

Substituted for Duplicate Attestation Paper, in accordance with H.R.D. para 1904.

ATTESTATION PAPER

No. 856363

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

- 1. What is your surname? Jubinville
1a. What are your Christian names? Emile
1b. What is your present address? St. Hyacinthe, P.Q.
2. In what Town, Township or Parish, and in what Country were you born? St. Liboin, P.Q.
3. What is the name of your next-of kin? Alexandre Jubinville
4. What is the address of your next-of-kin? St. Hyacinthe, P.Q.
4a. What is the relationship of your next-of-kin? Mon Pere
5. What is the date of your birth? 23 Avril 1894
6. What is your Trade or Calling? Journalier
7. Are you married? Non
8. Are you willing to be vaccinated or re-vaccinated and inoculated? Oui
9. Do you now belong to the Active Militia? Oui (34th Reg't. St. Hyacinthe.
10. Have you ever served in any Military Force? Oui
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, Emile Jubinville, 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.

Emile Jubinville (Signature of Recruit)

Date 26 Avril 1916 Lieut. C.A. Sutton (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Emile Jubinville, 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.

Emile Jubinville (Signature of Recruit)

Date 26 Avril 1916 Lieut. C.A. Sutton (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 St. Hyacinthe this 26 day of Avril 1916.

Jules St. Germain, Commissaire

True Copy for the Records

Description of Emile Jubinville on Enlistment.

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

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).

Height.....5.....ft..7 1/2.....ins.

Chest measurement. { Girth when fully expanded.....35 1/2.....ins.
 { Range of expansion.....3.....ins.

Complexion.....Colore.....

Eyes.....Brun.....

Hair.....Brun.....

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

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*.....Valide.....for the Canadian Over-Seas Expeditionary Force.

Date.....26 Avril.....1916.....J. E. A. Collette.....

Place.....St. Hyacinthe, P.Q......M.D.
 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.

.....Jubinville Emile.....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.

.....R. de la Bruere Girouard.....(Signature of Officer)
 Lt Col.

Date.....26 Avril.....1916.....

REGIMENTAL DOCUMENTS

NAME *Guberville Emile*

REGT. NO. *856363* UNIT

H. Q. FILE NO.

S

W

H

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

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

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

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

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

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

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

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

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)

