

2273352
SIN/NAS

Monette
Surname/Nom

Frank
Given names/Prénoms

**CANADIAN FORCES
FORCES CANADIENNES**

**PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL**

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

6290

**COMPONENT
ÉLÉMENT**

CEF

REGIMENTAL DOCUMENTS

6/18
22-4-19 Pte

NAME **MONETTE FRANK**

REGT. NO. **2273352** UNIT

52nd Bn.

H. Q. FILE NO.

(S)

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

(H)

1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)

1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

1 TRAINING HISTORY SHEET (M.F.W. 113)

1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

1 DENTAL HISTORY SHEET (M.F.B. 465)

1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

1 MEDICAL EXAMINATION (M.F.W. 129)

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PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

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LAST PAY CERTIFICATE (M.F.W. 44)

1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

1 PARTICULARS OF CHARACTER (A.F.W. 3226)

1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

2. *msie*
1 *casualty*
1 *CP3*
1 *R-122*

DEATH

Category

27431

DISCHARGE

Category *Demotion*

DESERTION

6290

3517
18-78
3-20
T

(H)

No. 2 INDEPENDENT COY INFANTRY
ATTESTATION PAPER.

No. 2273357

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

- 1. What is your surname?..... Monette
- 1a. What are your Christian names?..... Frank
- 1b. What is your present address?..... Portage la Prairie, Manitoba
- 2. In what Town, Township or Parish, and in what Country were you born?..... Bay St. Paul, Manitoba
- 3. What is the name of your next-of-kin?..... Mrs. Patrick Monette
- 4. What is the address of your next-of-kin?..... Portage la Prairie, Man., Canada
- 4a. What is the relationship of your next-of-kin?..... Mother
- 5. What is the date of your birth?..... December 16th, 1888
- 6. What is your Trade or Calling?..... Farmer
- 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
- 10. Have you ever served in any Military Force?..... No
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Frank Monette, 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.

X Frank Monette (Signature of Recruit)

Date May 8th 1917 . H. Dawson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Frank Monette, 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.

X Frank Monette (Signature of Recruit)

Date May 8th, 1917 . H. Dawson (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 Winnipeg this 12th day of May 1917.

H. M. Thompson (Signature of Justice)

Description of Frank Monette on Enlistment.

Apparent Age 34 years 7 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

Height 5 ft. 9 ins.

Chest measurement: { Girth when fully expanded 30 1/2 ins.
 Range of expansion 3 1/2 ins.

Complexion Dark

Eyes Brown

Hair Black

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

Vision R. Eye 20/20
 " L. Eye 20/30
 Hearing R. Ear N
 " L. Ear N

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 12th 1917.

Place Winnipeg, Man.

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:—

MOBILIZATION
 MEDICAL BOARD
 APPROVED

[Signature] PRESIDENT

[Signature] MEMBER

[Signature] MEMBER

CERTIFICATE OF OFFICER COMMANDING UNIT.

Frank Monette having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

[Signature] (Signature of Officer)

Date May 12th 1917.

LIEUT & O. C.

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

War Service Badge
 Class "A" No. 72376
 M. F. W. 54. (A. F. B. 103.)
 350M.—5-16
 H. O. 1772-39-970.

Casualty Form—Active Service.

Unit, Regiment or Corps. o. 2 INDEPENDENT COY. INFANTRY

Regimental No. 2273352 Rank Pte Name Monette, Frank
 C. E. F.

Enlisted (a) 8-5-17 Terms of Service (a) 1 year Service reckons from (a) May 8-1917

Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

Extended Re-engaged Qualification (b) Farmer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

Embarked Halifax, N.S. Oct. 4-1917. R.M.S. "Metagama"

Dis-embarked Liverpool, Eng. 17/10/17

25/10/17
 O.C. #2
 Ind. Inf. Co. Isfd. 1018th Res. Batta. St. Martin's Plains 17
 Pt. II, No. 204.

[Signature]
 Lieut & Co.
 Co. 2 Independent Infantry Co.

