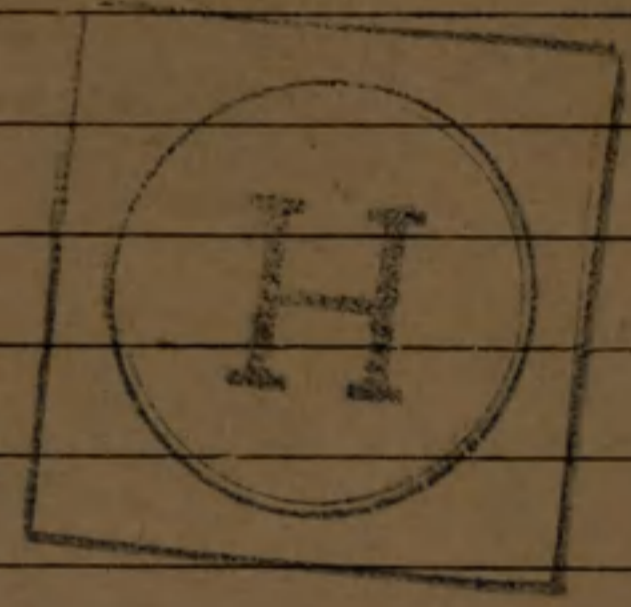


REGIMENTAL DOCUMENTS

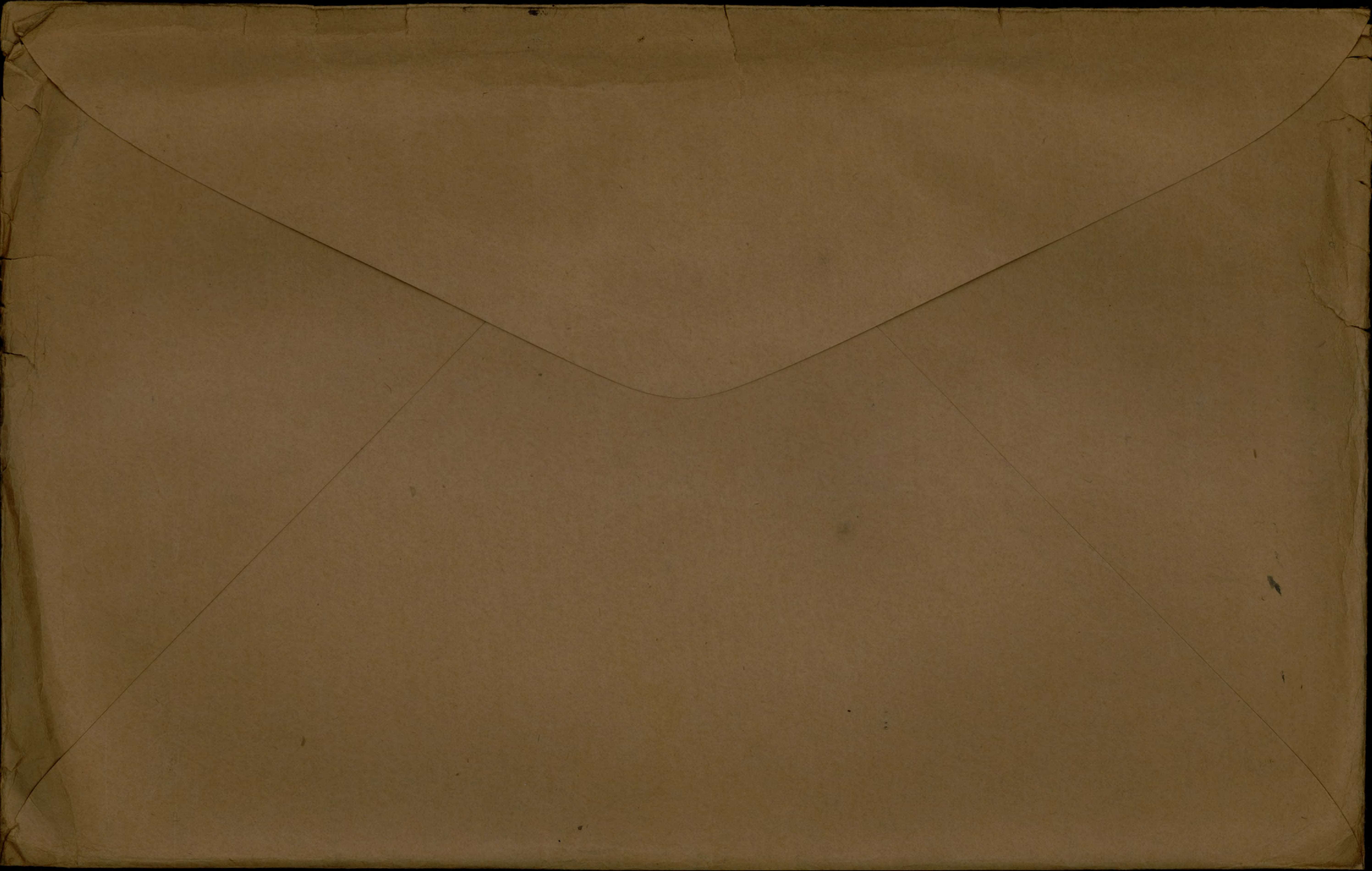
NAME Blanchard, George W. REGT. NO. 300 836 UNIT C-7A H. Q. FILE NO. 23623

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CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
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)				M	
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)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					DEATH
1 MEDICAL EXAMINATION (M.F.W. 129)					
1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1 Sent cert.					
1 C.D. 3					
1 Route Letter					
32 Cas Cards					
1 B. 22					
1 P.C.					
1 P.C.					
					47-23
					22-23
					26 24
					2



*Deceased 25 11-58*



24<sup>th</sup> B<sup>ty</sup>. C.F.A.

Original  
No. 300336

# ATTESTATION PAPER

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE

### QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS)

1. What is your name? George Blanchard.
2. In what Town, Township, or Parish, and in what Country were you born? Lakefield, Peterboro Co.
3. What is the name of your next-of-kin? Mrs W. N. Blanchard
4. What is the address of your next-of-kin? 546 Waterford St. Peterboro.
5. What is the date of your birth? 1<sup>st</sup> October 1897
6. What is your trade or calling? Clerk.
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? Yes.
10. Have you ever served in any Military Force?  
If so, state particulars of former Service. Yes. (8 Yr. 54<sup>th</sup> Inf)
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.

G. Blanchard (Signature of Man.)  
W. Stannell (Signature of Witness.)

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Blanchard, 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.

Date Aug 16 1915 George Blanchard (Signature of Recruit.)  
W. Stannell (Signature of Witness.)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Blanchard, 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.

Date Aug 16 1915 George Blanchard (Signature of Recruit.)  
W. Stannell (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 Peterboro this 16 day of Aug 1915.  
W. Stannell (Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.  
W. Stannell (Approving Officer.)

DESCRIPTION OF George Blanchard ON ENLISTMENT.

Apparent Age 14 years 10 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. 5 1/2 ins.

Chest measurement { Girth when fully expanded 34 ins.  
 Range of expansion 2 ins.

Complexion Fair

Eyes Blue

Hair Light

None

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

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 Aug 16 1911 G. Stewart

Place Colerbro W. J. ... 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

Geo. Blanchard 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.

W. J. ... (Signature of Officer.)

Date Aug 16 1911

# CANADIAN EXPEDITIONARY FORCE

War Service Badge

## DISCHARGE CERTIFICATE

Class \_\_\_\_\_

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

Issued

THIS IS TO CERTIFY that No. <sup>3</sup> 300386 (Rank) Cor.

Name (in full) George W. Blanchard. enlisted in

the C.F.A.

CANADIAN EXPEDITIONARY FORCE at Ottawa on the 16

day of Aug. 19 15.

HE served in C.F.A. - France & Belgium

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 22  $\frac{7}{12}$

Height 5'-5 $\frac{1}{2}$ "

Complexion Fair

Eyes Blue

Hair Light

Marks or Scars \_\_\_\_\_

George W. Blanchard.  
Signature of Soldier

[Signature]  
Issuing Officer

Date of Discharge

No. 2 District Depot  
Toronto, Ont.

MAY 27 1919

FOR  
O.C. No. 2 District Depot.

Rank

Date MAY 27 1919 19

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.

DEPARTMENT OF MILITIA AND DEFENCE <sup>P. 380</sup>  
**WAR SERVICE GRATUITY**  
*Certified this document checked with Regimental documents.*

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names *George Welford* 2. Surname *Blanchard*
3. Rank *Sgt* 4. Original Unit *33 Batty* 5. Reg. No. *300336*
6. Address, in full, to which future payments of gratuity are to be forwarded  
*Bank of Toronto - Head Office Toronto, Ont.*
7. Date of enlistment in the C.E.F. *Sept 15, 1915.*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *not applicable*
9. Relationship of such dependent *not applicable*
10. Address, in full, of such dependent *not applicable*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *not applicable*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States?
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *3 years 7 months*  
*33 Batty C.F.A. - 48 Batty C.F.A. - 5 Batty C.F.A.*  
*C.A.B.D.*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.?