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

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

DEATH

Category

DISCHARGE

Category

14305

DESERTION

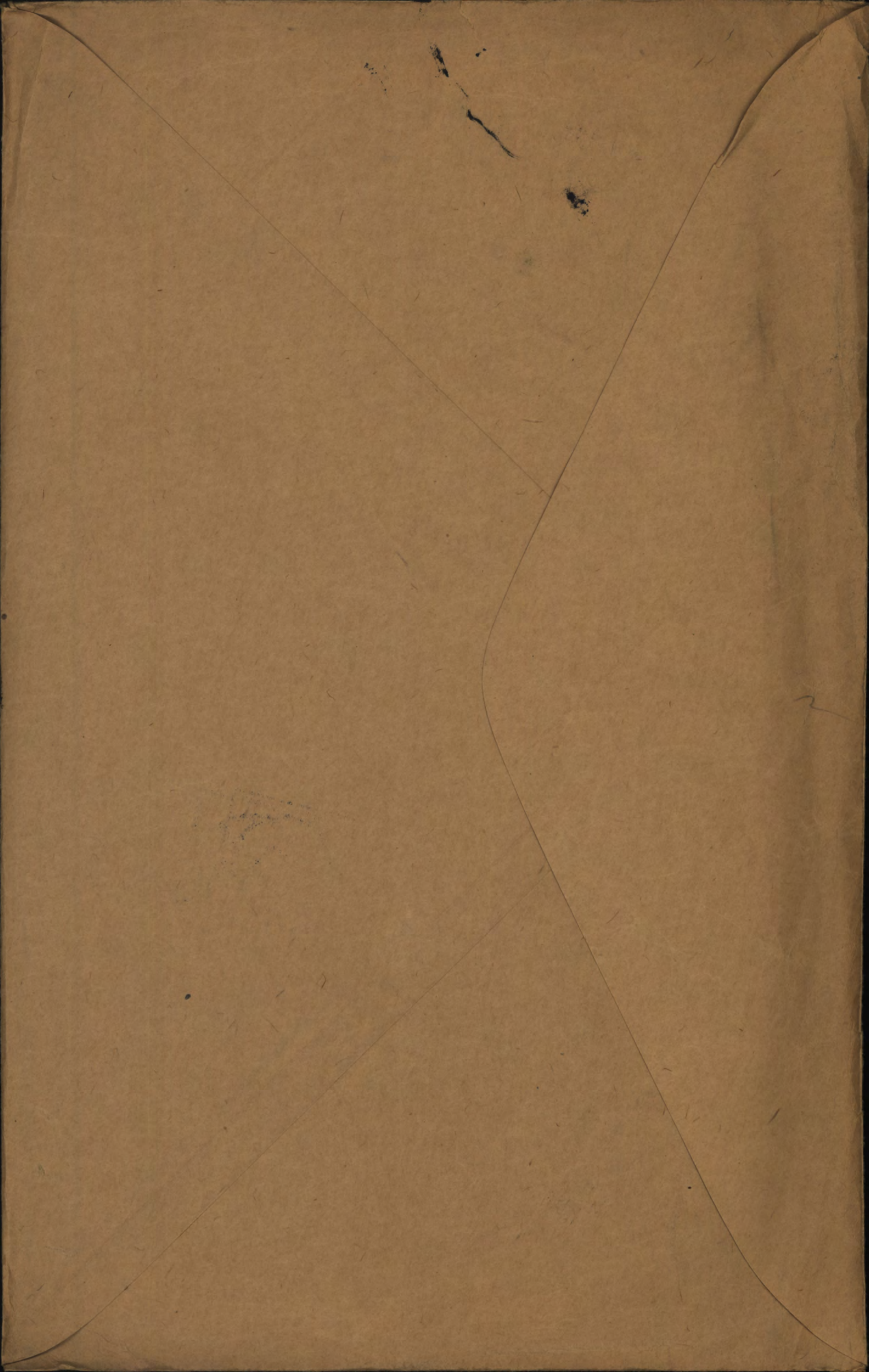
H

X

*1 P.85
1 M.F.W. 67
1 B.149
1 Cal Card
1 miss
2 pay cards*

MX 19th ac

*16-7
24-9
30-9
3*



8 2/4 18.

(649-9.8372)

SURNAME.

Jubinville

CARD NO.

CHRISTIAN NAMES

Emile.

FOLL.

REGL. No.

856363

RANK

~~Ste.~~ 2/Cpl.

UNIT 178th.

BW

FORMER CORPS

84th. Rgt. 5 yrs.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Jubinville Alexandre

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

~~11 St. Michel Providence~~
St. Hyacinthe P.Q.

Rue Ste. Anne No 29. Letter 21-9-18.

COUNTRY OF BIRTH

Canada St. Libre P.Q.

DATE

Apr. 23rd. 1894

PLACE OF ATTESTATION

St. Hyacinthe P.Q.

DATE

Apr. 26th. 1916

O.S. 3.3.17.

From Halifax Per S.S. "Canada" 3-3-17.

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

22 YEARS

MONTHS

HEIGHT

5 FEET

7 1/2 INCHES

CHEST MEASUREMENT

35 1/2 INCHES

EXPANSION

3 INCHES

COMPLEXION

Fresh

EYES

Brown

HAIR

Brown

DISTINGUISHING MARKS

Not stated

MEDICAL EXAMINATION.

PLACE

St. Hyacinthe

P.Q.

