



17th of Battalion
Original

PIÈCE D'ATTESTATION.

MAR 20 Ent'd
No. 856148

Folio

CORPS EXPÉDITIONNAIRE CANADIEN D'OUTRE-MER

QUESTIONNAIRE REQUIS AVANT ATTESTATION

(RÉPONSES)

1. Quel est votre nom de famille ?..... *Ruel*
- 1a. Quels sont vos noms de baptême ?..... *Arthur*
- 1b. Quelle est votre présente adresse ?..... *221 Chambord, Montreal*
2. En quelle ville, village ou paroisse, et en quel pays êtes-vous né ?..... *Montreal, que*
3. Quel est le nom de votre plus proche parent ?..... *Joseph Ruel*
4. Quelle est l'adresse de votre plus proche parent ?..... *221 Chambord, Montreal*
- 4a. Quel est votre degré de parenté avec icelui ?..... *père.*
5. Quelle est la date de votre naissance ?..... *Avril 18-1895.*
6. Quel est votre métier ou profession ?..... *Journalier*
7. Êtes-vous marié ?..... *non*
8. Consentez-vous à être vacciné ou revacciné et inoculé ?..... *oui*
9. Faites-vous déjà partie de la Milice active ?..... *non*
10. Avez-vous déjà fait du service militaire ?..... *non*
(En ce cas, mentionner les états de service)
11. Comprenez-vous bien la nature et les termes de votre engagement ?..... *oui*
12. Consentez-vous à être attesté pour service dans le Corps Expéditionnaire Canadien d'outre-mer ?..... *oui*

DÉCLARATION REQUISE DU SUJET

Je, *Arthur Ruel*, déclare solennellement que ce qui précède contient les réponses que j'ai faites au questionnaire ci-dessus, et que ces réponses sont véridiques, et que je consens à remplir les engagements que je prends maintenant, et je m'engage et consens à servir dans le Corps Expéditionnaire Canadien d'outre-mer et à être affecté à une arme quelconque dans le service de ce Corps pour le terme d'une année, ou pour la durée de la guerre actuellement engagée entre la Grande Bretagne et l'Allemagne si elle dure plus d'une année, et pour six mois après la conclusion de cette guerre dans le cas où Sa Majesté requerrait mes services d'autant, ou jusqu'à ce que je sois légalement libéré.

Arthur Ruel (Signature de la Recrue)
Date: *Mars 20* 1916. *J. W. Leachy* (Signature du Témoin)
Lieut.

SERMENT REQUIS DU SUJET

Je, *Arthur Ruel*, prête le serment d'être fidèle et de donner mon entière allégeance à Sa Majesté le Roi George V, ses Héritiers et Successeurs, de me faire un devoir de défendre honnêtement et fidèlement la Personne, la Couronne et la Dignité de Sa Majesté, et de ses Héritiers et Successeurs contre tous ennemis, et d'obéir ponctuellement à tous les commandements de Sa Majesté, de ses Héritiers et Successeurs, ainsi que de tous Généraux et Officiers placés au-dessus de moi. Ainsi Dieu me soit en aide.

Arthur Ruel (Signature de la Recrue)
Date: *Mars 20* 1916. *J. W. Leachy* (Signature du Témoin)
Lieut.

CERTIFICAT DU MAGISTRAT

La Recrue ci-dessus nommée a été prévenue par moi que, s'il répondait faussement à aucune des questions ci-dessus, il serait passible des pénalités pourvues par la loi de l'Armée.

Les questions ci-dessus ont alors été lues à la Recrue en ma présence.

J'ai vu avec soin, à ce qu'il comprit chaque question, et à ce que les réponses à chacune fussent dûment inscrites telles que reçues, et la dite Recrue a fait et signé la déclaration et prêté le serment en ma

présence, à *Montreal* ce *21* jour de *Mars* 1916
J. W. Leachy (Signature du Juge)

*Corrected
11.3.17
ne me*

Signalement de Arthur Ruel à l'Enrolement

Age apparent 21 ans.....mois.
 (Déterminable d'après les instructions contenues dans les règlements du Service Médical de l'Armée.)

Signes distinctifs, et indices d'affections congénitales ou de maladies antérieures.

Si le Médecin-Officier est d'avis que la Recrue a fait du service antérieurement, il devra, à moins que l'engagé reconnaisse le fait, ajouter une note à cet effet pour l'information de l'officier approbateur.

