2nd DEPOT BN. 2nd QUEBEC REG'T.

4 M. D. 2nd Depot Battalion 2nd Quebec Regiment

Regtl. No. 3156509

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1) ORIGINAL

1. Surname: Lafortune
2. Christian name: Paul
3. Present address: 650 Green, St Lambert, Que.
4. Military Service Act letter and number: 80387 DC
5. Date of birth: May 22nd, 1892
6. Place of birth (town, township or county and country): Ste Hyacinthe, Que.
7. Married, widower or single: Single
8. Religion: Roman Catholic
9. Trade or calling: Plasterer
10. Name of next-of-kin: Arthur Achin
11. Relationship of next-of-kin: Friend
12. Address of next-of-kin: 204 St Denis, Montreal, Que.
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 (b) Date: Nov. 30, 17 (c) Category: A2

DECLARATION OF RECRUIT

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

Paul Lafortune (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age: 25 yrs. 9 mths.

Height: 5 ft. 2½ ins.

Chest measurement: fully expanded 37 ins.; range of expansion 2 ins.

Complexion: Fair

Eyes: Brown

Hair: Brown

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

R.D. - 20

L.D. - 20

R. EAR - OK

L. EAR - OK

O. C. 2nd Depot Btln.

2nd Quebec Regt.

Place: Montreal Date: 1.3.18

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

LAFORTUNE PAUL 3156509 2 Q R 02688

MED UNFIT

DIED 1-5-19

H

478

This space to be for numbers.

JJO 20/3/19

Proceedings on Discharge.

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

H

No. 3156509

Rank ~~Pte~~ Cpl.

Surname LAFORTUNE

Christian name Paul

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

Corps (Squadron, Battery or Company) 2/2 QR

Date of discharge May 16th 1919

Place of discharge Montreal, Que

1. DESCRIPTION AT THE TIME OF DISCHARGE.

		Descriptive marks
Age	~~26~~ 27 years months.	
Height	5 feet 9 inches.	
Complexion	Fair	
Eyes	Grey	
Hair	L.Brown	
Trade	Plasterer	Nil
Intended place of residence (To be given as fully as practicable.)	261 Notre Dame St St.Lambert, Quebec	

Demobilized 1-5-19 6149-L-20346

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

RO 1420 MED UNFIT TO I.S.C.

Authority for discharge (Treatment refused see 227) Pay

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

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

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

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

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

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations.....

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).....

(Date).....

.....

Commanding.....

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place)....Montreal, Que.....Paul Lafontaine *(Signature of Soldier.)*

(Date)....May 16th 1919.....L. C. Davies *(Signature of Witness.)*

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

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

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

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

10. **Statement of Service.**

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

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

11. **Confirmation of Discharge.**

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

(Place)....Montreal, Que.....

(Signature).....Captain,

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

(Date)....May 16th 1919.....

Reservations referred to at Para. 8.

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

NO RESERVATIONS

Paul Lafortune

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company Conduct Sheet,	"	B. 263a
or Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper	Militia Form	W. 23
or Particulars of Recruit	"	W. 133
Proceedings on Discharge	"	B. 218

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

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

CASE HISTORY SHEET.

ST. GEORGES MILITARY Hospital. Montreal Que. Station.

No. 3156509 Rank Cpl. Name Lafortune P. Age 26

Unit 2/2 Quebec Completed years of service (Where and how long)

Date of admission 4/12/18 Date of discharge 27/1/19

Diagnosis Nephritis & V.D.G. Place of origin Montreal Que.

CONDITION ON ADMISSION AND PROGRESS OF CASE. Admitted with a slight urethral discharge Old double epididymitis Has parenchymaton hephritis Urine shows albumine XX 10/12/18.-- Positive Extra cellular gram. Neg. diploeocci. 11/12/18.-- Developed sore testicle (left) after phisical training in afternoon. Same testicl was swollen two years previously. 16/12/18.-- Testicles still swollen In bed with ice bag. 19/12/18.-- Epidymo-orchitis slightly improved Slight A.M. serous drop. 23/12/18.--Epididymo-orchitis subsiding rapidly dry this A.M. 26/12/18.- Epididymo-orchitis gradually improving dry since 23/12/18. 30/12/18.- Dry since 23/12/18 Epididymitis outsiding. Orchitis altogether subsided. 2/1/19.-- Dry since 23/12/18. Epididymitus subsiding gradually 6/1/19.-- Dry since 23/1/19. Epididymitis improving. 9/1/19.- Dry since 23/12/19 Epidimitis improved 15/1/19.-- Dry since 23/12/18. Epididymitus totaly subsided. 20/1/19.- Dry since 23/12/18. 22/1/19. Re: Nephritic Conditn Man complains from time to time of pain across the back. He has had no acdena since admission here. Urine shows thre (3) grammes of albumen to the litre and microscopic examination shows a few hyalince casts. Specific gravity 1018. 1016 and 1015 on three successiveexamination. Blood pressure $\frac{S}{153}$ $\frac{D}{88}$ Recommend transference to for further treatment for nephritis RE: Urethral condition....- No urethral discharge sinco23/12/18 Epididymitis subsided globusminor still slightly swollen but not tender. Protastic smears negative on three successive protastic massage.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.) Neg:

TREATMENT (Especially any specific or special form.) $K_2Mn_2O_8$ 1-6000 irrigatation t.i.d 2% argn. in stillations. Prostatic massage. urethral sounds

CONDITION ON DISCHARGE, (and disposal made of case.) ~~To unfit fit~~ Transfer to hospital for treatment of nephritis.

Date

E. B. Carter Capt.
Medical Officer i/c case.

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

Diagnosis - Nephritis.

MONTREAL GENERAL HOSPITAL.
Admitted on the 28th of January 1919 with general weakness.
Is a heavy drinker. Had Nephritis two years ago. Was treated by his own physician. Has had nocturnal frequency for the past two years.
In October 1918 whilst at work he fainted and fell on the floor.
Remained in a coma. state for some days. Previous to this attack had vomiting. No pruritus. Has no memory of that period. For two weeks previous he had slight dizziness and specks floating before his eyes.
On Examination - Fairly well developed and nourished. Quite pale.
Nephritic appearance. B.P. 170 - 122. Both heart sounds are accentuated at the apex. There is a short blowing systolic murmur not transmitted.
Albuminuric Retinitis - Rt. Eye. Left Fundi normal. W.B.C.=9,400.
Urine shows an average two grams per leiter of albumen with pus, granular hyaline casts and blood cells.
Treatment - Rest in bed. Soft free diet.
Recommend transfer to Ste. Anne de Bellevue Military Hospital for further treatment.

C R Bourne Capt. A. M. C.
M. O. i/c Troops, M. G. H.

CLINICAL CHART.

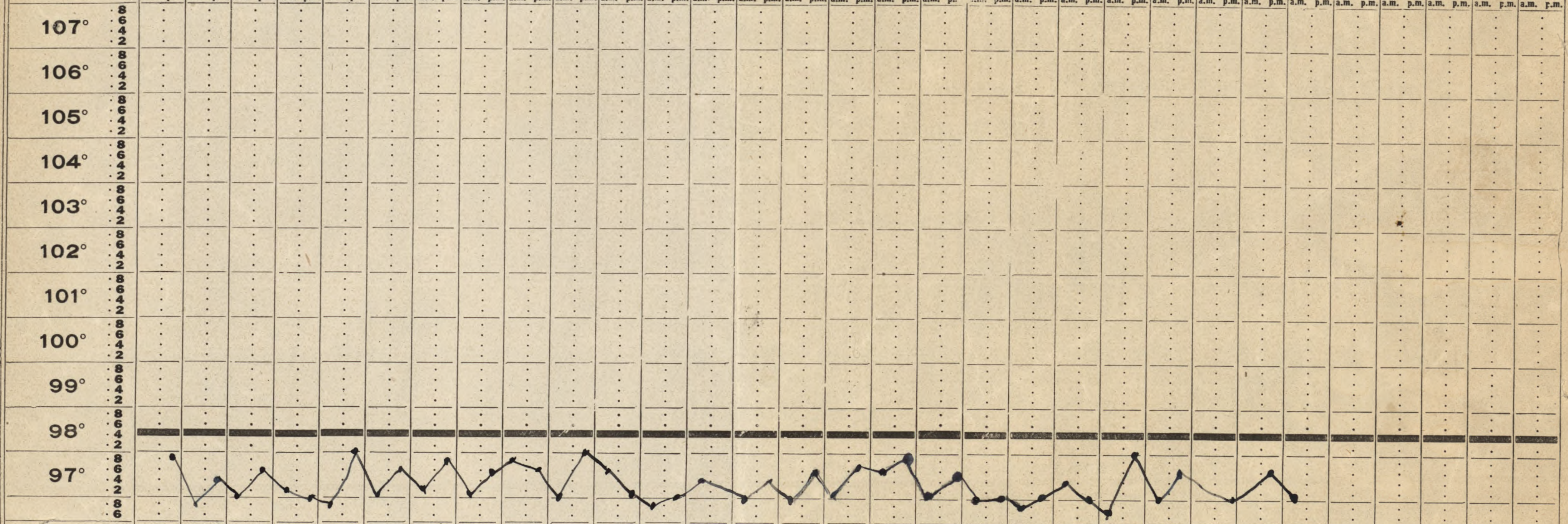
(To be pasted into Case Book opposite Patient's Case.)

