

593

637

ATTESTATION PAPER.

No 1054637

Folio. 28

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

- 1. What is your surname?..... McLeod.
- 1a. What are your Christian names?..... Louis
- 1b. What is your present address?..... Spring Hill P.Q.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Spring Hill Co Frontenac P.Q.
- 3. What is the name of your next-of kin?..... Alex W McLeod.
- 4. What is the address of your next-of-kin?..... Spring Hill P.Q. sufficient Address
- 4a. What is the relationship of your next-of-kin?..... Father
- 5. What is the date of your birth?..... November 25th 1897
- 6. What is your Trade or Calling?..... Farmer 20
- 7. Are you married?..... No
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes
- 9. Do you now belong to the Active Militia?..... 8th. REGT. ROYAL RIFLES
- 10. Have you ever served in any Military Force?..... 8th. REGT. ROYAL RIFLES
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... Yes
- 12. Are you willing to be attested to serve in the } Yes
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Louis McLeod., 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.

Louis McLeod (Signature of Recruit)

Date November 4th 1916. C. G. Drum (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Louis McLeod., 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.

Louis McLeod (Signature of Recruit)

Date November 4th 1916. C. G. Drum (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 Quebec this 4th day of November 1916.

W. P. L. Lussan (Signature of Justice)

M. F. W. 28
750M-8-16
R. Q. 1772-39-941
Enlisted at Quebec 4/11/16
Taken on strength 244th Batt. 16/11/16

Description of Louis McLeod on Enlistment.

Apparent Age 19 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. 6 ins.

Chest measurement { Girth when fully expanded..... 38 ins.
 Range of expansion..... 3 ins.

Complexion..... Fair

Eyes..... Blue

Hair..... Brown

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

none

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..... Nov 4 1916

Place..... Quebec

W. H. Army Capt
Am
 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.

Louis McLeod..... 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.

[Signature]
 (Signature of Officer)
 c/o 244th "Overseas" Battalion, C. E. F.
 T. A.

Date..... NOV 17 1916 1916

REGIMENTAL DOCUMENTS

NAME

MacLeod Louis

REGT. NO.

1034637 UNIT

H. Q. FILE NO.

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.B.W. 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)