*15/1/21*

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *no*

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid. *No*

20. Have you been issued with a War Service Badge? If so what class? *no*

21. Have you, during the present war, served in the Imperial Forces? *no*

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled. *no*

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *no*

(b) If so, was such reversion in consequence of misconduct or inefficiency? *not applicable*

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge

**MAY 27 1919**

(b) Reason for discharge

**DEMOBILIZATION**

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *G. W. Blanchard.*

Place of Residence: *Wescott apt. Fuller Ave. Toronto Ont.*

Declared before me at: *Ripon, Yorks.*

This *25* day of *Apr* 19 *19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

QUESTIONS 12, 13, 14, 20, 24, 25, 26 and 27 ARE LEFT UNANSWERED.

*L. M. Shannon*

**POST DISCHARGE PAY.**

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Certified Correct.

District Paymaster.

# ORIGINAL MEDICAL HISTORY SHEET

Surname Blanchard, Christian Name George

Examined { on 16 day of Aug 1915  
 at Peterboro  
 Birthplace { City or Town Luffield  
 County Peterboro

Approved by G. Stewart Cameron  
 Rank Adj't Genl M.O.

Apparent age 18  
 Trade or occupation Aug 21/5 fit  
 Height 5 Feet 5 1/2 Inches.  
 Weight 125 Lbs.  
 Chest measurement { Minimum 32 inches.  
 Maximum expansion 34 inches.  
 Physical development Good.  
 Small-Pox Marks none

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		<u>W.E. Beel</u> M.O.
		<u>Rec. after D.D.S. had been made out in B.I.I.</u> M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left  
 Number

Date	Result	VACCINATIONS.
<u>Oct 1/15</u>		<u>W.E. Beel</u> M.O.
		M.O.
		M.O.

When Vaccinated last  
 (a) Marks indicating congenital peculiarities or previous disease none

(b) Slight defects but not sufficient to cause rejection none

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>Sep 14 1915</u>		<u>W.E. Beel</u> M.O.
<u>Sep 24 1915</u>		<u>W.E. Beel</u> M.O.
<u>1913/19</u>	<u>2003</u>	<u>Dr. M. W. Capt</u> M.O.

Enlisted on 16 day of Aug 1915 at Peterboro

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>33rd Battery</u>	<u>300336</u>		
Transferred to.. ..	<u>C.F.A.</u>			

### 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.

CANADIAN



2nd London General Hospital,  
St. Mark's College,  
King's Road,  
CHELSEA. S.W.

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				
		4	2	19							
16 Can Gun Hosp. Orpington Kent		3	3	19	21	3	19	Influenza	19	Convalescent on admission Exam <sup>n</sup> negative Disch Duty	G. H. Dyer Capt. R.A.M.C.

Christian Name

Surname

MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book. <i>110908</i>	Regimental No.	Rank.	Surname.	Christian Name.
	<i>300366</i>	<i>Gnr.</i>	<i>Blanchard</i>	<i>G.</i>
Year <i>1919</i>	Unit.	Age.	Service.	
	<i>C. F. A.</i>	<i>20</i>	<i>42 12</i>	
Station and Date.	Disease <i>Influenza (convalescent)</i>			
<i>Camp.</i>	<i>none</i>			
<i>Pres Ill.</i>	<i>Taken sick on leave Feb 4 - to Camp 5<sup>19</sup></i>			
	<i>pains rashes - feverish - no cough - no</i>			
	<i>soil throat - temp lasted 5 days - has not</i>			
	<i>been up since - gradually cleared up.</i>			
<i>Post Ill.</i>	<i>Similar attack last winter -</i>			
<i>Pres Cond.</i>	<i>Just good appetite good - bowels normal -</i>			
	<i>Wears slippers only</i>			
<i>14<sup>3</sup></i>	<i>Disch. Order</i>			
	<i>Y. R. Jones</i>			
	<i>Capt Comd</i>			

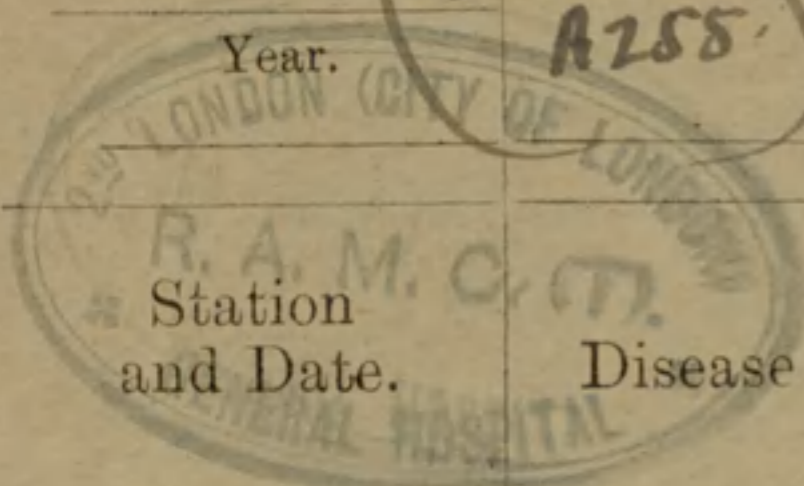
\* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.  
(6365) W2944/P438 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E2349) [P.T.O.]

Station  
and Date.

MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	300366	Gunner	Blanchard	E.W.
Year.	Unit.	Age.	Service.	
	2 C. F. A.	20	4 . 3	
Station and Date.	Disease			
	Influenza . 21.			

7016  
A255



On leave 13 days. ill 9 days ago  
~~very~~ worse last 2 days.  
 Thickly furrowed tongue.  
 No moist sounds.

Must Sod sat c Pharynx

R + <sup>+0.50</sup> +2.00      L + <sup>+0.50</sup> +2.50

22-2-19 H.C. R =  $\frac{4}{34} + \text{Sph. } 0.25 + \text{C. } 1.00 \text{ at } 75 = \frac{6}{6}$   
 L =  $+ \text{Sph. } 0.25 + \text{C. } 2.00 \text{ at } 85 = \frac{6}{6}$

25-2-19 R + cyl. 1.00 at 75 } =  $\frac{6}{6}$   
 L + cyl. 1.75 at 85 } =  $\frac{6}{6}$

26.2.19. Canadian Convalescent.  
Margill

Station  
and Date.

26

29

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 131.

Corps B-F.A.  
No. 300866

Rank and Name Gunner Blanchard

Military Hospital 29 London General  
Age 20yr. Service 3 1/2

Disease \_\_\_\_\_ Date of admission 4 Feb. 1919 Date of discharge \_\_\_\_\_ Result \_\_\_\_\_

Dates of Observation	4		5		6		7		8		9		10		11		12												
Days of Disease																													
Temperature Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	
	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	
107°	6	2	6	16	2	8	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	2	6	10	
106°																													
105°																													
104°																													
103°																													
102°																													
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99°																													
98°																													
97°																													
Pulse per Minute	112		108		96		100		90		96		88		96		96		96		96		96		96		96		
Respirations per Minute	28		28		24		24		24		24		24		24		24		24		24		24		24		24		
Motions per 24 hours			1		0		1		1		1		1		1		1		1		1		1		1		1		

On admission

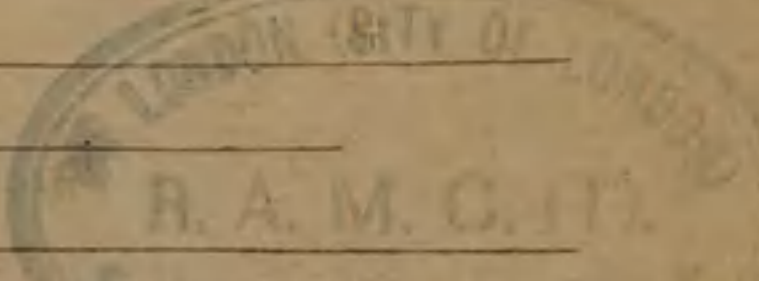
Signature [Signature] In charge of case.

# CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 131.

Corps 2 C.F.A. No. 300366 Rank and Name Gunner Blanchard Age 20 Military Hospital \_\_\_\_\_ Service H. 3.  
 Disease \_\_\_\_\_ Date of admission 4 Feb. 1919 Date of discharge \_\_\_\_\_ Result \_\_\_\_\_



Dates of Observation	Days of Disease																													
	4	5	6	7	8	9	10	11	12	13	14	15	16	17	19	20	21	22	23	24	25	26	27	28	1	2	3	4	5	6
Temperature Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.
107°																														
106°																														
105°																														
104°																														
103°																														
102°																														
101°																														
100°																														
99°																														
98°																														
97°																														
Pulse per Minute	106																													
Respirations per Minute	25																													
Motions per 24 hours																														

Signature \_\_\_\_\_ In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

40 Corps C.T.A.

Rank and Name Sgt. Blanchard

Military Hospital No. 16, Camp of the Hoop.

Disease Influenza

Date of admission 3-3-19

Date of discharge \_\_\_\_\_

Result \_\_\_\_\_

Dates of Observation	Time																											
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.
3																												
4																												
5																												
6																												
7																												
8																												
9																												
10																												

Admitted 10:30 AM  
 Discontinued

Pulse per Minute: 72, 106, 92  
 Respirations per Minute: 20

Signature \_\_\_\_\_ In charge of case.



# CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps \_\_\_\_\_

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

Rank and Name \_\_\_\_\_

Age \_\_\_\_\_

Military Hospital \_\_\_\_\_

Service \_\_\_\_\_

Disease \_\_\_\_\_

Date of admission \_\_\_\_\_

Date of discharge \_\_\_\_\_

Result \_\_\_\_\_

Dates of Observation																														
Days of Disease																														
Temperature Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	
	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.
107°	.8	.6	.4	.2																										
106°	.8	.6	.4	.2																										
105°	.8	.6	.4	.2																										
104°	.8	.6	.4	.2																										
103°	.8	.6	.4	.2																										
102°	.8	.6	.4	.2																										
101°	.8	.6	.4	.2																										
100°	.8	.6	.4	.2																										
99°	.8	.6	.4	.2																										
98°	.8	.6	.4	.2																										
97°	.8	.6	.4	.2																										
	.8	.6	.4	.2																										
Pulse per Minute																														
Respirations per Minute																														
Motions per 24 hours																														

Signature \_\_\_\_\_

In charge of case. \_\_\_\_\_

CLINICAL CHART.  
(To be attached to Case Sheet.)

Corps C.F.A. Military Hospital 2<sup>09</sup> 2<sup>9</sup> 11  
 No. 300366 Rank and Name Gunner Blanchard Age 20 yrs Service 3 1/2 yrs  
 Disease \_\_\_\_\_ Date of admission 4 Feb. 1919. Date of discharge \_\_\_\_\_ Result \_\_\_\_\_

Dates of Observation	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28
Days of Disease																									
Temperature, Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	
107°																									
106°																									
105°																									
104°																									
103°																									
102°																									
101°																									
100°																									
99°																									
98°																									
97°																									
Pulse per Minute	112	108	90	96	96	96	84	76	76	78	72	82	70	70	68	68	60	65							
Respirations per Minute	28	28	24	24	24	24	24	20																	
Motions per 24 Hours	.	1	1	E	1	.	1	.	1	.	1	.	1	.	1	.	1	.							

on admission

Signature [Signature] In charge of case.

# CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps \_\_\_\_\_

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

Rank and Name \_\_\_\_\_

Age \_\_\_\_\_

Military Hospital \_\_\_\_\_

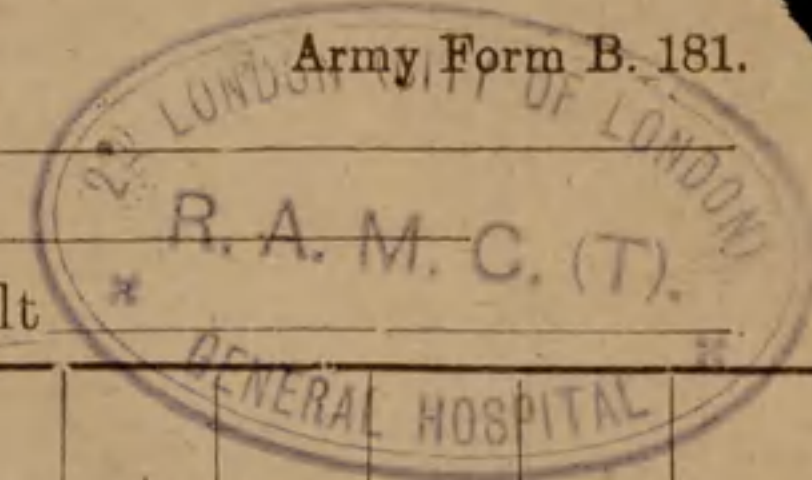
Service \_\_\_\_\_

Disease \_\_\_\_\_

Date of admission \_\_\_\_\_

Date of discharge \_\_\_\_\_

Result \_\_\_\_\_



Dates of Observation																													
Days of Disease																													
Temperature, Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.
107°																													
106°																													
105°																													
104°																													
103°																													
102°																													
101°																													
100°																													
99°																													
98°																													
97°																													
Pulse per Minute																													
Respirations per Minute																													
Motions per 24 Hours																													

Signature *[Handwritten Signature]* In charge of case.

2

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block letters)

BLANCHARD, A W

REGIMENT

PARA

RANK

Sgt

No.

30036

Date of Examination in England

26/4/19

Date of Examination in France

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

7. 8. 28.

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

No

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

(a) In Canada

yes

(b) In England

yes

(c) In France

yes

Signature of Dental Officer

[Handwritten signature]

CANADIAN ARMY DENTAL CORPS (M.R.C.)  
DENTAL CERTIFICATE FOR DEMOBILIZATION

This form will be  
filled out by the  
dentist in charge  
of the dental  
unit to which the  
patient is assigned.  
It will be used to  
determine the  
patient's dental  
status and to  
recommend the  
necessary dental  
treatment.

NAME OF PATIENT  
SERIAL NUMBER  
REGIMENT  
BRANCH  
GRADE  
DATE OF BIRTH  
DATE OF ENTRY INTO SERVICE  
DATE OF EXPIRATION OF SERVICE  
DENTAL STATUS  
REMARKS

Signature of Dentist

Signature of Officer  
Signature of Surgeon

Signature of  
Signature of  
Signature of  
Signature of

# 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. 300336 Rank Pte Surname BLANCHARD  
 (Given name in full)  
George  
 Unit or Corps C.A.R.D. Birthplace Lokfield, Eng.

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

I. GENERAL DESCRIPTION:

Physique Robust Weight 130 lbs. Height 5 5/2 ft. Colour of Eyes Blue  
 Nutrition good  
 Pulse 76  
 Condition of arteries reg. soft  
 Vision Rt. 6/12 Left 6/12  
 Hearing (conversational voice) Rt. 21 ft.  
 Left 21 ft.

Identification marks, scars, or deformities.  
 (Give cause and date of origin.)  
none

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 no 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 yes

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.

Influenza 4.2.19 2nd London Gen  
 3.3.19-21.3.19 16 C.H.H.  
Contusion Chest 17-12.17-17.12.17 3 C.F.A.

no disability

# EXAMINATIONS

## THIS SECTION FOR USE OVERSEAS—

Examined at Ripon Yorks (Overseas)

Date 21. 4. 19

Signed Enfilore Donohy M.D. C.M.C. 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 G. W. Blanchard

(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 a Medical Board.)

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

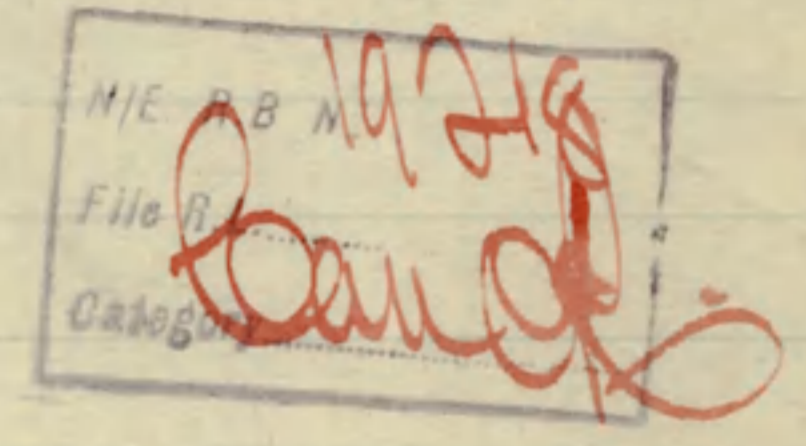
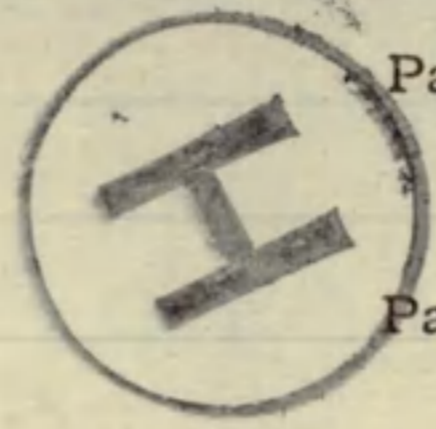
Rank \_\_\_\_\_ Name **BLANCHARD, George** Reg'l No. **300336**  
 Unit **Dft. 33rd Bty.** If in perm. Corps, }  
 What Unit? } Married or Single **Single.**

Place and Date of Enlistment **Peterboro', 16th Aug. 1915.** Place of Birth **Lakefield, Peterboro' Co.**

Name and Address, Next-of-Kin **Mrs. W. H. Blanchard,**  
**546, Waterford Street, Peterboro'.** Relationship \_\_\_\_\_

Assigned Pay Monthly \$ \_\_\_\_\_ Payable to \_\_\_\_\_ Relationship \_\_\_\_\_

Separation Allowance \$ \_\_\_\_\_ Payable to \_\_\_\_\_ Relationship \_\_\_\_\_



Discharge, Date and Place \_\_\_\_\_ Reason \_\_\_\_\_ Character \_\_\_\_\_

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				
28-10-15	O.C. R Bde.	Taken on Sh. 1st Batty	Shorncliffe	25-10-15	PT II 0.190
19. 11 -15	"	Transf to 2nd Bde CFA	"	9. 11 15	201
13-3-16	1st 2nd Bde	Adm #26 General Hosp.	France	1-3-16	Case S#A 279. Influenza.
30-3-16	Do	Discharged to duty	"	19-3-16	Case S#A 291. "
17.9.17	"	Awarded one good Con Bde D	"	16.8.17	PT 1112
24. 12. 17	"	Adm 3 Con 7th Amb	"	17.12.17	CLa 125 Contd Chest (Med)
21.2.19.	CARD	TOS from 2nd Bde CFA.	Witley	5.2.19	58.714 2nd CFA 5-3-19
26-2-19	2nd Bde CFA	Yonke's 5 days pay for A.W.L. Pa. 1 day aut	Envr. Field	14-12-18	15 "
29-4-19	CARD	Granted leave from 21-3-19 to 31-3-19	Witley	24-3-19	83

(N.R. file)



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				
8.2.19	2 Wing	I.O.P. from C.A.R.D.	In Rhyt	5.5.19	- 109 v CARD 126 6/5/19
15-5-19	hlo	S.O.S. to Canada	✓ hlo	14-5-19	- 115.
		To Canada	72-1-19	14-5-19	

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

M. F. 7. 54. (A. F. B. 103.)

500M.—9-16

H. Q. 1772-30-920.

# Casualty Form—Active Service.

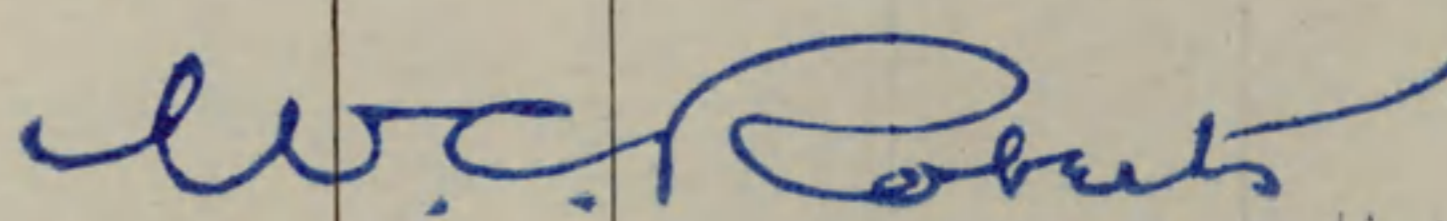
Unit, Regiment or Corps. ....

Regimental No. 300336 Rank Gnr Name Blanchard Geo.  
C. E. F.

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

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				
MAY 14 1919	O. S.	T. O. S. No. 2 DISTRICT DEPOT, TORONTO		1919	PART II D. 157
MAY 27 1919	S. O. S.	(DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT,			PART II D. 157
 Lieut. For O. G. No. 2 District Depot.					

(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.]



# SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103-I.  
Part I.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889-PP 1150 IM 5/18 G.W.P.Co (3490)

(1)*Substantive rank *Acting rank *[To be entered in pencil to facilitate alteration.] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
--	-----------------------	----------------

(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	Initials and Rank of an Officer.
(Authority)	(date)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test  Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin	(Place)	(Signature of
(18) Demobilizer (f)	(Date)	(Posting Officer)
(19) Pivotal-man (f)	or (21) Corps trade and rate	
(20) Qualifications (g)		
(22) Extended {	(23) Re-engaged {	
(24) Miscellaneous entries:—		

**NOTES.**—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only." or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoing-smith, &c.

300336 Gnr. Blanchard, Geo.

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					

27.2.19	CARD	58	TOS from 2 Bde	Wikey	5.2.19	
---------	------	----	----------------	-------	--------	--

6/5/19	Do.	126	SOS to llll Rhy l In D 2	Rison	5/5/19	
--------	-----	-----	-----------------------------	-------	--------	--

*ASW Mackay* ... LIEUT.  
OFFICER TO RECORDS

W.S.B CLASS "A"

Attached C.C.C. Kinmel Park for  
return to Canada. Part 11 Orders  
No....., Ceases to be attached  
C.C.C, Kinmel Park on embarking  
for Canada, Part 11 Order No.....

15-5-19

*C. F. Zimmerman*  
Capt. Commanding..... Wing,  
Kinmel Park Camp.

MAY 14 1919 EMBARKED FOR CANADA

Nothing to be written in this margin.

*bert RL 2-2-91  
R.S. 8117*  
**Casualty Form—Active Service.**

RECEIVED  
Canadian Record  
Westminster  
1916

Regiment or Corps *Can Field Art.*

Regimental No. *300336*

Rank *GM*

Name *Geo Blanchard*

Enlisted (a) *Aug 16/15*

Terms of Service (a) *War*

Service reckons from (a) *Aug 16/15*

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)

No Rec. Card

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				

W. S. B.  
Class A

Wrote to Frances Nov 5th 1915

Genl Roberts  
Major

10-11-15.	C.B.D.	Arrived at Can B-Depot.		10-11-15.	from Roll No 539
12-11-15	"	Left for Unit	In the field	12-11-15.	do.
19-11-15.	2nd Art Bde.	Taken on strength	"	106/Art/2/4.	15-11-15.
4/3/16.	20 C. Str.	Influenza. 29/3/16. Transferred	To Base	1/3/16.	a. 36. D.C.R. No. 232.
1/3/16.	26 General	Admitted	26 General	1/3/16.	W-3034.
19/3/16.	"	Discharged	13 Base Details Etaples	19/3/16.	" "

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of re-engagement or enlistment will be entered.  
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

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				
22/3/16.	C.B.D.	Taken on strength	C.B.D.	22/3/16.	101/80/3/25% D.C.R. No. 237.
22/3/16.	"	Left for unit.	In the field.	22/3/16.	15/80/3/26 " " 238.
26/3/16.	C. Unit.	Rejoined Unit	"	27/3/16.	B 213. " " "
17-12-16	ob. Unit	Granted leave of absence	Field	15-12-16	B 213 pt II, Ord 126 d/27-12-16
31-12-16	do	Returned from leave	do	27-12-16	B 213 order 4029/19/1/17
8.9.17	Unit	Awarded Good Conduct Badge		16-8-17	B 213 Pt II Ord 142
18.12.17	36 Amb	Conus Chest. Kicks 17 <sup>12</sup> / <sub>17</sub> to 16 Amb		17.12.17	A 36 A 4597
17.12.17	16 Amb	Conus Chest Kicks by horse. <sup>adm</sup> 16 Amb		17.12.17	A 36 A 4593
23.12.17	Unit	Granted <sup>14</sup> 15 days leave to England		21.12.17	B 213 Pt II Ord No 1.
12. 1. 18	"	Rejoined from leave		7.1.18	B 213 Pt II Ord 7
15-3-18.	16.3. Amb	Discharged to Duty.	Field	23-12-17.	K.T. 17-22. Ceter.
30.5.18.	2nd Lt C.A.	Injured virus from horse	do	do	do do
25/19	do	14 days Leave	U.K.	23/19	B 213. P.B.O. 11.
15-2-19	Records	Adm. H.Q. - leave, 5-2-19			K.T. 17-239
6-1-19	do.	Forfeit 5 days pay for W.O.A.S. absent without leave from 06.30, 21-12-18 until 20.30, 21-12-18. Forfeit 1 day pay by P.S. regulations		24-12-18	15 2069 P.B.O. 15 7/1919
25-2-19	officer 1/2 Keen London.	admitted to hospital sick while on leave and posted to C.A.R.D. with;		5-2-19	officer 1/2 Keen's London. R.H. 2-2-303 on 28-2-19. A.S. 9. Ceter Met. B.R.O. 17/739. P.B.O. 13. d/19/19.

*Ed Jewell*  
for Lieut Col A.P. Jewell  
2.14.19 3-14-19

19-19-19  
 19-19-19  
 19-19-19

40

Report No. 2293B

Army Form W. 3212.

(In books of 100)

Regtl. No., Rank and Name } 300366 Cmr. Blanchard G.W. Age 20 Corps CFA

Disease Influenza Hospital 16th C.G.H. Campington

To Officer i/c Laboratory. Ward 31

Please carry out an examination of the accompanying specimen of Urine with special regard to \_\_\_\_\_

Nos. of previous Reports (if any) \_\_\_\_\_

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date 4/3/19 G.L. Dupson O. i/c Ward.

**LABORATORY REPORT.** Capt. Case

Turbid  
acid

S. g. 1034

alb. 0

Sugar. 0

Date of Examination 4/3/19 [Signature] O. i/c Laboratory.



100-100

Report No.

Bank and ...

Physician

Location of Laboratory

Please enter out an examination of the accompanying ...

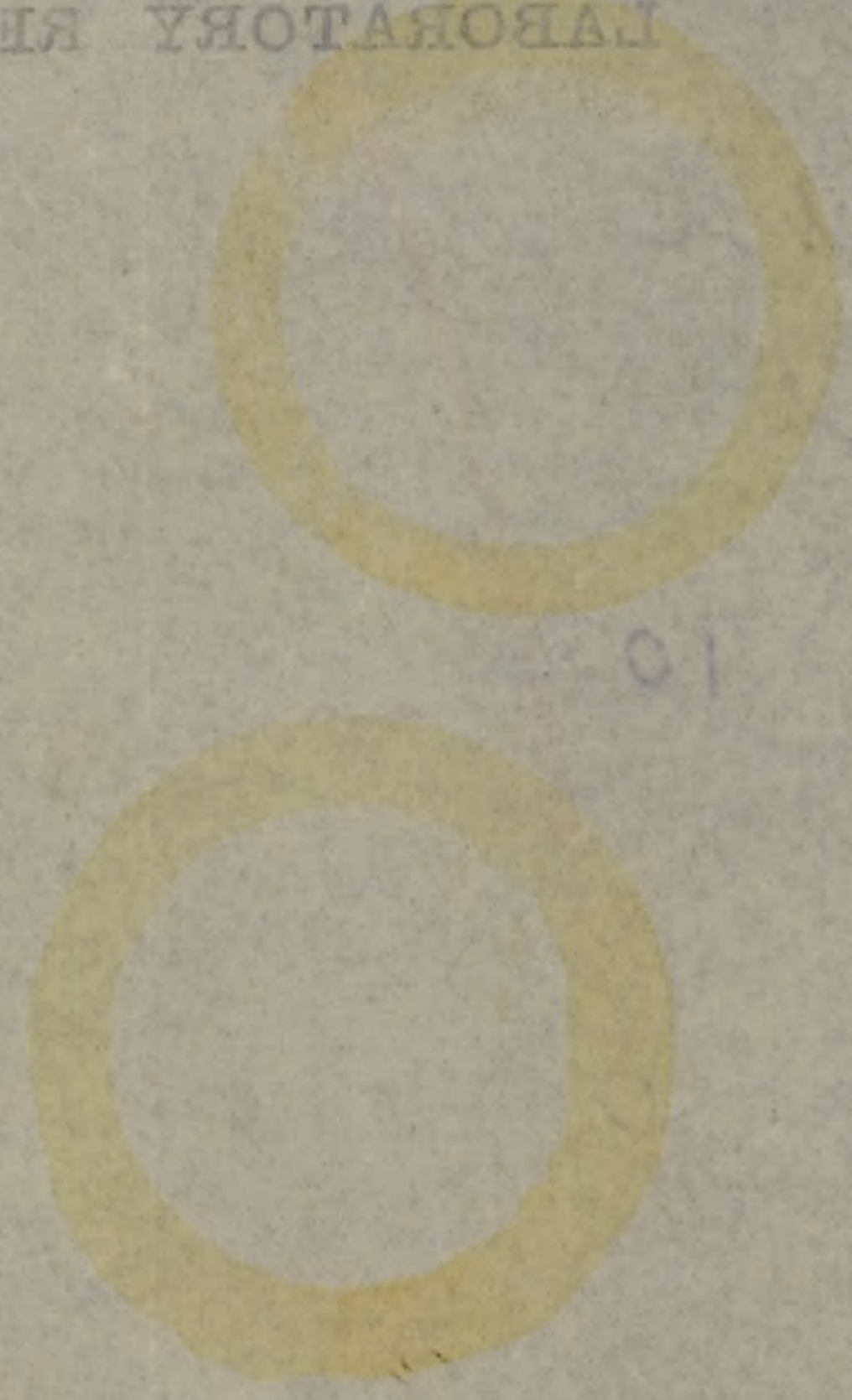
with special regard to

Use of previous Report (if any)

In pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date

LABORATORY REPORT



10

Date of Examination

Of the Laboratory

Handwritten text, possibly a signature or name, written in cursive.

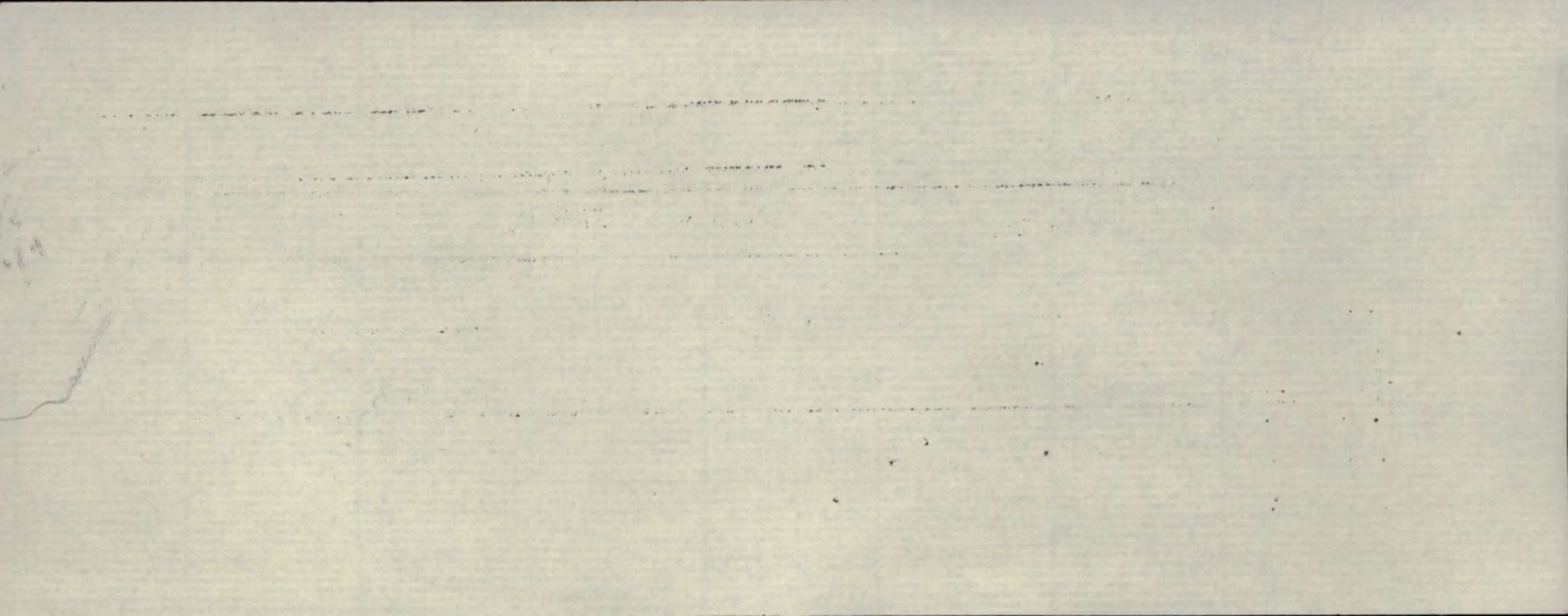
Handwritten text, possibly a signature or name, written in cursive.

Handwritten text, possibly a signature or name, written in cursive.

Handwritten text, possibly a signature or name, written in cursive.

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Handwritten text, possibly a signature or name, written in cursive.





Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

# B 8119

Oct 1-15

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15-			
-----	--	--	--

### PARTICULARS OF SEPARATION ALLOWANCE

No. 300336  
 Rank Cor Promoted Reverted Discharge  
 Soldier's Name Geo. Hill Blanchard  
 Battalion 33 Batty C.F.A. Transferred to 2nd Bde  
 Beneficiary  
 Relationship  
 Address Oct. 375 375

### PARTICULARS OF ASSIGNMENT

Name Mrs H. H. Blanchard *Mother*  
 Address 260 1/2 Sherbrooke St  
 Change of Address Peterboro  
 1 C/o Mrs C. A. Chadwick Ont.  
 2 298. Ossington Ave Toronto  
 3 Wescott apto Fuller ave 8/10/18  
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Nov 1918	A 53022		15	15	F 53021 Can. H.S.
Dec	B 58188		15	15	M
Jan	B 65337		15	15	M
Feb	C 91624		15	15	
Mar	A 98915		15	15	✓
Apr	C 2783		15	15	
May	E 4521		15	15	B
June	D 17598		15	15	✓
July	X 31929		15	15	✓
Aug	C 29355		15	15	✓
Sept	D 35376		15	15	
OCT	B 47137		15	15	
NOV	B 50741		15	15	
DEC	B 64624		15	15	
JAN 1919	D 74358		15	15	
Feb	976332		15	15	
Mar	A 82943		15	15	
Apr	E 3824		15	15	
MAY	B 8462		15	15	✓

**AUDITED.**

M.D. 2  
 A/c Closed 31-5-19  
 Ret'd per Bohemian  
 Date 25/5/19 M.F.W 187  
 Closed A.J.S.  
 mro.112685



246 B/11

1918

111  
D. 7583.

*of Mrs C A Chadwick*  
*298 Ossington Ave.,*  
*2nd Contingent Toronto Ont*

MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

M. F. W. 12.  
 20m.-9-15  
 H. Q. 1772-39 819.

To Whom *Mrs. W. H. Blanchard*  
 Address *260 1/2 Sherbrooke st. W. G. C. 24/12/17*  
*Peterboro Ont*

By Whom Assigned *Blanchard, Geo. Wilf.*  
 Regtl. No. *300336*  
 Rank *Gr.*  
 Corps *33 Batty. C. F. A.*

OCT 1 1915

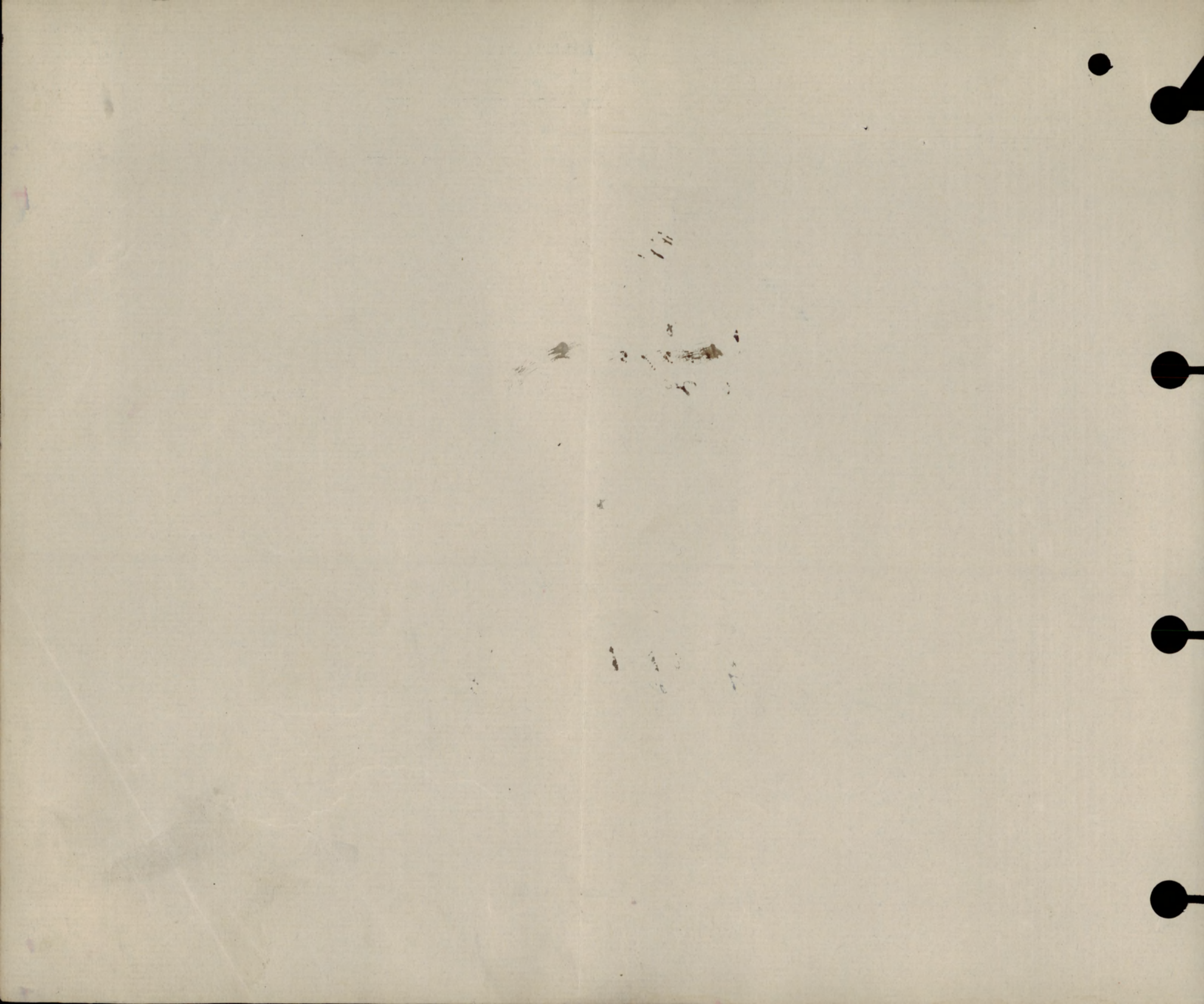
Rate *15. <sup>4</sup>/<sub>100</sub>*

PAYMENTS *Transferred to 2nd Bde. Bm*

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		<i>M 9104</i>	<i>20 -</i>	}
Dec.		<i>N 11233</i>	<i>15</i>	
Jan.	1916	<i>D 13018</i>	<i>15 -</i>	
Feb.		<i>A 15286</i>	<i>15</i>	
March		<i>W 17264</i>	<i>15</i>	



*90*



ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

*Mrs. N. H. Blanchard*

Name of Soldier

*Blanchard Geo. W.*

L. L. Job 89002.-Req. 6213.

PAYMENTS.

*1300336*

*15<sup>00</sup>  
15-*

Remarks.

*33<sup>rd</sup> Batty C.F.C.*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	<i>L 265</i>	<i>15-</i>	
May		<i>M 3322</i>	<i>15-</i>	
June		<i>N 6969</i>	<i>15</i>	
July		<i>O 6405</i>	<i>15</i>	
Aug.		<i>P 11782</i>	<i>15</i>	
Sept.		<i>A 15575</i>	<i>15</i>	
Oct.		<i>Q 20013</i>	<i>15</i>	
Nov.		<i>I 24891</i>	<i>15</i>	
Dec.		<i>E 31871</i>	<i>15</i>	
Jan.	1917	<i>Q 35538</i>	<i>15</i>	
Feb.		<i>Q 41878</i>	<i>15</i>	<i>15 AW</i>
March		<i>S 49328</i>	<i>15</i>	<i>15-B</i>
April		<del><i>B 1001 B 1001</i></del>	<del><i>15</i></del>	<i>15-AT</i> <i>This chkt duly mailed Posted in error GWR</i>
May		<i>Q 6601</i>	<i>15</i>	
June		<i>U 13263</i>	<i>15</i>	<i>15-B</i>
July		<i>S 20630</i>	<i>15</i>	<i>Cu</i>
Aug.		<i>U 26729</i>	<i>15</i>	<i>6</i>
Sept.		<i>T 34653</i>	<i>15</i>	<i>03</i>
Oct.		<i>J 48253</i>	<i>15</i>	<i>960</i>
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*max*

*m.c.*

*1300336*



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.				

Rank \_\_\_\_\_ Name **BLANCHARD, George** Reg'l No. **300336**  
 Unit **Dft. 33rd Bty.** If in perm. Corps, )  
 What Unit? ) Married or Single **Single.**  
 Place and Date of Enlistment **Peterboro', 16th Aug. 1915.** Place of Birth **Lakefield,**  
**Peterboro' Co.**  
 Name and Address, Next-of-Kin **Mrs. W. H. Blanchard,**  
**546, Waterford Street, Peterboro'.** Relationship \_\_\_\_\_  
 Assigned Pay Monthly \$ **15<sup>00</sup>** Payable to **M<sup>rs</sup> Blanchard**  
 Relationship **546 Waterford St.**  
**Peterboro'**  
 Separation Allowance \$ \_\_\_\_\_ Payable to \_\_\_\_\_  
 Relationship \_\_\_\_\_

Discharge, Date and Place \_\_\_\_\_ Reason \_\_\_\_\_ Character \_\_\_\_\_

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.						
1915																
16 Oct.	30 Nov.	46	1	46	46	10	4 60	10	60 60		4 87	15				✓ Error 10¢ To 2 <sup>nd</sup> Grade. R. Ryder (The D.K. } for
Dec		31	.	31	31	.	3 10		34 10		22 18	15	15	37 33	22 60	
Jan		31	.	31	31	.	3 10		34 10		5 23	15		20 23	36 47	
Feb.		29	.	29	29	.	2 90		31 90		5 23	15		20 23	48 14	
March		31	.	31	31	.	3 10		34 10		6 98	15		21 98	60 26	
				168			16 80	10	194 80		4 49	90	15	134 64		



EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Surname

Christian Name or Names

Reg. No.

Blanchard G

W 300536

Rank

Unit

Co.

Troop

Batty.

Dr Hospital

2 Bnd 67A

Date of Admission

Transferred

26 Gen Staples Hosp. 1-9-16

3 Can. Fld. Amb.

Hosp. 12-12-14

2nd London Gun. Chelsea

Hosp. 5-2-19

16 C. G. Orpington

Hosp. 4-3-19

Diagnosis

Influenza

Later Diagnosis (if changed)

(1) cont. chest (kick)

(2)

(3)

Influenza

Additional Diagnoses: If more than one state present

DISPOSITION

Date

Disch'd 19-3-16

Dis - 17-12-17.

REMARKS

" 21. 3. 19

CL 13. 3-16 A279

CL 30. 3. 16 # A291.

24-12-17 A125 (1)

26-14-18 @226 @

10-2-19 B 471. Admitted whilst on leave from France.

10-3-19 B 495 2

26-3-19 B 509

A.M.D. 2 DEPT.

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

Handwritten initials and checkmark

DESF DEC 14 1922  
REGN. NO. 82771

CS  
y/n

Number 300336

Rank ~~Genl~~ B

Surname BLANCHARD

Christian Name George

Units C.F.A. Theatre of War France

Date of Service 10 - 11 - 15

Remarks 374 Louconde Ave

Latest Address ~~Westcott Apts~~  
~~Fitter Ave~~

Roll No. B Page 19354 Toronto Ont

MARRIED

SINGLE

*yes*

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE



SURNAME. *Blanchard*

CHRISTIAN NAMES *George*

REGL. No. *300 336* RANK *Priv.*

UNIT *33rd Batty (1st R. D.) C. Y. A.*

FORMER CORPS *Nil*

CARD NO. *8590*  
*Feb Dis 27-5-19*  
FOLL. X  
*2015 7/16/11*  
*200*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Blanchard Mrs. W. H.*  
RELATIONSHIP TO SOLDIER *(R. N. S.)*

ADDRESS *Westcott Apts. Fuller Ave*  
*Toronto, Ont.*

*509 P. 22-10-18m*

COUNTRY OF BIRTH *Canada Peterboro Co. Ont.* DATE

PLACE OF ATTESTATION *Peterboro Ont.* DATE *16/8/15-*

*0/8 16/10/15 230*  
*1*

*R/C. 25-5-19 / 332*  
*21* *Grv.*



No.

RANK

*Ote*

NAME

*Blanchard G.*

T. O. S. *16-8-15*  
 (D. O. *10 of 16-8-15*)

UNIT

*24th Battery (7th Brigade)*M. D. *3*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i> <i>aug 16</i>	<i>1915</i> <i>aug 19</i>	<i>N</i>	<i>transf. to 33rd Btry 19-8-15</i> <i>paid from date genl. by 33rd Btry</i>	<i>D. O. 13 of 19-8-15</i> <i>Aug. P. Cash</i>



No. 300336

RANK

Pte.

NAME

Blanchard G. W

T. O. S. 16-8-15

UNIT

33rd - Battery, 9th Bde. C.F.A. C.C.F.

D.O. 8-19-8-15

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Aug. 16	Aug. 31	✓		
Sept		✓		
Oct 1	Oct 15	✓	on o/s draft 15-10-15	D.O.# 65 of 15-10-15



Name **BLANCHARD** Rank **DOR.**

Reg. No. ~~300366~~ <sup>300336</sup>

Unit **2 Bde 7A**

Next of Kin **CANADA**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917						
17-12	3 Can. 7th. Amb. Conty	Antwerp	detached	A125		10400
17-12	Discharged	5018	do	A/236	15.1.18-9126	
5-2-19	2 on 1st Bde	Belgium	Influenza	B441		6386
4-3	to 6th Bde	Washington	do	B495		8162
21-3	Discharged			B509		
12-21-3	W.Pon	5-3 to 6th Bde	W. Italy	Dep		B460





Name Blanchard. G.W. Rank Dvr.

Reg. No. 300336.

Unit 2nd. Brigade. C.F.A.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/KO	W.O. List
1916.						
1-3.	No. 26. General Hos.	Etaples.	Influenza.	A279.		
19. 3.	Discharged Ex Above.		"	" 291.		

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
B471.	2 London G. Chelsea	5-2-19	Influenza
B495.	16 Can Gen: Orpington	4-3-19	"
B-509-1.	" " " Riv	21-3-19	"

NAME

Blanchard. G.

REGT. No.

300396.

RANK AND UNIT

Priv.

2nd B.

NEXT OF KIN

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A279.	#26 Gen. & Staples	1-3-16	Influenza
A291.	Klisch.	19-3-16	
A125	#3 Can. Fly Amt	17-12-17	(2B) Cont. Chest (Kick)
A226	Discharged	17-12-17	Cont Chest (Kick)

REGT'L NO 300 336

NAME *Blanchard, G. W.*

H. Q. FILE NO. 649-

RANK AND CORPS *plwr. 2 Ind Bde C. 7. B*

FOLLOWS  
No. *1718xxx*  
FOLLOWS

CABLE

NATURE OF CASUALTY

No.

DATE

cf

MARRIED OR SINGLE Single  
 PLACE OF BIRTH Lakefield, Peterboro's Co.  
 NAME AND ADDRESS OF NEXT OF KIN Mr. W. H. Blanchard.  
546 Waterford St, Peterboro.  
 RELATIONSHIP OF NEXT OF KIN  
 NAME AND ADDRESS OF NEXT OF KIN  
 RELATIONSHIP OF NEXT OF KIN  
 SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)  
 PAYABLE TO  
 RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.		
PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L NO. 300336 RANK gunner NAME Blanchard George.  
 IF IN PERM. CORPS | WHAT UNIT | UNIT 33rd Bty Draft TRANSFERRED TO 2nd Bde CTA DATE AUTHORITY  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY  
 PLACE OF ATTESTATION Peterboro. TRANSFERRED TO DATE AUTHORITY  
 DATE OF ATTESTATION 16th August 1915. TRANSFERRED TO DATE AUTHORITY  
 ASSIGNED PAY MONTHLY \$ 15.00 DATE EFFECTIVE 1st Oct 1915  
 PAYABLE TO M. Blanchard 546 Waterford St Peterboro RELATIONSHIP  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE Wm  
 PAYABLE TO RELATIONSHIP  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON  
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

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.
1916																																		
			168.				16 80						10		194 80																			
Apr 30	30	1.00	30		30	10	3								33		1092	26	100					5 24	4 36		15		75		24 60	68 66		
May	31		31		31		3 10								34 10										2 56		15			17 56	85 20			
June	30		30		30		3 -								33 -		1218								2 55		15			17 55	100 65			
July	31		31		31		3 10								34 10	1257	1355								2 56	5 23	2 55	15		25 34	109 41			
Aug	31		31		31		3 10								34 10	1406	1459								2 61	2 61		15		20 22	123 29			
Sep	30		30		30		3								33		1525									3 48		15		18 48	137 81			
Oct	31		31		31		3 10								34 10													15		20 23	151 68			
Nov.	30		30		30		3								33													15		21 11	163 57			
Dec	31		31		31		3 10								34 10													15		68 03	129 64			
1917			44 30																															
Jan	31	1.00	34 10												34 10		1846									4 36		15		123 67	40 07			
Feb.	28		30 80												30 80													15		15.	55 87			
			552 20																							19 99	18 19	119 94	93 16	255.	15.	506 43		
			652 20																							19 99	18 19	119 94	93 16	255.	15.	506 43		

X Error 1/109 10/15



"BOHEMIA" 24-5 -19

B. 5619

DISPERSAL "T"

AUDITOR PAYMASTER

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 300336

RANK Gnr NAME (IN FULL)

BLANCHARD, G.W.