Taille 5 pieds 2 1/2 pouces

Mesure de la poitrine { Tour de poitrine, à pleine expansion 34 pouces
 Marge d'expansion 2 1/2 pouces

Teint..... Brun

Yeux..... Brun

Chevelure..... Châtain

Confession religieuse { Anglican.....
 Presbytérien.....
 Méthodiste.....
 Baptiste ou Congregationaliste.....
 Catholique Romain..... C.R.
 Juif.....
 Autres dénominations.....
 (Indiquer laquelle)

CERTIFICAT D'EXAMEN MÉDICAL

Ayant examiné le sujet ci-haut nommé, je constate qu'il ne présente aucune des causes de rejet spécifiées dans les règlements du Service Médical de l'Armée.

Il peut voir de chaque œil à la distance requise ; le cœur et les poumons sont sains ; il a le libre usage de ses articulations et de ses membres, et il déclare n'être sujet à aucune syncope quelconque.

Je le considère*..... fit pour le Corps Expéditionnaire Canadien d'outre-mer.

Date..... March 20 1916.....

Lieu..... Mont.....

A. Aubrey
 Médecin-Officier
Major

* Insérer ici "valide" ou "non-valide".

NOTE.—Si le médecin-officier trouve le sujet impropre au service, il remplira le certificat ci-dessus dans les seuls cas où il y a eu attention et notera brièvement ci-dessous les causes d'invalidité:

CERTIFICAT DE L'OFFICIER COMMANDANT

Ruel Arthur.....ayant été finalement approuvé et examiné par moi ce jour, et le nom, l'âge, la date d'attestation et tous les autres détails réglementaires ayant été notés, je certifie être satisfait de l'exactitude de cette attestation.

Date..... March 20 1916..... (Signature de l'officier.)
Arthur Ruel
 Lt.-Colonel
 O.C. 173ème Bieue Det. Can.

Despoinery

ATTESTATION PAPER.

No. 856148

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... RUEL
- 1a. What are your Christian names?..... Arthur
- 1b. What is your present address?..... 1 Ruelle Marquette, Montreal, P.Q. Canada
- 2. In what Town, Township or Parish, and in what Country were you born?..... Montreal, P.Q. Canada
- 3. What is the name of your next-of-kin?..... Joseph Ruel
- 4. What is the address of your next-of-kin?..... 1 Ruelle Marquette, Montreal, P.Q. Canada
- 4a. What is the relationship of your next-of-kin?..... Father
- 5. What is the date of your birth?..... April 18th, 1894
- 6. What is your Trade or Calling?..... Laborer
- 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?..... No
or Naval Service
- 10. Have you ever served in any Military Force?..... 6 months with 178th Regt C.E.F. *AA*
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 } CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } Yes
- 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. No
- 14. If so, what was the nature of the disability?..... Not applicable
- 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?..... No
- 16. If so, what was the reason?..... Not applicable

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Arthur RUEL, 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.

Arthur Ruel (Signature of Recruit)

Date March 18th 1918. *J. J. J.* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Arthur RUEL, 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.

Arthur Ruel (Signature of Recruit)

Date March 18th, 1918. *J. J. J.* (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 Montreal, P.Q. this 18th day of March 1918.

J. J. J. (Signature of Justice)

*W. Desjardins Lt. Col.
OC. 10^e Res. Bn. (Caus)*

Description of Arthur RUEL on Enlistment.

Apparent Age 23 years 11 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 2 ft. 2 ins.

Chest measurement: (Girth when fully expanded) 33 1/2 ins.
 (Range of expansion) 2 1/2 ins.

Complexion Clear

Eyes Grey

Hair Dark

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

| | |
|---------|-----------|
| R. D. = | <u>40</u> |
| L. D. = | <u>40</u> |
| R. EAR | <u>OK</u> |
| L. EAR | <u>OK</u> |

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 March 18th 1918

Place Montreal, P.Q. Canada

Declared FTT by MEDICAL BOARD
MOBILIZATION CENTRE, M. O. #4

[Signature]
 Medical Officer.
 President, S. M. B.

*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:—

"A" Fit for General Service

CERTIFICATE OF OFFICER COMMANDING UNIT.

Arthur RUEL 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 not available) (Signature of Officer)

Date March 18th, 1918

[Signature]
 Lt Col.
 104th Can Res. Bn.

922
S

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 1

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..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

DISCHARGE DOCUMENTS

R. O. No. 899

H. Q. No.

Name Ruel, Arthur
Regt. No. 856148 Rank Pte.
Corps 178th F. I. Bn. G. I. C.