DEATH

Category

DISCHARGE

Category

DESERTION

28499

480884

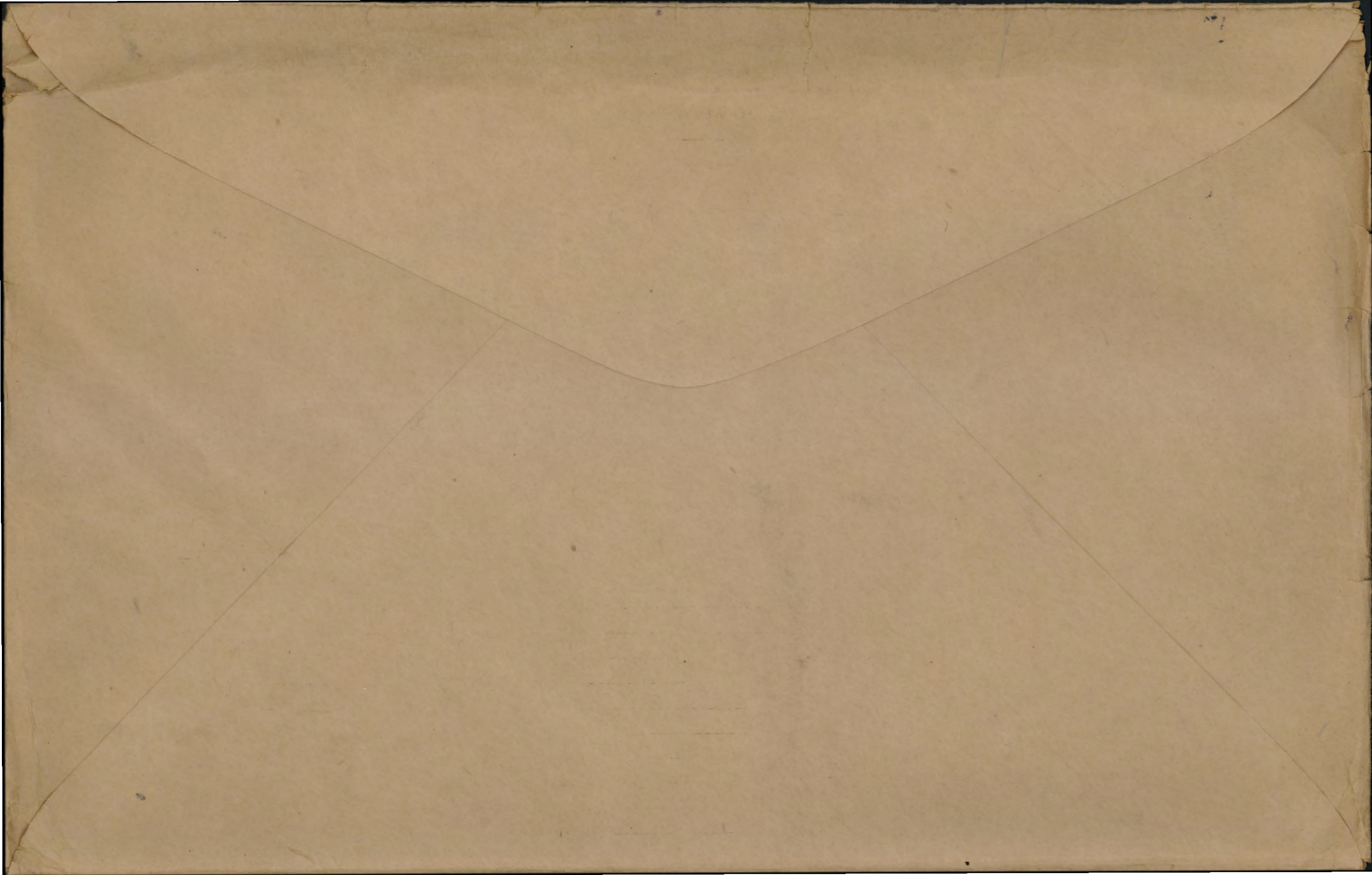
6-16
19-16
26-16
3

S

H

H

W. 2589
100M-11-19
1772-33-1377



²¹/₈ ~~10~~
SURNAME.

McLeod

CARD NO.

X

CHRISTIAN NAMES

Louis

FOLL.

REG. No. 1054637 RANK *pld.*

UNIT ~~244th~~ M.H.C.C. M.D.4.

Bn.

FORMER CORPS 8th. Regt. Royal Rifles.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

McLeod, Alex. W.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

Spring Hill, P.Q.

COUNTRY OF BIRTH

Canada, Spring Hill, P.Q.

DATE

Nov. 25th. 1897

PLACE OF ATTESTATION

Quebec, P.Q.

DATE

Nov. 4th. 1916.

From Halifax Per S. L. "Capland" 28-3-17.

MARRIED

SINGLE *yes.*

WIDOWER

TRADE OR CALLING

Farmer.

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

19 YEARS

0 MONTHS

HEIGHT

5 FEET

6 INCHES

CHEST MEASUREMENT

38 INCHES

EXPANSION

3 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

nil.

MEDICAL EXAMINATION.

PLACE

Quebec, P. Q.

DATE

Nov. 4th 1916

Present Address: Spring Hill, P. Q.

42
mmk

~~B~~

Number... 1054637 Rank Pte

Surname... MCKEOD

Christian Name... Louis

Units... 87th Bn. Can. Inf. Theatre of War... France

Date of Service... 27-9-17... D

Remarks.....

Latest Address... Alex MacLeod (G)

Springhill P.Q.

Roll No. Page 7479

DESP. . OCT 26 1921

REGN. NO. *Yas 1391*

649-M-35633

MacLEOD, Louis, 1054637 Pte.

87th Air Postal Sq. Station,

Medals & Father. Alex MacLeod,
Dec. Springhill, P.Q.

M

P. & S. " As above.

(Serial no. 769302.)

Mem. Cross. Mother. Mrs. Barbara MacLeod,
R.R.No.1
Springhill, P.Q.

Desp 14.10.20 (M) C26983 27539

mj.

Scroll Desp.

JAN 7 1921

Reqn. No.

78360

Plague Desp.

JAN 31 1921

Reqn. No.

P 27527

422

W

No 1054637 RANK *Pte*

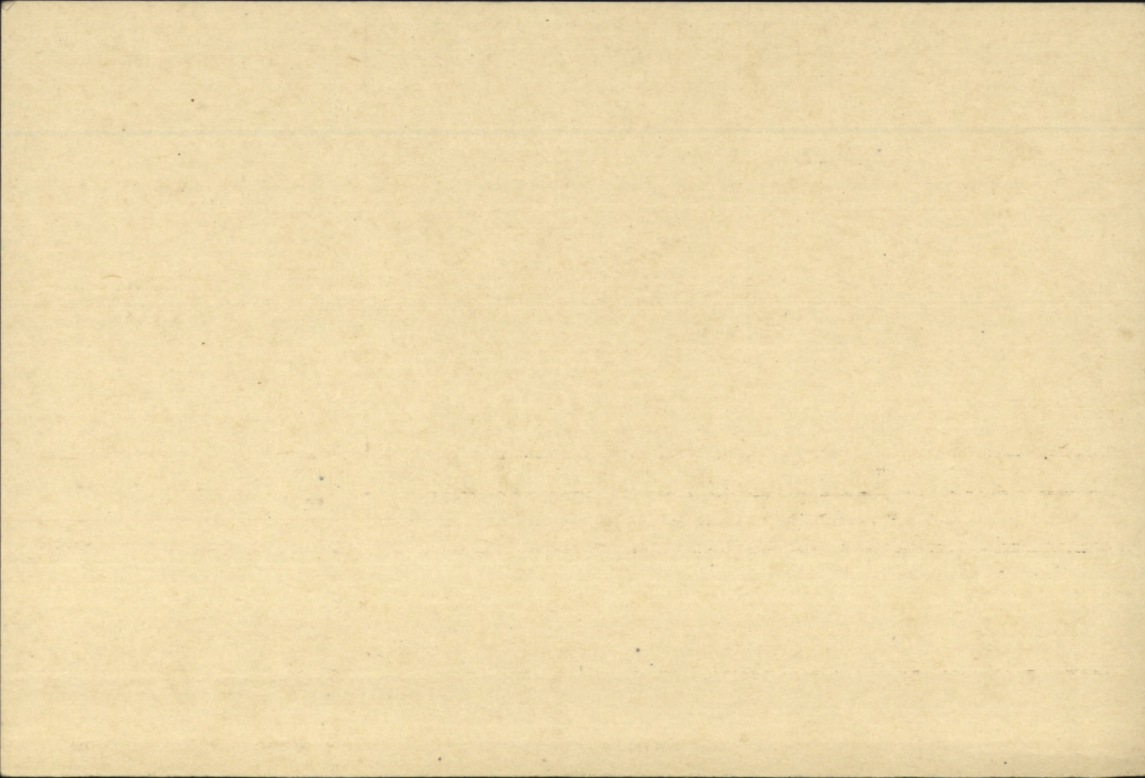
NAME *Mc. Rod. Rowis*

T. O. S. 16-11-16
20126 of 17-11-16

UNIT *244th B attalion C. E. F*

M. D. *4*

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916.</i>			
<i>Nov 16</i>	<i>Nov 30</i>	<i>✓</i>		
<i>Dec.</i>		<i>✓</i>		
<i>1917</i>	<i>1917</i>			
<i>Jan.</i>		<i>✓</i>		
<i>Feb.</i>		<i>✓</i>		
<i>Mar.</i>		<i>✓</i>		



NAME

McLeod, Louis

REG'TL No.

1054637

H. Q. FILE No. 649.

RANK AND CORPS

Pte. 87th Bn. (former 2nd 87th Bn.)

CABLE

FOLLOWS

NO.

FOLLOWS

NO.

DATE

NATURE OF CASUALTY

A. O. I.

"b" Alex. W. McLeod (Father)
Spring Hill, P. Q.

26-8-18

Dang. ill. + C. C. S. Aug. 21, 1918.

24-8-18

Lysed. chest, neck.

31-8-18

H. of W. of C. C. S. Aug 21st 1918.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
32.	Can. Etchinghill Springs ^{Kent.}	2-5-17	N. Y. W. "2."
34.	Discharged	31-5-17	V. D. S.
47	M. H. C. C. Montreal	12-2-17	Adm. Int. K. L. C. H. ^{bel. 2} not.
a 306	No 4 Can. Cas. El. Stat.	21-8-18	Glaucoma & Chest Died 9 wds. (Pres. up. Deng ill)

REG. NO. 1054637. NAME McLeod R.
(SURNAME FIRST)

RANK Pte CORPS 244th Battalion

AGE 19 SERVICE

NAME OF HOSPITAL General Hospital PLACE Montreal

DATE OF ADMISSION 14 - 2 - 17.

DISEASE Ingrown toe nails

DISCHARGE

OPERATION

DISCHARGED TO DUTY

TRANSFERRED TO Khaki League Conv Home 15 - 2 - 17

DISCHARGED BY MEDICAL BOARD

Louis

25-M-7408

Name M^CLEOD

Rank

Plt

Reg. No. 1054637

Unit 87 Bn

Alex W M^CLeod

Spring Hill PQ

Next of Kin

Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
21-8-18	4 bus to station DANC. ILL		Gun Neck chest	A 306	H 274	134499
21-8-18	DIED. OF WOUNDS		do	A 306	H 274	135502

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

McLeod L.
RANK UNIT Co.

1054637
TROOP BATTY

HOSPITAL 87 Bn Que

DATE OF ADMISSION

1. 46. bas. bl. station

HOSP. 21.8.18

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

1.

gsw. neck & chest

2.

died of wounds - 21.8.18. R

3.

DISPOSITION

DATE

bl. 24.8.18 @ 301. Dangill.

REMARKS

30.8.18 @ 306

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.

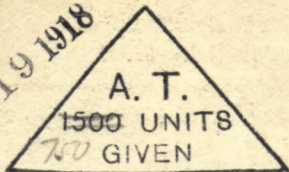
6.

7.

6321
FIELD MEDICAL CARD.

A.T. Serum } 1st
Dose and Date }
2nd

AUG 19 1918



FIELD AMBULANCE NOTES.

Morphia }
Dose and time }

Date of wound or }
onset of illness. } AUG 19 1918

Religion

PRES.

19 18 9/2

No. 1054637 Rank PTE
Name McLEOD, L.
Unit 87th CON. BN. 4th D.I.

Battle Casualty Accidentally Wounded. "Sick"
(Strike out description which does not apply).

No. of F.A. 11th Canadian Field Ambulance.
Date of admission
F.A. diagnosis AUG 19 1918

Died 5/15
August 21 1918
C. S. W. NECK.
LW

Additional F.A. Notes to be written on back of card.

C.C.S. diagnosis (if altered from above)

Base Hospital diagnosis (alterations or additional)

RECEPTION ROOM
No. 4, CANADIAN

Date of entry and medical unit admitting must be recorded immediately on admission. Brief clinical notes to be added later and signed by M.O.

No. of C.C.S.

19 AUG 1918

Date of entry

CASUALTY CLEARING
STATION,

T & Thresh
& lung
M

No. of Hospital

Date of entry

This F.M. Card must not be destroyed, and it must be transmitted with the patient if he is evacuated to U.K. Temperature charts or additional clinical notes may be sent with it, either in the same or in another envelope attached to the patient.

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.

M.F.
8/11/16



Unit, Regiment or Corps 244th "OVERSEAS BATTALION, C. E. F.

Regimental No. 1054637 Rank Private Name McLeod Louis

C. E. F.

Enlisted (a) 4/11/16 Terms of Service (a) C.E.F. Service reckons from (a) 4/11/16

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) Farmer

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				
		EMBARKED CANADA	<i>Belgian</i>	MAR 25 1917	<i>R. Anderson</i> Capt. & Adjutant
		DISEMBARKED ENGLAND	<i>Liverpool</i>	APR 7 1917	<i>R. Anderson</i> Capt. & Adjutant
		Transferred to <u>22nd Reserve Batin.</u>	<i>Shoreham</i>	APR 7 1917	<i>R. Anderson</i> #1609 Capt. & Adjutant
<u>11.4.17</u>	<u>22nd. R. Bn.</u>	Taken on strength	<u>Shoreham</u>	<u>7.4.17</u>	<u>D.P.11 0.53</u>
<u>25.4.17</u>	<u>22nd. R. Bn.</u>	Posted to <u>23rd. Res. Bn.</u>	<u>Shoreham</u>	<u>24.4.17</u>	<u>D.P.11 0.67</u>
			<i>Adjutant 22nd. Res. Bn., C.E.F.</i>		
<u>25.4.17</u>	<u>23rd. R. Bn.</u>	Taken on strength	<u>Shoreham</u>	<u>24.4.17</u>	<u>D.P.11 0.115</u>
<u>27.9.17</u>	<u>23rd. Res. Battalion.</u>	Posted to <u>27th Batt'n.</u>	<u>Shoreham.</u>	<u>26.9.17.</u>	<u>D.P.11 0.267</u>
			<i>Lieut. and Adjutant</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, Shoing Smith, etc., etc., also special qualifications in Technical Corps duties.

[P.T.O.]

CERTIFIED CORRECT
5 - OCT 1917
CALCUTTA LONDON

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				
27.9.17 6.10.17	A. G. B. D. 87 Bn	T. O. S. 87 Bn joined unit	Catopus Field	27.9.17 2.10.17	NR. Pt II 116 9/4-10-17 B213
20.8.18	116 FA.	GSW neck	admitted to CCS	19.8.18	A7752
22-8-18	O.C. No. 4 C.C.C.S.	DIED OF WOUNDS RECEIVED IN ACTION		21-8-18	Death Report R.I. 17-1301 D.O.No.76-1918
			<i>J. Anderson</i>		Lieutenant, for Lieut. Col. A.A.G. Canadian Section, 3rd., Echelon, G.H.Q.

159439

28691

20

Perforated sheet for Will from Pay Book of Reg.

No. 1054637
 Name L. McLeod
 Unit 23rd Reg Pm

Military Will

Deposited
Military District No 4
Montreal

Que.

ESTATES BRANCH

OCT 16 1918

MILITIA DEPT.]

Signature

Rank and Regt.

Date

*The original was
 forwarded to Ottawa
 23-9-18*

Further correspondence
please quote this
Number and Date

No. _____

E. _____

H.Q. _____

_____191_____

ESTATES

From

Officer i/c Estates, C.E.F.
Westminster House, 7 Millbank, S.W.

To

Paymaster-General,
Headquarters, Ottawa, Canada.

Sir,

I have the honour to enclose the Non-
Effective Account of the deceased soldier
named in the margin.

I have the honour to be,

Sir,

Your obedient Servant.

Lt-Colonel
Officer i/c Estates, C.E.F.

FORM OF WILL

31.8

I, Louis George McLeod (Name in full)
Regimental Number 1054637 serving in 244th Batt CEF
of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and
declare this to be my last Will.

I devise all my real estate unto

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

Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

Miss Mary Julia MacLeod
Spring Hill
R.M.D.#1 Quebec

Name and Address
of person or
persons to receive
personal estate*
(See note).

NOTE

This space for the
appointment of
Executor if
necessary.

IMPORTANT
NOTE

This must be signed
and Dated by
THE SOLDIER
HIMSELF.

this 13th day of March A.D. 1917

Louis G. McLeod Signature of Soldier.

*N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us
both present at the same time, who in his presence, at his request, and in the presence of
each other have hereunto subscribed our names as Witnesses.

Signature of First Witness Andrew W. Griffiths

Address of Witness 244th Batt CEF

THE TWO
WITNESSES

Occupation of Witness Private

MUST
SIGN HERE

Signature of Second Witness Clifford Gaulin

Address of Witness 244th Batt CEF

Occupation of Witness Private

FORM OF WILL

3

BRIDGEVIEW CANADA

MADE IN CANADA

WILL OF [Name] DATED [Date]

Private

IMPORTANT NOTE: This form is for use in the Province of Ontario only. It is not valid in other provinces.

I, the undersigned, being of legal age and sound mind, do hereby declare that I am not under any duress, coercion, or undue influence, and that I am fully aware of the contents of this will and the consequences thereof.

I hereby declare that I am not married, and that I have no legal spouse or partner, and that I have no children, and that I have no other persons who have any claim upon my estate.

I hereby declare that I have no debts or liabilities, and that I have no other persons who have any claim upon my estate.

I hereby declare that I have no other persons who have any claim upon my estate.

6
907

Register No. Dmc 907

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 3 012 477-L-12

Regt'l No. 105-4637 Name Louis McLeod
(Christian Name) (Surname)
Unit 87 Bn Rank Pte Date of enlistment.....
Date of casualty 21-8-18 B.P.C. File No.....
Was service performed overseas? Yes

DEPENDENT

Name Mr. Alexander McLeod Relationship Father
Address A.M.O. #1
Springhill

Amount of Special Pension Bonus \$ nil Abstracted by P.S. Baird
Rec.

M.F.W. 2652
25M-6-20,
H.Q. 1779-39-1473

Eligible for Gratuity \$ ✓
Less amount of Special Pension Bonus paid \$
Less Debit Balance of S. A. or A.P. \$
Total deductions \$
Balance due \$ ✓

Cheque No. Date issued:

REMARKS: Ineligible as no SA
was paid.

Clerk J.C. Muller

Audited by
Stout
Date 4/8/20

20427

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

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

L.L. 58901—M. & D. 6721

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

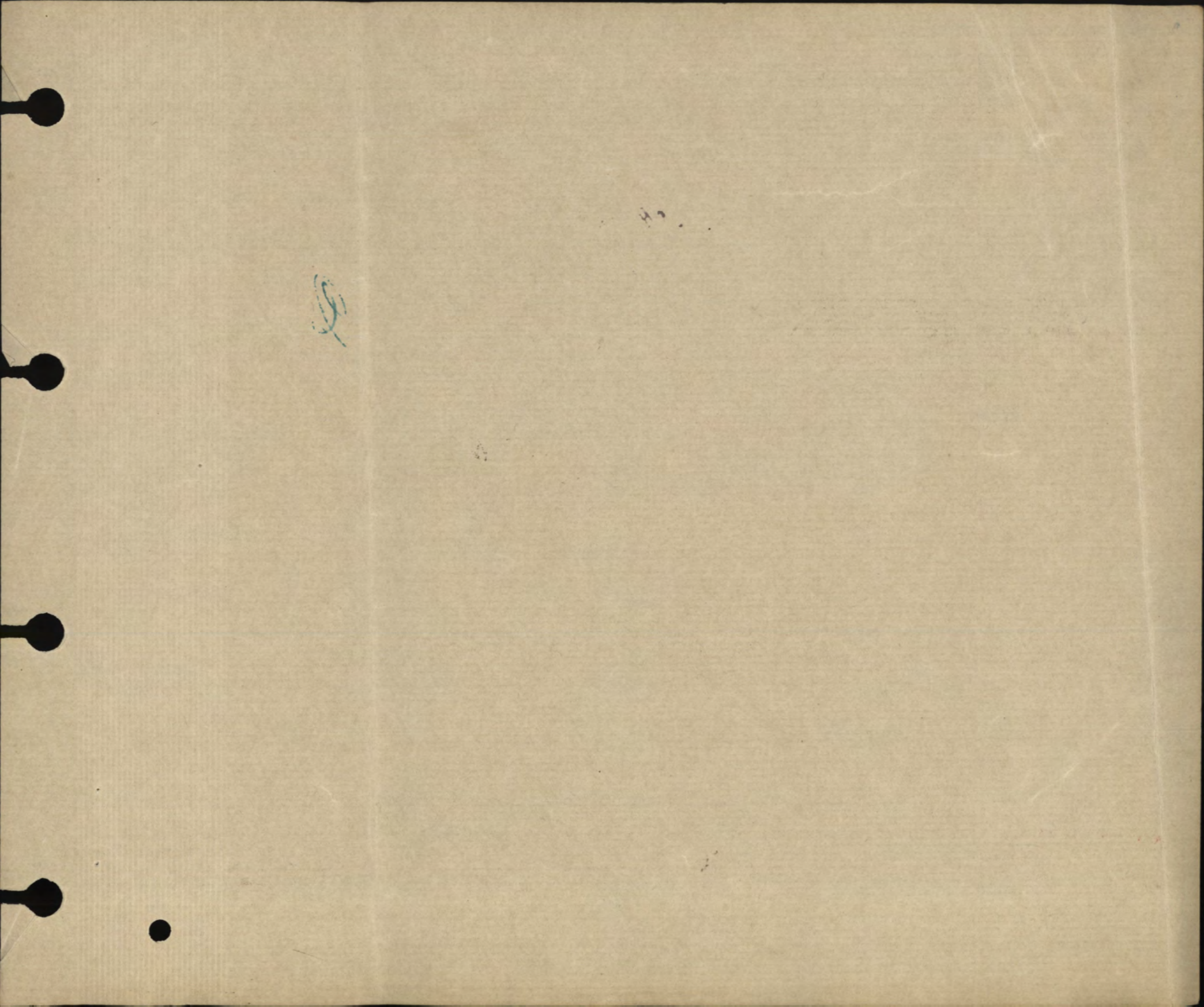
MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

Mr.
 To Whom *Barbara McLeod* By Whom Assigned *McLeod Louis*
 Address *Springhill to Frontenac* Regtl. No. *1054637*
PQ Rank *Plt*
 Corps *244th Bn*
 Rate *15.* APR 1 1917

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			
Feb.				
March				





ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2. *Mr Barbara McLeod*
(Assignee)

Name of Soldier *McLeod Louis*

PAYMENTS.

L. L. Job 5470—Req. 6888.

1054637, Plc: 244" Bm

APR 1 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>15.</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>U 6114</i>	<i>15.</i>	
May		<i>Y 10541</i>	<i>15.</i>	<i>15-45.</i>
June		<i>M 19226</i>	<i>15.</i>	<i>s</i>
July		<i>W 23500</i>	<i>15.</i>	<i>2 of 23500 Remailed 27-7-17 Gb.</i>
Aug.		<i>L 30793</i>	<i>15.</i>	<i>If July check returns remail to.</i>
Sept.		<i>J 38328</i>	<i>15.</i>	<i>03 Fibentube P.Q. 26-7-17 Gb.</i>
Oct.		<i>Q 43187</i>	<i>15.</i>	
Nov.		<i>L 50099</i>	<i>15.</i>	
Dec.		<i>W 59998</i>	<i>15.</i>	
Jan.	1918			<i>135⁰⁰ m.</i>
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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.				

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-	1.4.17	EFFECTIVE DATE:-	
AMOUNT:-	15 ⁰⁰	AMOUNT:-	
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.			
Mrs Barbara McLeod Mother Springhill Co. Frontenac Co. P.Q.			
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK			
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT

NAME:- M ^c LEOD L.		
NUMBER:- 1054637		
PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Plt
UNIT AND TRANSFERS		
ORIGINAL UNIT:- 244 th Bn.		
DATE ACCOUNT FIRST OPENED:- 1.4.17		
AUTHORITY	DATE EFFECTIVE	DATE LEGER SHEET T SP'D
	1-9-18	
		UNIT TRANSFERRED TO
		87 th Bn
		N.E.D
DAILY RATES OF PAY AND ALLOWANCES		
AUTHORITY	PAY	F.A.
	1 00	10
PAY BOOK CHECKED.		
Date 18.11.18		
By Justice		
N.E. BRANCH.		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
31.3.18	bal fwd								116 84		
April				Can A.P.				15	101 84		
	P.P.	33		AR 20 87 Bn - 3-4-18	3 57				98 27		
				470 - ... - 20/4/18	4 46				131 27		
May	P.P.	33			8 03			15	166 81		
		34 10		Can a Pay				15	160 91		
				AR 116 87 Bn 3/5/18	3 57				145 91		
				" 169 " 18/5/18	4 46				142 34		
		34 10			8 03			15	137 88		
June	P.P.	33		Can a.P.				15	155 89		
				AR 217 87 Bn 1-6-18	4 46				151 42		
				AR 265 - 17-6-18	4 46				146 96		
		33			8 92			15			
July	P.P.	34 10		Can a.P.				15	166 06		
				AR 312 87 Bn 1-7-18	3 57				162 49		
				AR 360 do 15-7-18	4 46				158 03		
		34 10			8 03			15			
Aug	P.P.	34 10		Can a.P.				15	177 13		
				AR 411 87 Bn 6-8-18	3 57				173 56		
				AR 452 11 th C.I.B 18-8-18	3 57				169 99		
		34 10			7 14			15			
SEP 18				AR 595 73 Bal to Ottawa	166 99				3 - 28/3/19 3 00		
					166 04						
June				10 th Bal trans Canada 28/19	3 00						
					3 00						

D of Warrants 21

18

NE STATE
C Bal 169 99
Supp Stat
3 - 28/3/19 3 00

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Apr-1/17

OVERSEAS CONTINGENTS

1119370

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>15</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *105-4637*

Rank *Rte* Promoted Reverted Discharge

Soldier's Name *Louis M^cLeod*

Battalion *244 Bn*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name *Mrs. Barbara M^cLeod*

Address *Springhill, P. Q.*

Change of Address

1

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec 31</i>		-	<i>135</i>	<i>135</i>	
<i>Jan 18</i>	<i>V 67958</i>		<i>15</i>	<i>15</i>	<i>A.P. account closed 30/9/18 Died of Wounds Aug 21/18 Auth C.L. 2nd Sept 1918 in File 3012477-L-12 <i>9/9/18</i></i>
<i>Feb 8</i>	<i>P. 76195</i>		<i>15</i>	<i>15</i>	
<i>Mar 11</i>	<i>M. 93560</i>		<i>15</i>	<i>15</i>	
<i>Apr 11</i>	<i>S. 2145</i>		<i>15</i>	<i>15</i>	
<i>May 11</i>	<i>P. 14389</i>		<i>15</i>	<i>15</i>	
<i>June 11</i>	<i>J. 26673</i>		<i>15</i>	<i>15</i>	
<i>July 11</i>	<i>L. 33443</i>		<i>15</i>	<i>15</i>	
<i>Aug 11</i>	<i>N. 36780</i>		<i>15</i>	<i>15</i>	
<i>Sept 11</i>	<i>Q. 49322</i>		<i>15</i>	<i>15</i>	
					<i>L.H. 10756</i>

M. F. W. 128
400M-6-17-1772-39-141
L. L. 22220-M. & D. 7493.



SYPHILIS CASE-SHEET.

Regtl. No. 1054637 Rank and Name *McLeod Pte L.* Corps *23rd Res*

Placed on Syphilis Register at *CANADIAN HOSPITAL,* on *1-5-17* No. in Register

Disease contracted at *Montreal* *ETCHINGHILL, LYMINGE.* Primary sore appeared on (date) *28-3-17*

CONDITION WHEN PLACED ON REGISTER.

Primary sore—character and site *Very markedly indurated chancre on glans dorsal, covered with scab*

Lymphatic glands *Inguinal glands +++ r. hard. Epirochlear ++ l*

Skin (nature and distribution of rash) *Negative*

Mucous membranes *Negative.*

Other symptoms

Examination of exudate from sore—Spirochaeta Pallida (present or absent)

Examination of blood serum—Method employed (original or modification)

Wassermann reaction (Result (positive or ~~negative~~) *+++*)

CANADIAN HOSPITAL,

Station *ETCHINGHILL, LYMINGE.*

Date *1-5-17* Signature of M.O.

B. R. Burgess
Capt C/MC

Struck off Syphilis Register at _____ on _____

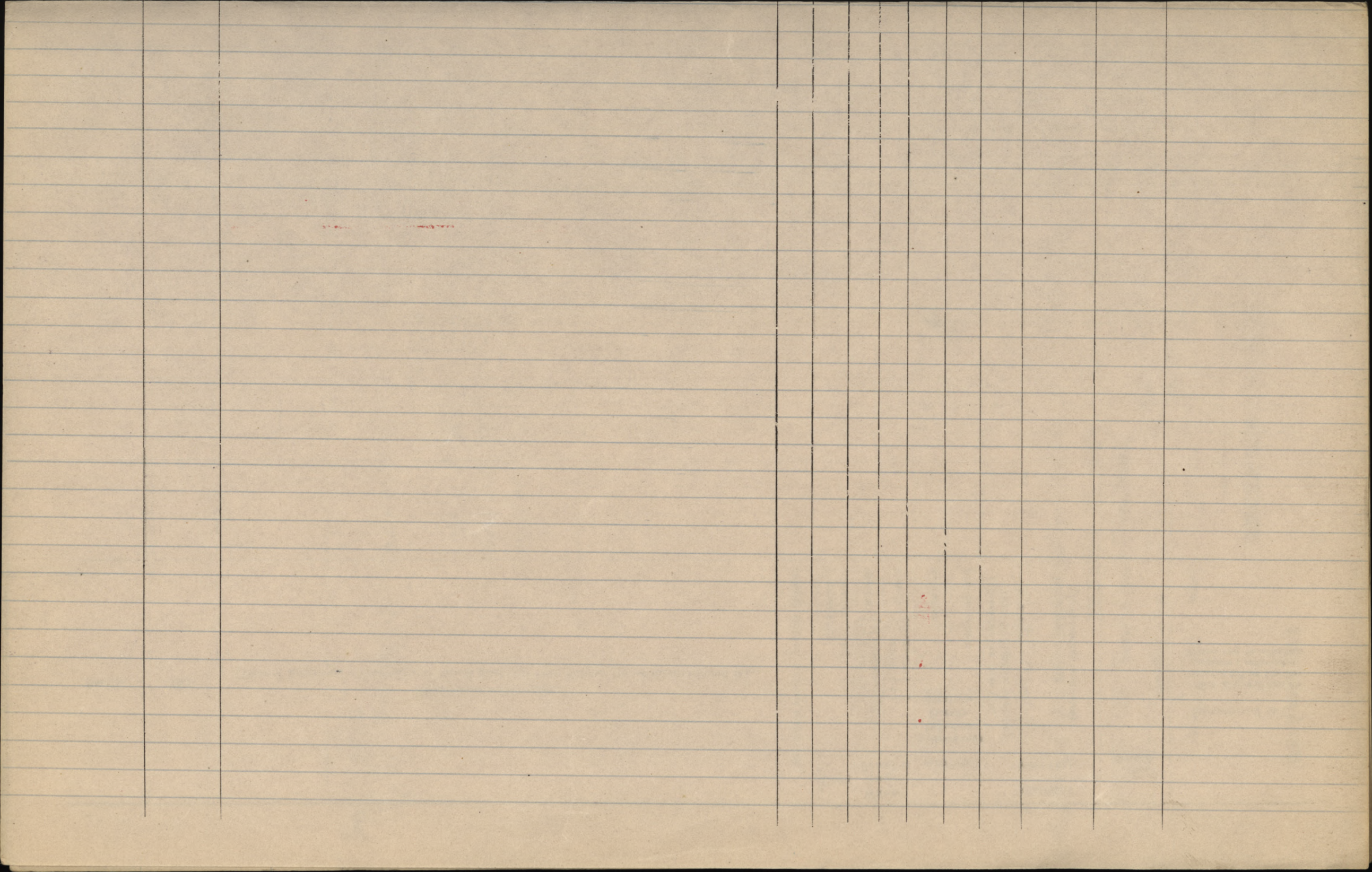
Cause of being struck off Register { (a) Recovered
(b) Transferred to Army Reserve
(c) Discharged from Army }

Station _____ Date _____ Signature of M.O. _____

N.B.—On completion of a course of treatment a red line to be drawn across the page, and the date when the next blood test is due to be entered in red ink below the line, e.g., "Blood test due 15.5.14."
 The date and result of the blood test to be entered; and if negative, the date on which the next blood test is due to be also entered.

Station	Date	Symptoms and progress (Date of admission to hospital, and date of discharge from hospital, to be entered in red ink.)	Weight clothed, without boots—lbs.	Urine		Wasser- mann Reaction		Treatment			Signature of M.O. (Each M.O. will sign his name in full on the first occasion; subsequent entries may be initialled.)
				Normal (N.) Albumen (Alb.)	Method (Original (O.) Modification (M.)	Result (Positive (+) Negative (-)	Arsenical	Mercurial		Other Methods	
CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE.	1-5-17	Admitted to Hospital									
		Full course treatment (W.F.O.)									
	9-5-17				N			.45 novarsen			B.R. August
	10-5-17								i.		
	14-5-17				N			.45 novarsen			
	17-5-17				N			.45 novarsen	i.		B.R.
	24-5-17								i.		
	30-5-17				N			.6 novarsen	i.		B.R.
	7-6-17				N			.75	i.		R. Brodeur Anderson
	28-6-17				N			.75	i.		J. R. B. A.
	5-7-17				N			.75	i.		J. R. B. A.
	9-7-17	Wasser mann									Negative

Novarsenolite



ORIGINAL MEDICAL HISTORY SHEET

ORIGINAL

Surname McLeod Christian Name Louis 1054637

Examined { on 4 day of Nov 1916
 at Quebec
 Birthplace { City or Town Spring Hill
 County Quebec

Approved by [Signature]
 Rank M.O.

Apparent age 19
 Trade or occupation Farmer
 Height 5 feet 6 Inches
 Weight 160 lbs.
 Chest measurement { Minimum 35 inches
 Maximum expansion 3 inches
 Physical development good
 Small-pox Marks none

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT

Vaccination Marks { Arm Right Left an
 Number 1
 When Vaccinated last Childhood
 (a) Marks indicating congenital peculiarities or previous disease measles

Date	Result	VACCINATIONS
18/1/17	Neg	Rowe & Co. Captains
7/2/17	Pos	

(b) Slight defects but not sufficient to cause rejection none

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
17/1/16		Rowe & Co.
27/1/16		
8/2/16		
9/9/17		

Enlisted on 16th day of November 1916 at Quebec P.Q.

	CORPS	REG'L NUMBER	HABITS	DATE
Joined on enlistment		1054637		
Transferred to	23rd BATTALION G. E. F.			
	23rd RESERVE BATTN C.E.F.			
	<u>87th Bn</u>			

244th OVERSEAS BATTALION, C.E.F.

SEP 26 1917

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Montreal</u>	<u>6-12-16</u>	<u>fit</u>	<u>passed board H. Aubrey</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.

J.M.C.

Surname *McLeod* Christian Name *Louis*

STATION	Date of Arrival at the Station	DATES OF						DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
<i>Montreal, P.Q.</i>	<i>M.G.H.</i>	<i>14</i>	<i>Feb</i>	<i>17</i>	<i>15</i>	<i>2</i>	<i>17</i>	<i>Cellulitis ankle</i>	<i>1</i>	<i>To Comm home</i>	<i>McLeod</i>
<i>Khartoum</i>	<i>Benar Home</i>	<i>15</i>	<i>2</i>	<i>17</i>	<i>10</i>	<i>3</i>	<i>17</i>	<i>Do Do</i>	<i>24</i>	<i>til.</i>	<i>McLeod Capt</i>
<i>CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE.</i>		<i>1</i>	<i>5</i>	<i>17</i>	<i>30</i>	<i>5</i>	<i>17</i>	<i>Syphilis</i>	<i>30</i>	<i>Dischd as Out Patient</i>	<i>McLeod Capt. C.A.M.C.</i>

Duplicate Medical History Sheet posted to here. *7-3*