ATTESTATION PAPER

No. ✓

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

~~A38751~~

		(ANSWERS)
1.	What is your name?	Villeneuve Hero 438751
2.	In what Town, Township, or Parish, and in what Country were you born?	St. John, Que.
3.	What is the name of your next-of-kin?	Mr. P. Villeneuve father
4.	What is the address of your next-of-kin?	Robaro, Lake St John, Quebec
5.	What is the date of your birth?	March 25 - 1893
6.	What is your trade or calling?	Laboureur
7.	Are you married?	No
8.	Are you willing to be vaccinated or re-vaccinated?	Yes
9.	Do you now belong to the Active Militia?	No.
10.	Have you ever served in any Military Force? If so, state particulars of former Service.	No.
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

52nd Battalion

H Villeneuve (Signature of Man.)

J.H. Orr (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Hero Villeneuve, do solemnly declare that the above answers made by me to the above questions 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.

H Villeneuve (Signature of Recruit.)

Date May 10th 1915 J.H. Orr (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Hero Villeneuve, 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.

H Villeneuve (Signature of Recruit.)

Date May 10th 1915 J.H. Orr (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 Fort arthur this 10th day of May 1915.

A. H. Hall. C.L. (Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

A. H. Hall. C.L. (Approving Officer.)

M. F. W. 23.
300 M.—2-15.
H.Q. 1773-99-641.

DESCRIPTION OF Vilreneure, Hero ON ENLISTMENT.

Apparent Age 22 years — months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6½ ins.

Chest measurement:
- Girth when fully expanded 35 ins.
- Range of expansion 2 ins.

Complexion Dark

Eyes Hazel

Hair Brown

Religious Denominations:
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic X
- Jewish

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.)

COPIED Admin Corps

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 May 10th 1915 W. McCullough

Place Port Arthur

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

Hero Vilreneure 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.

A. W. Hayes Lt Col (Signature of Officer.)

Date May 10th 1915.

4B
30.11.18

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 .....1.....

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.....1.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

A.F.B. 122-1
1 Cas Cd
1 Rlwy

Int
5-10-20

M. F. W. 62.
50M.—9-16.
H. Q. 1772—39—935.

S

~~DISCHARGE~~ DOCUMENTS

R. O. No.....

H. Q. No.....

H

Name VILLENEUVE. HUBERT

Regt. No. 438751 Rank Pte

Corps 53rd Bn.

D.o.W. 14.5.16

M

H

C5180

Box 9951

24 — 23
14 — 24
1 24

2

438751
I.D. number
No. d'identification

VILLENEUVE
Surname
Nom de famille

HUBERT
Given names
Prénoms

D.O.W. 14-5-16

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS DU PERSONNEL

RECORDS CENTRE
DOCUMENTS

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu

BOX 9951

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

ARC-1048(86/06)

SURNAME. Villeneuve

CHRISTIAN NAMES Hero.

REGL. No. [redacted]38,751 RANK Pte.

UNIT 5-2nd Bn.

FORMER CORPS Nil

CARD NO. D

FOLL.

COPIED Adjutant General

NEXT OF KIN.

NAMES IN FULL Villeneuve, P.

RELATIONSHIP TO SOLDIER Father

ADDRESS Roberval Lake, St. Johns. P.Q.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. St. Johns P.Q. DATE March 25th 1893

PLACE OF ATTESTATION Port-Arthur. Ont. DATE May 10th 1915.

O/S 23/11/15 275/23.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Labourer RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT ~~5~~ FEET 5 INCHES 6½

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION Dark EYES Hazel HAIR Brown

DISTINGUISHING MARKS Nil

COPIED Archives OOFIS

MEDICAL EXAMINATION. PLACE DATE

not elig. 1914-15 Star.

649-V217, H. Villeneuve, Pte. #438751. 52nd Bn.

Medals & Dec. (Father) Pitre Villeneuve,
Roberval,
Lac St. Jean, P. Q.

P. & S. (Father) See Above.
(Ser. # 797925.)

Mem. Cross. (Mother) Elizabeth Villeneuve, c/o Pitre Villeneuve
~~Roberval~~, RR # 1 Roberval
~~Lac St. Jean P. Q.~~ P.Q

COPIED Archives

Given to

DESPATCHED X1241 24/1/21

Scroll Desp. APR 8 - 1921 Reqn. No 234266

DEC 29 1921

Pbgrue Desp. Reqn No P 22864

Desp. OCT 15 1920 (m) C 27085

Mr

703

m x ctd ~~11~~ 11/20 not called for

R. 149.

Name Villeneure H. *Rank* Private. *Reg. No.* 438751.