DATE

Apr. 26th 1916

Present Address

11 St. Michel
Providence St. Hyacinthe

E MILE

J. 1474

Name JUBINVILLE

Rank Pte

Reg. No. 856363

Unit 87th Bn

Alexandre Jubinville, St Hyacinthe

Next of Kin Canada

P. Q. Can

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918 24 4	8 la. F. G.		P. U. O.	A 202		17302
22 4	42 l. l. S.		do	A 205		17454
1 5	discharged to Unit	✓ W. S. G.	do	A 212		17849
2 9	<u>Killed in Action.</u>			A 320	A 222	3283

856363
REG' NO.

H. Q. FILE NO. 649

NAME

Jubenville Emile

RANK AND CORPS

Pte. 87th Bn. from 178thFOLLOWS
No.

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

~~St anne st #29 (auch letter 2-9-18)~~

Alexander Jubenville (father) + St Michel Providence

St Hyacinthe P 2.

P 322 33-11

17-9-18 It is a Sept 2nd/18

Quebec Regt

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A 202-1. no 8. Can. Fld. Amb. 24-4-18. P.U. O

U 205². 42 Can. Ctg. Stu. 25-4-18 P.U. O

A 212² Disc. To Unit 1-5-18 P.U. O

A 320² Rep from Base. 2-9-18 K. m. G.

HOSPITALS**DATE****DIAGNOSIS**

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

No 856363 RANK

Pte

NAME

Jubinville P. C.

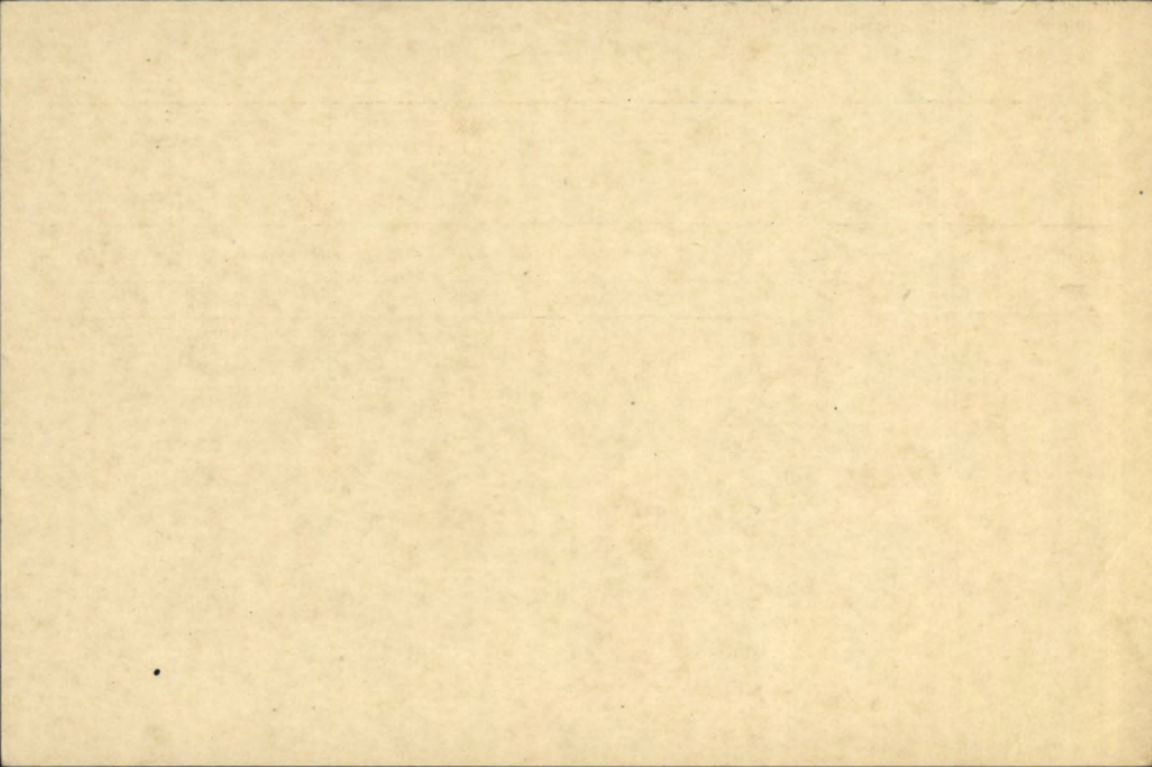
T. O. S.

UNIT

4th Coy. 150th Battalion C. F. 7

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Oct 10	1916 Oct 21	✓		
	Nov	✓		
	Dec	✓		
1917 Jan	1917 Jan	✓		
Feb 1	Feb 15	✓	Transfd to 148 th Bn 15/2/17	SD 46 15-2-17



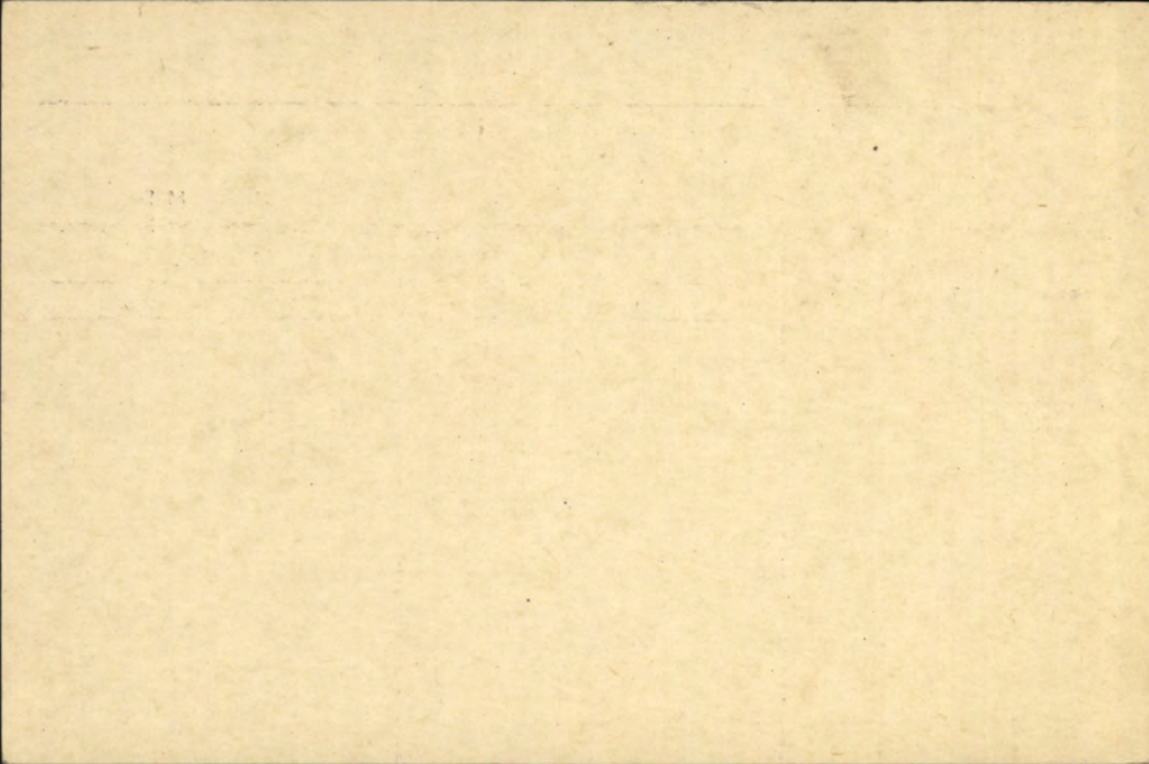
No. 856363 RANK Pte.

NAME Jubinville, Emil

T. O. S. 26-4-16 UNIT 178th. Battalion, (683)
DD 71 of 28-4-16.

M. D. 4.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Apr 26	1916 Apr. 30	n		
	May	✓		
	June	✓		
	July	✓		
	Aug.	✓		
Sept. 1.	Sept. 9.	n.	aws. 3-9-16	DD 188.
Sept 10	Sept 21	n.	Trans. to 150th. Bn.	DD 192.
			absent on Emb 21-9-16	DD 197.
			now shown on 150th Bn	Sept Paylist.



EK
A

Number 856363 Rank Pte.

Surname JUBINVILLE

Christian Name Emile

Units 87th Br band Inf Theatre of War France

Date of Service 27-2-18

Remarks

Latest Address Alex Jubinville
St. Hyacinthe

Roll No. B Page 16391

200m.-2-21.M.

X
X

DEPT. SEP 22 1922

REG. NO.

8993

✓ ✓ ✓ ✓ ✓
JUBINVILLE, Pte. Emile, #856363, 87th Bn. H.Q. 649-J-8372.

M. & D. (Father) Alex. Jubinville, *W*
St. Hyacinthe, P.Q.

B. & S. " Ditto.

(Serial no. 767775.)

Mem. C. (Mother) Mrs. Rose Anna Jubinville,
Rue St. Antoine, No. 8 Providence,
St. Hyacinthe, P.Q.

JAN 20 1921

Scroll Desp. _____ Reqn. No. *11657*

JUL 20 1921

Plague Desp. _____ Reqn. No. *1231*

Not Eligible for 14/15 star

E. " " V. M.

E. " " BAW M.

W
83571

ac

540

M 6.32925

NOV 25 1920.

URNAME

CHRISTIAN NAME OR NAMES

REG. NO.

JUB INBILLE

E.

856363.

RANK

UNIT

Co.

TROOP

BATTY.

Pte.

Q. 87.

HOSPITAL

DATE OF ADMISSION

8 C.F.A.

25-4-18

1. 42. C.C.S.

HOSP. 25.4.18.

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS PUO. aX.

1. R.F.D. Killed in Action 2-9-18

2.

3.

DISPOSITION

Dis. to Unit. 1-5-18^{DATE}

CL. 1-5-18. A202.

REMARKS

4.5.18 Q 205 (2)

" 13-5-18 Q 212 (2)

16.9.18 Q 320 (2)

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

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

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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 178th Bn C.E.F.
 Regimental No. 856363 Rank Pk Name Jubenville Emile
 Enlisted (a) 26-4-16 Terms of Service (a) C.E.F. D. of War Service reckons from (a) 26-4-16
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }
 Extended Re-engaged Qualification (b) Labour

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	3-3-17	
		Disembarked	England	15-3-17	
19-3-17	86.10 th Reg. Bn	Taken on from 178 th Bn	Shochaw	15-3-17	DDP. 2.62 ✓
4-4-17	86.10 th Reg. Bn	Transf. to 150 th Bn	Shoubon	4-4-17	DD Post 2 ✓ 77
7-4-17	86.150 th Bn	Taken on strength	Whitley	4-4-17	DD. P. H. A. 97-07
27-2-18	86.150 th Bn	S.O.S. on transport to 87 th Bn	Whitley	27-2-18	DD. P. H. A. 34-18 ✓ B. Binard capt for adj
28-2-18	4 CIBD	T.O.S. 87 th Bn		28-2-18	NR 544 DO No.14 d/6-3-18
3-3-18	"	S.O.S. to CCRC		3-3-18	NR 1020
9.3.18	Unit	joined unit		4.3.18	B 213
25.4.18	86.7A.	Quo.	Adm	25.4.18	E 7594
26.4.18	86.7A.	"	7042 CCS.	25.4.18	E 7874
27.4.18	96.7A.	"	Adm 70507A.	24.4.18	E 7874
27.4.18	42 C.C.F.	"	Adm	25.4.18	E 8449.

(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.

Casualty Form - Army Service

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				
27.4.18	Unit	Evac Sick		23.4.18	B213
4.5.18	H2 Cbs	P.W.	O Todulij	1.5.18	F152
4.5.18	Unit	joined unit		1.5.18	B213
6-9-18	Unit	KILLED IN ACTION		2-9-18	Cas Report K.I.17-1301 DO.NO.85-1918

J. Anderson

Lieut. for Lt Col. A. A. G.

Canadian Section, G. H. Q. - 3rd, Ech.

178EME BATAILLON, F. E. C.

Fill in only.— **it, Number, Rank and Name.**

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

350M.-5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 178th (F.C.) Battalion, C.E.F.

