

Fourth M. D. First Depot Battalion First Quebec Regiment

Regtl. No. 4030103

D. F. S. PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class.....)

1. Surname OWENS
2. Christian name John
3. Present address No. 79 Desmorteau Street, Montreal. Que
4. Military Service Act letter and number Not Registered.
5. Date of birth 1885. March 3rd.
6. Place of birth (town, township or county and country) MOSSEND. LANARKSHIRE. SCOTLAND.
7. Married, widower or single Single.
8. Religion Roman Catholic.
9. Trade or calling Munition Worker.
10. Name of next-of-kin Mrs Mary Ann Rafferty.
11. Relationship of next-of-kin Sister.
12. Address of next-of-kin 79 Desmorteau Street, Montreal Canada.
13. Whether at present a member of the Active Militia No.
14. Particulars of previous military or naval service, if any No. 96
15. Medical Examination under Military Service Act:—
(a) Place Montreal Canada (b) Date 11th November 1917 Category A 1/11

DECLARATION OF RECRUIT

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

John Owens (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 32 yrs. 11 mths.
Height 5 ft. 6 ins.
Chest measurement } fully expanded 35 ins.
range of expansion 3 ins.
Complexion Fair
Eyes Blue
Hair Black.
Distinctive marks, and marks indicating congenital peculiarities or previous disease.
R.V. 30
L.V. 30
R.E. O.K.
L.E. O.K.

M. A. Piche Lieut Col.
O. C. First Depot Bthn.
First Quebec. Regt.

Place Montreal Canada. Date 11th November 1917.

PARTICULARS OF RECRUIT

PREPARED UNDER MILITARY SERVICE ACT, 1917

Class

1. Name	
2. Christian name	
3. The last address	
4. Military service number and number of	
5. Term of birth	
6. Place of birth	
7. Marital status	
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. Whether at present a member of the Armed Forces	
14. Particulars of any other military service	
15. Date of discharge from last military service	

DECLARATION OF RECRUIT

I, the undersigned, being the person named in the above particulars, declare that the facts therein stated are true and correct.

Signed: \_\_\_\_\_

Witness: \_\_\_\_\_

DESCRIPTION ON CALLING UP

Height	
Weight	
Complexion	
Build	
Stature	
Complexion	
Build	
Stature	
Complexion	
Build	
Stature	

Prepared by \_\_\_\_\_

Date: \_\_\_\_\_

Page No. \_\_\_\_\_

M. S. No. \_\_\_\_\_

M. S. No. \_\_\_\_\_

INCOMPLETE

OWENS JOHN

4030103

1ST DEPOT BN. 1ST QUE.R.

07820

C.E.F. REGIMENTAL DOCUMENTS  
WAR SERVICE RECORDS D.V.A.



28

H

RECEIVED  
JAN 10 1898

SURNAME.

*Owens*

CARD No.

*X*

CHRISTIAN NAMES

*John*

REGL. No.

*4030103*

RANK

*Pf.*

UNIT

*1<sup>st</sup> Que. Regt. 1<sup>st</sup> Depo. Bn.*

FORMER CORPS

*Inf.*

FOLL.

NEXT OF KIN.

NAMES IN FULL

*Rafferty, Mrs. Mary Ann*

RELATIONSHIP TO SOLDIER

*Sister*

ADDRESS

*79 Lemarteaux St., Montreal  
P. Q.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

*Scotland, Mossend, Lanark*

DATE

*Mar. 3<sup>rd</sup> 1885*

PLACE OF ATTESTATION

*Montreal, P. Q.*

DATE

*Nov. 11<sup>th</sup> 1917*

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Munition

RELIGION

Roman Catholic

Worker

DESCRIPTION.

APPARENT AGE

32

YEARS

11

MONTHS

HEIGHT

5-

FEET

6

INCHES

CHEST MEASUREMENT

35-

INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Black

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

Montreal, P.Q.

DATE

Nov 11<sup>th</sup> 1917

Present Address

79 Lemarteaux St., Montreal  
P.Q.

✓ ✓ ✓ ✓ ✓ *Que. Regt*  
OWENS, John. (Pte) #4030103, 1st D. Bn. 649-0-2776.

MEDALS & DECORATIONS. (Sister) Mrs. Mary A. Rafferty,  
4502 Notre Dame E.,  
Montreal, P.Q.

PLAQUES & SCROLLS. (Sister) Mrs. Mary A. Rafferty,  
Address as above.

*(Ser. #808216)*

MEMORIAL CROSS. ( N I L. )

*Canada only*

MAY 7 - 1921  
Scroll Desp. \_\_\_\_\_ Reqn. No. 2-41883

Plaque Desp. 18722 Reqn. No. 042873

*#4*  
52297

*ac*





N. B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a \* Board of Officers

assembled at Guy Street Barracks, Montreal, P.Q.

on the 16th day of February, 1918.,

by order of Lt.-Col., M.A.Piche, C.O. 1st Depot Bn.  
1st Quebec Regiment.

for the purpose of collecting and recording evidence

relating to the illness of No. 4030103 Pte. Owens,

J. 1st Depot Bn. 1st Quebec Regiment.

PRESIDENT.

Capt. L. S. Yuill  
1st Depot Bn. 1st Quebec Regiment.

MEMBERS.

Lieut. W. H. Harrison  
1st Depot Bn. 1st Quebec Regiment.

Lieut. R. Hampson  
1st Depot Bn. 1st Quebec Regiment.

The Board of Officers having assembled pursuant to order, proceed to take evidence from the following witnesses;

First Witness No. 2075596 Sergeant Biggs, C.H. "C" Coy.  
1st Depot Bn. 1st Quebec Regiment.

Second Witness Captain A. E. Vipond, Medical Officer  
1st Depot Bn. 1st Quebec Regiment.

Third Witness Captain R. E. Powell, A.M.C.  
Montreal General Hospital.



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Third block of faint, illegible text, possibly a section header or a specific entry.

Fourth block of faint, illegible text, continuing the list or entries.

Fifth block of faint, illegible text, possibly a concluding paragraph or note.

Sixth block of faint, illegible text, possibly a signature or date.

Seventh block of faint, illegible text, possibly a final note or reference.

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First Witness.

No. 2075596 Sgt. Biggs, C.H. 1st Depot Bn. 1st Quebec Regiment being duly sworn gives evidence as follows;

I was Company Orderly Sergeant on Thursday February 7th, 1918, when No. 4030103 Pte. Owens, J. reported sick to me at 2.30 P.M. I detailed Corpl. Findlay to take him to the Medical Officer at once. He had been on the morning parade.

*C.H. Biggs*

Sgt.  
1st Depot Bn. 1st Quebec Regiment.

Second Witness

Captain A. E. Vipond, M.O. 1st Depot Bn. 1st Quebec Regiment, being duly sworn gives evidence as follows;

No. 4030103 Pte. Owens, J. was paraded sick before me at 2.30 P.M. on Thursday February 7th, 1918. I found that his temperature was 102, pulse 132 and respirations 32. I diagnosed his case as ~~bronchial~~ pneumonia and ordered him to be sent to the hospital immediately.

*A.E. Vipond* Captn.

M.O. 1st Depot Bn. 1st Quebec Regiment.

Third Witness

Captain R. E. Powell, A.M.C. on duty at Montreal General Hospital, Montreal, being duly sworn gives evidence as follows;

- (1) No. 4030103 Pte. Owens, J. 1st Depot Bn. 1st Quebec Regiment, was admitted to this hospital on the 7th instant suffering from a bronchial pneumonia.
- (2) The Medical Officers feel that this condition is an acute tuberculous infection although the origin has not been proven.
- (3) He is seriously ill.
- (4) His disability at present cannot be given.

*R.E. Powell*

Capt. A.M.C.  
Montreal General Hospital

Finding

The Board having duly considered the foregoing evidence, finds that Pte. Owens, J. contracted illness whilst on duty; that his disease resulted from natural causes and that in consequence there was no fault or negligence on his part.