22



Handwritten signature

27638

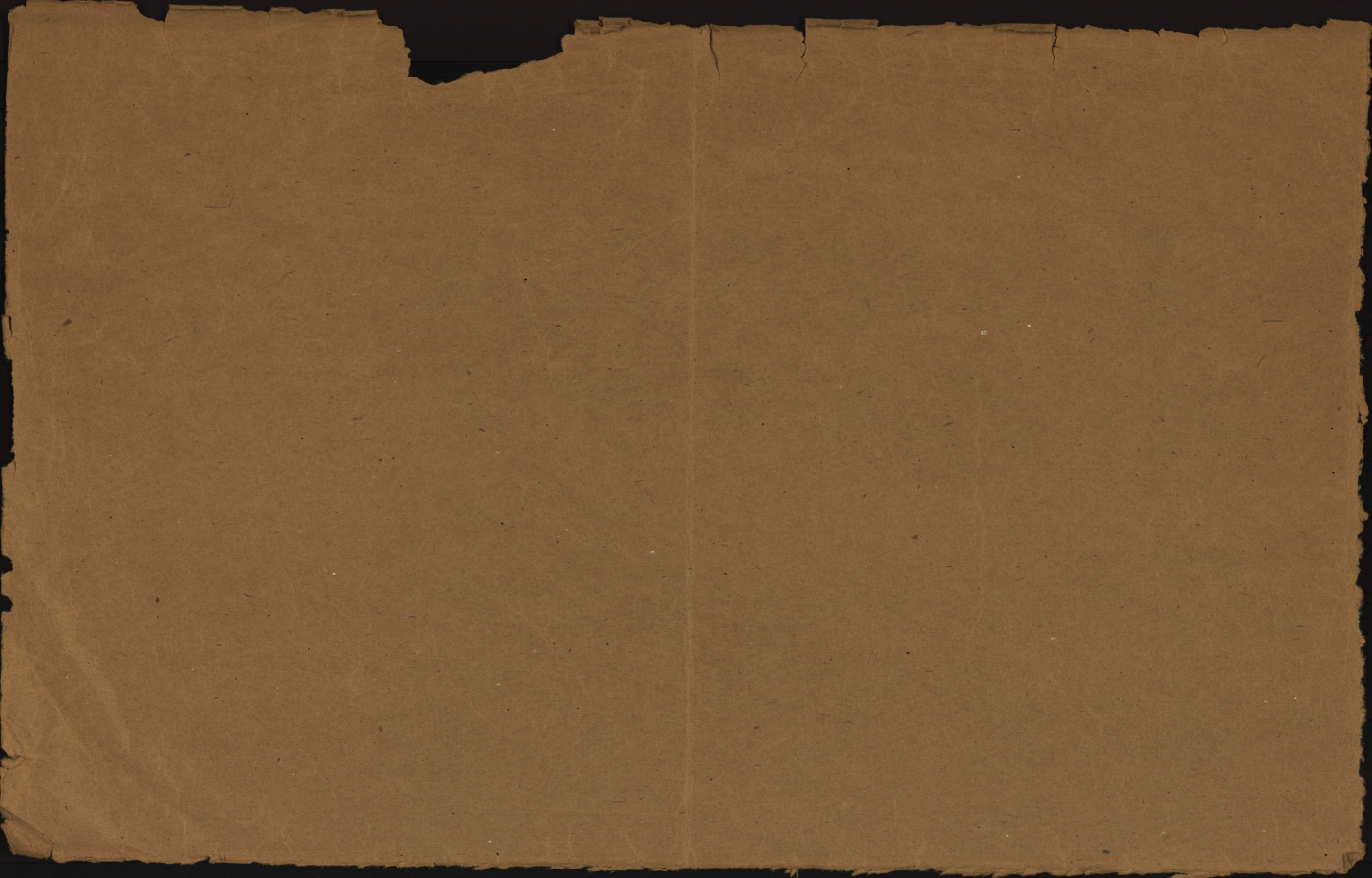


~~Box~~
482256

Box #
8539

Handwritten notes:
Mx
15 10 20
27070
less band

Large handwritten scribbles and initials in the bottom right corner.



856148

I.D. number
No. d'identification

RUEL

Surname
Nom de famille

ARTHUR

Given names
Prénoms

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location

Lieu

8539

«CONTENTS CONFIDENTIAL»
«CONTENU CONFIDENTIEL»



928
68

CARD NO. ✓

SURNAME. *Ruel*

CHRISTIAN NAMES *Arthur*

REGL. No. *856148* RANK *Pte.*

UNIT *178th* *Bn.*

FORMER CORPS *nil.*

CHANGE OF ADDRESS

NEXT OF KIN.

NAMES IN FULL *Ruel, Joseph*
RELATIONSHIP TO SOLDIER *Father.*

ADDRESS ~~*221 Chambord St.*~~
793 Marianne St. Montreal, P. I.
(S.A.A.P. 2/7/18)

COUNTRY OF BIRTH *Canada, Montreal, P. I.*

DATE *April 18th 1895.*

PLACE OF ATTESTATION *Montreal, P. I.*

DATE *March 21st 1916.*

L. L. 94504. M. & D. 6512. *of S. 25-3-18 11326*

M. F. W. 22. 250M.-2-16. H. Q. 1772-39-339.

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Laborer

RELIGION

Not stated.

DESCRIPTION.

APPARENT AGE

21

YEARS

MONTHS

HEIGHT

5

FEET

2 1/2 INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

3 1/2 INCHES

COMPLEXION

Brown

EYES

Brown

HAIR

L. Brown,

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Montreal, P. Q.

DATE

March 20th, 1916.

Present Address:

221 Chamford St.

Montreal, P. Q.

649-R-13743

RUEL, Pte. Arthur, #856148 - 22nd Bn

not elig. for star

Med & D (Mother)

Mrs. Eugenie Ruel
793 Marie Anne St.
Montreal, P.Q.

M

Roll Desp. 22 1921 Reqn. No. 12638

League Desp. DEC 31 1921 Reqn. No. PC 2125

P & S (Father)

Jas. Ruel. Esq.
793 Marie Anne St.
Montreal, P.Q.

(Serial no. 770248.)

Mem Cross (Mother) See above

Desp 25/10/20

28310
(m) C 27900

M

446

EM
Number 856148

Rank Pte

Surname

RUEL

Christian Name

Arthur

Units

22 Bn Can Div Theatre of War France

Date of Service

13/8/18

Remarks

Mother

Latest Address

Mrs Eugenie Ruel
793 Marie Anne St.
Montreal, P. Q.

Roll No

"B" Page 10704

Next of kin _____

Address on leave _____

Address on discharge _____

Transportation issued Yes No Date _____ Character on discharge _____

Previous occupation _____ Date and place of enlistment _____

Diagnosis _____ Date of Medical Boards _____

| Date | Remarks |
|------|---------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

DESP MAR 25 1922
REGM. N. 211 22452

*—Name will be given in full; surname first.

NAME

Ruele Arthur

REG'T L No. 856148

H. Q. FILE No. 649.

RANK AND CORPS

Pte 22nd Bn. form. 178th Reg

FOLLOWS

NO.

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

N. of R.

84-3

28294

6-9-18

Joseph Ruele (father)
793 Marianne St. Montreal P Q
N. of W. 7. C. C. & Aug. 28th 1918.
Shrapnel side leg.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

Q310.1

not has bly stat 28.8.18

died of wds. S.W. side of Leg

No 856148

RANK *Rt.*

NAME *Ruel, Arthur*

T. O. S. 20-3-16 *D.O. 41 of* UNIT *178th Battalion, C. E. F.*
23-3-16.

M. D. *H.*

| PAID | | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|----------------|-----------------|---------------|---|---------------------------|
| FROM | TO | | PARTICULARS | AUTHORITY |
| <i>1916</i> | <i>1916</i> | | | |
| <i>Mar. 20</i> | <i>Mar. 31</i> | <i>✓</i> | | |
| <i>Apr.</i> | | <i>✓</i> | | |
| <i>May.</i> | | <i>✓</i> | | |
| <i>June</i> | | <i>✓</i> | | |
| <i>July</i> | | <i>✓</i> | | |
| <i>Aug.</i> | | <i>✓</i> | | |
| <i>Sept 1.</i> | <i>Sept. 9.</i> | <i>n</i> | <i>aws; forfeits 4 days pay</i> | <i>Ro. 132; + 135.</i> |
| <i>Sept 10</i> | <i>Sept 21</i> | <i>n.</i> | <i>Trans. to 150th Bn 9-9-16</i> | <i>DD 194 of 10-9-16.</i> |
| | | | <i>absent on Emb 21-9-16</i> | <i>DD 194.</i> |
| | | | <i>now shown on 150th Bn</i> | <i>Sept. Paylist</i> |



Register No. *DR 737*

WAR SERVICE GRATUITY

A.P. File No. *15761-a-9*

TO
DEPENDENTS OF DECEASED SOLDIERS

Reg'tl No. *856148* Name *Arthur Ruelle*
 (Christian Name) (Surname)
 Unit *22nd Bn* Rank *Plt* Date of enlistment
 Date of casualty *8-8-1918* B.P.C. File No. *89531*
 Was service performed overseas? *yes*

DEPENDENT
 Name *Mrs Eugenie Ruel* Relationship *Wife*
 Address *793 Marie Anne St
 Montreal Qc*

Amount of Special Pension Bonus \$ *nil* Abstracted by *J. Maher*

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: *not eligible for S.A.
 paid*

Clerk *J. Le Court*

Audited by
 Date

M.F.W. 2652
 25M-6-20.
 H.Q. 1772-89-1473

*"Gota" 22/8/20
 Dy 30*

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.

LL 53961—M. & D. 9721

| 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 | | |
| | | | | | | | | | | | |

M. F. W. 127
 300M-1-19
 1772-39-1140

Remarks:

TIM Rank Name RUEL, Arthur, ✓
4th Dft. 2nd Bn QUE Unit If in perm. Corps, }
What Unit? } Married or Single Single ✓

Reg'l No. 856148 ✓

Place and Date of Enlistment Montreal, P. Q. 18th. March, 1918 ✓ Place of Birth Montreal, P. Q. ✓

Name and Address, Next-of-Kin Joseph Ruel, Canada

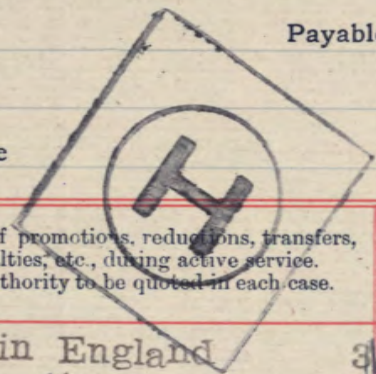
1 Ruelle Marquette, Montreal, P. Q. Canada ✓ Relationship Father ✓

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

Discharge, Date and Place Reason Relationship Character

N/E. R.B. No. 13778
File R.L. 25 R2937.
DIED OF WOUNDS
Category



| 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. | | | | |
| 16.4-18 | 10th Res | Arrived in England Z.O.S. | S/S GRAMPIAN B. Shott | 3.4-18 | D.O. 87 |
| 12.8-18 | ✓ | Ser. to 22 nd Bn of Res | --- | 12.8-18 | D.O. 189. D.O. 82 of 30-8-18. 22 nd Bn |
| 4-9-18 | 22 nd Bn | Died of Wounds. | Flo | 28-8-18 | D.O. 85 |
| 4.9.18 | --- | --- | --- | 28.8.18 | 6 th P.A. 310 |

*M X 20
15.10.20
28*

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

M. F. W. 54. (A. F. B. 10s.)

500M.—9-16

H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps. *178 Battalion C.E.F.*

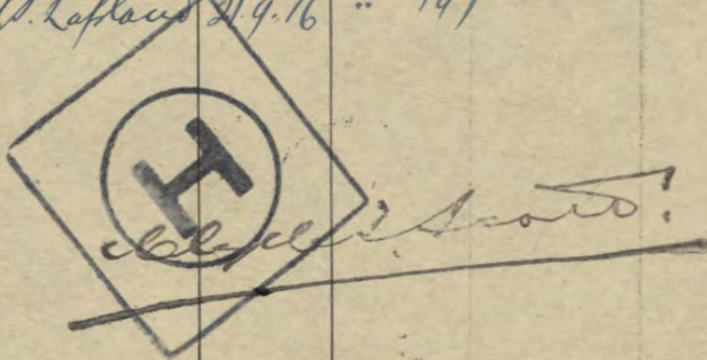
Regimental No. *856141* Rank *Plt* Name *Rulle, Arthur*
C. E. F.

Enlisted (a) *21.3.16* Terms of Service (a)..... Service reckons from (a) *21.3.16*

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>10.9.16</i> | <i>178 Bn</i> | <i>100 on Trans to 150 Bn</i> | <i>Volcavies</i> | <i>9.9.16</i> | <i>DD. 194</i> |
| <i>26.9.16</i> | <i>150 Bn</i> | <i>200 Deserter absent or Embarked</i> | <i>St. Leger</i> | <i>21.9.16</i> | <i>.. 197</i> |



¹⁾ 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.
²⁾ e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

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 | | | | |
| | | | | | |

30917

Ruel

49B 960

FORM OF WILL.

Name in full.

I Arthur Ruel

Regimental Number 856/48 serving in 10th Can. Res. Batt'n

of the Canadian Expeditionary Force do hereby revoke all former Wills made by me and declare this to be my last Will.

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

I DEVISE and BEQUEATH all my real estate unto

~~.....~~

absolutely, and my personal estate I bequeath to

Name & Address of persons or person to receive personal estate (see Note 1.)

Mrs. Jos. Ruel.
201- Marquette Lane.
Montreal P. Que.

Fill in Date and Year.

IN WITNESS WHEREOF I have hereunto set my hand this 19th day of April A.D. 1918.

A. Ruel

(Signature)

197292

Signed by the said Testator as his last Will and Testament, the same having been read over and explained to him, in the presence of us both present at the same time who at his request and in his presence and in the presence of each other have subscribed our names as witnesses.

ESTATES BRANCH
NOV 9 1918
MILITIA DEPT.