Corps 2/2 Que. Hospital Station

No. 3156509. Rank and Name Laplume P. Cpl. Age 26. Service 10 mos.

Disease Hepatitis Date of Admission March 1/19 Date of Discharge Result Case Book

Dates of Observation	Days of Disease	TIME	Pulse per Minute (a.m. p.m.)	Respirations per Minute (a.m. p.m.)	Motions
Mar/1	1	4	72	20	
2	2	10	66 76	20 20	
3	3		80 80	20 20	
4	4		72 76	20 22	
5	5		72 80	20 20	
6	6		72 74	20 20	
7	7		72 78	18 20	
8	8		72 78	20 18	
9	9		78 78	20 20	
10	10		72 78	18 18	
11	11		76 72	18 18	
12	12		76 78	18 18	
13	13		70	20	
14	14		58 72	20 20	
15	15		90 80	20 20	
16	16		72 84	20 20	
17	17		80 76	20 20	
18	18		72 76	20 20	
19	19		68 80	20 20	
20	20		70 84	20 20	
21	21		82 70	18 18	
22	22		78 80	20 20	
23	23		76 70	20 20	
24	24		80	20	
25	25		84	20	
26	26		76	20	
27	27				
28	28				
29	29				
30	30				
	31				



M. F. B. 288.
25M—2-18.
H. Q. 1772-39-513.

Signature .... In charge of case.

VENEREAL DISEASE CASE-SHEET

(Gonorrhoea)

Reg. No. 3156509 Rank Cpl. Name Lafortune P. Unit 2/2 Quebec

Diagnosis V.D.G. & Hephritis Admitted 4/12/18 Discharged 27/1/19

Medical Officer i/c Case E. B. Carter Lt.

HISTORY.

No. of previous attacks One

Where and when acquired 1 ½ Year ago Montreal

Date and character of symptoms Slight A.M. urethral discharge

DATE -Day of disease-	Smear	Urine	Urinalysis	Other Lab. Tests	Complications	Medicine	Irrigation	Operations
6/12/18	Pos.				Epididymitis		K2 M n O_4 I/6000	Prostat massage
10/12/18	Negat	? Pus & diplococci.	Few extra cellular					
8/1/19	Neg.	Urine	Urine			Magnes. Sulphate		Urethral sounds.
15/1/19	Neg.	Shows	Albumed					
18/1/19	Neg.		granular 3 gr. Casts Sp Grav. 1.1018 2.1016 3.1015			z I t.i.d.	Silver nitrate 2 %	

M. F. W. 101.
5m-5-18. M.
1772-39-1053.

CASE HISTORY SHEET.

Ste. Anne Military Hospital. Ste. Anne de Bellevue Station.

No. 3156509 Rank Cpl Name Lafortune P. Age 26

Unit 22 Due Completed years of service (Where and how long) C. 4/2 B. 0 F. 0/12

Date of admission 1-3-19. Date of discharge 13/5/19

Diagnosis Nephritis Place of origin Canada

CONDITION ON ADMISSION AND PROGRESS OF CASE

~~Mar 1 BP 180-114~~ Enlisted Feb 1918

Oct 26/18 admitted as a stretcher case in SMCH in deep coma. Urine contained ¾ grms albumen per litre & granular casts. Eyes showed Retinal Haemorrhages. Usual treatment given & recovery was fair. BP was 150-80

Dec nov 1918 developed Orchitis due to Gonorrhoea of 7 years duration. Transferred to St Jos Hospital & dec 1918 was discharged c̄ no urethral discharge & orchitis cleared up. + transferred to M.G.H. when BP was 170-122 + had a recent Retinitis. Sept urines normal. Admitted to SAB Mar 3 1917

Mar 1. Pallor marked + oedema of face & extremities. Urine 3 grams per litre c̄ granular casts. Fundi normal. BP 190-122.

Has made fair improvement + BP ~~[illegible]~~. Heart sounds.

May 5/17: Oedema disappeared & cept slight traces in deep pressure of Pubic region.

Fundi normal.

Urine ¾ grams per litre c̄ granular & hyaline casts S.G. 1012. average.

FAMILY HISTORY BP 150-114. WBC 9500 Hb 75-80% RBC 4000,000

(Tuberculosis, mental or nervous diseases.) Heart RCD 10.5 cms to left. A2+ P2+. Otherwise negative.

Has been on salt free diet & fluid restricted.