Unit 52nd.Battalion.

Next of Kin Canada.

COPIED Archives

25-V-57

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
4-3-16.	No.6.Can Fld Ambulance.		Synosis			
			Barbac &Boils.	A18.		
10-3-16.	do discharged.		do	A18.		
14-5-16	No.9 Can Field Amb.			A59.	m 4708	
	Died of Wounds.					
	(Burial Rep. on D.C.S. No82 d 22.6.16)					
	Extracted 28.6.16.					

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List

H. Q. FILE No. 649-

NAME Villeneuve (Hubert) Hero

REGT'L. No. 438757

RANK AND CORPS Pte 52nd Battalion C.

CA[illegible] No.	DATE	NATURE OF CASUALTY
M. 6708	18-5-16	Died of wounds 9th Fld. Amb. May 14th 1916.
A.F. B 2090a Rouen	21-5-16.	Died of wounds 14-5-16.

NO. 179 X

FOLL.

COPIED

L. L. Job 86907--M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A18(1)	No. 6, Can, Fld. Amb,	4-3-16	Sycosis, Barbae & Boils
A18(2)	No. 6, Can, Fld. Amb,	10-3-16	Discharged
U5-9	No 9 Can. Fld Amb.		Died of Wounds 14-5-16.

COPIED Archives Copies

E.K.

Numb[redacted] 438751 Rank Pte.

Surname VILLENEUVE.

Christian Name Hubert.

Units 52nd Bn Can Inf Theatre of War France.

Date of Service 21-2-16.

Remarks Father.

Latest Address Mr. Pitre Villeneuve
Roberval, Lac St Jean.
P.Q.

COPIED Archives

"B" Roll No.
Page 11144.

200m.-2-21.M.

26/10/87

DISP. APR 7 1922
REGN. No. 7800

D.M.S. 1500.

Surname	Christian Name or Names	Reg. No.
Villemure	H.	438751

Rank	Unit	Co.	Troop	Batty.
Pte	52nd Bn			

Hospital: # 6 Can Fld Am

Date of Admission: 4 · 3 · 16

Transferred " " " Hosp. 14 · 5 · 16

Hosp.

Hosp.

Hosp.

Diagnosis: Sycosis Barbae & Boils

(1) Later Diagnosis (if changed): Died of Wounds 14 · 5 · 16

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION

Date: Dis 10 · 3 · 16

REMARKS

b 2 28 · 3 · 16	a 18(1)
28 · 3 · 16	a 18(2)
" 19 · 5 · 16	a 59

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

3 to D.P.

EPITOME OF HOSPITAL TREATMENT.

Hospital	Adm.
1.	
2.	
3.	
4.	
5.	
6.	
7.	

5

R—122.

Rank **Pte.** Name **VILLENEURE. Hubert** Reg'l No. **438751**

Unit **52nd Battn.** If in perm. Corps, What Unit? Married or Single **Single**

Place and Date of Enlistment **Pt. Arthur, May 10th 1915.** Place of Birth **St. John, Can.**

Name and Address, Next-of-Kin **Mr. P. Villemeure,**

Robervale Lake, St. John, Que. Relationship **Father.**

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason 25-V-57 Character

N/E. R.B No. 9
File R.L.
Category D of W

16

Report Date	Report From whom received	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
		Arrived in England		3 DEC 1915	
28.3.16	C.R. 52nd	Adm to 6 Can Fld Amb. In field Embarked for France		20-2-16 NP 4.3.16	C.R. A.8. Lyconia Barbados 5
"	"	Dis "	"	10.3.16	" "
1/4/16	"	Wiring Course	"	25-3-16 28-3-16	A 7 B213 1/4/16
19.5.16	"	DIED OF WOUNDS	Field	14.5.16	CL A 59 + Pt II O.R.2. D.W. Not Stated O.N.
21.5.16	"	# 9 Canadian Field Amb.			
		Died at Brandhoek			
6.5.16	"	3rd Can Div'l Wiring Party	"	1.5.16	B213.

ort		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Document	
Date	From whom received					

92431.—W6490/1535.—2,000,000—J. J. K. & Co., Ltd.—Forms B. 103/1.

Army Form B. 103.

CERTIFIED CORRECT
Canadian Record Office
Westminster Hospital
7, Millbank, S.W.

Casualty Form—Active Service.

Regiment or Corps 52nd Candn Bn

Regimental No. 438751 Rank Pte Name Villeneuve Hero. Herbert

Enlisted (a) 10.5.15 Terms of Service (a) Mobilization Service reckons from (a) 10.5.15.

