

2nd. DEPOT BATTALION,
Eastern Ontario Regiment.

5 M. D. Depot Battalion Regiment

Regtl. No. 4025024

3320024

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 1)

DUPLICATE

1. Surname Normand
2. Christian name Emile
3. Present address 32 Garneau St Hull Que.
4. Military Service Act letter and number 254119 SC
5. Date of birth April 28th 1896
6. Place of birth Hull Que.
(town, township or county and country)
7. Married, widower or single Single
8. Religion R.C.
9. Trade or calling Barber
10. Name of next-of-kin Joseph Normand
11. Relationship of next-of-kin Father
12. Address of next-of-kin 32 Garneau St Hull Que.
13. Whether at present a member of the Active Militia Nil.
14. Particulars of previous military or naval service, if any No.
15. Medical Examination under Military Service Act:—
(a) Place Hull Que (b) Date 15th. Oct. (c) Category A 11

DECLARATION OF RECRUIT

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

Emile Normand

(Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 21 yrs. 6 mths.
 Height 5 ft. 4 1/2 ins.
 Chest measurement } fully expanded 34 ins.
 } range of expansion 4 1/2 ins.
 Complexion Medium
 Eyes Gray
 Hair Fair

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

Nil.

T. S. Powers Lt Col

O. C. 2nd. DEPOT BATTALION Depot, Btlh.
Eastern Ontario Regiment Regt.

OTTAWA

Place Date JAN 8 1918

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT 1917

(Class)

UNCLASSIFIED

REGIMENTAL NUMBER

1. Name

2. Regimental number

3. Age

4. Military service Act letter and number

5. Place of birth

6. Place of birth

7. Native or foreign born

8. Religion

9. Trade or calling

10. Name of next of kin

11. Relationship of next of kin

12. Address of next of kin

13. If under 17 years of age, name of the parent or guardian

14. Particulars of previous military or naval service, if any

15. Medical examination under Military Service Act

16. Place of residence

DECLARATION OF RECRUIT

I, the undersigned, being the parent or guardian of the above mentioned recruit, do hereby declare that the particulars given by me are true and correct.