TREATMENT ~~Remained in Cont Beds~~

(Especially any specific or special form.)

~~[illegible]~~

Gives history of swelling etc suggestive of pleurisy early in Sept 1917, but appeared to recover on enlistment.

CONDITION ON DISCHARGE Free discharge & Cont Beds

(and disposal made of case.)

Date

Medical Officer i/c case.

M. F. B. 313a.
200M.—5-18.
2772-20-429

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Ste Annes, P.Q. DATE 6/5/19

1. 1 (a) Unit 7th Inf (b) Regimental No. 3156509 (c) Rank Cpl.

(d) Surname Lafontaine (e) Christian name Paul

(f) Home address St Lambert #261 Notre Dame St

(g) Next of Kin Mrs Angeline Lecuier (h) Relationship Aunt

(i) Address of Next of Kin 411 St. Christopher St Montreal

2. Age last birthday 27 yrs Date of birth May 27th 1892

3. Enlistment, or Appointment (if an Officer) (a) Place Montreal (b) Date Feb 1918

4. Personal description:

(a) Height 5 ft 9 in (b) Weight 157 lbs (stripped) (c) Complexion fair

(d) Colour of hair Brown (e) Colour of eyes grey (f) Identification marks, Scars, etc.

5. Former trade or occupation Plasterer.

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	one	60

	Periods From	Periods To
Canada	Feb 1918	to date
England	not applicable	
France or other theatres of War		

7. Original disease, or injury

Nephritis

(a) Date of origin Sept 1917 (b) Place of origin Canada

(c) Cause Unknown

M. F. B. 227.

40UM.—11-18.
1772-30-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Chronic Nephritis

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Urine: Acidy, S.G. 1012. Albumen + gross pus cells
Hyaline & granular casts.
Blood Count: RBC 4080000 WBC 9,800 Hb 80%
BP 180-114
Fundi normal.
Heart: RCD 10.5 cm to left. $A^2 + P^2$ + other sounds negative. Regular in rate & rhythm.
Skin: slight oedema of tibial regions & puffy eyelids in morning

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System: No
Cardio-Vascular System: No (If pulse rate is abnormal, B. P. will be taken.)
Genito-Urinary System: No (Albumen and Sugar will be excluded.)

Special Senses: No
Respiratory System: No
Integumentary System: No

Disturbances of Mentality: No
Digestive System: No
Muscular System: No

Osseous and Joint Systems: No
Any other general condition: No

10. (a) History (of the condition referred to in Section 9 (a).)

History suggestive of nephritis in Sept 1917.
Enlisted Feb 1918.
Admitted to hospital in deep Coma in Oct 1918.
& recovered treatment now since in hospital
Had Retinal haemorrhages, but Fundi clear now.
No subjective symptoms now. feels fairly well.
No suggestive history of past ailments

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

Gonorrhoea in 1917.
Orchitis in Nov 1918

(*c*) (Here give a description of wounds, scars and deformities.

nil

11.—(*a*) Did the disabling condition have its origin before enlistment? yes

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

yes

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? no

The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? permanent.

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

Dietetic & Heat treatment for testicle (Baking, etc).

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

no yes
Rest & dietetic 1/12

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

17. Recommendations

S.C.R.
Discharge to Canada

J. M. Cassell Capt
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned Paul Fortune have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of nothing

Pte. Paul Fortune Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Concur.

19. Is the invalid fit for

(a) ~~General service,~~ (Category A) (~~Yes~~ or No.)
(b) ~~Service abroad, not general service,~~ (" B) (~~Yes~~ or No.)
(c) ~~Home service (Canada only),~~ (" C) (~~Yes~~ or No.)
(d) ~~Temporarily unfit,~~ (" D) (~~Yes~~ or No.)
(e) Unfit for service in Categories A, B and C (" E) (Yes ~~or No~~.)

20. It is certified that the invalid
(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

(b) ~~Does not require treatment.~~
(c) ~~Should pass under his own control.~~
(d) Should not pass under his own control.
(Strike out condition not applicable.)

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

Yes. to S.C.R. for further treatment

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

PLACE St. Anne de Bel — J. A. Browne Capt. — President.
DATE 8/5/19 — W. J. Martin Capt. — Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned Paul Lafortune understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness Paul Lafortune — Signed J. Beaudet Capt.

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

Unreasonal in our opinion

PLACE Montreal D.D.4 — J. Beaudet Capt. — President
DATE 16-5-19 — Jas Andrews Capt. — Members

APPROVED BY — APPROVED BY

Colonel
FOR Assistant Director of Medical Services. — Director-General of Medical Services.
M.D. No. 1
DATE MAY 10 1919 — DATE

AUDITOR | PAYMASTER

M. OR S.

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

REGT. No. 3156509 RANK Cpl. NAME (IN FULL) LIAFORTUNE, PAUL.