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) ____

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				
		Handed in	France	21/2/16	
		EMBARKED FOR FRANCE.		20/2/16	13144. B.Y. 1844. Dtd 4.2
11/3/16	#6 C.A. Am.	Sycosis.	adm. #6 C.A. Am.	4/3/16	a 36 4/3/16
11/3/16	"	do.	Yf. D.R.S. Dis Duty	7/3/16 10/3/16	a 36 11/3/16 #11
4/3/16	"	do. Burbea & Boils	adm. #6 6 70th Am.	4/3/16	a 36 4/3/16 #14
1/4/16	O.C. 52 Btn.	Wiring Course		25/3/16 28/3/16	a 7 B 213 1/4/16
6/5/16	"	3rd Fd. Div. Wiring Party		1/5/16	B213
14/5/16	Wire O.C. 9 Ca 70 Bde	Dies of Wounds at Bramshott	Field	14/5/16	Wire #53
					Part II ords #11 21/5/16

Lieut
for Lieut Col H A Ly Cdn Sec
70 Bde
Eng #2

(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., etc., also special qualifications in technical Corps duties.

[P.T.O.

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. 218, Army Form A. 36, or other official documents.
Date	From whom received				

ORIGINAL

438751

MEDICAL HISTORY SHEET. ~~A38751~~

Surname Villeneuve *Christian Name* A

Examined { on 10 day of May 1915 / at Pt. Arthur

Birthplace { City or Town St. John / County Canada

Apparent age 22

Trade or occupation Laborer

Height 5 Feet 6½ Inches.

Weight 151 Lbs.

Chest measurement { Minimum 33 inches / Maximum expansion 35 inches

Physical development Good

Small-Pox Marks Marks on left forearm

Vaccination Marks { Arm Right. Left. / Number 2

When Vaccinated last 1915

(*a*) Marks indicating congenital peculiarities or previous disease —

(*b*) Slight defects but not sufficient to cause rejection —

Approved by W. McCullough

Rank Captain M.O

Date	Fit or Unfit	Examined for Re-engagement.
		M.O
		M.O.
		M.O
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
1915	Good	W. McCullough M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
7/5/15	Good	W. McCullough M.O.
19/5 "	"	M.O.
5/6 "	"	M.O.

Enlisted on 10 *day of* May 1915 *at* Pt. Arthur

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	52nd O.B.	438751		10 May '15
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.

100M.—5-15.
H. Q. 1772-39-439

Christian Name.....

Surname.....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			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.
		Day	Month	Year	Day	Month	Year				

Belgium May 14th 1916

P. Villeneuve Esq.
Lake St Jean
Quebec P.Q.

Dear Sir:-

I regret to have to announce to you the death of your son who was killed last night while putting his wire on a certain trench last night. He always pick the best of men for this dangerous work & I might say that your son was one of the coolest & best we had in our Batt. Please accept my most sincere sympathy we all mourn our loss. He has paid the price for his country which perhaps we shall be called upon to do for this struggle for liberty-

Yours sincerely

J. J. Duchesne
Capt.

Encl'd 2 tax

RECEIVED-REÇU
PA/NL

-2 SEP 1987 08 19

P—56

Rank Pte. Name VILLENEURE. Hubert If in perm. Corps, What Unit? Reg'l No. 438751

Unit 52nd Battn. Married or Single Single

Place and Date of Enlistment Pt. Arthur, May 10th 1915. Place of Birth St. John, Can.

Name and Address, Next-of-Kin Mr. P. Villemeure, Roberval Lake, St. John, Que. Relationship Father.

Assigned Pay Monthly $ Payable to Relationship

Separation Allowance Payable to Relationship

Discharge, Date and Place 14/5/16. Reason Killed in Action Character DO #11. 21/5/16

PAY OFFICE, N. E. BRANCH, AUG 5 1916, CANADIAN CONTINGENTS

COPIED

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amo	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
1915 Dec 1	Dec 31	31	1.00	31.00	31	1.0	3.10		34.10	14 61		17.03 17.03			34.06	.04	
1916 Jan 1	Jan 31	31	1.00	31.00	31	1.0	3.10		34.10	108 156		14.60 9.73			24.33	9.81	
Feb 1	Feb 29	29	1.00	29.00	29	1.0	2.90		31.90	202 23		7.30 2.62			9.92	31.79	
Mar 1	31	31	-	31 -	31	-	3.10		34.10	74 105		2.60 2.61			5.13	60.66	
				122.00			12.20		134.20			73.54			73.54	60.66	Checked

Statement of Account rendered SEP 2 1916

Cash found in effec No report

BALANCE TRANSFERRED TO NEW LEDGER

Posted to large sheet

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

Married or Single: S

Place of Birth: Prov. Que. St John Can

Name and Address of Next of Kin: Mr P. Villeneuve, Roberval, Lake St John, Que. Can.