CERTIFIED COPY
 11 OCT 1917
 CAN. RECORDS, LONDON

OCT 30 1917 8 RES BN TAKEN ON STRENGTH DIRGATE 15.10.17 PT 11 DO 288

(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.]

2273352 Pte Monette J

CERTIFIED COPY
 CAN. RECORDS DEPT.

Report Date	From whom received	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
-------------	--------------------	--	-------	------	---

2/10/18	Obtained from	Sos. Drafted to 52nd Bn of sea	Seaford	2/10/18	Part of D.O. 276 <i>[Signature]</i> Adjut. 18th Can Reserve Battalion.
---------	---------------	--------------------------------	---------	---------	---

O.C.C. B. D.	Landed in France. Taken on strength. 52nd Cdn. Bn.	2/10/18	Nom. Roll d/		
- do. -	Left for Unit.	6/10/18	Pt II D.O. d/	12-10-18	
O.C. 52nd Bn.	Arrived Unit for duty	11-10-18	Nom. Roll d/	6-10-18	
6.10.18	6.10.18		B. 213 d/	19-10-18	
8.10.18	8.10.18			8.10.18	

O.C. Cdn. S.O.S. for demobilisation in G.F.C.
 Comd. Camp.
 Le Havre

[Signature]
 Proceeded to England
 Depot Seaford

N.R.
 Pt. 2, C/O
 10.2.19

Lieut. for Lt. Col A.A.G.
 Cdn. Sect. G.H.Q.

S.O.S. ON F.C. to CEF Daily Orders Pt. 2 #19.

[Signature]
 Lieutenant-Col.,
 O.C. 52nd. Canadian Infantry Battalion.

15. MAR. 1919 O.S. Dispersal Station 2
 17.3.19 → D.O. 94 Pa. 2.
 and Dispersed 31.3.19 D.O. 94 Pa. 3
[Signature] Lieut.
 for O. C. 10 District Depot.

EMBARKED S S OLYMPIC
 SOUTHAMPTON 17-3-19

[Signature]
 Capt.
 No. 8 Trans-Atlantic Conducting Staff

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

72376
War Service Badge
Class "A" No.

THIS IS TO CERTIFY that No. 2273352. (Rank) Pte.

Name (in full) MONETTE Frank enlisted in
the No 2 Independent Coy.

CANADIAN EXPEDITIONARY FORCE at Winnipeg on the 6th
day of May 1917

HE served in 52nd Battalion MAN. REGT

and is now discharged from the service by reason of Demobilization.
Medical Unfitness.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:

Age 36
Height 5'9"
Complexion Dark
Eyes Brown
Hair Black

Marks or Scars NIL

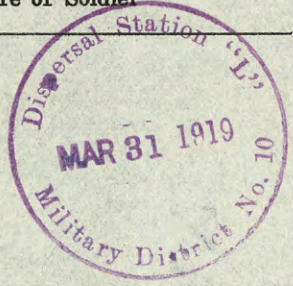
J. Monette
Signature of Soldier

J. W. Bernard

Issuing Officer

Sgt.
Rank

Date of Discharge



Date Mar 31st 1919

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

LTR

Rank

Pte.

Name MONETTE, Frank ✓

Reg'l No.

2273352 ✓

Unit No. 2. Indep. Co. to
18th Res. Bn.

If in perm. Corps,
What Unit? }

Married or Single

Single ✓

Place and Date of Enlistment Winnipeg, May 8th, 1917.

Place of Birth Bay St Paul, Man¹/₂

Name and Address, Next-of-Kin Mrs Patrick Monette ✓

Portage La Prairie, Manitoba, Canada.

Relationship

Mother. ✓

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

H. W. & V., Ld.—9546-16.

N/E R. B. No. 18370
File R.L.
Category R. C. 1.

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.				
		Arrived in England Taken on strength.		17-10-17	S/S Metagama
30. 10. 17	18 th Res.			18. 10. 17	Pt 288.
14. 11. 17	MR. (18 Res) Am Can Corp.			10. 11. 17	C.L.C. 63 V.D.G.
3-10-18	18 th Res SOS to 52 nd Bn, O' Seas			3-10-18	Pt 276
19 2 19	52 nd BDN PROC, TO ENGLAND			10. 2. 19	D O, 29
15 3 19	52 nd BDN PROC TO CANADA			17 3 19	D O 19
	S/L NO 41 & DISP AREA, L				

CHECKED

1918

1919

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2),
12. Last Pay Certificate (P. 851). *& duplicate*
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2505).
15. Sundry Documents.

Group..... *B*

Checked by No..... *14*

Date..... *12-3-19*

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..... No. 2 Independent Infantry Co.

(2) Regimental Number..... 2273352

(3) Full Name of Soldier..... Frank Monette

(4) Place of Birth..... Bay St. Paul, Manitoba

(5) Are you married, or not?..... widower

(6) If married, state,
(a) Full name of your wife.....

(b) Present Postal Address.....

(7) Are you a widower?..... Yes

(8) Have you any children?..... No

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive?.....**Yes**.....

If so, state name and address.....**Patrick Monette, Portage la Prairie, Man.**

(10) Is your Mother alive?.....**Yes**.....

If so, state name and address.....**Julia Monette, Portage la Prairie, Man.**

(11) If your Mother is a widow.....

Are you her sole support, or not?.....

(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.

(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.

(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.

(15) Are you insured?.....**No**.....

If so, in what Company?.....

Have you made arrangements for payment of your Insurance premium.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

A. M. Ainsworth

Officer Commanding.
LIEUT & O. C.

Date.....**Sept. 2-1917**.....

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 2273352 Rank Pte Surname MONETTE
(Given name in full)

Unit or Corps 52 Battr Birthplace Bay St. Paul Man

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique Good Weight 155 lbs. Height 5' 9" in. Colour of Eyes Brown
 Nutrition Good
 Pulse 72 Regular
 Condition of arteries Soft
 Vision Rt. 6/12 Left. 4/12
 Hearing (conversational voice) Rt. 20 ft. Left. 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin.)
Small brown mole
abdomen 6" to the
left of umbilic.
no vaccination marks

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System yes Cardio-Vascular System no
 Special Senses no Integumentary System no Respiratory System no
 Disturbance of mentality no Muscular System no Digestive System no
 Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

9-11-17 Gonorrhoea.
250 days hospital
apparently cured

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Buenos Aires (Overseas)
Date 20/2/19 Signed C. J. Bouyer M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature F. Morilla

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at..... (Canada)
Date Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

LS

[OVER]

FORM OF WILL.

I, Frank Monette (Name in full)

Regimental Number 2273352 serving in No. 2 Infantry Draft

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

I bequeath all my real estate unto

My Father, Patrick Monette and
My Mother, Julia Monette of Portage la
Prairie, Manitoba, Canada,

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

equally
~~absolutely~~ and my personal estate I bequeath to

My Father, Patrick Monette and
My Mother, Julia Monette of Portage la
Prairie, Manitoba, Canada, equally

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

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this 2 day of Sept. A. D. 1917
His mark

Frank Monette 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 S. M. Hillman, A.S.

Address of Witness 61 Lansdowne Ave. W. W. P. Q.

Occupation of Witness Soldier

Signature of Second Witness Quice

Address of Witness 404 Burrows Ave., Winnipeg

Occupation of Witness soldier

THE TWO WITNESSES MUST SIGN HERE

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

MONETTE FRANK R.

REGIMENT

52 Inf.

RANK

Plt

No.

227 3352

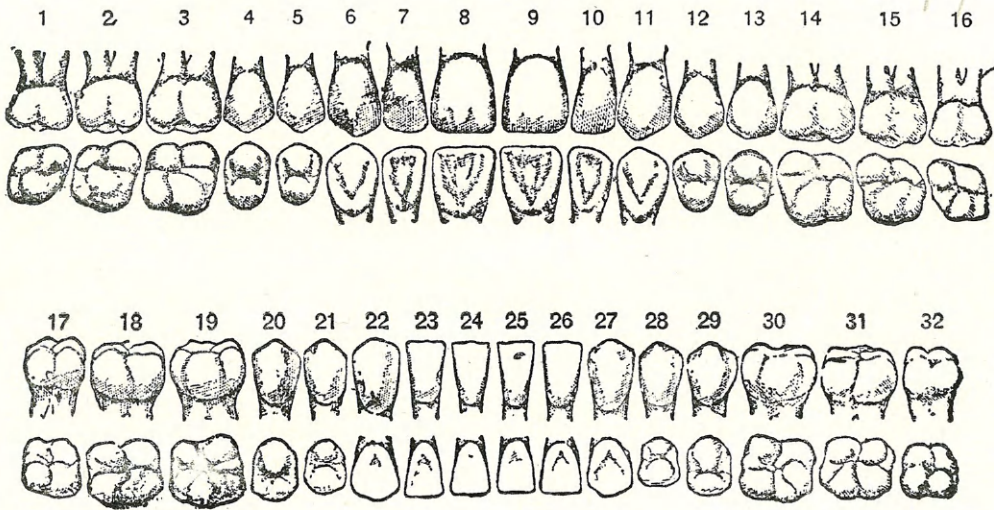
Date of Examination in England

Date of Examination in France

25/1/19

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ?

HAS HE EVER RECEIVED DENTAL TREATMENT ? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada

(b) In England

(c) In France

Signature of Dental Officer

J. H. ... Capt

11A

Surname *Woneke* Christian Name *Frank*

STATION	Date of Arrival at the Station	DATES OF						DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
<u>CANADIAN HOSPITAL, ETCHINGHILL, LYMINGE,</u>		9	11	18	16	7	18	GONORRHOEA.	250	Free purulent discharge & Pus. lgb on admission. Treated by irrigations, sounds & massages. Givens & arbolised. Urn discharge both urines, clear, - no urethral discharge, Reg. for lgb & pus.	<i>[Signature]</i>

SURNAME

CHRISTIAN NAME OR NAMES

FORM D.M.S 1300

REG. No.

MONETTE.

F.

2273352.

RANK

UNIT

Co.

TROOP

BATTY

Pte.

Man. 18R.

HOSPITAL

DATE OF ADMISSION

Etchinghill. Can.

10-11-17.

1.

HOSP.

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

V.D.G. *HO*

2-

3.

DISPOSITION

DATE

C.L. 15-11-17. C63.

22-7-18 C770-1

REMARKS

Dis. 17-7-18

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.E.C. London.

Number. 2273352 Rank. pts. ~~B~~

Surname. MONETTE

Christian Name. Frank

Units. 52nd Bn. Cavalry. Theatre of War. France

Date of Service. 3-10-18

Remarks.

Latest Address. Portage la Prairie
Manitoba.

Roll No. B. Page 7545.

No.

RANK

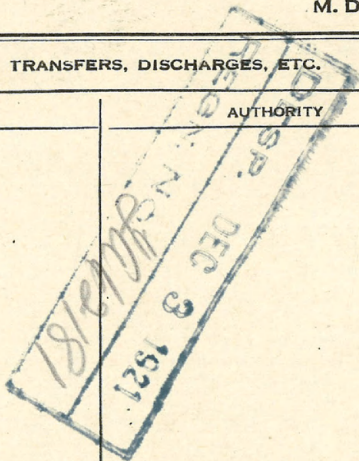
NAME

T. O. S.

UNIT

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY



Name *MONETTE*Rank *Private*Reg. No. *2273352*Unit *18 Res*Next of Kin *broader*

Date

Movement

Place

Casualty

List
No.Notified
N/K O.

W.O. List

*10-11-17**Can. H. Chinghill**V.D.G**C-63**5555**17-7-713**Rich**do**C 290**6664*

NAME *Monette D.*

RANK AND CORPS

Pte. (18th R.)

REGT'L No.

2273352

H. Q. FILE No. 649.

FOLLOWS

No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

LIST No.

HOSPITAL

DATE OF
ADMISSION

(Man. Reg't)
REMARKS

663.	ban. Etchingill Lyminge	10-11-17.	V. D. G.
C270 ¹	Discharged	17-7-18	" " "

SURNAME.

Monette.

10. CARD NO.

CHRISTIAN NAMES

Frank

*605 Les 31-3-19 Genol
Do 94 of FOLL. 4-4-19
#10910*

REGL. No.

2273352

RANK

Pfc

UNIT

No. 2. Ind. Inf. Co. (Draft)

FORMER CORPS

nil

NEXT OF KIN.

NAMES IN FULL

Monette, Mrs. Patrick

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

Portage la Prairie, Man

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada, Baie St. Paul, P. Q.

DATE

Dec. 16th 1882.

PLACE OF ATTESTATION

Winnipeg, Man

DATE

May 12th 1917

R/C 24-3-19 ²⁹⁰185 Fle

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

34

YEARS

MONTHS

HEIGHT

5-

FEET

9.7

INCHES

CHEST MEASUREMENT

33

INCHES

EXPANSION

3 1/2

INCHES

COMPLEXION

Dark

EYES

Brown

HAIR

Black

DISTINGUISHING MARKS

nil

MEDICAL EXAMINATION.

PLACE

Winnipeg, Man

DATE

May 12th 1917

Present Address,

Portage la Prairie, Man.

REGT. NO. *2273357* RANK *Pte* NAME (IN FULL) *Monette Jr*
 ORIGINAL UNIT C.E.F. *21.6.* IF IN P.F. WHAT UNIT? (BLOCK LETTERS SURNAME FIRST)

PARTICULARS EFFECTIVE DATE AUTHORITY

PLACE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY
St. Louis *St. Louis* *MAR 17 1919* *10094*

DATE OF ATTESTATION TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY \$ *15.00* DATE EFFECTIVE

PAYABLE TO *Mrs Julia Monette* RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS
 ADDRESS *P.O. Postage Pa Prairie Man.*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE *closed* PLACE *Man.* DATE EFFECTIVE *3/3/19*

DISCHARGED *M.D. 10* DATE *MAR 31 1919* REASON *2* AUTHORITY *10094* IF ENTITLED TO POST DISCHARGE PAY

ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					DEBIT	CREDIT	
NO. DATE	NO. DATE	NO. DATE	\$ C.	\$ C.	\$ C.	\$ C.	\$ C.	\$ C.	\$ C.	\$ C.		
			<i>9.73</i>									
			<i>4.87</i>									
			<i>5.00</i>									
			<i>105.67</i>					<i>15.00</i>	<i>140.27</i>		<i>117</i>	<i>Bal. 117 BAL. ENG. L. P. C.</i>
												<i>Clothing Alice, 1st payment W.S.G.</i>
												<i>Advances - Boat - Train</i>
												<i>A.P. chd. on Eng. L. P. C. to 28/2/19</i>
												<i>On 15th of March</i>
						<i>658.50</i>						<i>Soldier's Dependent</i>
						<i>70.00</i>			<i>210.00</i>	<i>120.00</i>		<i>1st Payment W. S. G. as above</i>
			<i>558375</i>	<i>40</i>					<i>140</i>			<i>70th India</i>
			<i>558376</i>	<i>60</i>						<i>60</i>		<i>60 14th " " 3.A.</i>
			<i>578849</i>	<i>70</i>					<i>70</i>			<i>70-3rd</i>
			<i>850</i>	<i>30</i>						<i>30</i>		<i>30-3rd - S/A</i>
			<i>77779</i>	<i>70</i>								<i>70th Final</i>
			<i>780</i>	<i>30</i>								<i>30th Final</i>
			<i>210</i>	<i>170</i>		<i>70</i>			<i>400</i>			

acc. closed

AUDITED
 JUL 7 1919
 Audit Clerk
M. D. 10

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

To Whom *Mrs Julia Monette*
Address *Postage La Prairie*
Man.

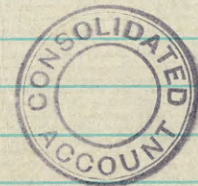
By Whom Assigned *Monette . Frank*
Regtl. No. *27355*
Rank *pte*
Corps *#2 Ind Inf Coy*

Rate *15.⁰⁰*

OCT 1 1917

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.
 50m.-6-16.
 1772-89-819.

Sheet No. 2.

Mrs Julia Monette

OVERSEAS CONTINGENTS

Monette
P A 9th Inf Co pte

PAYMENTS.

Name of Soldier

L. L. Job 4503. - Req. 6332.

777 3352

15.00 **OCT 1 1917**

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>E 48923</i>	<i>15</i>	<i>J</i>
Nov.		<i>I 50283</i>	<i>15</i>	
Dec.		<i>T 62805</i>	<i>15</i>	<i>45/h</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

off

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

1-1-18 BofR.

Separation and Assigned Pay Branch

M

18045 Oct 1-17

OVERSEAS CONTINGENTS

D of C. 10-5-17

RATE OF SEPARATION ALLOWANCE

2.5	30 ⁰⁰		
-----	------------------	--	--

RATE OF ASSIGNMENT

15			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 227 33 52
 Rank Pte Promoted Reverted Discharge
 Soldier's Name Frank Monette
 Battalion #2 Ind Inf Coy
 Beneficiary Mrs Julia Monette
 Relationship Mother
 Address Portage La Prairie, Man.

PARTICULARS OF ASSIGNMENT

Name Mrs Julia Monette
 Address Portage La Prairie
 Change of Address Man
 1
 2
 3
 4

M.F. 20 2654-29-7-18 (514)

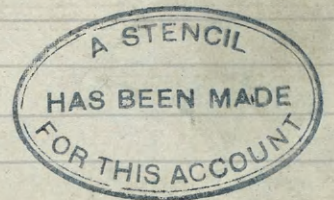
Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec. 3/17			45	45	
Jan 1/18	W 68392		15	15	
Feb	U 74047	50		50	
Feb.	B 74692		15	15	
Mar	N 90633	.25	15	40	
April	M 11851	.25	15	40	
May	R 13784	.25	15	40	
June	N 20083	.25	15	40	
July	H 29484	.25	15	40	
Aug	P 38728	.25	15	40	
Sept	S 50136	.25	15	40	
Oct	X 54405	.25	15	40	
Nov	J 60839	.25	15	40	
Dec 1919	P 67624	.45	15	60	
Jan	U 70854	30	15	45	
Feb	W 75281	30	15	45	
Mar	M 84641	.30	15	45	
		410	270 =		

13004-F-6

S.A. opened 1-1-18 BofR. File 13004-7-6-14-2-18-RAB
\$50⁰⁰ Spcl. Reg. to adjust S.A. - mailed 15-2-18.

M. F. W. 128.
4 COM. 6-17-1772-39-1141
L. L. 22820-M. & D. 1903.

26/3/17
 31-3-19
 3/4/19
 M. D. # 10
 Destruction # 73782



stopped h 3 19

UNIT AND TRANSFERS

ORIGINAL UNIT: *# 2 Ind Inf Co*

DATE ACCOUNT FIRST OPENED: *1/10/17*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
			<i>M.R.D.</i>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>3/2</i>	<i>5133</i>	<i>7cl 50 fr</i>	<i>9.23</i>				
<i>10/2</i>	<i>148</i>	<i>Pthrdk - 22</i>	<i>9.72</i>				
			<i>19.06</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1</i>	<i>- 10</i>	<i>-</i>	<i>-</i>

PARTICULARS OF RENDERING NON-EFFECTIVE *Can 2/19 - 6357 2/18 - M.D. 12/10 / Led: Bal: 20 23 Cr R.P.C. - 1 17 Cr*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>1918</i>									<i>8642</i>		
<i>April</i>	<i>Pat. P. Pay</i>	<i>33</i>		<i>Cap AR. 145 12/11/18 E Hill 243</i>	<i>243</i>			<i>15</i>	<i>10199</i>		
<i>May</i>	<i>P. Pay</i>	<i>3410</i>		<i>Cap AR. 479 15/5/18 do. 243</i>	<i>243</i>			<i>15</i>	<i>11810</i>		
		<i>3410</i>		<i>AR. 1005 18/5/18 18 Res. 56</i>	<i>299</i>			<i>15</i>			
<i>June</i>	<i>P. P.</i>	<i>33</i>		<i>Cap AR. 819 14/6/18 E Hill 243</i>	<i>243</i>			<i>15</i>	<i>13267</i>		<i>agreed 30/18</i>
<i>July</i>	<i>P. P.</i>	<i>3410</i>		<i>Cap AR. 1200 Etolinghull 12/1/18 243</i>	<i>243</i>			<i>15</i>			
		<i>3410</i>		<i>" 1107 18 Res 24/7/18 243</i>	<i>243</i>			<i>15</i>			
		<i>3410</i>		<i>7 blqs 9-11-17-16-7-18 = 250 days 18 Res Bon St 110204 27/18 150</i>	<i>150</i>			<i>15</i>	<i>209</i>		<i>28-8-18</i>
<i>Aug</i>	<i>P. P.</i>	<i>3410</i>		<i>Cap AR. 1255 18 Res 12/8/18 243</i>	<i>243</i>			<i>15</i>			
		<i>3410</i>		<i>Don R. 14005 16-7-18 95</i>	<i>95</i>			<i>15</i>	<i>1130</i>		
		<i>3410</i>		<i>AR. 1429 18 Res 27/8/18 243</i>	<i>243</i>			<i>15</i>			
<i>Sept</i>	<i>P. P.</i>	<i>33</i>		<i>Cap AR. 1553 18 Res 11/9/18 730</i>	<i>730</i>			<i>15</i>	<i>1470</i>		
		<i>33</i>		<i>" 1629 " 25/9/18 730</i>	<i>730</i>			<i>15</i>			

FORWARD

157

NUMBER 2273352

RANK

PR.

NAME

MONETTE Frank

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	P.P.			Balance 30/9/18					14 70	N.I.	
		34 10		C.A.P.				15	33 80		
				Quos. 30/9	1 46						
				4/19/19 q Bde 16/10	3 73				28 61		
		34 10			3 19			15			
Nov		33		C.A.P.				15			
Dec		34 10		4/12/43 ✓	2/11	3 73 ✓					
Jan		34 10		2751 ✓	15/11	9 33 ✓					
				C.A.P.				15			
				✓ 3286 ✓	1/12	7 46 ✓					
				✓ 3699 ✓	19/12	3 73 ✓					
		191 20		C.A.P.				15	60 56		
		47				24 25		45			
Feb	P.P.	30 80		14188 ✓	4/1	3 73 ✓					
				14752 ✓	18/1	3 73 ✓					
				24937 Lidow ✓	5/2	48 67					
				C.A.P.				15			
				5133 ✓	3/2	9 33					
				1148 B. Skott. 16.2	9 73						
					75 19						
				A.R. 993. 8/31.9. Em L.P.C. Em L.P.C.	9 73			15			
				8492							
				24/AR. 51015 30/9/18. Lyman	12	advanced 7/4/19					
		30 80			85 04			15	8 68		
				SOS to Canada. 17/3/19							
				S.L. 41. MRA							

NE

Rec
Jan

3410	1/11 2443	✓	2/11	3731	
3410	2751		15/11	933 ✓	
	C.A.P.				15
	3286	✓	1/12	746 ✓	
	3699	✓	19/12	393 ✓	
	C.A.P.				15
19120					6056

Feb
P.P.

3080	14188	✓	4/11	373 ✓	
	14752	✓	18/11	373 ✓	
	24937	Lidow	5/2	4867	
	C.A.P.				15
	5133	✓	3.2	933	
	148	B. Scott.	16.2	973	
				7519	
	AR 993	8/3/19	Erny ccc	973	
			Em LPC	8492	15
	2N/AR 51015	30/9/18	Lyming	12	advised 7/4/19
3080				8504	15 868

NE

SOS to Canada. 17/3/19
S.L.41. MRD