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE

TO WHOM PAID: Nil | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
T. O. S.	5-4-19	D.O. 98. P.
Trf from 20th to 20R		
Hosp Sect	5-4-19	D.O. 98. P.1
Cas Co	13-5-19	D.O. 133-3

ORIGINAL UNIT C.E.F.: 2.O.R. | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION: 1-3-18 | TRANSFERRED TO: Served in Canada only | DATE | AUTHORITY

ASSIGNED PAY $: Nil | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS: Hill St Christopher St Montreal

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE: T. I. S. C. (Refuses treatment)

DISCHARGED: PLACE: Montreal | DATE: 16-5-19 | AUTHORITY: D.D. 4-19 L-838 | IF ENTITLED TO POST DISCHARGE PAY

MONTH 1919	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. No. 1 NO.	DATE	COL. No. 2 NO.	DATE	COL. No. 3 NO.	DATE	CASH PAYMENTS COL. No. 1 $	C.	COL. No. 2 $	C.	COL. No. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					C.S.P.C. 5/4/19
6/4/19							200	70	200	70																									200	70	
April	25	1/10	27	50					27	50	1992 -28-		2351 30				15	00	15	00											30	00			~~213~~	~~50~~ 198	
May	16	1/10	17	60	35	00	xx	xx	52	60							xx	xx	xx	xx							xx	xx	~~31 70~~		xx	xx					35.00 C.C.
									2.80.80												250	80									250	80					~~70.00 W.S.G. not entitled to disc~~ $2.80.80 ~~X~~ ~~xxx~~ ~~xx/xx~~ cancelled
																															280	80					
			Other Credits		W. S. C.		S. A.	Total																			Other Charges		W. S. G.		S. A.	Total	Soldier		Balance Dependant		
					70	00			70	00																	70					70	No Bal				not entitled to W.S.G.
																																					Refused treatment with S.A.C.
16-2-23	31	70	W S G						70 -												70 -										70 -		~~0~~		~~0~~		CK No 9600 10/2/23 TO STATES

War Service Gratuity

MILITARY DIST. No. 4 DEMOBILIZATION PAY DIVISION

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

*Name Lafortune, Paul Rank Pvt.pl. Regtl. No. 3156509

Fyle Depot L.838

Original unit 2/2nd.QR Present unit DD#4 M. or S. Age Religion Ref. H.Q.

Port, ship, and date of arrival

Next of kin

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Date and place of enlistment

Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
8-4-19.	TOS.DD#4 on transfer from 2/nd.QR posted to Hosp. Sec	
	Effective 5-4-19.Authy. RO#1702 Cat "D"	98-p-1.

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

(over)

Date.	Remarks.	Pt. 2 Order No.
13-5-19.	SOS.Hosp. Sec om Trans to Cas Co'y 13-5-19.	133-p-3
20-5-19.	SOS.Dis.H.M.Service.19-5-19.Med.Unfit.Auth.RO.1420.	140.

M.F.W. 192
150M—5-18.
1772-39-1243.

SURNAME. Lafortune.

CHRISTIAN NAMES Paul.

REGL. No. 3156509. RANK Pte

UNIT 2nd Que. Regt. 2nd Dpo. Bn.

FORMER CORPS Nil.

CARD No. M.D. 4. 4

8080 ks 16-5-19
on Ind. Ft. 20
1400 20-5-19
5420

T. O. S. Feb 28 1918.

D.O. Part II No 59.

19

NEXT OF KIN.

NAMES IN FULL Achin, Arthur

RELATIONSHIP TO SOLDIER Friend

ADDRESS 204 St. Denis St, Montreal P. Q.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, St. Hyacinthe, P. Q. DATE May 22nd 1892

PLACE OF ATTESTATION Montreal, P. Q. DATE Mar. 1st 1918

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

No. 3156609 Rank Pte Name Lafortune Paul

T. O. S. 1-3-18 Unit 2nd Depot Battalion 2nd Quebec Regt

AU 790 of 28-2-18.

M. D. 4,

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918			
Mar 1	Mar 20	✓		
Mar 21	Mar 23	✓		
Mar 24	Mar 31	✓		
	Apr	✓		
	May	✓		

Reg. No. 3156509 Name Lafortune, P.

Rank Cpl. Corps Age 26 Service 6 10/12

Ledger No. 585 Serial No. R 31607 24

HOSPITALS	DATE	DIAGNOSIS
Montreal M.H.	26.10.18	Gonorrhoea Nephritis
St. Anne de Bellevue	1.3.19	
Dis.	13.5.19	

P.T.O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2555.
75M.—9-19.
1772-39-1332.

M.S.A. 15 F.

ORIGINAL 8187

LOI DU SERVICE MILITAIRE

FEUILLE MÉDICALE

IMPORTANT.—Si le nom de l'homme n'apparait pas sur la liste des hommes répondant à l'appel, ou s'il n'a pas fait une demande d'exemption ou une déclaration d'être prêt à répondre au service militaire ou, dans le cas où il aurait fait l'une ou l'autre, s'il en ignore le numéro, on l'informera qu'il doit attacher la copie de cette feuille médicale (qu'on lui remettra) à la déclaration ou à la demande d'exemption qu'il pourra faire en s'adressant à n'importe quel maître de poste en Canada, ou envoyer lui-même après avoir marqué dessus le numéro du reçu qu'il a reçu du maître de poste, au Registraire ou au député Registraire de la Loi du Service Militaire. Dans tous les cas le double de cette feuille médicale sera envoyé par le Bureau Médical au Commandant du District à moins que ce dernier n'ait donné ordre de l'envoyer directement au Registraire ou Député Registraire.

1. Nom de famille: Lafontaine Nom de baptême: Paul
2. Numéro de la réponse à l'appel ou de la demande d'exemption d'après le reçu du maître de poste ou la liste: 80387
3. Numéro consécutif de la liste des déclarations (s'il y apparait): 100
4. Adresse (y compris la rue et le numéro s'il en existe): 650 Green St City

MOBILIZATION CENTRE No. 1 NOV 29 1917 MONTREAL, P.Q.

Voici les renseignements exacts qui résultent de l'examen du sujet ci-dessus nommé, fait le ..... jour de ..... 1917, par le bureau médical soussigné siégeant à .....

5. Âge affirmé: 26 ans ..... mois.
6. Âge apparent: ..... ans ..... mois.
7. Hauteur: 5 Pieds 2½ pouces.
8. Poids: 125 livres.
9. Mesure de poitrine: Minimum 35 pouces; Maximum 39 pouces
10. Couleur: Fair — Yeux: Brown; Cheveux: Brown
11. Développement physique: Good (Bon / Moyen / Pauvre)
12. Marques de vérole: Nil
13. Nombre de vaccinations: Bras droit ..... ; Bras gauche 1
14. Dernière vaccination: Child
15. Indices distinctives et indices de particularités congénitales ou de maladie antérieure .....
16. Défauts légers insuffisants pour l'exemption: varicocele B.

Le sujet nie avoir souffert de (Rhumatisme / Tuberculose / Syphilis) — Nous ne trouvons pas de preuve qu'il ait souffert de (Rhumatisme / Tuberculose / Syphilis)

(Rayez la maladie admise ou soupçonnée.)

R. D. = 20
L. D. = 20
R. EAR ok
L. EAR ok

Nous avons examiné le sujet ci-dessus nommé, conformément aux règlements pour les examens médicaux des F.E.C. et il est classé dans la catégorie A2

..... Président.

..... Membre ..... Membre

Signature de l'homme .....

Date	Résultat	Vaccine	Date	Résultat	Innoculations, Anti-Typhoïdes, Etc.
2/3/18		O.M.	2/3/18		O.M.
		O.M.	2/3/18		O.M.
		O.M.	12/3/18		O.M.

FROM MEDICAL BOARD NOV 30 1917

Enrôlé le 1st jour de March 1918 à Montreal, Que

	Corps	No. dans le régiment	Habitudes	Date
Enrôlé	2nd Dp. Bn. 2nd Que. Rgt.	356509		1-3-18
Transféré à				

EXAMINÉ OU REFUSÉ PAR UN BUREAU MÉDICAL.

Quartier	Date	M. D. No.	Maladie	Resultat
Montreal	6-5-19		B. Category E	

N. B. Il sera disposé de cette fe[illegible] conformément aux règlements du service médical de l'arm[illegible] le sujet devient inapte au service, la date et la cause seront indiquées au ve[illegible]

Nom de baptême: Paul

Nom de famille: Lafortune

QUARTIER	Date de l'arrivée au quartier	Dates de l'Admission à l'hôpital			Dates de Sortie de l'hôpital			MALADIE	Nombre de jours à l'Hôpital	Remarques sur la nature de la maladie; comment contractée; légère ou violente; si complètement guérie; s'il y a eu traitement particulier; dans les cas de maladies vénériennes, mentionnez la maladie originaire et si le mercure a été administré. Si c'est un accident, dites s'il est arrivé en devoir et si une enquête a été faite. Date et détails de fourniture de fausses dents et autres articles de chirurgie. Détails d'innoculations prophylatiques.	Signature de l'officier médical
		Jour	Mois	An	Jour	Mois	An				
DMCSt. Montreal		26	10	18	4	12	18	Nephritis Gonorrhoea		Patient entered Hospital suffering from uremic convulsions. Urine now contains albumen 2 grms to Liter. Granular & Hyaline Casts. He is suffering from Gonorrhoea: Transfer to Ste Georges Military Hospital for treatment on completion Invalid return to Convalescent Hospital for 227. Cat E. E. E. Robbins Capt AMC	
St Georges M.H. Montreal		4	12	18	27	1	19	V.D. & Nephritis	54	To hospital for nephritis. Gonorrhea cured. E. B. Carleton Capt. C.A.M.C. M.O. i/c St. Georges Military Hospital.	
MONTREAL GENERAL HOSPITAL		JAN	28	1919	MAR 1		1919	Nephritis	32	On examination - Fairly well developed, and nourished. Quite pale. Nephritis appearance. Albuminuric Retinitis - Rt. Eye. Left Fundi normal. W.B.C.=9,400. Urine shows an average two grams per leiter of albumen with pus, granular hyaline casts and blood cells. Treatment - Rest in bed. Soft free diet. Recommend transfer to Ste. Anne de Bellevue Military Hospital for further treatment. Capt. F. M. O. M. O. i/c Troops, M. G. H.	
Stadacona		1	3	19	13	5	19	nephritis		Urine: S.G. 1017, 2 grms albumin per litre.	

BP 180-114. RCs 10.5 cm to left
Art Ret. Fundi normal
Lungs & Chest

CASE HISTORY SHEET.

Military Hospital. Ste Anne de Bellevue Station.

No 3156509 Rank Cpl. Name Lafortune P Age 26

Unit 2/2 Que. Completed years of service (Where and how long) C 14.12 E 0.12 F 0.12

Date of admission 1.3.19 Date of discharge 13/5/19

Diagnosis Nephritis Place of origin Canada.

CONDITION ON ADMISSION AND PROGRESS OF CASE Enlisted Feb.1918. Oct. 26 1918 admitted as stretcher case D.M.C.H. in deep coma. Urine contained 2 gms. Albumin per litre and granular casts. Eyes showed retinal Haemorrhages Usual treatment given and recovery was fair. Blood Pressure was 150-80. In Nov. 1918 developed Orchitis due to Gonorrhea of 2 years duration. Transferred to St. Geo. Hospital. In Dec.1918 was discharged with no Urethral discharge and orchitis cleared up, and was transferred to M.G.H. when Blood Pressure was 170-122 and had a right retinitis. Left Fundus normal. Admitted Ste Anne de Bellevue Mar.3.1919.

Physical Examination:- Pallor marked and oedema of face and extremities. Urine 3 grms per litre with granular casts. Fundi normal.

Blood Pressure 190-122.

Has made gradual improvement and Blood Pressure kept the same.

May 1.1919 Blood Pressure 180-114.

May 5.1919. Oedema disappeared except slightly noticed on deep pressure of Retinal regions.

Fundi normal.

Urine 2 grms per litre with granular and hyaline casts.

S.G. 1012., average.

Blood Pressure 180 - 114. W.B.C. 9800. H.C. 75-80%

R.B.C. 4,080,000. Heart, Relative Cardiac Dulness 10.5 cm to left. A^2 + P^2 + Otherwise, negative.

FAMILY HISTORY (Tuberculosis, mental or nervous diseases.) Has been on salt free diet and feels fairly well. Gives history of swelling etc. suggestive of previous nephritis in Sept. 1917, but apparently well on enlistment.

TREATMENT (Especially any specific or special form.)

CONDITION ON DISCHARGE (and disposal made of case.)

Recommend Discharge to Civil Life.

Date 9.5.1919.

Medical Officer i/c case.