Relationship of Next of Kin: Father

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ — Effective (Date):

Payable to:

Relationship of Dependant:

Copied

Casualties, Promotions, &c.

Particulars	Effective Date	Authority
Killed in Action	14/5/16	Do. #11 21/5/16

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l No. 438751 Rank Pte Name Villeneuve Hubert O

(If in Permt. Corps) What Unit — Unit 52nd Bn. Transferred to Non Eff. Date 15/6/16 Authority Do 11 21/8/16

Permanent Force Allowances — Transferred to — Date — Authority

Place of Attestation: Port Arthur, Ont. — Transferred to — Date — Authority

Date of Attestation: May 10th 1915 — Transferred to — Date — Authority

Assigned Pay Monthly $: Nil — Date Effective

Payable to — Relationship

Assigned Pay Monthly $ — Date Effective

Payable to — Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) — Effective — Reason

Discharge Date and Place: Field 14/5/16 — Reason and Authority: Do 11 21/5/16

Account Transferred to Non-Effective Branch (Date): May 15th 1916

Account Transferred to Officers' Pay Branch (Date):

Pay Office, N.E. Branch, Ottawa, Aug 5 1916, Canadian Contingents

Date	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
Mar 31															134 20															73 54	60 66				
1/4 30/4	30	1 00	30	00	30	10	3	00							33 00	133 15/4	175 30/4							2 61	4 36					6 97	86 69				
1/5 15/5	15	1 00	15	00	15	10	1	50							16 50													1 10		1 10	102 09				Killed in Action 14/5/16 Do. 11 21/5/16 Dr 1 day May
~~1/6 30/6~~	~~—~~	~~-~~	~~-~~	~~-~~	~~-~~	~~-~~	~~-~~	~~-~~							~~-~~					~~86 305~~	~~15/5/16~~					~~256~~				~~256~~	~~9953~~				
																Balance on transfer to N.E. Branch.																102.09				
N.E. Oct. 16																									102 09					102 09	—	—			To Final Settlement 11. 10. 16.

Checked ...Ward

Statement of Account rendered SEP 2 1916

Cash found in effects No report

Date	Pay				Field Allowance				Working or Special Pay				Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls								Cash Payments				Assigned Pay	Other Charges	Total Debits	Balance		Pay Withheld or Deferred	Pay Available for Issue	Remarks
	No. of Days	Rate	Amount		No. of Days	Rate	Amount		No. of Days	Rate	Amount					1		2		3		4		1	2	3	4				Credit	Debit			
			$	c.			$	c.			$	c.				No.	Date	No.	Date	No.	Date	No.	Date												

ARMY FORM B. 178.

To be used (*a*) for recruits enlisting direct into the Regular Army, and (*b*) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

DUPLICATE

AFD

MEDICAL HISTORY of

Surname VILLENEURE *Christian Name* H

TABLE I.—GENERAL TABLE.

Birthplace ... Parish St. John County Canada.

Examined ... ... on 10th day of May 191 5 at Port Arthur.

Declared Age ... ... 22 years days.

Trade or Occupation ... Labourer

Height ... ... 5 feet 6½ inches.

Weight ... ... 151 lbs.

Chest Measurement: Girth when fully Expanded 35 inches. Range of Expansion 2 inches.

Physical Development ... Good.

Vaccination Marks: Arm ... Right / Left; Number 2

When Vaccinated 191

Vision ... ... R.E.—V= L.E.—V= 5

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*) Small pox marks onleft forearm.

(*b*) Slight defects but not sufficient to cause rejection ... ... (*b*)

Approved by (*Signature*) W. McCullough.
(*Rank*) Capt.
Medical Officer.

Enlisted ... ... at Port Arthur. on 10th. day of May 191 5.

	Corps.	Regtl. No.
Joined on Enlistment ...	52nd. O.B.	438751
Transferred to		

Became non-effective by

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

on day of 191 .

(*Signature*) Hugh Betty
(*Rank*) Lieut.-Col.
In Charge of Records, Canadian Contingent.

Table II.—Only for Admissions to Hospital or to the Sic

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Rem
	Day	Month	Year	Day	Month	Year			

k List in the case of Warrant Officers treated in quarters.

arks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer

Table III. Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
1915.	Vaccination Good. W. McCullough.
7.5.15	Inoculation. " "
19.5.15	" " "
5.6.15	" " "

Dept. Medical Board

Table IV. Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation