TO POST DISCHARGE PAY

| MONTH | PAY AND F.A. No. of Days | Rate | Amount $ | c. | Other Credits $ | c. | $ | c. | Total Credits $ | c. | Acquittance Rolls Col. No. 1 | Col. No. 2 | Col. No. 3 | 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 | | | | | | | 93 | 31 | 93 | 31 | | | | | | | | | | | | | | | | | | | | | | 93 | 31 | "Olympic" Cr Bal ELPC 93 31/x |
| 1. 6/6/19 | | | | | 35 | 00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | Civ Clos 35 00/x Wife 70 00/x |
| 17. 7. 19 | 47 | 1.10 | 51 | 70 | 70 | 00 | | | 156 | 70 | Boat | Train | D CK 141600 | 4 | 87 | 5 | 00 | 137 | 41 | 20 | 00 | | | 6 | 60 | 82 | 73 | 256 | 61 | 6 | 60 | JBR | | AP 20 00/x (for June, July 1919) |
| | | | | | | | | | 250 | 01 | | | | | | | | | | | | | | | | | | | | | | | | P. Aops 126 17/7/19 6 60/x |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Endsmnt ELPC 82 73/x |

**War Service Gratuity**

| Date | Other Credits | W. S. G. S. A. | Total | Other Charges | W. S. G. S. A. | Total | Balance Soldier | Balance Dependant | Remarks |
|---|---|---|---|---|---|---|---|---|---|
| | 280 | | 280 | | | | | | |
| | | | | | 70 | 70 | 210 | | |
| | | | | 6 60 | | 6 60 | 203 40 | | |
| 15/8/19 | | | | | 70 | 70 | 133 40 | | 1277515 |
| 11.9.19 | | | | | 63 40 | 63 40 | 70 00 | | 1528047 |
| 11. 10. 19. | | | | | 70 | 70 | — | | 1636501 |
| | | | | | | 280 — | | | |

Final

MILITARY DIST. No. 4 AUG 8 1919 DEMOBILIZATION PAY DIVISION

200M-3-19.—L. L. 58766-M. & D. 9985.
M. F. W. 2596.
1972-39-1390.

Cat- A II
S G- 33
O G- 3

E

SHORT FORM.

**PROCEEDINGS ON DISCHARGE.**

**(Demobilization.)**

1. No. 3281521
2. Rank. Pte
3. Name. Grenette Jean Baptiste Louis
4. Unit. C.O.T.C. Laval, 2nd D.R.D.
5. Date of Discharge 11-7-19 Place Montreal.
6. Reason for Discharge Demobilization.
7. Authority. R.O. 1420. D.D. #4 D.O. Pt. II-202.
8. Proposed Residence after Discharge Quebec

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? B-39 Montreal

July 11th/19.

Jean Grenette

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Montreal

Date July 11th/19

Signature (O. C. Discharging Unit.)

G.D. 21.10.60

M.F.B. 218a—300M.-11-18—1772-39-113.

## LIST OF DISCHARGE DOCUMENTS.

| | |
|---|---|
| Attestation Paper, Triplicate | Militia Form W. 23 |
| or Particulars of Recruit | Militia Form W. 133 |
| Field Conduct Sheet | Militia Form W. 178 or A.F.B. 122 |
| Casualty Form | Militia Form W. 54 or A.F.B. 103 |
| Last Pay Certificate | Militia Form W. 44 |
| Certificate that missing documents are unobtainable | |
| Medical History Sheet | Militia Form B. 313 or A.F.B. 178 |
| Proceedings of Medical Board | M.F.B. 227, A.F.B. 179 or A.F.A. 45 |
| Dental History Sheet | Militia Form B. 465 |
| Medical Report | M. F. W. 129 or D. M. S. 1375 |
| Regimental Conduct Sheet | Militia Form B. 263 |
| Company Conduct Sheet | Militia Form B. 263a |

Group A
Checked by No. 20
HH
Date 29-6-19