

original 122 *50887*
ATTESTATION PAPER

No. *418211*
 Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.
 (ANSWERS) *417221*

1. What is your name? *Adelard Lebrun*
 2. In what Town, Township, or Parish, and in what Country were you born? *St-Raymond*
 3. What is the name of your next-of-kin? *Paul Lebrun*
 4. What is the address of your next-of-kin? *145 St-Julien St Trois Rivieres*
 5. What is the date of your birth? *16 mars 1875*
 6. What is your trade or calling? *journalier*
 7. Are you married? *non*
 8. Are you willing to be vaccinated or re-vaccinated? *oui*
 9. Do you now belong to the Active Militia? *no*
 10. Have you ever served in any Military Force?
If so, state particulars of former Service. *no*
 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*
- Adelard Lebrun* (Signature of Man.)
Sgt. Martel (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Adelard Lebrun*, do solemnly declare that the above answers made by me to the above questions 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.

Adelard Lebrun (Signature of Recruit.)
Sgt. Martel (Signature of Witness.)

Date *Oct. 6* 191*6*

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Adelard Lebrun*, 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.

Adelard Lebrun (Signature of Recruit.)
Sgt. Martel (Signature of Witness.)

Date *Oct 6* 191*6*

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 *Valcartier Camp* this *9th* day of *Oct* 191*6*

E. Montgomerie (Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

E. Montgomerie (Approving Officer.)
St. Col.

Green Com.
57th Batt. C. I. P.

DESCRIPTION OF Adelard Lebrun ON ENLISTMENT.

Apparent Age 20 years 0 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 ins.

Chest measurement { Girth when fully expanded 37 ins.
 Range of expansion 34 ins.

None

Complexion Fair

Eyes Blue

Hair Brown

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

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 fit for the Canadian Over-Seas Expeditionary Force.

Date October 9th 1915

Place Valcartier Camp P.Q.

[Signature]
 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

Adelard Lebrun 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.

Date 9th Oct 1915

[Signature] (Signature of Officer.)
[Signature]
cc. 57 h m.

REGIMENTAL DOCUMENTS

NAME *Lebrun Adilard*

REGT. NO. *417221* UNIT *1st Bn* H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

16738

M

H

- 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)
- LAST PAY CERTIFICATE (M.F.W. 44)
- PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

1 card
1 will
1 pass card
2 Reg. with copy
1 A.F.B. 1237
1 card
1 med card

15

15



ar. B. R. B
Number. 417221 Rank. Pte.

Surname. LEBRUN K

Christian Name. Adelard

Unit. 22nd Bn. Can. Inf. Theatre of War. France.

Date of Service. 28-6-16 D.

Remarks.....

Latest Address..... Paul LeBrun Esq (W)

..... Barrante.....

Roll No. B. Page 4621. Pontiac Co.
P.Q.

52 52070000

AUG 18 1921

Le Brun Pte Adelaide 417221 649-1-8616
or
Le Brun Not elig. for 1914-1915 Star

Medals Walter Paul Le Brun Esq.
Sic.

Barrante 7833
Pontiac Co.
P. Q.

Pys. Walter as above
Serial No 768140

C. of Mother Mrs. Malvina Le Brun
same address

Not married
Desp MAY 31 1920 69590

74.9

JAN 18 1921

Scroll Desp. _____

Reqn. No. _____

710569
PL 174

Plague Desp. _____

Reqn. No. _____

DEC 22 1921

1339
L

A
NAME *Lebrun, Adelaard.*

649-L-8616 ✓

RANK & No. *Pte.*

417221

CORPS *41st.*

Battalion

ENLISTMENT, PLACE *Valcartier Camp.*

DATE *Oct. 9th 1915 S.*

FORMER CORPS *Nil.*

COUNTRY OF BIRTH *Canada St. Raymond. Que.*

NEXT OF KIN *Lebrun, Paul.*

ADDRESS OF NEXT OF KIN *14 5 Ste. Julie, Three Rivers, Que*

DISCHARGE, PLACE

DATE

D

REMARKS:

No 412211. RANK Pte.

NAME Lebrun A.