M. OR S. \_\_\_\_\_

NEXT OF KIN \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_

IS SEPARATION ALLOWANCE PAID? *nil* DATE EFFECTIVE \_\_\_\_\_

TO WHOM PAID \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_

ORIGINAL UNIT C.E.F. *Arty 5* IF IN P.F. WHAT UNIT? *Bank of Toronto*

PLACE OF ATTESTATION \_\_\_\_\_ TRANSFERRED TO \_\_\_\_\_ DATE \_\_\_\_\_ AUTHORITY \_\_\_\_\_

DATE OF ATTESTATION *15-9-15* TRANSFERRED TO \_\_\_\_\_ DATE \_\_\_\_\_ AUTHORITY \_\_\_\_\_

ASSIGNED PAY \$ *15.00* DATE EFFECTIVE *Closed by Ottawa 31.5.19*

PAYABLE TO *Mrs. W. H. Blanchard* RELATIONSHIP \_\_\_\_\_ ANY CHANGE IN ASSIGNEE OR ADDRESS \_\_\_\_\_

ADDRESS *Wescott Apts. Fuller Ave; Toronto, Ont.*

STOP PAYMENT FORM RENDERED. DATE \_\_\_\_\_ EFFECTIVE \_\_\_\_\_

DISCHARGED PLACE *Toronto* DATE *27-5-19* REASON *Demob* AUTHORITY *Do 157* IF ENTITLED TO POST DISCHARGE PAY *Yes*

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		T.O.S. 14/5/19 D.O. 137	PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT			CREDIT
<i>30.4.19</i>																		<i>Bal. on Aug 2. P.C.</i>	
<i>15.5.19</i>	<i>29</i>	<i>1<sup>00</sup></i>	<i>31 90</i>															<i>1-5. 19 to 29.5. 19 P.C.</i>	
			<i>35 00</i>															<i>clothing allow.</i>	
			<i>70 00</i>															<i>with pay of U.S.S.</i>	
							<i>487 500</i>											<i>May 19. 19 N.T.O.</i>	
							<i>94 89</i>											<i>Bonus train money</i>	
					<i>136 90</i>														
				<i>W.S.G.</i>															<i>W.S.G. plus above</i>
<i>183 days</i>																		<i>2.20 2 dip. P.C. &amp; 1st W.S.G. Paid by #2 D.D.</i>	
			<i>420</i>		<i>420</i>			<i>AR 72 June 25 665 767</i>			<i>70</i>		<i>142 20 277 80</i>					<i>1st W.S.G. Paid by #2 D.D.</i>	
								<i>AR 97 July 21 979 917</i>			<i>70</i>		<i>212 20 207 80</i>						
								<i>A.R. 117 Aug 20 1342 505</i>			<i>70</i>		<i>282 20 137 80</i>						
								<i>AR 147 Sep 25 1354 720</i>			<i>70</i>		<i>352 20 67 80</i>						
								<i>AR 175 Oct 29 1363 179</i>			<i>67 80</i>		<i>420 - - -</i>						
					<i>420</i>													<i>W.S.G. PAID IN FULL</i>	
											<i>420</i>		<i>420</i>					<i>CAPTAIN FOR PAYMASTER WAR SERVICE GRATUITY</i>	



*350*

ASSIGNED PAY. ~~ENGLAND~~ \* CANADA. SEPARATION ALLOWANCE. ENGLAND or CANADA.

EFFECTIVE DATE:- 1-10-1915 EFFECTIVE DATE:-

AMOUNT:- 15<sup>00</sup> AMOUNT:-

NAME *BLANCHARD, George*

NUMBER:- *300386*

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

*M<sup>rs</sup> Blanchard*  
*546 Waterford St.*  
*Peterboro Ont.*  
*Stopped 11/15/19*

WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>Sur</i>

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
<i>1 day sick furlough</i>	<i>213-373</i>	<i>R</i>	<i>7.00</i>				
	<i>Comp P. 760 R.L.</i>						
<i>4/4/19</i>	<i>354</i>	<i>Rapon</i>	<i>7.30</i>				
<i>22/4/19</i>	<i>2209</i>	<i>do</i>	<i>14.60</i>				

UNIT AND TRANSFERS

ORIGINAL UNIT:- *33 Bky Df*

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'F'D	UNIT TRANSFERRED TO
			<i>2 Bky Df</i>

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE: *Disch'd to Canada 30/4/19 NR 7517 Rapon 25/4/19 Rapon M.D. 2. Debit Bal. \$ 7<sup>41</sup>/<sub>100</sub>*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>Apr</i>	<i>Mch Bal. fwd</i>								<i>41.96</i>		
	<i>G.P.</i>	<i>33-</i>		<i>a.p.</i>				<i>15-</i>			
				<i>AR 29 11/4/18 2 Pds</i>	<i>4.46</i>						
				<i>✓ 79 21/4/18</i>	<i>3.57</i>				<i>51.93</i>		
<i>May</i>	<i>G.P.</i>	<i>33</i>		<i>a.p.</i>	<i>8.03</i>			<i>15-</i>			
		<i>34/10</i>		<i>✓ 132 7/5/18 2 Bde</i>	<i>4.46</i>						
				<i>✓ 189 16/5/18</i>	<i>3.57</i>				<i>63.00</i>		
<i>June</i>		<i>34/10</i>		<i>a.p.</i>	<i>8.03</i>			<i>15-</i>			
		<i>33-</i>		<i>AR 245 1/6/18 2 Bde</i>	<i>4.46</i>			<i>15-</i>			
				<i>✓ 311 20/6/18</i>	<i>3.57</i>				<i>72.97</i>		
<i>July</i>	<i>lst.</i>	<i>33</i>		<i>a.p.</i>	<i>8.03</i>			<i>15-</i>			
		<i>34/10</i>		<i>✓ 351 3/7/18 1 Bky</i>	<i>4.46</i>						
				<i>✓ 365 13/7/18 2 Bde</i>	<i>3.57</i>				<i>84.04</i>		
<i>Aug</i>	<i>lst</i>	<i>34/10</i>		<i>a.p.</i>	<i>8.03</i>			<i>15-</i>			
		<i>34/10</i>		<i>✓ 473 20/8/18</i>	<i>3.57</i>			<i>15-</i>	<i>103.14</i>		
				<i>✓ 476 21/8/18</i>	<i>3.57</i>				<i>96-</i>		
<i>Sept.</i>	<i>2nd</i>	<i>33-</i>		<i>612 20FA 18.9.18</i>	<i>3.57</i>			<i>15-</i>	<i>106.86</i>		
				<i>535 ✓ 11.9.</i>	<i>3.57</i>			<i>15-</i>	<i>118.50</i>		
				<i>a.p.</i>	<i>7.14</i>				<i>118.50</i>		
<i>Oct</i>	<i>G.P.</i>	<i>33-</i>		<i>cap</i>	<i>7.14</i>			<i>15-</i>	<i>118.50</i>		
		<i>34/10</i>		<i>AR 665 8.10.18 20FA</i>	<i>3.73</i>				<i>118.50</i>		
				<i>✓ 801 24/10</i>	<i>3.73</i>				<i>118.50</i>		
		<i>34/10</i>			<i>4.40</i>			<i>15-</i>	<i>118.50</i>		

MONTH	NUMBER	RANK	NAME	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
											118 50		
			ar 911			2/11/18 seta	3 73				56 70		
			" 1089			4/12/18	16 49				174 40		
			Cap.	101 20			10 52			45	154 18		agreed
				101 70			20 52			45	72 20		
			1246			4. 2. 6. 7. a.	7 54				226 31		
			18987			29/1. Ldw.	24 33				229 89		
			Lt. 155			21/1. 2. 6. 7. a.	97 33						
			1332			24/1. "	9 33						
Feb			Cap.	30 80						15			
			forfeit 5 days pay -			24.12.18 - 20.12.18							
			u.w L. from 20-21-12-18 to			2030 - 21-12-18 do. 15							
			26-2-19 2. 6. 7. a. 6 day.					6 60					
Mar			Cap.	34 10						15	23 25		
			Sick furlough 21.3.19 to	64 90		15011 12.3. emp	4 87						
			31.3.19. S.O. 83. 24.3.19 6000.			15902 21.3	48 67						
			10 days -	7 30		04230. 24. Nov. 19. -	1 22				3 51 on.		
				72 20			193 29	6 60		30			
Apr.			Cap. pay	33 -		Cap. pay.				15	14 49		
			559. 2/4 - Ripon				7 30						
			2209. 2/4 lead				14 60						
			8827. 7/5 S.O. V				29 73				17 14		
				33			51 63			15			

Cap 21-90  
1449  
S.O. 7-41

S.O. L. to Cap. 14/5/19. S.O. 7/5 M.D. 2

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

WSB class 'a'

M.D.2

Toronto  
 Mother  
 Student

SERVICE GROUP 22

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

OCCUPATIONAL GROUP 19

(Demobilization.) 'A'

13/5/37

1. No.	300386	MAY 14 1919	R.C.
2. Rank.	Gunner	DISEMBARKED, HALIFAX, 24-8-19	
3. Name.	BLANCHARD George W.		
4. Unit.	C.F.A.	C.A.R.D.	Can. Field Artillery
5. Date of Discharge	MAY 27 1919	Place	TORONTO, ONT.
6. Reason for Discharge.	DEMOBILIZATION <b>I</b> War Service Badge Class <u>A</u> No. <u>Toronto</u> Issued.		
7. Authority.	No. 2, D.D., Part II, D.O. No. 157		
8. Proposed Residence after Discharge.	<u>Letupan</u> <u>Toronto</u> <u>Merleth apt</u> <u>Fuller Ave</u>		
9.	CERTIFICATE TO BE SIGNED BY SOLDIER. I hereby acknowledge that at the undernoted place and date I received my discharge Certificate M. F. W. ? <u>Deceased 25-11-58</u> <u>George W. Blanchard.</u> Signature of Soldier.		
10.	CONFIRMATION. The discharge of the above named man is hereby confirmed. Place <u>TORONTO, ONT.</u> Date <u>MAY 27 1919</u> Signature <u>[Signature]</u> For O.C. No. 2 District Depot, (O. C. Discharging Unit.)		

Group.....  
 Checked by No. 20  
 Date 28 MAY 1919

714  
 4-2-59