Name of Witness

Address of Witness

Occupation of Witness

Name of Witness

Address of Witness

Occupation of Witness

W. M. M. M. M. CAPT.
W. M. M. M. M. SERGEANT, 10TH RES. BATT'N.
D. A. LeBlanc
Bramshatt
Sgt.

N.B.—Personal Estate includes pay, effects, money in Bank, insurance policy, in fact everything except real Estate.

CANADIAN.
22 OCT 1918

REGISTERED
WILLS SECTION
26 APR 1918

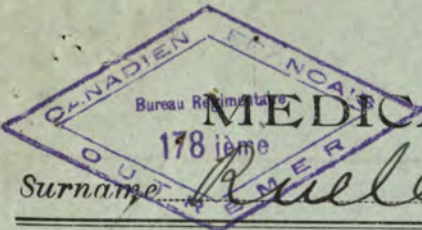
STATES REGISTRY
MAILING
DEPARTMENT
— IN —
APR 26 1918
133, OXFORD ST.
LONDON, W. 1
O.M.F. OF CANADA.

WILLIAM DEBB

WILLIAM DEBB

WILLIAM DEBB

178th B. Battalion



MEDICAL HISTORY SHEET.

Surname Bueller Christian Name Arthur

Examined { on 20th day of March 1916
 at Montreal
 Birthplace { City or Town Montreal
 County Hochelega
 Apparent age 21
 Trade or occupation Labourer
 Height 5 Feet 2 1/2 Inches.
 Weight 104 Lbs.
 Chest measurement { Minimum 30 1/2 inches.
 Maximum expansion 34 inches.
 Physical development good
 Small-Pox Marks None
 Vaccination Marks { Arm Right Left
 Number 2
 When Vaccinated last as a child
 (a) Marks indicating congenital peculiarities or previous disease None

Approved by H. Aubry
 Rank Major M.O.

| Date. | Fit or Unfit. | EXAMINED FOR RE-ENGAGEMENT. |
|-------|---------------|-----------------------------|
| | | 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. |
|----------------|-------------|---------------------------------|
| <u>4/18/16</u> | <u>Good</u> | <u>E.L.</u> M.O. |
| <u>15/4/16</u> | <u>"</u> | <u>E.L.</u> M.O. |
| <u>29/4/16</u> | <u>"</u> | <u>E.L.</u> M.O. |

Enlisted on 20th day of March 1916 at Victorville

| | CORPS. | REG'TL NUMBER. | HABITS. | DATE. |
|----------------------|------------------------------------|----------------|---------|----------------|
| Joined on enlistment | <u>178th HATT. CEF.</u> | <u>856148</u> | | <u>20/3/16</u> |
| Transferred to | | | | |

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.
 M. F. B. 313.
 400M.—1-16.
 H. Q. 1772-39-439.

ORIGINAL

856148

MILITARY SERVICE ACT, 1917.

ORIGINAL

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 RUEL Christian name Arthur
- 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) } Not applicable
- 4. Address (including street and number, if any) } 1 Ruelle Marquette, Montreal, Que Canada

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 19th day of March 1917, by the undersigned medical board sitting at Union Ave. Montreal Que Canada

- 5. Age as stated 23 Years 11 Months.
- 6. Apparent age 23 Years 11 Months.
- 7. Height 5 Feet 2 Inches.
- 8. Weight 116 Pounds.
- 9. Chest measurement { Minimum 31 Ins.
Maximum 38 1/2 Ins.
- 10. Complexion clear { Eyes Grey
Hair Dark
- 11. Physical development Good { Good
Fair
Poor
- 12. Smallpox marks None

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

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

- 17. (a) Vision R. 40 40 L. 40 40
- (b) Hearing R. OK OK L. OK OK

H. Aubry President.
G. B. Malcolm Member.
F. J. Anderson Member.

| Date | Result | VACCINATIONS | Date | Result | ANTI-TYPHOID INOCULATIONS, ETC. |
|-----------------|--------|---------------------------|-----------------|--------|---------------------------------|
| <u>12-11-18</u> | | <u>J. A. Kenwick</u> M.O. | <u>12-11-18</u> | | <u>J. A. Kenwick</u> M.O. |
| | | M.O. | | | M.O. |
| | | M.O. | | | M.O. |

Joined 18th day of March 1918 at Montreal, Que Canada

| | CORPS | REG'TL NUMBER | HABITS | DATE |
|----------------------|------------------|------------------------------|--------|-------------|
| Joined on enlistment | | <u>856148</u> | | |
| Transferred to..... | <u>2nd Depot</u> | <u>BN. 2nd QUEBEC REG'T.</u> | | <u>1918</u> |
| | <u>22 Bn</u> | | | |

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| STATION | DATE | DISEASE | RESULT |
|---------|------|---------|--------|
| | | | |

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 Arthur Ruel



* Strike out whichever inapplicable.

| | | | | | | | |
|---|--------------------|---|-------------------------------------|-----------------|----------------|--------------|--------|
| ASSIGNED PAY. | ENGLAND or CANADA. | SEPARATION ALLOWANCE. | ENGLAND or CANADA. | | | | |
| EFFECTIVE DATE:- 1/4/18 | | 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. | | | | | |
| M ^{rs} Jos Ruel N/R. | | LAC Can | | | | | |
| Marguerite Laine | | DATE EFFECTIVE | | | | | |
| Montreal Que. | | RANK OR APPOINTMENT | | | | | |
| Mother | | Plc | | | | | |
| UNIT AND TRANSFERS | | | | | | | |
| ORIGINAL UNIT:- HADR. 2 nd Que Reg | | DATE ACCOUNT FIRST OPENED:- 1/4/18 | | | | | |
| AUTHORITY | | DATE EFFECTIVE | DATE LEDGER SHEET T ST D | | | | |
| | | | UNIT TRANSFERRED TO | | | | |
| | | | 10 Res | | | | |
| | | 11/9/18 | NE D | | | | |
| | | Dead | | | | | |
| EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | | | | | | | |
| DATE OF PAYMENT | NUMBER OF A.R. | UNIT PAID BY | AMOUNT | DATE OF PAYMENT | NUMBER OF A.R. | UNIT PAID BY | AMOUNT |
| | | | | | | | |
| DAILY RATES OF PAY AND ALLOWANCES | | | | | | | |
| AUTHORITY | | PAY | F.A. | P.F.A. | SUBS'CE ALL'CE | | |
| LAC Can | | 1 | . | . | 10 | | |

PAY BOOK CH. C. D.
Date: 1/1/18
By: [Signature]

| PARTICULARS OF RENDERING NON-EFFECTIVE:- | | | | | | | | | | | |
|--|-------------------|------|------|--------------------------|------|------|------|------|---------|----------|------------|
| MONTH | PARTICULARS | CR 1 | CR 2 | PARTICULARS | DR 1 | DR 2 | DR 3 | DR 4 | SALANCE | DEFERRED | SEPARATION |
| 3/31/18 | Balance from Can. | | | | | | | | Nil | | |
| april | Plc Pay. | 33 | | Can a/p. | | | | | 15 | 18 | |
| | | | | AR102 10 Res 18.4.18 | 487 | | | | | 13 | |
| | | | | AR177 " 26.4.18 | 973 | | | | | 3 | |
| May | " " | 33 | | a/p May. | 1460 | | | | 15 | 22 | |
| | | | | AR297 10 Res 15/5/18 | 487 | | | | | 17 | |
| | | | | AR430 " 26/5/18 | 973 | | | | | 7 | |
| June | " " | 34 | 10 | a/p June | 1460 | | | | 15 | 25 | |
| | | | | Q4605 - 3/5/18 - # M20 | 16 | | | | | | |
| | | | | AR541 10 Res 13.6.18 | 973 | | | | | | |
| | | | | AR701 " 26.6.18 | 1460 | | | | | | |
| | | | | AR662 " " | 730 | | | | | 5 | |
| July | " " | 33 | | a/p July | 3179 | | | | 15 | 13 | |
| | | | | AR955 " 26.7.18 | 730 | | | | | 5 | |
| Aug | " " | 34 | 10 | a/p Aug | 730 | | | | 15 | 25 | |
| | | | | AR1014 " 10.8.18 | 487 | | | | | 20 | |
| | | | | DRAR177 502 B 22.8.18 | 178 | | | | | 1 | |
| | | | | R4005 149. 10 Res. 29/18 | 665 | | | | | 17 | |
| | | | | DR Bal Trans to Ottawa | 1780 | | | | | 7 | |
| | | | | | 1180 | | | | | | |

Died of wounds 8-18 era 310 4.9.18

21818

NESEA 27.19 Cr. 1780

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.

Unit, Regiment or Corps

Hth Bn 2nd DEPOT BN, 2nd QUEBEC REG'T.

Regimental No. *856148* Rank *Private* Name *RUEL Arthur*

C. E. F.

Enlisted (a) *18th. 3. 18* Terms of Service (a) *C. E. F. D of O* Service reckons from (a) *18th. 3. 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) *Labour*

| 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 | | 24/3/18 | |
| | | Arrived England | | 3.4.18 | <i>W. J. Champion</i> |
| <i>16/4/18</i> | <i>10th Can. Res. Bn. T.O.S. on transfer from arriving from Canada</i> | <i>B'sholt</i> | | <i>3/4/18</i> | <i>D. O. P. 11 87</i> |
| <i>12.8.18</i> | <i>10th. Res. Bn. Transf. to 2nd Bn. C. E. F.</i> | <i>B'sholt</i> | | <i>11. 8/18</i> | <i>D. P. 11. O. 189</i> |
| | <i>Palanque</i> | | | | <i>Ass-Adj. 10th. Can. Res. Battn.</i> |
| <i>13/8/18</i> | <i>C. I. B. D.</i> | <i>Arrived & I. O. S.</i> | <i>22nd Bn. France</i> | <i>13. 8/18</i> | <i>A 724 B D 82 / 30-8-18</i> |
| <i>13/8/18</i> | <i>C. I. B. D.</i> | <i>Left for C.C. Rein. C.</i> | <i>Field</i> | <i>15 8/18</i> | <i>VR. 1347.</i> |
| | <i>C. C. Rein. C.</i> | <i>Arrived.</i> | | | |
| | | <i>Left for Unit</i> | <i>Field</i> | | |
| | <i>22nd Bn</i> | <i>Arrived</i> | <i>Field</i> | | |

CERTIFIED CORRECT.
16 AUG. 1918
CAN. RECORDS, LONDON.

who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered. *g 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 | | | | |
| 27-8-18. 52 | 7668. 52 | E.S.W. Side 1 st Leg. Adm. Died of wounds received in action. | 7 th C.C.S. 52 | 27-8-18. 28-8-18. | #3468. #3468 P.I.O. 85/1918. |
| | | Whogau | Major | for Lt.-Col., A.A.G. Canadian Section. G. H. Q. 3rd Echelon B.E.F. | |

Date of Enlistment 2-3-18

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

07773

apr. 1/18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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

| | | | |
|----|--|--|--|
| 15 | | | |
|----|--|--|--|

R

PARTICULARS OF SEPARATION ALLOWANCE

No. 856148
 Rank Pte. Promoted Reverted Discharge
 Soldier's Name Arthur Ruel
 Battalion 2nd Depot Battr. 2nd. Que. Regt. Lft. 4.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name
 Address
 Change of Address
 1 MRS. JOS. RUEL 2n
 2 MARQUETTE LANE
 MONTREAL QUE. 15 15.00
 3 % 856148 PTE. ARTHUR RUEL
 FIFTEEN DOLLARS
 4 793. Marianne st. per letter of 4-6-18.

| Date | Cheque No. | Amount S/A | Amount A/P | Total | REMARKS |
|------------------|--------------------|------------|------------|-------|--|
| 1918 | | | | | 15761-2-9 |
| April | X 16452 | | 15 | 15 | ✓ X16452 Canc'd ✓ M.R.C. 1B. rank re ch. add. 24-6-18 |
| Apr. | 9 11097 | | 15 | 15 | ✓ Died of wounds Aug. 8. 1918. C.L. dated 9-9-18. |
| May | ✓ 16666 | | 15 | 15 | ✓ M.R. G.P. 6474 to destroy rendered 14-9-18 |
| June | S 27437 | | 15 | 15 | ✓ M. new add. B.P.C. Form 1. and C.F.X. completed on above file 14-9-18. |
| July | E 22053 | | 15 | 15 | ✓ W.M. Phillips |
| August | U 34558 | | 15 | 15 | ✓ |
| September | X 44332 | | 15 | 15 | ✓ |

AUTHORITY
 FOR
 NEW ACCT.

M. F. W. 28
 400M-6-17-177-28-141
 L. L. 22220-M. & D. 7603.

AUTHORITY
 FOR
 NEW ACCT.

M.R.M.H. 4-B-2
 G. Raymond 23/4/18

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

| | | | |
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RATE OF ASSIGNMENT

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| | | | |
|--|--|--|--|

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

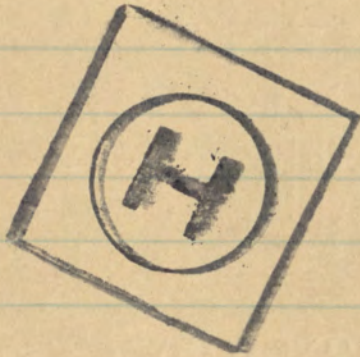
| Date | Cheque No. | Amount S/A | Amount A/P | Total | REMARKS |
|------|------------|------------|------------|-------|---------|
|------|------------|------------|------------|-------|---------|

M. F. W. 128.
400N. 17-1772 39-1141
L. L. 22290—M. & D. 7968.

M

856,48

A. Quella



pm
Carded
1.3.17.
no. 10.