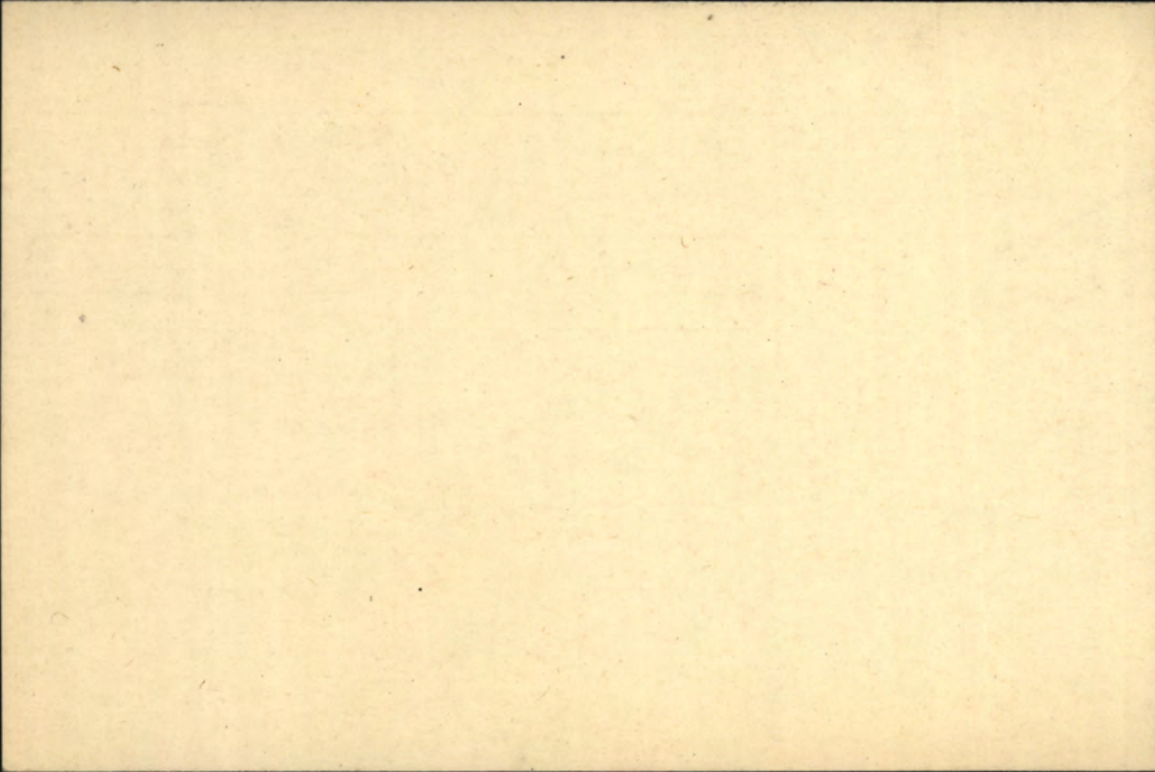
417221

T. O. S.

UNIT 41st. Battalion

M. D. 3.

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1915. Nov. 1.	1915. Nov. 30.	✓		UNIT SAILED OCT 18 1915



NAME

Lebrun Adelard

REG'TL No.

417221

H. Q. FILE No. 649.

RANK AND CORPS

Pte. 22nd Bn. (Form 41st Bn)

FOLLOWS
NO.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

C

CABLE NO.	DATE	NATURE OF CASUALTY
m 5942 39-5	25-8-17	Died of wounds. 6 basualty Clearing Station Aug. 18th. 1917. G. S. W. Right Arm. ✓
A. F. B. Rover	2090a 23-8-17	Died of wds received in action (Finance.) No. 6. Cav. Co. 22nd. 18-8-17. (Received 19-10-17.)

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A592. #6 Cas. C. Str.

18-8-17

Died of wds. B.W. R. Arm

Surname	Christian Name or Names	Reg. No.
Le brun.	A.	417221
Rank	Unit	Co.
Pte.	22nd. Bn.	
Hospital	Date of Admission	
6. C.C. Stn.	18-8-17.	

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis B.W. Rt. Arm.

