

PP
26-11-18

Incomp

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.



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

6.

Name LEVESQUE AMELEE

Regt. No. 3293756 Rank Pte

Corps 1st Depot Bn. 2nd Quebec Regt

Deceased 19-10-18

M. Bellanger 17-12-20

m. Scott 20-12-20

23886



docs 38.10

1 credit Card

M. G. 21

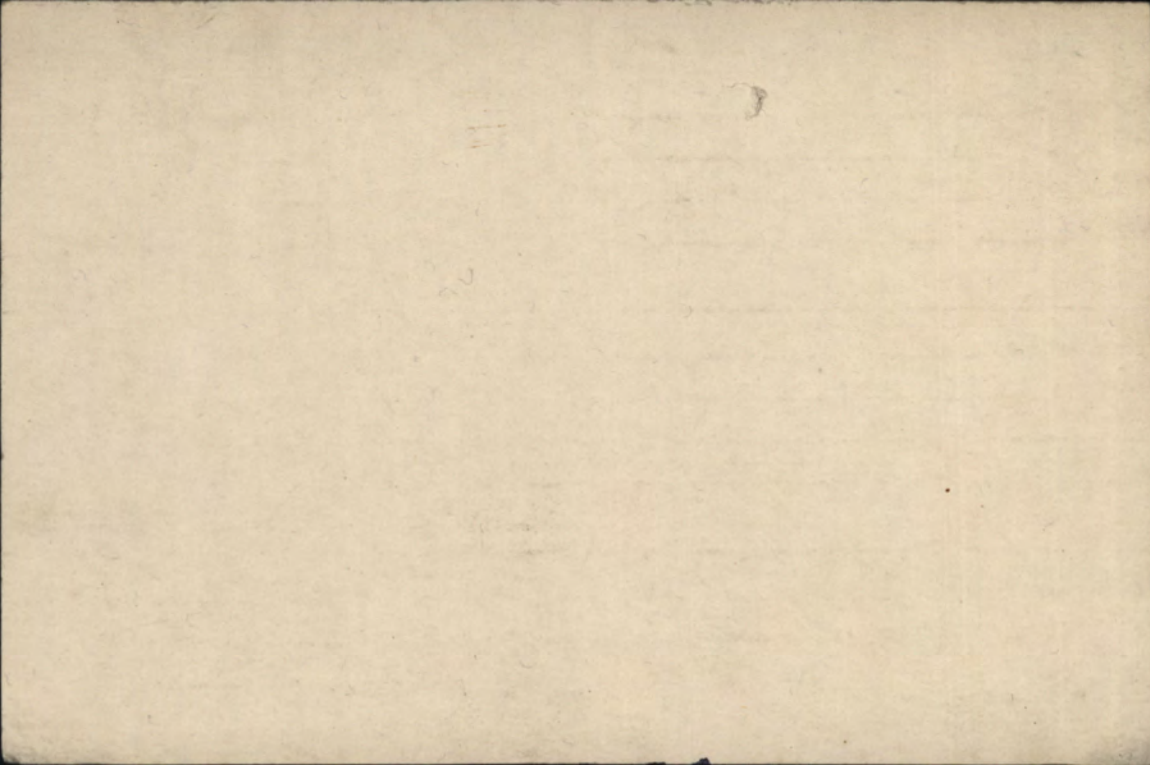


Surname *Leresque*
 Christian names *Amedee*
 Regtl. No. *3293756* Rank *Pte*
 Unit *1st Lps Bn 2nd Que Regt.*
 H. Q.
 M. D. No. *D*
 T. O. S. 19.....
 D. O. Pt. II of
 S. O. S. *19-10-1918*
 Reason *Dec.*
 Auth *10030642-11-18 1/2 PR M.D.s*

Next of kin *Leresque Mrs. Henriette Caron* Relationship *Mother*
 Address *St. Epiphane,*
Yemiscouata Co., P.Q.
 Also notify:

BORN—Place *Canada, St. Epiphane, P.Q.* Date *April 11th 1895*
 ATTESTED—Place *Camp St. Louis* Date

O/S R/C



Levesque, Amédee, Pte. 3293756 1st D. Bn. 649-L-16979

2nd Que. Regt.

Med. & Dec. (NIL)

P. & S. (NIL)

Ser # 809789,

Mem. Cross. (NIL)

(Died before Attestation.)