M. F. B. 313a.
200M.-5-18.
1772-39-439.

a 31607

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

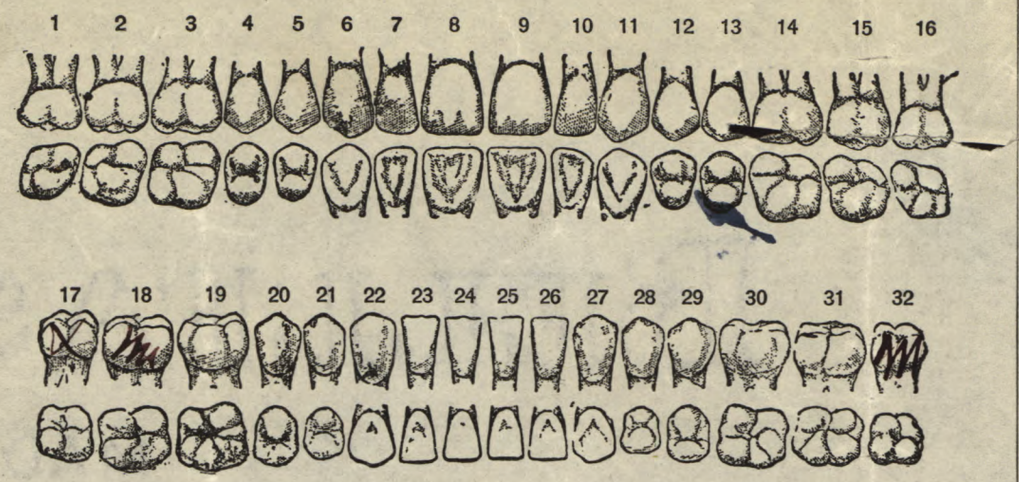
DISTRICT ...

NAME OF SOLDIER ...

REGIMENT ...

RANK ...

No. ...



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show :

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	1918																					No 17 Ext
Gracie No 28																				J Edsmont Capt	H	
	" "										17											Completed
																						Nov 7 8.4.18
																						J Edsmont Capt

M.F.B. 463
200M-1-17
1772-39 957

Fill[illegible] only.—Unit, Number, Rank and N[illegible]e.

M. F. W. 54. (A. F. B. 103:
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 2nd DEPOT BN. 2nd QUEBEC REG'T.

Regimental No. D-3156509 Rank Pte. C. E. F. Name LAFORTUNE Paul

Enlisted (a) 13.1.18. Terms of Service (a) CEF. Service reckons from (a) 13.1.18.

Date of promotion to present rank } Date of appointment to lance rank } 15-7-18 Numerical position on roll of N. C. Os. }

Extended Re-engaged Qualification (b) Plasterer

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				
15-7-18	Maj. E.A. Papineau	To be A/Lce Corporal	Valcartier Camp	15-7-18	
	D.O. 95	S. O. S. [illegible] D. No.4 as from 5-4-1919. Auth. R.O. 1702 Para. 1 Sub. Sec. "B." (DEMOBILIZATION)			
20-5-19.	SOS. Disch.Med.Unfit RO.1420		Montreal.	16-5-19.	DD4/DO/Pt.11/140

ADJUTANT

2nd. Depot Bn. 2nd. Quebec Regim

Captain,
Officer i/c Discharge Section, District Depot No. 4.

(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				

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Lafortune P.
Surname Christian Name

Regimental Number 3156509 Rank Cpl.

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full) Deceased.

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

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

M. F. W. 127
300M-1-19
1772-39-1140

File No. 10578. P32.

WAR SERVICE GRATUITY.

Register No. Spec Reg. 64 1919

1

Reg. No. 3156509.

Name Lafortune P.

Address Deceased.

Dependent Nil

Address

Pay Soldier $

Pay Dependent $

Days Rate Due

Less P.D.P. credited

Less further Dr. Bal. or overpayment.

Net

Clerk

See District ledger sheet for adjustment

R W134 15-10-20

Date	Ck. Order	Ck. No.	Amount	Remarks.	Date	Ck. Order	Ck. No.	Amount.
1					1			
2				Not eligible under P.C. 3165	2			
3				& 3419.	3			
4					4			
5					5			
6					6			

495-D.P.-100M-6-19 (10248).

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

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3156509 (Rank) ~~Private~~ Corporal

Name (in full) LAFONTUNE, Paul enlisted in

the 2nd Depot Battalion 2nd Quebec Regiment

CANADIAN EXPEDITIONARY FORCE at Montreal, Quebec on the 1st

day of March 1918.

HE served in CANADA

and is now discharged from the service by reason of MEDICALLY UNFIT

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

Age	27 years	Marks or Scars	
Height	5 feet 9 inches		
Complexion	Fair		
Eyes	Grey		
Hair	Light Brown		Nil

Paul Lafontune
Signature of Soldier

Captain,
Issuing Officer
Officer i/c Discharge Section, District Depot No. 4.

Rank

Appointment

Date of Discharge May 16th, 1919.

Signed at Montreal, Quebec this 16th day of May 1919

in Military District No. 4

File Reference No. DD4 19-L-838.

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

M. F. W. 39a.
250m —6-18.
H. Q. 1772-39-882.

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

On demobilization the particulars called for on this certificate back of the will not be completed.