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DIED OF WDS. 18-8-17. *ll*

DISPOSITION

Date

C.L. 24-8-17. A592.

REMARKS

A.M.D. 2 DEPT.

Ch: of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

CERTIFIED COPY
Army Form B. 103.
 Canadian Record Office
 Westminster House,
 7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps ^{23rd} ~~1st Bn C.O.C.F.~~

Regimental No. 4172 Rank Private Name Lebrun Adelaide

Enlisted (a) 6-10-15 Terms of Service (a) D of W Service reckons from (a) 6-10-15

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

Extended _____ Re-engaged _____ Qualification (b) 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				
		<i>Embarked</i>	<i>Canada</i>	<i>18/10/15</i>	
		<i>Disembarked</i>	<i>England</i>	<i>29/10/15</i>	
		<i>Drafted Overseas to 22nd Bn</i>	<i>25/6/16</i>		
		<i>Unit Pt 2 B D 152</i>			
29-6-16	C B D	Reinf. from 23rd Res. Bn.			
	"	Taken on strength 22nd Bn.		29-6-16	N. Roll. Pt 0.27/7-7-16
	O.C. Bn	Left C B D to Unit			"
		Joined Unit	Field		B 213
7-8-16	C B D	Left CBD. to 2nd Can. Ent. Bn		5-8-16	N. Roll 178/25-8-16
	2nd Can. Ent. Bn	Joined	do	8-8-16	B 213 do
	"	Left	do		
	OC. Bn	Joined Unit		<i>18/16 unit</i>	<i>19/16 B 213</i>
22-2-17	do	Sentenced to 28 days' F.P.			
		No. 1, 21-2-17 for when on active service: Contravening G.R.O. 59. (Straggling away from his Unit while on the line of march.)	Field.	13-2-17	Part 11 O. No. 25 D/1-3-17.

A.F.B. 2069

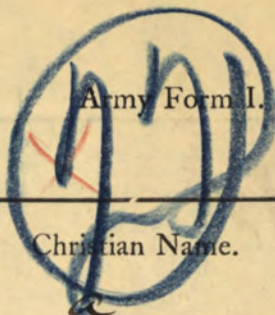
(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(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				
19-8-17	22nd Bn.	DIED OF WOUNDS RECEIVED in ACTION.	Field	19-8-17.	2x51 C 51.-ref.K.I.16-18627. Pt.II.0.83 D/23-8-17.DCS
21-8-17	Saab, r. <u>EXA.3rd Ech</u>	Date of death is corrected to read: "18-8-17"	6 C.C.S.	19-8-17	M.K. X. 2.16-18737-528.281 Pt. II. 0.84 D/24-8-17.
			<i>J. Whogau</i>		Major for Lt.-Col., A.A.G. Canadian Section G.H.Q. 3rd Echelon B.E.F.

MEDICAL CASE SHEET.*



No. in
Admission
and
Discharge
Book.

12534

Year

1915

Camb. Hoops
address us

Station
and Date.

1915.

15.12

17.12

Regimental No.

417211

Rank.

Pte

Surname.

Lehman

Christian Name.

W

Unit.

41st Canadian contingent

Age.

19

Service.

5
12

Disease

Neuralgia

Headache at temple last 3 weeks, ~~at~~ some pain
in stomach. Bowels regular.

Heart lungs & abd normal
in feet 6.

W. Landy

Much improved. for discharge.

W. Landy

*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

5088 ORIGINAL

57th Regt N. Co. 3

MEDICAL HISTORY SHEET.

Surname Lebrun Christian Name Abelard

Examined on 9th day of Oct 1915
 at Valentin Camp.

Birthplace { City or Town St Raymond.
 County N. D.

Apparent age 20

Trade or occupation Laborer

Height 5 Feet 7 Inches.

Weight 135 Lbs.

Chest measurement { Minimum 34 inches.
 Maximum expansion 37 inches.

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right Left
 Number 2

When Vaccinated last as a boy

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by <u>A. Gabowy Captain</u>		Rank _____ M.O.
Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
Date	Result	VACCINATIONS.
		M.O.
		M.O.
		M.O.
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.
		M.O.
		M.O.