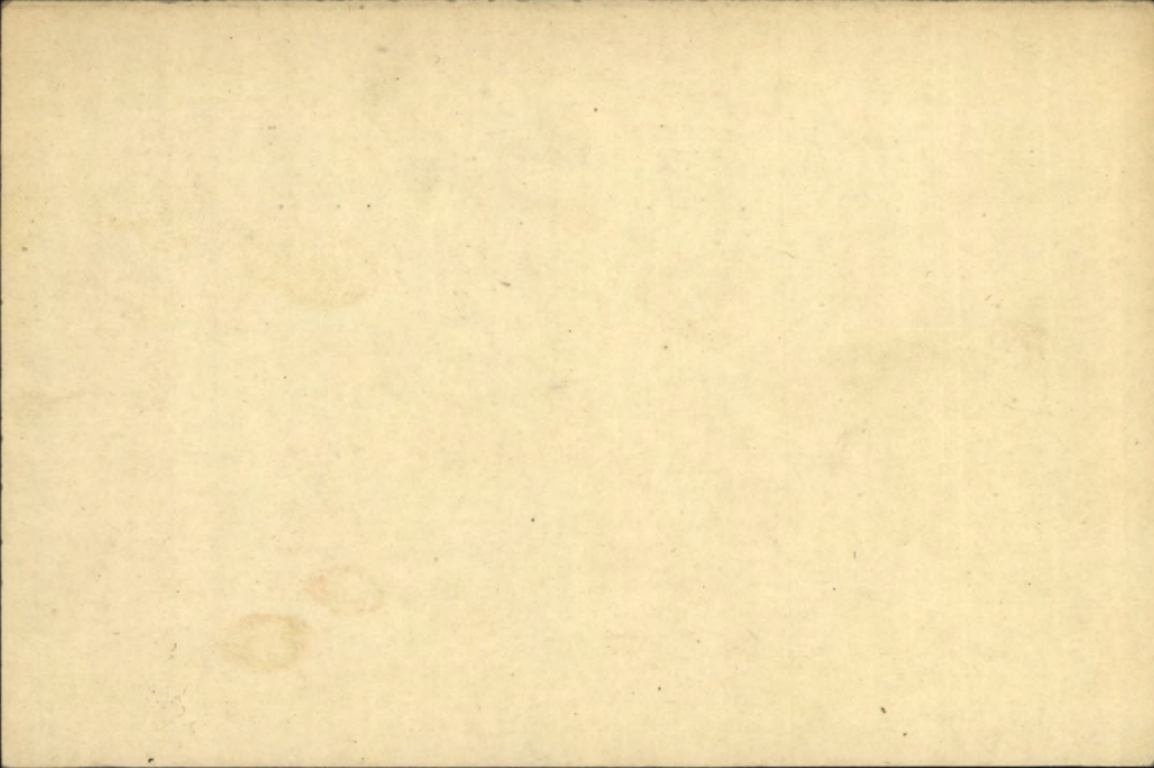
54377

Canada only.

No 10000.

28.

5



Original not available
 Fill in only—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.
 500M.—9-16
 H. Q. 1773-39-9.0.

Casualty Form—Active Service.

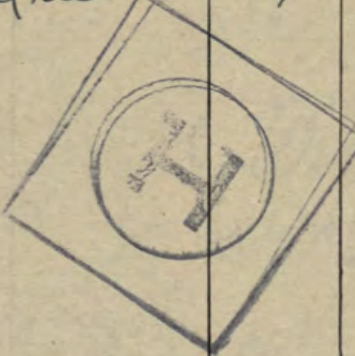
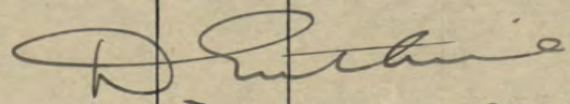
Unit, Regiment or Corps..... *1st Depot B² - 2nd Que. Regt.*

Regimental No. *3293756* Rank *P⁶* Name..... *Levesque Amedee*

Enlisted (a) *6/10/18* Terms of Service (a)..... *Defu* Service reckons from (a)..... *6-10-18*

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

Extended..... Re-engaged..... Qualification (b).....

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>2/11/18</i>	<i>1/2nd Q.R.</i>	<i>S.O.S. Deceased</i>	<i>Quebec</i>	<i>19/10/18</i>	<i>Pt. I D.O. #306</i>
					
 <i>Capt. for Defu</i>					

(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, Shoeling Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

Casualty Form—Active 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				

tit

Levesque
Levesque

NAME

DATE

Date	13 th 16					17 th					18 th					19 th								
	A.M.		P.M.			A.M.		P.M.			A.M.		P.M.			A.M.		P.M.						
Day of Dis.	-	6	8	10	12	-	5	9	-	5	9	-	6	9										
Hour	2	4	6	8	10	12	2	4	6	8	10	12	2	4	6	8	10	12	2	4	6	8	10	12
Pulse	Asleep	26 90	20 88	20 76	20 96	24 100	Asleep	26 100	34 80	20 88	24 88	26 100	Asleep	26 96	24 96	32 96								
Resp.																								
Stool	1																							
Urine																								

Quinine 9.00 am

Quinine 8.00 am

Murphy Drop & Brandy 12.00 pm - Or 11.00 am

1/2 pint of wine in 11.00 am

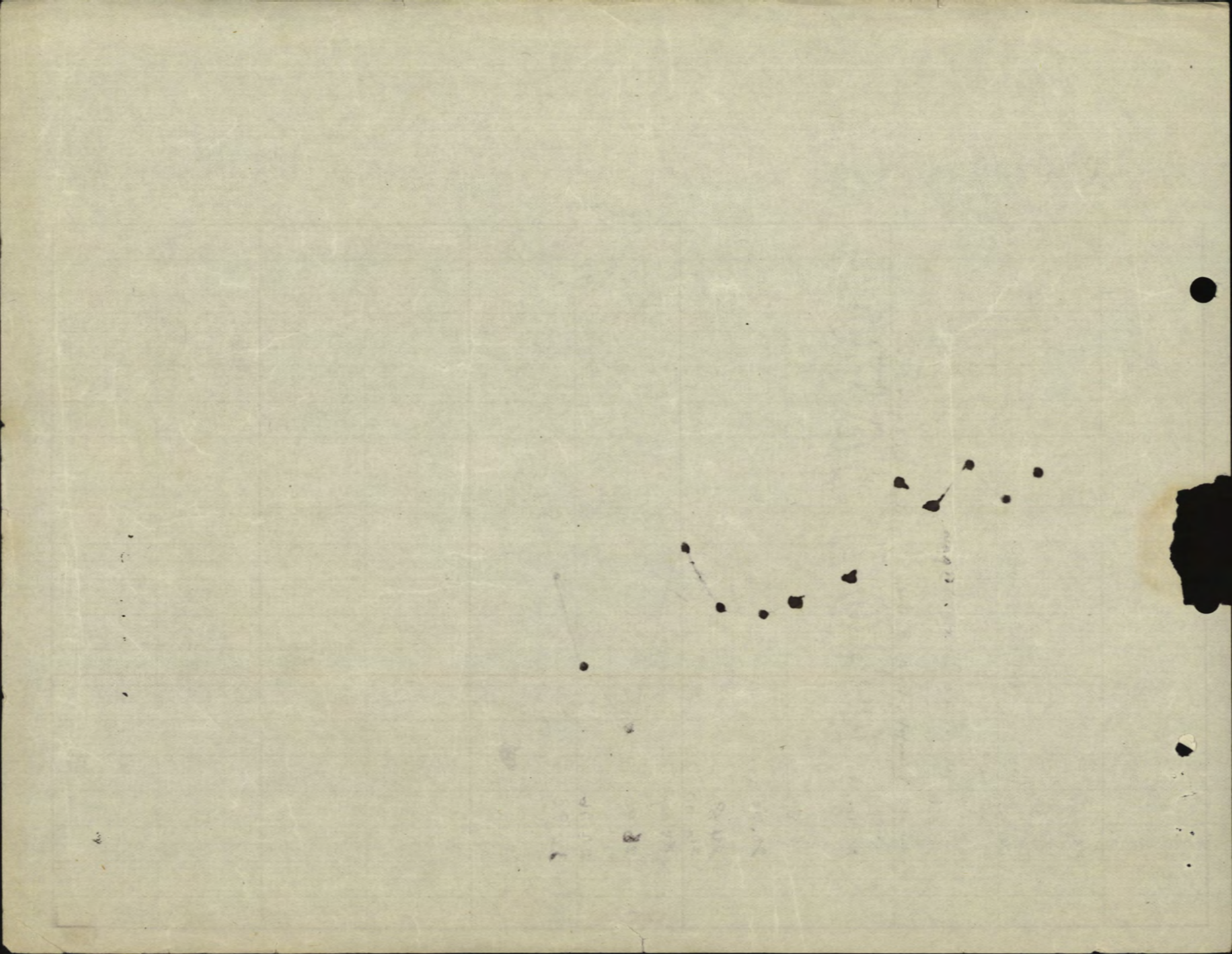
Quinine 11.00 am

Still

Still

107°
106°
105°
104°
103°
102°
101°
100°
99°
98°
97°
96°
95°

107°
106°
105°
104°
103°
102°
101°
100°
99°
98°
97°
96°
95°



CLINICAL CHART.

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

Corps Monte Carlo

Hospital Station (militaire) Quebec

No. _____ Rank and Name Levesque Amede

Age 23 Service _____

Disease Influenza

Date of Admission 18/10/18 Date of Discharge _____

Result died

Case Book _____ Folio _____

Dates of Observation	Days of Disease																													
	TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME		TIME	
Temperature Fahrenheit	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.	a.m.	p.m.
107°																														
106°																														
105°																														
104°																														
103°																														
102°																														
101°																														
100°																														
99°																														
98°																														
97°																														
Pulse per Minute	120		120	138	138																									
Respirations per Minute	42		48	48	38	38																								
Motions																														

100°
 101°
 102°
 103°
 104°
 105°
 106°
 107°

42
 48
 48
 38
 38

120
 120
 138
 138

46
 38
 138

Signature W. H. Belliveau capt

In charge of case.

#-CLINIC CHART

WATER IN CANAL

BRITISH WEST INDIES

THE FRIENDS OF THE



CANADIAN CONTINGENT EXPEDITIONARY FORCE

M. D. 5

A MENDED

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 2543 C.E.F., 1916).

Regimental No. 3293756 Rank Pte. Name Lovesque Arsène
 Corps 1st. Depot Bn. 2nd. Quebec C. Regiment who was S.O.S. on A/C Death
 On 19-10-18 191... to 31-10-18 191...
 *Insert "discharged" or "transferred."

26



The following is a statement of the account of the above named from 19-10-18 191... to 31-10-18 191... the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....			Bal. Cr. from prev. month.....		
Advances by Cheques } No.....			Reg'tl Pay..... <u>26</u> days at \$ <u>1.00</u>		<u>26.00</u>
} No.....			Field Allow. <u>26</u> days at \$..... c. <u>10</u>		<u>2.60</u>
Assigned Pay and Sep'n Allice. No.....			Separation Allowances* (Monthly)		
Other charges			Other Allowances*		
Payment on transfer or discharge No.....			Other Credits*.....		
Balance Cr. (to be paid by the new unit).....	<u>28.60</u>		Bal. Dr. (to be deducted by new unit).....		
Total.....	28.60		Total.....		28.60

* Give particulars.

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of Assigned Pay for the month of..... 191... } (to) Assignee..... }
 and Sep'n Allice. for month of..... 191... }
 (Address)

Documents not Completed

- (†) Insert amount to be assigned, whether it has been paid or not.
- (‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of \$..... has been paid by Paymaster, Military District No.....

REMARKS:— S.O.S. 19-10-18 L.P.C. Shows Credit to 31-10-18
 State (1) date of enlistment

- (2) if married and if a Separation Allowance Card has been submitted.....
- (3) cause of discharge..... authority.....
- (4) authority for transfer.....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date..... 6-11-18

Place..... Drill Hall Quebec P.C. Arsène Arsène Lieut.
1st. Depot Bn. 2nd. Quebec Reg. Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record. For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record. If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.



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Faint, illegible text or markings in the upper left quadrant.

Faint, illegible text or markings in the upper left quadrant.

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Faint, illegible text or markings in the middle left area.

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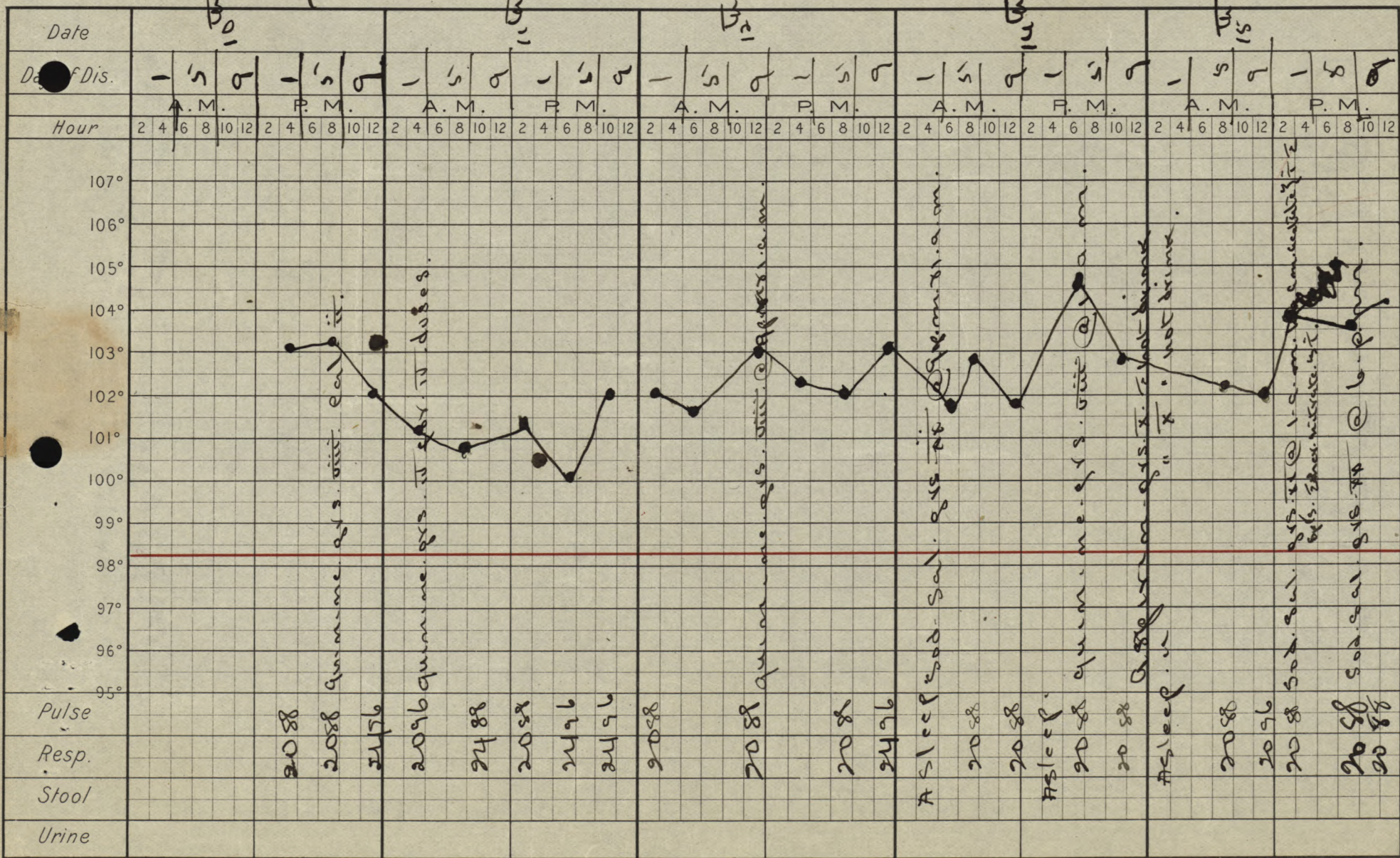
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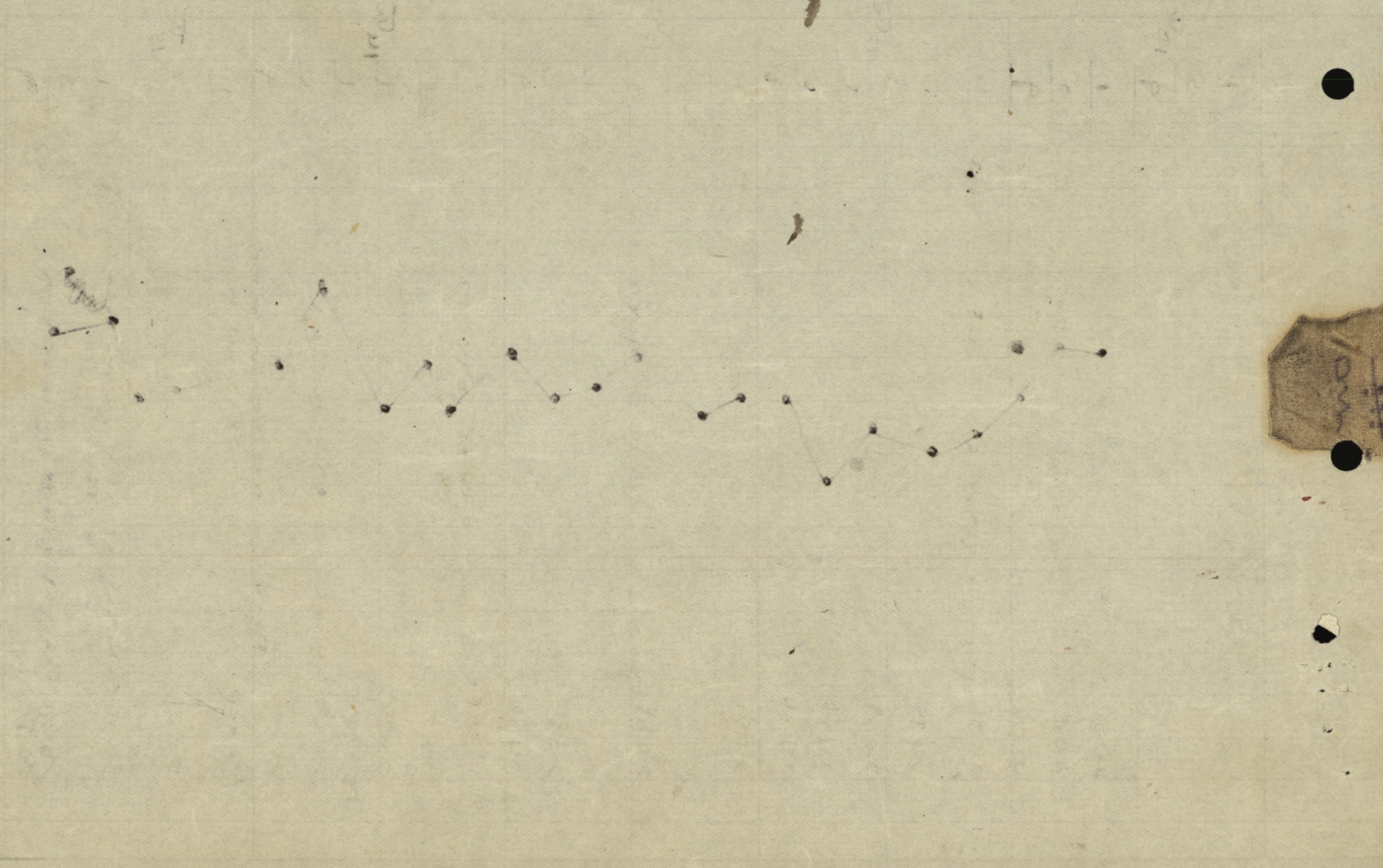
Faint, illegible text or markings in the lower middle area.

NAME

hevesque.

DATE





Handwritten text on a small piece of paper or tape on the right edge of the page. The text is partially obscured and appears to be a date or a reference number, possibly "1934" or "1935".

CASE HISTORY SHEET.

militar Hospital.

Quebec Station.

No. _____ Rank _____ Name Levesque Amide Age 23

Unit Moh-cante Completed years of service _____ Where and how long _____

Date of admission 18/10/18 Date of discharge died 19/10/18

Diagnosis Influenza Place of origin _____

CONDITION ON ADMISSION AND PROGRESS OF CASE.

Patent admit. to hosp from Drill Hall hosp. where he had been sick since Oct. 10th. - temp charts attached. Exam of chest - R. side postl. shows traces of patent breathing bad, much distressed & rather cyanosed.

19/10/18 - Patent died at 1045 A.M.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT

(Especially any specific or special form.)

Quin. streph. & Digitalis (also cupping)

CONDITION ON DISCHARGE

(and disposal made of case.)

died 19/10/18

Date 20/10/18

[Signature]
Medical Officer i/c case.



Case History Sheet