Signature of parent or guardian

DESCRIPTION ON CALLING UP

1. Name

2. Height

3. Weight

4. Complexion

5. Eyes

6. Hair

7. Particulars of previous military or naval service, if any

8. Particulars of previous medical examinations, if any

9. Particulars of previous diseases, if any

10. Particulars of previous injuries, if any

11. Particulars of previous operations, if any

12. Particulars of previous wounds, if any

13. Particulars of previous illnesses, if any

14. Particulars of previous accidents, if any

15. Particulars of previous losses, if any

16. Particulars of previous disabilities, if any

17. Particulars of previous convictions, if any

18. Particulars of previous offences, if any

19. Particulars of previous punishments, if any

20. Particulars of previous awards, if any

21. Particulars of previous decorations, if any

22. Particulars of previous medals, if any

23. Particulars of previous honours, if any

24. Particulars of previous titles, if any

25. Particulars of previous ranks, if any

26. Particulars of previous commissions, if any

27. Particulars of previous appointments, if any

28. Particulars of previous promotions, if any

29. Particulars of previous transfers, if any

30. Particulars of previous discharges, if any

31. Particulars of previous re-entries, if any

32. Particulars of previous re-commissions, if any

33. Particulars of previous re-appointments, if any

34. Particulars of previous re-promotions, if any

35. Particulars of previous re-transfers, if any

36. Particulars of previous re-discharges, if any

37. Particulars of previous re-entries, if any

38. Particulars of previous re-commissions, if any

39. Particulars of previous re-appointments, if any

40. Particulars of previous re-promotions, if any

41. Particulars of previous re-transfers, if any

42. Particulars of previous re-discharges, if any

43. Particulars of previous re-entries, if any

44. Particulars of previous re-commissions, if any

45. Particulars of previous re-appointments, if any

46. Particulars of previous re-promotions, if any

47. Particulars of previous re-transfers, if any

48. Particulars of previous re-discharges, if any

49. Particulars of previous re-entries, if any

50. Particulars of previous re-commissions, if any

51. Particulars of previous re-appointments, if any

52. Particulars of previous re-promotions, if any

53. Particulars of previous re-transfers, if any

54. Particulars of previous re-discharges, if any

55. Particulars of previous re-entries, if any

56. Particulars of previous re-commissions, if any

57. Particulars of previous re-appointments, if any

58. Particulars of previous re-promotions, if any

59. Particulars of previous re-transfers, if any

60. Particulars of previous re-discharges, if any

1918

OTTAWA

1918

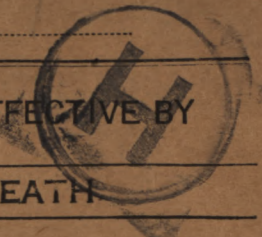
REGIMENTAL DOCUMENTS

NAME *Normand Emile*

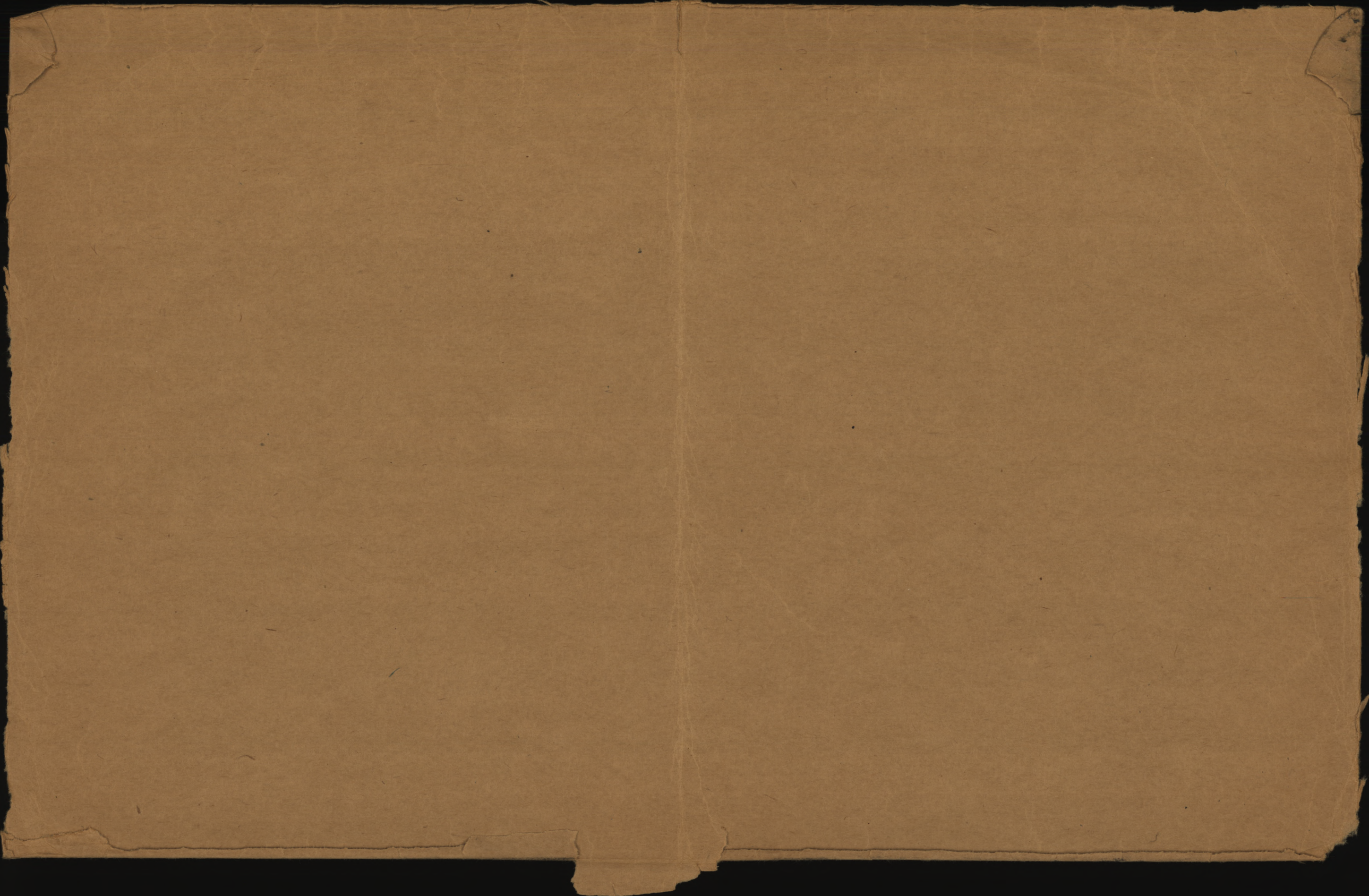
REGT. NO. *3320024* UNIT

H. Q. FILE NO.

S	CONTENTS	DATE RECEIVED	M	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)	<i>28</i>					DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		Category				
	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)				DISCHARGE		
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				Category		
	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)					DESERTION	
	LAST PAY CERTIFICATE (M.F.W. 44)				<i>.08086</i>	<i>33-27</i>	
	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					<i>19-27</i>	
	PARTICULARS OF CHARACTER (A.F.W. 3226)					<i>11-27</i>	
	COPIES OF PARACHUTE DISCHARGE CERTIFICATE (M.F.W. 39A)						
	<i>9 copies</i>						
	<i>1 copy</i>						



*W. 2505
100-11-19
1772-39-1377*



3320024

NORMAND

EMILE

I.D. number
No. d'identification

Surname
Nom de famille

Given names
Prénoms

OPEN

d.o.w. 28/09/18

PERSONNEL RECORDS CENTRE

**CENTRE DES DOCUMENTS DU
PERSONNEL**

A.T.I.A.

Location
Lieu

7363



649-N-4530

✓
NORMAND, Emile, Pte. 3320024. 2nd. Depot. Batt. ✓

38th Bn

Medals & Dec. (Father)

not elig. for star.

Joseph Normand, Esq.,
32 Garneau St.,
Hull,
Que.

Scroll Desp. DEC 24 1920 Reqn. No. 76317

MAY 20 1922

Plaque Desp. Reqn. No. p38334

P & S.

(Father)

Joseph Normand, Esq.,

Address as above.

Serial No 763033

Memorial Cross (Mother)

Mrs. Geneveive Normand,

Address as above.

m.f.

Desp.

SEP 30 1920

(m)C 25119. d
25533

M

391

649-7-45-30

CARD NO. *X*

SURNAME. *Normand*

CHRISTIAN NAMES *Emile*

FOLL.

REGL. NO. *3320024* RANK *Pte*

UNIT *East Ont Regt. 2nd Depo Bn. (1st)*

FORMER CORPS *Nil*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Normand, Joseph*

RELATIONSHIP TO SOLDIER *Father*

ADDRESS *32 Garneau St. Hull P.Q.*

COUNTRY OF BIRTH *Canada. Hull, P.Q.*

DATE *Apr. 28th. 1896*

PLACE OF ATTESTATION *Ottawa, Ont.*

DATE *Jan. 8th. 1918.*

From Halifax per Lt Lapland 11/2/18

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Barber

RELIGION

Roman Catholic.

DESCRIPTION.

APPARENT AGE

21

YEARS

6

MONTHS

HEIGHT

5

FEET

4½

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

4½

INCHES

COMPLEXION

Medium

EYES

Grey

HAIR

Fair

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

Hull, P. Q.

DATE

Oct. 15th 1917.

Present Address. 32 Garneau St. Hull, P. Q.

REGT'L. No. 3320024

H. Q. FILE NO 649

NAME Normand, Emile

RANK AND CORPS Pte 38th Bn form

FOLLOWS No. OP 2nd Op
FOLLOWS

CABLE

NATURE OF CASUALTY

NO. DATE

0598, 5-10-18

Dof wds #22. C.C.S. Sept 28th 1918.

012.0335⁶⁵ 8-10-18

Gen R Leg Slip.

N.K.

Normand, Joseph, Father
32. Garneau St Hull. P.Q.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS



EM

~~B~~
~~V~~

Number 3320024 Rank Pte

Surname NORMAND

Christian Name Emile

Units 38 Bn Canadian Inf Theatre of War France

Date of Service 10/6/18

Remarks

Latest Address Joseph Normand Esq (M)
32 Garneau St.
Hull P.Q.

Roll No 10
Page 8114

DESP OCT 29 1921
REGN. NO. *YD65898*

M. F. B. 465
100m.-1-16
1772-39-950

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

SPECIAL

DIVISION

NAME OF SOLDIER *James Robert John Maxwell*

REGIMENT *146 Bde* RANK

No. *835203*



DATE	No.	FILLINGS				Extracted	Anesthetic	Treated	Crowns	Cleaned	As 2's	Pulp Removed	Put Pulp	Artificial Teeth	OPERATOR	REMARKS
		Amal.	Phosp.	G. Per.	Cement											

REGISTERED.
WILLS-SECTION
-8 MAY 1918
ESTABLISHED IN FC, LONDON.

31168

SPECIAL

198738

Number+.....3320024.....

Rank.....Private.....

Name.....Normand. G.

Unit.6th.Canadian.ReserveBattalion.

319

Surname

Christian Name or Names

Reg. No.

Hormans
Rank

E.
Unit

3320024

Pl.

E. Out. (38)

Cas. List.

22 basal sh 28. 9. 18.

3. 10. 18 0335/

Sw Hip & leg

Died of wounds 29. 9. 18.

*A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London*

Perforated sheet for Will from Pay Book of Reg.

No. 3320024Name Emile NormandUnit 6th Canadian Reserve Batt.

EOR

Military Will

Seaford.
Eng.

In the event of my death
I give everything I might
have, & as jewels, money
coming from pay book,
pocket money etc. etc. to
Pte. Ernest Labrie

3320018

6th Can. Reser. Batt.Signature Emile NormandRank and Regt. Pte. 6th Can. Reser. Batt.Date 2 April 1918

TURN OVER

First Witness. *Pt. Ph. Tremblay*
#3320036, 6th Reserve Batt
Scaford Eng.

2nd Witness. *Pt. W. Turpin* 3320208
6th Canadian Reserve
Scaford Sussex
England

2/4/18

FORM OF WILL

I, Emile Normand (Name in full)

Regimental Number 3320024 ~~4025074~~ serving in 2nd Depot Bn. E.O.R.

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

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

absolutely, and my personal estate I bequeath to

M^r J Normand (Father)
32 Garneau St.
Hull P.Q. 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 4 day of January A.D. 191 5

Emile Normand 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 [Signature]

Address of Witness 2nd. DEPOT BATTALION, OTTAWA
Eastern Ontario Regiment.

THE TWO WITNESSES

Occupation of Witness Soldier C.E.F.

MUST SIGN HERE

Signature of Second Witness [Signature]

Address of Witness 2nd. DEPOT BATTALION, OTTAWA
Eastern Ontario Regiment.

Occupation of Witness Soldier C.E.F.

MEDICAL HISTORY SHEET. 26

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Normand Christian name Emile
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule.....
3. Consecutive number on schedule of men reporting for service (if he appears on it).....
4. Address (including street and number, if any)..... 32 Garneau St Hull, Que.

ORIGINAL

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 15th day of Oct. 1917, by the undersigned medical board sitting at Hull, Que.

5. Age as stated 21 Years 6 Months. 6. Apparent age..... Years..... Months

7. Height 5 Feet 4 1/2 Inches. 8. Weight 140 Pounds.

9. Chest measurement { Minimum 29 1/2 Ins. Maximum 34 Ins. 10. Complexion Medium { Eyes Gray Hair Fair

11. Physical development Good { Good Fair Poor 12. Smallpox marks.....

13. Number of vaccination marks { Right arm..... Left arm I 14. When vaccinated last 1901

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

16. Slight defects but not sufficient to cause rejection.....

The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis (Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category AI1 R.D 20 L.D 30

R. H. Parent President. E. S. Aubry Member. H. H. Schomburgk Member.

Signature of Man Emile Normand

Old to schedule by W.C.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>16-1-18</u>		<u>W. Shullings M.O.</u>	<u>16-1-18</u>		<u>W. Shullings M.O.</u>
		<u>M.O.</u>	<u>2-2-18</u>		<u>W. Shullings M.O.</u>
		<u>M.O.</u>	<u>4-2-18</u>		<u>W. Shullings M.O.</u>

Joined 3rd day of January 1918 at Ottawa

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>2nd Depot Bn. E.O.R</u>	<u>4025024</u>		<u>3.1.18</u>
Transferred to.....	<u>6th Res</u> <u>38th Bn</u>	<u>3320024</u>		<u>FEB 26 1918</u> <u>10/6/18</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

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

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

500M.—9-16

H. Q. 1772-39-920.

Casualty Form Active Service.

3320024

Unit, Regiment or Corps

1010th Eastern Ontario Regiment

106 Res Bn

Regimental No. 4025074

Rank Pte

Name Normand Emile

C. E. F.

Enlisted (a) 8.1.18

Terms of Service (a)

Service reckons from (a) 8.1.18

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) Barber

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				

26-2-18. O.C. 6th Res. T.O.S. 6th Res. Batt. Embarked Canada 12-2-18.
Disembarked England. 25-2-18. H.M.S. Lapland.
Seaford. 25-2-18. Pt-11-B.O. 48³

11 JUN 1918

6TH CAN. RES. BN.

DRAFTED 38th Bn
TRANSFERRED TO

SEAFORD, 10 JUN 1918 PART II No. 137

C. D. Danfield
OFFICER in CHARGE 6TH CAN. RES. BN

12 JUN 18

C.B.D.

TAKEN on STRENGTH 38th

12 JUN 18

2055-

18 JUN 18

17 JUN 18

»

Left for Unit

FIELD

17 JUN 18

L-1275

18 JUN 18

Unit

Joined Unit

FIELD

18 JUN 18

2920

-6 AOU 18

»

Left for Unit

FIELD

-6 AOU 18

21345

17 AOU 18

Unit

Joined Unit

FIELD

13.8.18 B203.

28.9.18

22 C.C.B.

owhip regt.

adm.

28.9.18 236/9957 K 4232.

died of wounds 22 C.C.B.

28.9.18 20.96 2.10.18.

(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., also special qualifications in technical Corps duties.

Can. Rec. 30 Sch. 11.2

Perforated sheet for Will from Pay Book of

Reg. No. 3320024

Name Emile Normand

Unit 6th Canadian Reserve Batt
E O R Seafood
MILITARY WILL. Eng.

RECORDS REGISTRY O.M.F. OF C.	
OLD PAINT HOUSE, LONDON, E.C. 4.	
REF-10	R2 B2
30 OCT. 1918	
%	L.P.
FILE CHARGED TO	SINCE
ACTED ON	

In the event of my death
I give everything I might
have, h as Jewels, money
coming from pay book,
pocket moey, etc. etc, to
Pte. Ernest Labrie

3320018

6th Can. Reser Batt.

Signature Emile Normand,
Can
Rank and Regt Pte. 6th Reser. Batt.

Date 2 April 1918. Turn Over.

I hereby certify the above to be a true copy of the original Will
now on file in Estates Branch.

Date 25 Oct. 1918.

[Signature]
Lieut.
for OFFICER I/C ESTATES,
OVERSEAS MILITARY FORCES OF CANADA.

NOTE Extracted from Pay Book Page 20

Holograph

Died of Wounds, 28-9-18.

25-N-726

Transferred 18-10-18.

McG.

Private E. Normand, 3320024, 38th Bn.

31168

REGISTERED.
WILLS-SECTION
28 OCT 1918
EST.

First Witness, Pte. P. H. Tremblay
Can

// 3320036, 6th Reserve Batt
Seaford Eng.

2nd Witness, Pte. W. Turpin 3320208
6th Canadian Reserve
Seaford Sussex
England

2/4/18

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT

Platoon # 2

NAME OF SOLDIER

Normand, E

REGIMENT

8-O-R

RANK

Pte

No. *4025094*

3320024

3320024



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.

Condition on first Examination	Date	Amalgam Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhea	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
											U	L	P			Gold	Porcelain				
	<i>1918</i>																				
	<i>Jan 4.</i>									<i>7.15.19.90</i> <i>24.80.21</i> <i>73</i>									<i>Examined by</i> <i>Capt. R. Gaman</i>		<i>1 Pt. Lower</i>
	<i>Jan 4.</i>																		<i>R. Gaman.</i>		

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on

Diagram as follows:

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.

2. Condition on leaving Canada.

3. Condition on discharge.

RECORD OF THE PATIENT'S MOUTH

MADE IN CANADA

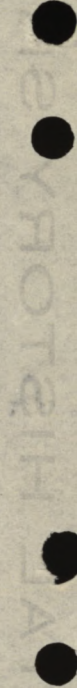
NAME OF PATIENT
AGE
SEX
DATE OF EXAMINATION
DATE OF DISCHARGE
DATE OF RE-ENTRY
PLACE OF BIRTH
PLACE OF RESIDENCE
PLACE OF DEPARTURE
PLACE OF ARRIVAL
PLACE OF DISCHARGE
PLACE OF RE-ENTRY
PLACE OF ARRIVAL
PLACE OF DISCHARGE

1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

DEPARTMENT OF HEALTH AND WELFARE

DEPARTMENT OF HEALTH AND WELFARE



NoI Drft 2nd Depot Bn E O R To 6th Res Bn

TLH Rank Name **NORMAND, Emile,** Reg'l No. 3320024
 Unit If in perm. Corps, }
 What Unit? } Married or Single **Single**
 Place and Date of Enlistment **Ottawa, Jan. 8th. 1918** Place of Birth **Hull, Que**
 Name and Address, Next-of-Kin **Joseph Normand,**
32 Garneau St., Hull, Que Relationship **Father**

*m.x.
2/19/20m f.*

Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. **7848.**
 File No. **25-N-928.**
 Category **D75.**

Discharge, Date and Place Reason Character
 H. W. & V., Ltd.,-9546-16.

| Report. | | Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. | Rank | Place. | Date. | REMARKS
Taken from Official Documents. |
|----------------|---------------------|--|----------------|----------------|----------------|---|
| Date. | From whom received. | | | | | |
| C | | | | | | |
| | | Arrived in England | 30th Bn | | 24-2-18 | S/S LAPLAND |
| 26-2-18 | 6th Res Bn | S.O.S from Canada | Pvt | Seaford | 25 Feb | Prod 48 |
| 11-6-18 | 6th Res Bn. | Posted to 38th Bn spear | Pvt | " | 10-6-18 | " 137 38th Bn. Prod 50 |
| 3-10-18 | EOR | Died of Wounds | " | Field | 28-9-18 | CLA. 335 S.W. Trip V.R leg. |
| 2-1-18 | 38th Bn. | Died of Wounds. | " | " | 28-9-18 | Prod 96. |

Date of Enlistment

Autho. N.R.

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

N 2270

Feb 1-18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

| | | | |
|--|--|--|--|
| | | | |
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RATE OF ASSIGNMENT

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

No. *3320024*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *Emile Normand*
 Battalion *2-8pt 15th. I.O.R. 1-8pt*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Jos Normand*
 Address *32 Garneau St. Hull. Que.*
 Change of Address
 1 JOS. NORMAND,
 32 GARNEAU ST.,
 HULL, QUE. 15 15.00
 2 % 3320024 PTE EMILE NORMAND.
 3 FIFTEEN DOLLARS
 4

| Date | Cheque No. | Amount S/A | Amount A/P | Total | REMARKS |
|-----------------|----------------|------------|------------|------------|----------|
| <i>Feb 1918</i> | <i>C 77119</i> | | <i>15</i> | <i>15</i> | <i>X</i> |
| <i>Mar</i> | <i>P 91059</i> | | <i>15</i> | <i>15</i> | |
| <i>Apr</i> | <i>O 11801</i> | | <i>15</i> | <i>15</i> | <i>✓</i> |
| <i>May</i> | <i>R 22557</i> | | <i>15</i> | <i>15</i> | <i>✓</i> |
| <i>June</i> | <i>U 26450</i> | | <i>15</i> | <i>15</i> | <i>✓</i> |
| <i>July</i> | <i>G 29357</i> | | <i>15</i> | <i>15</i> | <i>✓</i> |
| <i>Aug</i> | <i>R 37774</i> | | <i>15</i> | <i>15</i> | <i>✓</i> |
| <i>Sept</i> | <i>U 47846</i> | | <i>15</i> | <i>15</i> | <i>✓</i> |
| <i>Oct</i> | <i>G 48681</i> | | <i>15</i> | <i>15</i> | <i>✓</i> |
| | | | <i>135</i> | <i>135</i> | |

S.E. Stevens 20/1/18

KILLED IN ACTION }
 DIED OF WOUNDS } DATE *28-9-18*
 C. L. NO. *925 folio 6* DATE *8-10-18*
 M.R.O. *42945* TO DESTROY PENDING *11-10-18*
 B. P. C. FORM 1 & C F X. COMPLETED ON FILE
13703-6-17
 CLERK *comitchell* DATE *11-10-18*

Closed 31-10-18

*Refused Request for Opmt "15"
 for month Oct 1918. 29/1/19
 Br # 572 for recovery of "15"
 refused, - 10/9/18*