Enlisted on 6th day of Oct 1915 at Three Rivers

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>57th Regt</u>			<u>6/10/15</u>
Transferred to.. ..	<u>EFF</u>			
	<u>41st Regt</u>	<u>412211</u>		<u>6-10-15</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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.

IR.

Rank

Pte.

Name

Lebrun
LEBUIN, Adelard

Reg'l No. 417221

R-122

Unit

41st Battn.

If in perm. Corps,
What Unit? }Married or Single **Single**Place and Date of Enlistment **Valcartier, 6th Oct, 1915.**Place of Birth **St. Raymond.**Name and Address, Next-of-Kin **Paul Bebuin,****145 Ste Julie St, Trois Riviers, P.Q. Can.** Relationship

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

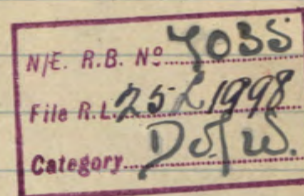
Relationship

Discharge, Date and Place

Reason

Character

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.				
					28 OCT 1915
		<i>Arrived in England per S. S. Saxonia</i>			
26.4.16.	O/c. 23 rd	<i>Taken on Strength</i>	<i>at Sandring</i>	<i>20.4.16</i>	<i>PT II DO 96</i>
28.6.16	"	<i>Trans. to 2 Inabn</i>	<i>O'Leas</i>	<i>28.6.16</i>	<i>PT II DO 103</i>
7.7.16	22 nd	<i>J.O.S. from 23rd</i>	"	<i>29.6.16</i>	<i>" 27</i>
24.8.17	22 nd Am	<i>Died of Wounds</i>	<i>Field</i>	<i>18.8.17</i>	<i>& LA. 592 BWA Arm</i>
23.8.17	"	<i>-----</i>	<i>-----</i>	<i>19.8.17</i>	<i>PT II DO 83</i>
24.8.17	"	<i>PT II DO 83 Amended to read</i>			
		<i>Died of Wounds</i>		<i>18.8.17</i>	<i>PT II DO 84</i>



2nd Contingent

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39-319.

To Whom *Paul Lebrun*
Address *145 St Julie*
Three Rivers
Que.
Rate *\$12*

By Whom Assigned *Lebrun Adelard*
Regtl. No. *412211* *417211*
Rank *Pte*
Corps *41st Bn.* *A. Co.*

NOV 1-1915

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916	<i>L8009</i>	<i>24</i>	
Feb.		<i>W9979</i>	<i>12</i>	
March		<i>K14541</i>	<i>12</i>	
		<i>016689</i>	<i>12</i>	



Pensions Notified Date *19/9/17*
Killed in Action }
Died of Wounds } Date *18/8/17*
Missing }
C. L. *(10)* *26/8/17* Clerk *E. L. Madley*
Date Noted *19/9/17* 191

W.P. 1/6

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 60m.-12-15.
 1772-39-819.

Sheet No. 2.

Paul Lebrun

Name of Soldier

Lebrun Adelard

L. L. Job 89002.-Req. 6213.

PAYMENTS.

412211

41st Batta A Co

Month.	Year.	Cheque No.	Amt.	Remarks.
			\$ 12 ⁰⁰	
April	1916	4290	12	
May		23200	12	
June		A3728	12	
July		210273	12	
Aug.		M14530	12	
Sept.		V18389	12	
Oct.		K23348	12	
Nov.		Y24986	12	
Dec.		33217	12	
Jan.	1917	340427	12	
Feb.		245768	12	
March		51815	12	12 (2)
April		P3081	12	12 w.
May		P9239	12	
June		O15851	12	On
July		P23083	12	On
Aug.		Z32116	12	
Sept.		S37607	12	67x. 30/9/17. 276 ⁰⁰ } E.H. Bradley Def. closed 30/9/17 } 19/9/17
Oct.				
Nov.				
Dec.				276 ⁰⁰
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

WAG

R

9/17

PA

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

Rank **Pte.** Name **Lebrun**

~~Adelard~~, Adelard

Reg'l No. **417221**

P-56

Unit **41st Battn.**

If in perm. Corps,
What Unit?