President

*J.L. Gaud* Capt.  
1st Depot Bn. 1st Quebec Regiment.

Members

*S.H. Hauser* Lieut.  
1st Depot Bn. 1st Quebec Regiment.

*R. Hampson* Lieut.  
1st Depot Bn. 1st Quebec Regiment.

A.A.G. FORWARDED AND CONCURRED IN

*H.A. Piche*

Lieut-Col.  
16/2/18 Commanding, 1st Depot Bn. 1st Quebec Regiment.



\* N.B.—This Form being applicable to any Board of Officers or Committee or Court of Inquiry, this blank to be filled in accordingly.

The signature of each Officer composing the Board, &c., should be attached to the end of the proceedings.

PROCEEDINGS of a \* Standing Medical Board.

assembled at THE MONTREAL GENERAL HOSPITAL.

on the 18th day of February 1918.

by order of The O. C. M.D. #4.

for the purpose of the Late examining #4030103 Pte. John Owens,

1st Depot Battalion, 1st Que. Regt.

in accordance with Para #617 P.&A. Rgls. 1914.

PRESIDENT.

Major W.H.P. Hill, A.M.C.

MEMBERS.

Capt. R.E. Powell, A.M.C.

The Board having assembled pursuant to order, proceed to examine the Late #4030103 Pte. John Owens, 1st Depot Battalion, 1st Quebec Regiment, and find:-

1. He was admitted to Hospital suffering from acute Pneumonia which was looked upon as being Tuberculous origin.
2. He grew rapidly worse and died at 5.45 a.m. the 18th day of February 1918.
3. Autopsy showed: Acute Pneumonic Phthisis of the left upper lobe and Lobar Pneumonia of the right upper and middle lobes.
4. Cause of death being acute Toxaemia both from the pneumonia phthisis and lobar pneumonia

Dated at Montreal, P.Q.  
February 18th 1918.

M. F. B. 303.

100m.—4-16.  
H. Q. 1772—39—153.

*W. H. P. Hill*  
*R. E. Powell*

Major, Pres.

Capt.





INSTRUCTIONS

1. On receipt of the specimen, the analyst should be instructed to

perform the test as follows:

2. On first use of each reagent, or when it is made up, it should

only be used in the presence of the analyst as follows:

3. Control on commission as test

4. Control on the day of analysis

5. Control on the day of analysis

NAME

ADDRESS

DATE

LABORATORY NO.

1950

DEPARTMENT OF HEALTH AND WELFARE

DEPARTMENT OF HEALTH AND WELFARE



MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

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 Owens Christian name John.

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) ... Hq Desmarteau St Montreal.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 8th day of Nov 1917, by the undersigned medical board sitting at Blue Hill Camp Montreal.

5. Age as stated 33 Years Months. 6. Apparent age Years Months.

7. Height 5 Feet 6 Inches. 8. Weight 118 Pounds.

9. Chest measurement { Minimum 32 Ins. Maximum 35 Ins. 10. Complexion Med. Eyes Blue Hair Brown

11. Physical development. Good 12. Smallpox marks no

13. Number of vaccination marks { Right arm 4 Left arm 0 14. When vaccinated last Child

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

A11

W. H. Williams Major President. G. H. Hume Capt Member. W. H. Tarwell Major Member.

Table with columns: Date, Result, VACCINATION, Date, Result, ANTI-TYPHOID INOCULATIONS, ETC. Includes entries for A. G. Vipond M.O. and J. A. Fairie Capt M.O.

Joined ... day of ... 191 ... at ...

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE. Includes handwritten '4030103' and '1st DEPOT BN. 1st QUEBEC REG'T.'

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: STATION, DATE, DISEASE, RESULT. Includes handwritten 'Montreal Jan 4/17', 'None slight typhoid', and 'A. G. Vipond Capt'.

N. B.—This sheet is 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.

The copy of this document which is delivered to the man examined will be attached by him to the report for service or claim for exemption made by him or on his behalf after the examination under the Military Service Act (Class 1 has been issued).