Regimental No. 856363 Rank Pte Name Jubinville, Emile

C. E. F.

Enlisted (a) 26-4-16 Terms of Service (a) War Service reckons from (a) 26-4-16

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

Extended Re-engaged Qualification (b) Private, Labourer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

(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.

J.P. Rank **Unit** **Name** **Reg'l No.**
 178th Bn. ✓ **JUBINVILLE, Emile.** ✓ 856363. ✓
 If in perm. Corps, }
 What Unit? } **Married or Single** **Single.** ✓
Place and Date of Enlistment **St. Hyacinthe. 26th April. 1916.** ✓ **Place of Birth** **St. Liboin. P.Q.** ✓
Name and Address, Next-of-Kin **Alexandre Jubinville.** ✓
St Hyacinthe. P.Q. ✓ **Relationship** **Father.** ✓

Assigned Pay Monthly \$ **Payable to**

Separation Allowance \$ **Payable to** *No a P*

Relationship

Relationship

N/E. R.B. No. *13098*
 File R.L. *25-V-1474*
KILLED IN ACTION

Discharge, Date and Place **Reason** **Character**

H. W. & V., Ltd.—9546-16.

Report.		Record of promotions, reductions, transfers, casualties during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
ARRIVED ENGLAND S S CANADA 15 MAR 1917					
19-3-17 10th Res Bn Taken on Strength Shoreham 14-3-17 PT 2 O No 62					
4. 4. 17	"	S.O.S. to 150th Bn	D.	4. 4. 17	PT 2 O No 62 V.P.I. Do # 970/24 150 Bn
12-6-17	"	SOS to 2 QRD	"	12-6-17	PTD 142.
15-6-17	2 QRD	LOS	"	12-6-17	98
27-2-18	150 Bn	SOS to 87 Bn	Witley	27-2-18	D034 TOS DO 1476-3-18 J. 87 Bn
11-9-18	87 Bn	Killed in action	Fild	2 9 18	Do 857 fuel la road/16/18

M X 19 11/20 ac

H

15 MAR 1918
 150 Bn
 OKED

506.

FORM OF WILL.

115740

Name in full.

I Charles Emile Jubenville

Regimental Number 856 363 serving in 150th Overseas Battalion C.E.F.

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

absolutely, and my personal estate I bequeath to my father

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

Mr. Alexandre Jubenville

#20 St. Antoine St.

St. Hyacinthe

Fill in Date and Year.

IN WITNESS WHEREOF I have hereunto set my hand this 18th

day of April A.D. 1917.

gubenville E
(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.

ESTATES BRANCH
NOV 1 1918
MILITIA DEPT.

Name of Witness

J. S. [Signature]

Address of Witness

150th Overseas Bn. C.E.F.

Occupation of Witness

Name of Witness

[Signature]

Address of Witness

150th Overseas Battalion C.E.F.

Occupation of Witness

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

CANADIAN.

14 OCT 1918

FORM OF WILL

[Handwritten signature]

ESTATES BRANCH
NOV 3 1918
MILITIA DEPT

To be made out in duplicate.



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.

Duplicate

(1) Name of Overseas Unit which Soldier joins..... **No 4 Coy 150th. Bn. C.E.F.**.....

(2) Regimental Number **856363**.....

(3) Full Name of Soldier..... **Jubinville Charles Emile**.....

(4) Place of Birth **St. Liboire**.....

..... **Bagot Co.**.....

(5) Are you married, or not? **No**.....

(6) If married, state,
(a) Full name of your wife..... **No**.....

(b) Present Postal Address..... **20 St. Antoine St. Hyacinthe Que**.....

(7) Are you a widower? **No**.....

(8) Have you any children?..... **No**.....

If so, give number of boys and girls.....

Also their names and ages.....

.....
.....
.....
.....

(9) Is your Father alive?.....**Yes**.....

If so, state name and address.....**Alexandre Jubinville**.....

(10) Is your Mother alive?.....**Yes**.....

If so, state name and address.....**Resanna Jubinville**.....

.....**20 St. Antoine St. St. Hyacinthe**.....

(11) If your Mother is a widow.....**No**.....

Are you her sole support, or not?.....**No**.....

(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.

.....**No**.....

(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.

.....**No**.....

(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.

.....**No**.....

(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.

R. G. Inman
Officer Commanding.

Date **Feb. 4th.** 1917.....

150TH

ORIGINAL

ORIGINAL

MEDICAL HISTORY SHEET. 856363

Surname Jubenville Christian Name Emile Original

Examined { on 1st day of Nov. 1916 Approved by W. J. Recorder
at Montreal

Birthplace { City or Town St. Hyacinthe Rank _____ M.O. _____
County Que.

Apparent age 22

Trade or occupation Laborer M.O. _____

Height 5 Feet 6 Inches. M.O. _____

Weight 132 Lbs. M.O. _____

Chest measurement { Minimum 31 inches. M.O. _____

{ Maximum expansion 35 inches. M.O. _____

Physical development Good M.O. _____

Small-Pox Marks None M.O. _____

Vaccination Marks { Arm Right Left
Number None

When Vaccinated last 15/11/17 W. J. Recorder Capt. M.O.

(a) Marks indicating congenital peculiarities or M.O. _____

previous disease None M.O. _____

(b) Slight defects but not sufficient to cause rejection

None M.O. _____

None M.O. _____

None M.O. _____

Enlisted on 1st day of Nov. 1916 at Montreal

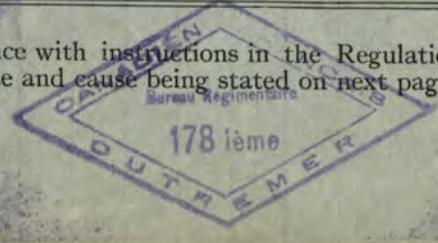
Enlisted on 1st day of Nov. 1916 at Montreal

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>150th Batt.</u>	<u>856 363</u>		<u>4/11/16</u>
Transferred to	<u>17th Hussar</u>			
	<u>" Batt'n</u>	<u>806363</u>		<u>16-2-17</u>
	<u>10th Hussar</u>			<u>15-3-17</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Montreal</u>	<u>11/1/17</u>	<u>Tu</u>	<u>Well</u>

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.



* Strike out whichever inapplicable.

ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.

NAME: **JUBINVILLE Emile**
NUMBER: **856363**

EFFECTIVE DATE: - AMOUNT: -

PARTICULARS OF RANK OR APPOINTMENT
AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT
Private

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.

UNIT AND TRANSFERS
ORIGINAL UNIT: **178th Bn**
DATE ACCOUNT FIRST OPENED: **1.3.17.**

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

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO
14.	6-3-18	1-4-18	26-4-18
629.320	14/18	1/10/18	22/10/18
			87 th Bn
			77 E D

DATE OF PAYMENT	NUMBER OF A.R.	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		

PAY BOOK CH. C.D.
Date **31/10/18**
By **C. Spensfeld**

PARTICULARS OF RENDERING NON-EFFECTIVE: -

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918											
March	Balford P.R.	33							224 37	195 00	
				AR 6 87 Bn 3/4/18	3 57				257 37		
				Q 4005-- 794- 17/2/18	85				253 75		
		33			3 62					210	
May		34 10		AR 118 87 Bn 3.5.18	8 03				24 57		
				167 18 5 18	4 46				275 36	225	
		34 10			12 49						
June		33							308 36		
				AR 216 87 Bn 1.6.18	4 46				303 90		
				263 17.6.18	4 46				299 44		
		33			8 92					240	
JUL		34 10							333 54		
				AR 310 87 Bn 1-7-18	3 57				329 97		
				329 15-7	4 46				325 51		
		34 10			8 03					240	
AUG		34 10							356 04		
				AR 409 6/8	3 57				352 47		
				451 Imz. News 18/8	3 57					790	
		34 10			7 14						
SEP		33							385 47		
		33								785	
Feb	Int on pay	15 43							400 90	17.1.19	400 90
July				AR 967 100 90	400 90						

5/16/19
16/9/18
15/11/18
15/11/18