Married or Single **Single**

Place and Date of Enlistment **Valcartier, 6th Oct, 1915.**

Place of Birth **St. Raymond.**

Name and Address, Next-of-Kin **Paul Bebuin,**

145 Ste Julie St, Trois Riviers, P.Q. Can. Relationship

Assigned Pay Monthly \$ **12⁰⁰** Payable to **Next of kin**

Relationship

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place **DoA. 18-8-17.** Reason

CR/592 d/24th 17.

Entered on N.E. Card Index **SM**

Checked by **J. Guillemin** Character



Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
1915																	
Jan 1	30	30	1 ⁰⁰	30	30	10	3	11 10	44 10	87	11	9 73			36 33	7 77	11 ⁰⁰ Bal. Oct. 31 st
Dec 1	31	31	1 ⁰⁰	31	31	10	3 10		24 10	137		14 60	12		29 03	12 84	
1916										192		2 43					
Jan 1	31	31	1 ⁰⁰	31	31	10	3 10		24 10	237		7 30	12		29 03	17 91	
Oct. 1	31	29	1 ⁰⁰	29	29	10	2 90		31 90	263		9 73	12				
Jan 1	31	31	1 ⁰⁰	31	31	10	3 10		34 10	333		4 87			31 84	21 560	374 04 ⁰⁰ Chg DO. 63
Jan 1	31	31	1 ⁰⁰	31	31	10	3 10		34 10	357		17 03	12		42 08	7 62	412 " " DO. 63
										406		374					32 " " DO. 74
										441		17 03	12				

Statement of
JAN 7 1918
Account rendered

BALANCE TRANSFERRED TO NEW LEDGER

Carried forward to Large Ledger sheet

152- 15 20 11 10 17830 102196000 8 49 17068

MARRIED OR SINGLE *S*
 PLACE OF BIRTH *St. Raymond P.Q. Canada*
 NAME AND ADDRESS OF NEXT OF KIN *Paul Lebrun*
145 Ste. Julie St. Trois Rivières P.Q. Can
 RELATIONSHIP OF NEXT OF KIN
 NAME AND ADDRESS OF NEXT OF KIN
 RELATIONSHIP OF NEXT OF KIN
 SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)
 PAYABLE TO
 RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Died of Wounds</i>	<i>18-8-17</i>	<i>624592 24/8/17</i>

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
---------------	-----------------	----------	------------------

REG'L. NO. *41721* RANK *Pvt.* NAME *Lebrun Adelaire*
 IF IN PERM. CORPS | WHAT UNIT *1st Batt* TRANSFERRED TO *2nd Batt* DATE *20/4/16* AUTHORITY *D.O. 96.*
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *220m* DATE *1.7.16* AUTHORITY *P.O. 152*
 PLACE OF ATTESTATION *Valcartier* 28 AUG 1917 "D" Dead DATE *1/9/17* AUTHORITY *C24592*
 DATE OF ATTESTATION *6/10/15* TRANSFERRED TO DATE AUTHORITY
 ASSIGNED PAY MONTHLY \$ *12.00* DATE EFFECTIVE *1-11-15*
 PAYABLE TO *Paul Lebrun 145 Ste. Julie St. Trois Rivières P.Q.* RELATIONSHIP
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
 PAYABLE TO RELATIONSHIP
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *Stopped* EFFECTIVE *1-9-17* REASON *Died of Wounds 18-8-17 624592 24-8-17*
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)
 Entered on N.E. Card Index *EM*
 Checked by *Judiciaire*

Date Pay:

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DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS						
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT									
			\$	c.			\$	c.			\$	c.																				NO.	DATE	NO.	DATE	NO.	DATE
1916																																					
7th				167	20											1110	178	30																			
30	100	30		30	10	3-										33																					
1-31-5	31	31		31	31	310										3410																					
1-30-6	30	30		30	3-											33																					
1-31-7	31	31		31	31	310										3410																					
1-31-8	31	31		31	31	310										3410																					
1-31-9	30	30		30	3-											33																					
1-31-10	31	31		31	31	310										3410																					
1-30-11	30	30		30	3-											33																					
Dec 31	31	31		31	31	310										3410																					
				2750				2750																													
				48970												1110	480	80																			

Statement of
 JAN 7 1918
 Account rendered

New A.S.P.B. issued by P.M. in field 28.6.17. Old book filed 17/7/17

A.S. Paybook Verified N.S.D.

bk with C.F.X 2/1.11.15. 30-9-17. 6hgt 246"

417211. Pte. Lebrun. A.

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS						
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT				
			\$	C.						\$	C.	NO.	DATE	NO.	DATE	NO.	DATE				NO.	DATE									
1917			469	70					11 10	480	80			40	89	7726	2091	10x19	168	849	36474	118	06								
1-31/1	31	10	34	10					34 10	172	2/1			262						12		17	23	134	93						
1-31/2	28	10	30	80					30 80	160	1/2			261						12		17	Y?	148	50						
1-31/3	31	10	34	10					34 10	147	1/2		149	16/3	CR School					12	30	80	48	91	133	69	31	-	Admpt. H. B. O. 5/13/17		
1/30 4/17	30		33						33											12		12	154	69							
1/31-5/1	31	10	34	40					34 40	15	10/4			262						12		14	62	174	17						
1/30 6/7	30	10	33						33	93	2/5			268						12		17	36	189	81	40	..				
July	31		34	10					34 10	12	2/6			268						12		14	68	209	23					Died of wounds 11/11/17 class checked to "d" dead off 1/9/17.	
Aug	31		34	10					34 10											12		12		231	33						
									743	10				64	68	22	26	21	40	102	19										

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. PAY	SER. ALLCE. ENG.
	Bales Ford.								231.33		
Oct				27.22	264						
				AR 205	267						
				266	200	264					
				339	26	248			220.62		
Nov	Int on Def. Pay to 31-7-17		231						222.93		
				N. E. for 6/17. Aud. C.F.		12			210.93		
				Balance transferred to N. E. Branch.					210.93		
1918				to Ottawa for settlement							
Feb				12/2/18	210	93					

*1 D
No stoppage 2-11 etc.*

(2468) Wt. W. 2290-PP1182 6-18 J.F.W. (E3277)

Empress Britain
Sa 13 1919 Ar 22 1 19

Army Form W3997.

Regtl. No. *820755* Rank *Plt*
Name *Keatly George Oliver Keatly*
(Christian Names in full) (Surname)
Unit *C.I.C.* Regt. *Sunningdale*
or Corps *B.II.*

*Order out;
wife,
James*

COVER
FOR
DISCHARGE DOCUMENTS.

Sailed for Can 13 JAN 1919

EMPRESS OF BRITAIN

417211 Lebrun, Adela

41st Battalion

7-8

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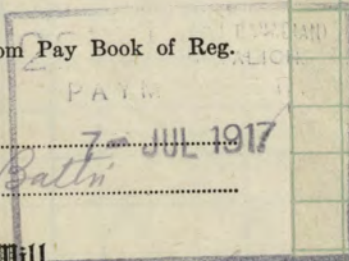
20

Perforated sheet for Will from Pay Book of Reg.

No. 417211

Name A. Lebrun

Unit 22nd (7th Can) Batta



Military Will

In the event of my death I give the whole of my property & effects to my Father.

Paul Lebrun
145 Ste Julie St
Trois Rivières
Canada

Signature Adolphe Lebrun

Rank and Regt Pte 22nd (7th C) Bn

Date June 26th 1917



ESTATES BRANCH,

JAN 28 1918

MILITIA DEPT.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Nov. 1-1915.

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>12.</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *412211 - 417221*

Rank *pte.* Promoted Reverted Discharge

Soldier's Name *Adelard Lebrun*

Battalion *41st Batta A. Co.*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name *Paul Lebrun*

Address *145 St. Julie three Rivers Que*

Change of Address

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Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917 Dec 31</i>			<i>276 ✓</i>	<i>276 ✓</i>	<i>Died of wounds 18/8/17 Wife closed 30/9/17 Pensions notified 19-9-17. E. S. Bradley C. F. X. 20/2/18. HW</i>

*278
292
EPR*