Signature of Man John Owens

Hearing R. Ear L. " Eyesight R. D. = 30 L. D. = 30



MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

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.

MILITIA & DEFENCE  
FEB 27 1918  
CANADA

- 1. Surname OWENS Christian name John,
- 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. Not Applicable.
- 3. Consecutive number on schedule of men reporting for service (if he appears on it) \_\_\_\_\_
- 4. Address (including street and number, if any) 79 Desmorteau Street, Montreal, Canada.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 11th day of November 1917 1917, by the undersigned medical board sitting at Montreal Canada.

- 5. Age as stated 32 Years 11 Months.
- 6. Apparent age 32 Years 11 Months
- 7. Height 5 Feet 6 Inches.
- 8. Weight 118 Pounds.

- 9. Chest measurement { Minimum 32 Ins. Maximum 35 Ins.
- 10. Complexion Fair { Eyes Blue Hair Black

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

- 13. Number of vaccination marks { Right arm 1 Left arm 0
- 14. When vaccinated last child

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 A 11

President.

Member.

Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
17/1/18		A. S. Vipond M.O.	13-1-18		J. A. Jamie Capt M.O.
		M.O.	4/1/18		A. S. Vipond M.O.
		M.O.	24/1/18		A. S. Vipond M.O.

Joined 11th day of November 1917 191 at Montreal Canada.

CORPS	REG'TL NUMBER	HABITS	DATE
1st DEPOT BN. 1st QUEBEC REG'T.	4030103		

R.V. 30  
I.V. 30  
K.E. O.  
I.E. O.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
Montreal	6/2/18	nil	fit

*(Signature)*  
A. S. Vipond  
Capt

N. B.—This sheet is 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.

Signature of Man



FORM OF WILL

I, Owens John (Name in full)  
Regimental Number 4030103 serving in 1st DEPOT BN. 1st QUEBEC REGT.

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

Mrs. Mary Ann Rafferty (sister)  
79 Desmarctrean St  
Montreal P.Q.

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

absolutely, and my personal estate I bequeath to

Mrs. Mary Ann Rafferty (sister)  
79 Desmarctrean St.  
Montreal 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 twelfth day of January A.D. 1918

John Owens 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 J. T. Hughes

Address of Witness Guy St Barracks Montreal

THE TWO  
WITNESSES

Occupation of Witness Soldier

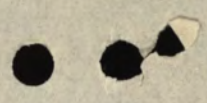
MUST  
SIGN HERE

Signature of Second Witness A. Berry

Address of Witness Guy St Barracks Montreal

Occupation of Witness Soldier

FORM OF WILL



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12

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To be made out in duplicate.

H.Q. 54-21-23-53

D. F. S.

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins..... 1st DEPOT BN. 1st QUEBEC REG'T.

(2) Regimental Number..... 4030103

(3) Full Name of Soldier..... John OWENS

(4) Place of Birth..... Mossend, Lanarkshire, Scotland.

(5) Are you married, or not?..... No.

(6) If married, state,  
 (a) Full name of your wife..... Not Applicable.

(b) Present Postal Address..... Not Applicable.

(7) Are you a widower?..... No.

(8) Have you any children?..... No.  
 If so, give number of boys and girls..... Not Applicable.  
 Also their names and ages..... Not Applicable.

(9) Is your Father alive?.....No.  
If so, state name and address.....Not Applicable.

(10) Is your Mother alive?.....No.  
If so, state name and address.....Not Applicable.

(11) If your Mother is a widow.....No.  
Are you her sole support, or not?.....No.

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.  
.....Not Applicable.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.  
.....SISTER.....  
.....Mrs Mary Ann Rafferty.....  
.....79-Desmorteau Street, Montreal Canada.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.  
.....Not Applicable.

15) Are you insured?.....Yes.  
If so, in what Company?.....Prudential.  
Have you made arrangements for payment of your Insurance premium.....Yes.....  
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

*Am. L. McKeown* Major.  
for O.C. 1st Depot Bn. 1st Quebec Regiment.  
Officer Commanding.

Date.....JAN 11 1918.....