

REGIMENTAL DOCUMENTS

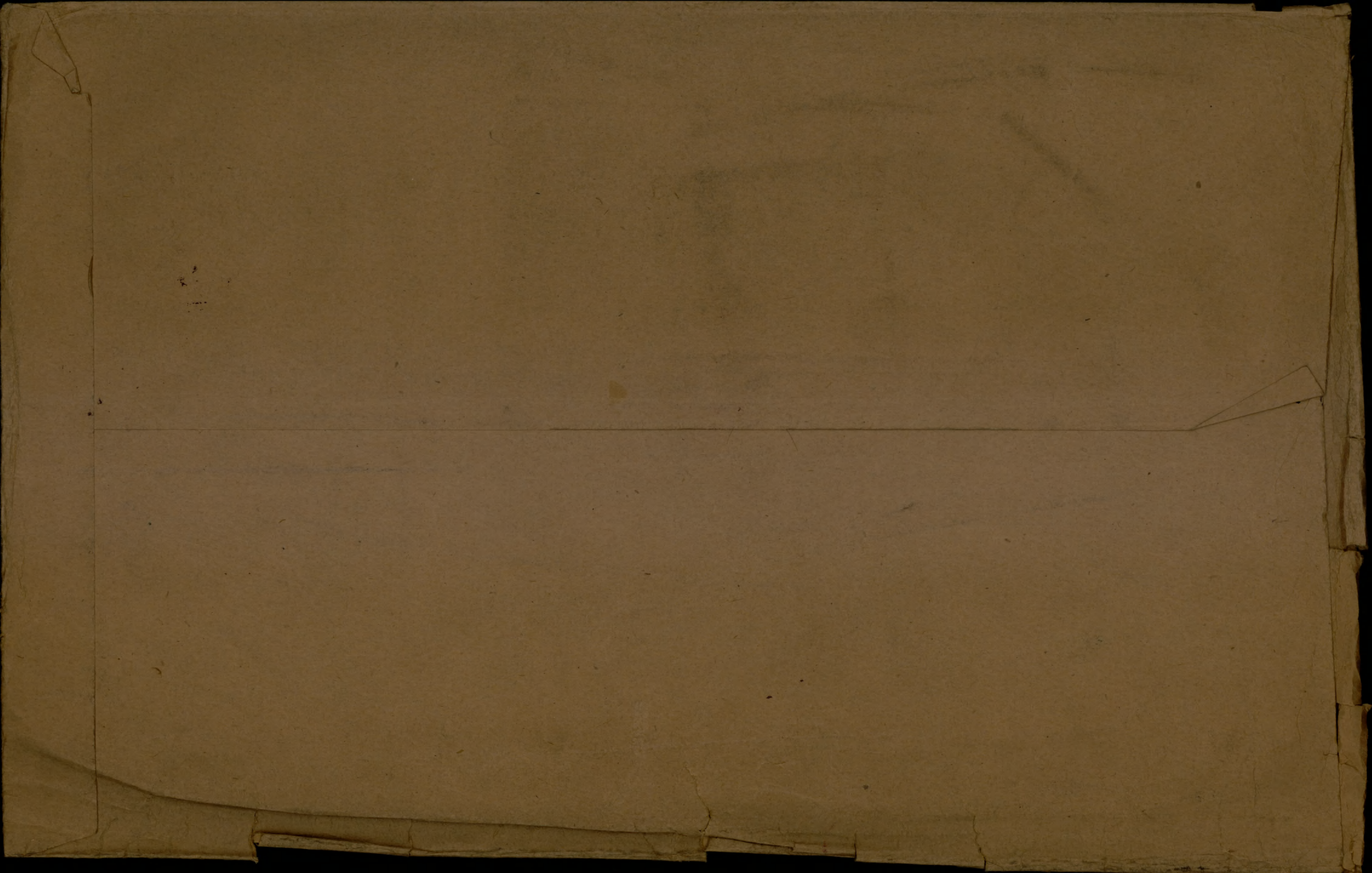
NAME *Burlean Harry*

REGT. NO. *905-160*

UNIT *49th Dr*

H. Q. FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY	
ATTESTATION PAPER (M.F.W. 23, 133, or 51)	<i>49</i>	<i>M</i>		<i>51905</i>	<p>DEATH</p> <p>Category <i>(Symbol)</i></p>	
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)						
TRAINING HISTORY SHEET (M.F.W. 113)						
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)						
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)						
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)						
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)						
DENTAL HISTORY SHEET (M.F.B. 465)						
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PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)						<i>H</i>
PARTICULARS OF CHARACTER (A.F.W. 3226)						
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)						
<i>2 C.A.C. 5009</i>						
<i>1 M.G. 5052</i>						
<i>1 Term C.D. 3</i>						
<i>1 MFW 67</i>						
<i>5 Cas cards</i>						
<i>1 Prop Cert</i>						
<i>1 M.F.W. 67</i>						
<i>1 Ad D Card</i>						
<i>2 A.F.S. 123</i>						
<i>1 A. 149</i>						
					<p>DISCHARGE</p> <p>Category <i>Remobil</i></p>	
					<p>DESERTION</p> <p><i>2</i></p> <p><i>20 - 5</i></p> <p><i>20 - 5</i></p> <p><i>1 8</i></p>	



364

ORIGINAL

905160

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... **BURLEAU**
- 1a. What are your Christian names?..... **Harry**
- 1b. What is your present address?..... **St Albert Alta**
- 2. In what Town, Township or Parish, and in what Country were you born?..... **St Albert Alta**
- 3. What is the name of your next-of-kin?..... **Mrs J Burleau**
- 4. What is the address of your next-of-kin?..... **Smoky River Alta**
- 4a. What is the relationship of your next-of-kin?..... **Sister**
- 5. What is the date of your birth?..... **15 August 1896**
- 6. What is your Trade or Calling?..... **Yeoman**
- 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 No**
- 10. Have you ever served in any Military Force?.. **yes 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, **Harry Burleau**, 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.

Date **19 Sept** 191 **6** **Harry Burleau** (Signature of Recruit)
Coop W Murray (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, **Harry Burleau**, 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 **19 Sept** 191 **6** **Harry Burleau** (Signature of Recruit)
Coop W Murray (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 **Sarcee Camp** this **21** day of **Sept** 191 **6**.
Harry Lambert Materson (Signature of Justice)

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Description of Harry Burkan on Enlistment.

Apparent Age... 20 years 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. 2 ins.

Chest measurement { Girth when fully expanded..... 34 1/2 ins.
Range of expansion..... 3.2 ins.

Complexion Dark
Eyes Brown
Hair Black

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

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..... Sept 27 1916

Place.....

.....
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.

Harry Burkan 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.

Date..... Sept 27 1916

.....
(Signature of Officer)

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CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 908160 (Rank) Private
 Name (in full) Furber Harry enlisted in
 the 194th Battalion
 CANADIAN EXPEDITIONARY FORCE at Calgary on the 19th
 day of September 1916
 HE served in 49th Battalion
 Demobilization.
 and is now discharged from the service by reason of ~~Medical Unfitness.~~

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

Age <u>22 yrs.</u>	Marks or Scars _____
Height <u>5'2"</u>	<u>Scar, lower left leg.</u>
Complexion <u>Dark</u>	<u>(wound)</u>
Eyes <u>Brown</u>	<u>Vaccination</u>
Hair <u>Black</u>	<u>(H) few left arm</u>
<u>His X mark Cpl Brown</u>	

Signature of Soldier

W. Paulie
 Issuing Officer

Date of Discharge



For C. J. Dispersal Station (S)
 Rank _____

Date

MAR 24 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.

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Hupper

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <u>Mc 16874</u> Year <u>1919</u>	Regimental No. <u>905160</u>	Rank. <u>PLt</u>	Surname. <u>Burlean</u>	Christian Name. <u>H.</u>
	Unit. <u>49 Cav.</u>	Age. <u>21</u>	Service. <u>30</u> <u>12</u> <u>24</u> <u>12</u>	

Station and Date. Disease Small Pox

15/1/19 OCCUPATION Transfer

NEXT OF KIN Sister

ENLISTED Edmonton June 1916

ENGALND Nov 1916

FRANCE Jan 1917

WOUNDED Sick 2/1/19

HOSPITALS
CCS
18 Gen
No 4 Gen

OPERATIONS

REMARKS

SUMMARY OF F.M.C & M.H.S.
Small Pox to Pet
Foot

PRESENT CONDITION Feels well

* 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 (E 2349) [P.T.O.]

No. 4 Canadian Cav. Coy.

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Station
and Date.

No disability
system is normal
P.C.T. found healed

of MacCallum
C. J. J.

SURNAME

CHRISTIAN NAME OR NAMES

REG. No.

Burleau.

H.

905160.

RANK

UNIT

Co.

TROOP

BATTY.

HOSPITAL

Pte.

Alberta.

~~49~~ 49 Batt

DATE OF ADMISSION

3. Can. Fld Amb.

30-10-17.

1. 1 South African Gen. Abbeville HOSP. 31. 10. 17.

2. 15th Canv. Depot 10. 11. 17.

~~Town Hall. Torquay HOSP 30. 12. 18.~~

3. 8 Gen. Hos. Bannockburn HOSP. 6-1-19.

H. C. G. Basingstoke 16. 1. 19.

4. P. P. C. K. C. Bexhill HOSP. 23. 1. 19.

DIAGNOSIS

1 Shell Gas. Inj

Abcess. at

2. J.C.F. Foot-2.

3

Miss B. H. Stephens 29. 11. 17

DISPOSITION

DATE

C.I.L. 6-11-17. A. 55.

Dis 30-1-19

REMARKS

10. 11. 17. A 59. (3)

20. 11. 17. A 67. (3)

10. 12. 17. A 84 (2)

6. 1. 19 B 412/1

13. 1. 19 B 418. (1)

18-1-19 B 423 Please cancel entry on B 412

21. 1. 19. B 425

~~27. 1. 19 B 430~~ Cancelled by Capt Burt d 10. 2. 19

10. 2. 19 B 441

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

No. 905160

RANK

Plt

NAME

Burkeau J.

T. O. S. 19-9-16.

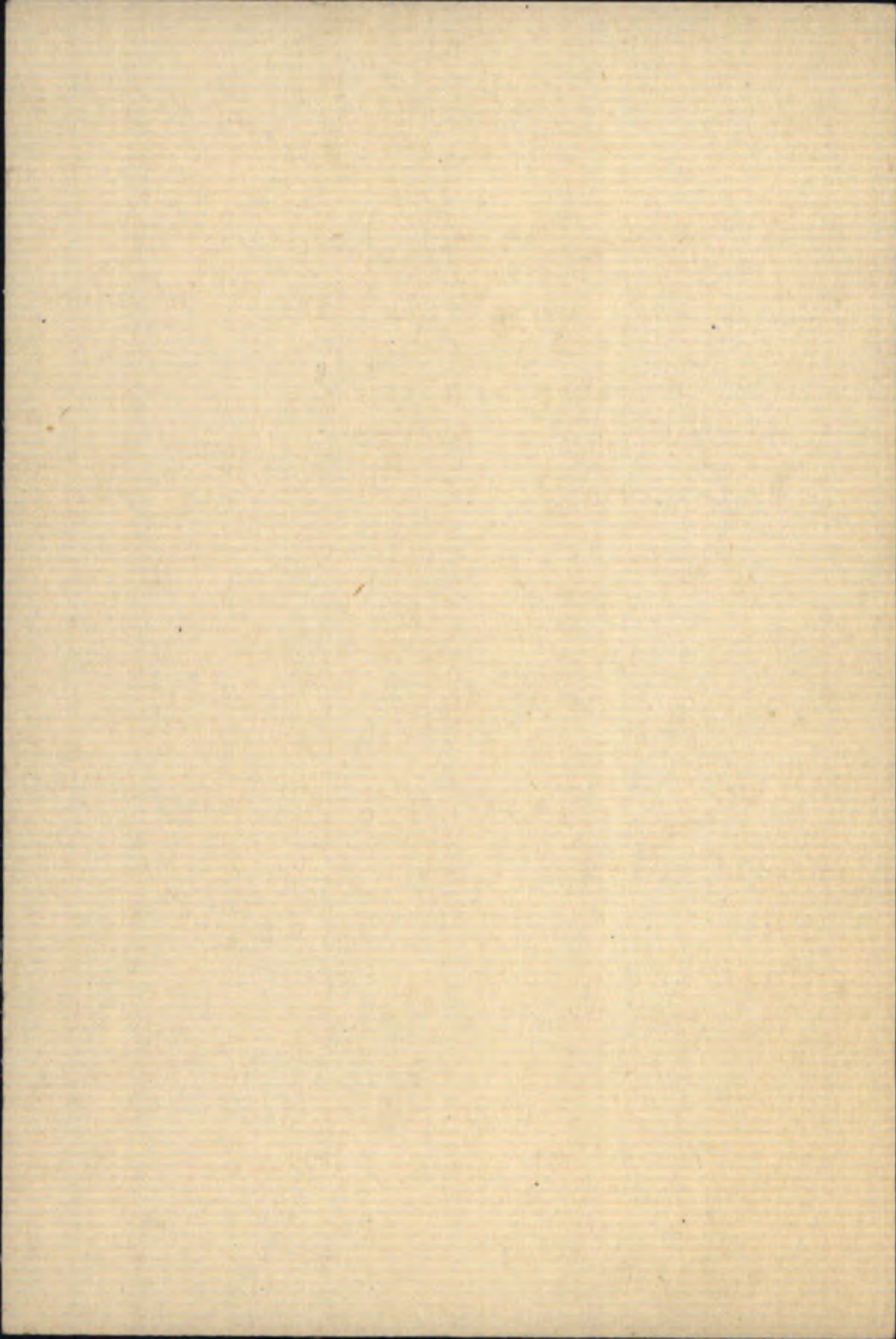
UNIT

194th Battalion.

Do 194-21-9-16.

M. D. *13*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916</i> <i>Sept 19</i>	<i>1916</i> <i>Sept 30</i>	<i>c</i>		
<i>Nov.</i>		<i>c</i>		



649-B-21615

Number 905160 Rank ptl.

Surname BURLEAU

Christian Name Harry

Units 49th Br. Can Enfl Theatre of War France

Date of Service 8-10-17.

Remarks _____

Latest Address not stated

Grand Prairie P.O., Alta.

Roll No. 20 12/27

200m.-6-21... Page 19289

[Handwritten mark]

GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA

DEP. DEC 22 1927
REG. NO. 36215

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REGT'L No. 905160
H. Q. FILE No. 649.

NAME Burlean Harry

RANK AND CORPS Pte 49th Batten. (Form 194th Bn.)

FOLLOWS
No.
FOLLOWS

CABLE

NO.

DATE

Can'

NATURE OF CASUALTY

51.5
M 6307

7-11-17

Adm. No 3 Fld. Ambul. Depot.
Oct 30th - 1917. yes. poisoning

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LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 5511	#3. Can. Fld., Amb.,	30-10-17	Shell Gas (Alberta)
A 59-	#1 So. African Gen. ^{Abberley}	31-10-17	" "
A 67-3	No 15. Com. Depot Cayeux	10-11-17	" "
A 84-2	Wich to Base Details	29-11-17	Shell Gas (Alberta)
B 712	John Hall Torquay	3-12-18	as per Hk B 423
A 418	8 Gen Campes	6-1-19	Abscess + SCI foot
A 414	3 Candlen Passport	25-12-18	Cervical Abscess
B 425	4 Candlen Passport	10-1-19	Abscess + SCI foot
B 430	8 Candlen Passport	23-1-19	as per Hk B 444
B 441	4 Candlen Passport	30-1-19	" "

4 Canadian Gen. Hospital,

HOSPITAL.

Hastings, Ont.

A. & D. CARD

194

AT.....

A. & D. No. M4T 6874 PL. OF ACTION France

RANK Pte REG. No. 905760 UNIT 49th Bu Coars SICK OR WOUNDED

NAME Burelan Hc AGE 21 RELIGION R.C.

PLACE IN HOSPITAL 26u

DIAGNOSIS D6T foot R

ADMITTED 10-1-19 FROM Lt. S. Brighton

DISCHARGED 30-1-19 To 28th R. Co S. Pigeon

TRANSFERRED

SERVICE AT HOME 7 mos IN FIELD 24 mos

RESULTS A

(See Document Card for M.H. Sheet and other Documents.)

Burelan, Harry

B 19.08

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

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 *Henry* 2. Surname *Burlean*.....
- 3. Rank *Pt* 4. Original Unit *194th Bn* 5. Reg. No. *905160*.....
- 6. Address, in full, to which future payments of gratuity are to be forwarded.....
Bank of Montreal
Edmonton *Alta*
- 7. Date of enlistment in the C.E.F. *29.9.16 BT.*.....
- 8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge..... *nil*
- 9. Relationship of such dependent..... *nil*
- 10. Address, in full, of such dependent..... *nil*
- 11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier?..... *nil*
- 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.....
- 16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department..... *No*
- 17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.?..... *No*

850
7

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?

21. Have you, during the present war, served in the Imperial Forces?

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?

24. Are you now serving in the C.E.F.? *24/3/19* If not, give:—(a) Date of discharge *24/3/19* (b) Reason for discharge *Demob.*

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: *Harry Burlean*

Place of Residence: *La Maya Ave Edmonton Alta*

Declared before me at: *Kimmel Park Camp*

This *27th* day of *Feb* 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.

H. Hastings MAJOR

POST DISCHARGE PAY.

Date paid. Paid Soldier Paid Dependent

Nil

War Service Gratuity Net amount due

350.00 *350.00*

GENERAL AUDITOR'S DEPT. AUDITED MAY 2 1919 DISTRICT AUDITOR M. B. 13

Certified Correct.

Edward Major

District Paymaster.

R.B.L.

EXAMINED BY *RST* REMARKS
ATTESTED *21.9.16* DISCHARGED *24/3/19* PUT ON PAY INITIALS

MEDICAL HISTORY SHEET

ORIGINAL 364 905160

Surname: Burlean Christian Name: Harry

Examined { on October day of 1916
at Sarcee Camp

Approved by [Signature]

Birthplace { City or Town St. Albert
County Alberta

Rank Capt M.O.

Apparent age 20

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
<u>28/1/16</u>	<u>A</u>	<u>McSharpe Major</u> M.O.

Trade or occupation Teamster

Height _____ feet _____ Inches

Weight _____ lbs.

Chest measurement { Minimum _____ inches
Maximum expansion _____ inches

Physical development _____

Small-pox Marks _____

Vaccination Marks { Arm Right Left
Number _____

Date	Result	VACCINATIONS
_____	_____	_____

When Vaccinated last _____

(a) Marks indicating congenital peculiarities or previous disease _____

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>Jan 13, 4/2/18</u>	<u>[Signature]</u>	<u>[Signature]</u> M.O.

(b) Slight defects but not sufficient to cause rejection _____

<u>Oct 2.16</u>	<u>Reaction</u>	<u>[Signature]</u> M.O.
<u>Oct 19.16</u>	<u>Reaction</u>	<u>[Signature]</u> M.O.
<u>6 Oct 16.16</u>	<u>Reaction</u>	<u>[Signature]</u> M.O.

Enlisted on 19 day of September 1916 at Sarcee Camp

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>194th O'Bat</u>	<u>905160</u>		<u>19.9.16</u>
Transferred to	<u>1st Canadian Labor Bn.</u>	<u>905160</u>		<u>21.12.16</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

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905160

Surname *Burlean* Christian Name *Darry*

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				
No. 4 Canadian Gen. Hospital, Basingstoke.		15	1	19	30	1	19	D.C. 2 R.V. feet 13.	13	D.C. 5. healed no disability	<i>[Signature]</i>

ORIGINAL

To be made out in duplicate.

H.Q. 54-21-23-53

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... *194th O. Highland. Bn. C.E.F.*

(2) Regimental Number... *905160*

(3) Full Name of Soldier... *Harry Burkeau*

(4) Place of Birth... *S. Albert, Alta*

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

(6) If married, state,
 (a) Full name of your wife.....
 (b) Present Postal Address.....

(7) Are you a widower?

(8) Have you any children?.....
 If so, give number of boys and girls.....
 Also their names and ages.....

(9) Is your Father alive?..... No.....

If so, state name and address.....

(10) Is your Mother alive?..... No.....

If so, state name and address.....

(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.

Miss J. Barbeau (Sister)
Summit River

(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.

Date..... Sept 24th 1916.....

W. H. Kraig
Officer Commanding.

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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. 925160 Rank Pte. Surname BURLEAU
(Given name in full) Haway
Unit or Corps 1st Par Birthplace St Albert, Alta

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

1. GENERAL DESCRIPTION:

Physique Good Weight 135 lbs. Height 5 ft. 6 in. Colour of Eyes Brown
Nutrition Good
Pulse 76
Condition of arteries Good
Vision Rt. 6/6 Left 6/6
Hearing (conversational voice) Rt. 20 ft. Left 20 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin).
G. S. W. Rt. foot
Leucoderma.

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 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.

na.

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EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Ripon (Overseas)

Date 19 FEB 1919

Signed [Signature] 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 [Signature]

(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.)

[OVER]

364

Huskel

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BURLEAU. H.
 REGIMENT 49. RANK Pte. No. 905/60.
 Date of Examination in England 29-1-19. Date of Examination in France _____

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 no
- 2. EXTRACTIONS three 30, 19. (2 roots.)
- 3. CROWNS no
- 4. DENTURES
 - (a) Full Upper no
 - (b) Part Upper no
 - (c) Full Lower no
 - (d) Part Lower no

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 no
- (b) In England no
- (c) In France no

Signature of Dental Officer H. R. Smith
No 4 Co. Gen. Hosp. Capt. Cdt.



Faint, illegible handwriting, possibly a name or title.

Faint, illegible handwriting, possibly a date or number.

Faint, illegible handwriting, possibly a list or notes.

Faint, illegible handwriting, possibly a signature or name.

Faint, illegible handwriting, possibly a list or notes.

Faint, illegible handwriting, possibly a list or notes.

Faint, illegible handwriting at the bottom left corner.

Faint, illegible handwriting at the bottom center.

364

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BURLEAU, H.
REGIMENT 21st RES. BN. RANK PTE No. 905160.
Date of Examination in England 4 FEB 1919 Date of Examination in France _____

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.



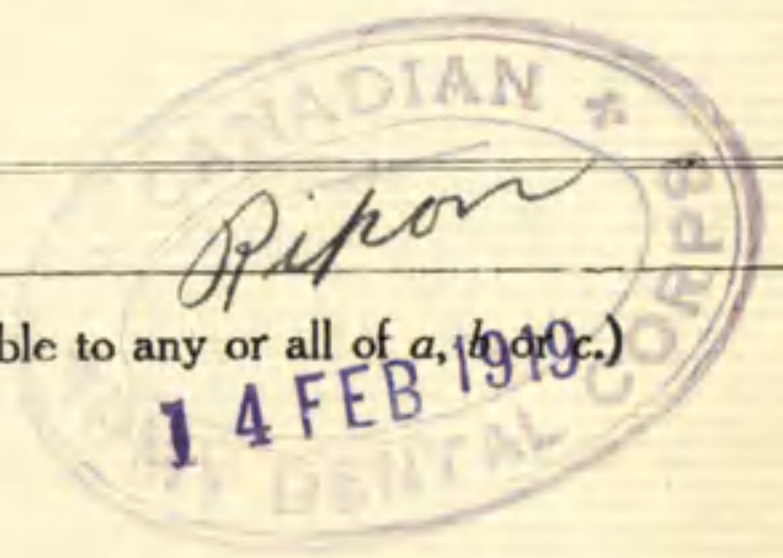
PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS 19. 30.
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
- (b) In England nil
- (c) In France



Signature of Dental Officer R Ripon Capt

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Casualty Form—Active Service.

Regiment or Corps 194 Bn
 Rank Pte Surname Burlean Christian Name Harris
 Religion Age on Elistment years months
 Enlisted (a) Terms of Service (a) Service reckons from (a)
 Date of promotion to present rank Date of appointment to lance rank
 Extended { } Re-engaged { } Qualification (b)
 or Corps Trade and rate
 Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked			
5-1-19	51 CCS.	10770th	1016ATI	5-1-19	63803
6-1-19	189th		Adm	6-1-19	N. 3880.
14-1-19	Brighton	Sick posted to A.R.D. Bramhall		14-1-19	W3083/67th Bn 7, 2/27-1-19
					Lt. for Lt. Col. A.M.S.
27.1.19	A.R.D.	Y.O.S. from 49 Bn.	Bokett	16.1.19	D.O. 19.
					Lt. ...

ORL

FOR LT. COL. I/O RECORDS C.O. M.F.

(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) Signaller, Shoeing-Smith, &c.
 W. 5527—M2093 1000m 7/17 (25686) C. P. & S., Ltd. Forms B./103 E/1555. [P.T.O.]

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(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps 194th Bn. Regimental Number 905160

*Substantive Rank Pvt Surname BURLEAU Christian Names HARRY

*Acting Rank _____

(* To be entered in pencil to facilitate alteration.)

Enlisted - Sept. 6th 1916

To be folded on this line.

Nothing to be written in this margin.

C.W.P. Co. 3973.
10/18
500,000
P1600
W. 6425
A1834

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders	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.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			Arrived in England S.S. Olympic		21-11-16	
21.12.16	OC 194 th Bn	P/O 273	LOS to 1 st Can Lab. Bn	Shorham	21.12.16	
23.12.16	1 st CL Bn	5-	TOS from 194 th Bn	---	21.12.16	
8.1.17	---	19	Proceeded Overseas	---	8.1.17	
21.6.17	1---	5-1	LOS To 49 th Bn	Field	6.6.17	49 th No 1 23 6/17
5.11.17	AR (49)	CLA 55	No 3 Can Field Amb.	---	30.10.17	Shell Gas
9.11.17	" "	58	1 st South African Gen Hosp	Alberville	31.10.17	"
19.11.17	" "	67	No 5 Caval Depot	Laying	10.11.17	
8.12.17	" "	84	Disc to Base Details	Etaples	29.11.17	
27.1.19	ARD	P/O 19	TOS from 49 th Bn	Bonshott	16.1.19	SOS 27/0/19 23 1/19 49 th Bn
25.1.19	" "	P/O 18 1/19	Do . y . 9 1/19 Cancelled	---	---	
3.2.19	21 st Res Bn	P/O 26.	TOS from A.R.D.	Ripon	30.1.19	ARD P/O 26 26 1/19
22.2.19	---	P.O. 43 MD 13	LOS. K.P.R Rhyf. M.D. 13	"	22.2.19	P/O 42 24 2/19
			pending return Canada			
			26.8.98		10.3.19	

L. J. L...

LIEUT.
FOR LT: COL: I/C RECORDS, C.O.M.F

864

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

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

250Me-1-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 194th Highland Bn. C.E.F.

Regimental No. 905160 Rank Pte Name Harry Bursell

Enlisted (a) 19.9.16 Terms of Service (a) C.E.F. Service reckons from (a) 19/9/16

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

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked	Canada	14. 11. 16	
		Disembarked	England	21 11 16	
28.12.16	O.C. 194 th Bn	Transferred to 126. Ban Labour Bn.	Shorston	28.12.16	Part II D.O. 273
21/12/16	O.C. 1st C.L.B.	Taken on strength 1st C.L.B.	Shorham	23-12-16	Part II D.O. #8 74. Harcourt Capt & Adjt 1st C.L. Bn
1-17	O.C. 1st C.L.B.	Proceeded Overseas	Shorham	7/1/17	D.O. Part II D.O. 195 74. Harcourt Capt & Adjt
15 th	C.B.D.	Disembarked	Naval	11 th	L. R. 7305. Part II O/S 1917

CERTIFIED CORRECT.
 9 FEB. 1917
 G.W. RECORDS, LONDON.

(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.]

364 905160 1200 can H.

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				
14.6.17	U.S. G. Ban Sect.	Transferred to 149th. Ban. Inf. Bath	Field	6.6.17	U.S. G. Ban Section KR 12774 Pt. II of 31 of 21-6-17
14.6.17	Adv. Can. Sect.	Taken on strength 19th Canadian Bn on transfer from 1st Canadian Labour Bn.	Labales	7-6-17	Pt II Order no 71-d. 23-6-17
17-6-17	6BD 3	Arrived at 6BD (3)	Field	17-6-17	N.R.
28-6-17		Left for 3rd B.B.		28-6-17	N.R.
1-7-17	6 3rd B.B.	Arrived at 3rd B.B.		1-7-17	N.R.
14-10-17	Unit	Joined Unit	"	9-10-17	B213.
31-10-17	15.A. Genl	SW Face based	Adm 18.A. General	31-10-17	Ext A. 9962.
30-10-17	3.C.F.A.	" " " "	5 C.C.S.	30-10-17	Ext A 9975.
4-11-17	Unit	Wounded in Action	Field	30.10.17	B213.
3-11-17	10 CCS.	SW Face.	to 20.A.T.	30.10.17	Ext. B. 2154.
11-11-17	15.A. Genl.	" "	To 5 Con. Dep.	11-11-17.	W4399/B34913
11-11-17.	5 Con. Dep.	" "	Adm.	11-11-17.	W4335/B 5650.
30-11-17	36.9.B.D.	T.O.S. "A"		30-11-17	NR 155.
10-12-17	"	Left for C.C.R.C.	joined	10.12.17	N.R. 804
29.11.17	5 Con. Dep.	SW Face.	to Base	29.11.17	Ext F.C. 127.
10.12.17	CCRC	Joined	Field	10.12.17	N.R.
13.12.17	"	Left for Unit	"	13.12.17	"
16.12.17	Unit	Joined Unit	"	13.12.17	B213.
30.12.17	"	Granted 14 days leave to Paris.		27.12.17	" D.O.F. 3, d 8. 1. 18.
20.1.18	"	Rejoined from leave	Field	12.1.18	"
29.7.18	"	Attached 181st Tunnelling Company		27.6.18	" 3rd Cdn. Div G. 350, d/26/6/18.
3-8-18	"	Rejoined from attachment		30.7.18	File K.1.17-357.
4-1-19	10 C.F.A.	10th Foot	Adm to CCS	31.12.18	B213. W3825
"	51 CCS	"	Adm	4-1-19	W3844
"	2 and CCS	"	Adm 31-12-18	4-1-19	W3853

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J.P.

Reg'l No. 905160.

Name BURLEAU, Harry

Married or Single Single

If in perm. Corps,
What Unit?

194th Bn.

Place of Birth St. Albert, Alta.

Place and Date of Enlistment Garage Camp 19th Sept. 1916.

Name and Address, Next-of-Kin Miss J. Burleau,

Smoky River, Alta.

Relationship Sister.

Assigned Pay Monthly \$

Payable to

Separation Allowance \$

Payable to

Discharge, Date and Place

Reason



Date.	Report.		Record or promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
	From whom received.	Character				
21-12-16	U.S. Army	1st Can Labour Bn	Shoreham	Shoreham	21-12-16	Part I. D.O. 273
28-12-16	England	S, S, OLYMPIC	21-11-16	Shoreham	21.12.16	Part II. D.O. 273
8-1-17	1st C.L. Bn.	T O S from 194th.	Shoreham	Shoreham	8-1-17	D O 19
21-6-17	1st C.L. Bn.	Proceeded Overseas,	Shoreham	Shoreham	8-1-17	D O 19
5-11-17	AK	(49) No. 3 Can Field Amb.	Acely	Acely	6-6-17	-57.49 No. 71. 23/17
9-11-17	.. (C)	1st South African Gen Hosp	Abbeville	Abbeville	30-10-17	6 L A 55 - Shell Gas
19-11-17	.. (C)	Notes Command Dept	Bayamp	Bayamp	10-11-17	.. 55 (..)
8-12-17	.. (C)	Disce to Base Detach.	Estapes	Estapes	2-9-11-17	.. 84 (..)
7-1-19	A.R.D.	T.O.S. from 49th Bn	Bohott	Bohott	30-12-18	AD. 7-505 of 23.9.49. Bn Cancelled error 37.

11 JAN 1918

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Report. Date. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
27.1.19. A.R.D.	TOS from 49. Bn.	P ^{te} 3rd Bn	16.1.19	Do 19. Do 7. 23 1/2. 49. Bn.
25.1.19 "	Do. 7. 9 1/2. Cancelled.	✓	-	Do 18.
3-2-19 21st Bn	TOS from MR 5	Regan	30-1-19	Do 26. A.P. Q.P. 26 4-2-19
22.2.19. "	SOS. 24. P.B. A.P. Reg. M.D. 13	"	22.2.19	P ^{te} 043, M.D. 13, A.D. 41, 24 7/9
11-3-19 MR 13	pending return Canada.	Rye	10-3-19	Do 59
	26-S-98			
	SOS to Canada			

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

364
 SHORT FORM.
 PROCEEDINGS ON DISCHARGE.
 (Demobilization.)
 207/12/38
 M
 H

1. No.	905 160 466 757	
2. Rank.	Pte.	
3. Name.	Bell, Thomas Bureau Navy	
4. Unit.	49th 194th	
5. Date of Discharge	MAR 24 1919	Place Edmonton, Alta
6. Reason for Discharge	Demobilization	
7. Authority.	R. O. 1489	
8. Proposed Residence after Discharge	Gen Del Edmonton Alta	
9.	<p>CERTIFICATE TO BE SIGNED BY SOLDIER.</p> <p>I hereby acknowledge that at the undernoted place and date I received my discharge Certificate</p> <p>M. F. W. ?</p> <p>His X Mark Signature of Soldier.</p>	
10.	<p>CONFIRMATION.</p> <p>The discharge of the above named man is hereby confirmed.</p> <p>Place EDMONTON EDMONTON, ALTA</p> <p>Date MAR 24 1919</p> <p>Signature Captain For O. C., Dispersal Station (O. C. Discharging Unit.)</p>	

War Service Badge
Class "A" No. 237439

M.D. 1/13.

1. Tripartite Attestation Paper (M.F.W. 23), or Particulars of Service (M.F.W. 125).
2. Casualty Form (M.F.B. 103).
3. Medical History Sheet (M.F.B. 213 or A.F.B. 179).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129).
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Contact 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 (e.l. 3).
11. Equipment Statement Q.M.G. Form (D.O.S. 2) and Clothing.
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 61).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group A
 Checked by No. 28
W.A.S.
 Date 9/3/19

REG'TL NO. 905160
 RANK. _____ (Acting)
 RANK. Pte (Permanent)
 NAME. Burlean CHRISTIAN NAME. Jerry
 RES' ID. 21st Res
 UNIT. 49 Batt (WITH IN BRIDGE)
 ORIGINAL UNIT. 194 Bn (OR BRANCH OR COMPANY WITH.)
 ALTERNATE. A
 NEXT OF KIN. Sister
 INTENDED PLACE OF RESIDENCE. Grand Prairie, Alberta
 OCCUPATION. Traveller GROUP. 7
 DATE LEFT CANADA. (MONTH) July (YEAR) 1916
 SERVICE GRADE. 25
 MARRIED. No
 WIFE. (NAME) _____
 PAY BOOK. _____

Embkd Lv'pl - Jertic Mar 10 19
 Deb'kd Halifax MAR. 18. 19

* Strike out whichever inapplicable.

ASSIGNED
PAY

ENGLAND OR
CANADA.

SEPARATION
ALLOWANCE.

ENGLAND OR
CANADA.

EFFECTIVE
DATE:--

EFFECTIVE
DATE:--

NAME: **BURLEAU, Harry.**
NUMBER: **905160**

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

AMOUNT:--

AUTHORITY

DATE
EFFECTIVE

RANK OR APPOINTMENT

Pto.

UNIT AND TRANSFERS

ORIGINAL UNIT:--

19th Bn. Royal

DATE ACCOUNT FIRST OPENED:-- *1-12-16*

AUTHORITY

DATE
EFFECTIVE

DATE LOGGED
SHEET T.S.P.D.

UNIT TRANSFERRED TO

Hq Bn.

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

DATE OF NUMBER
PAYMENT OF A.R.

UNIT PAID BY

AMOUNT

DATE OF NUMBER
PAYMENT OF A.R.

UNIT PAID BY

AMOUNT

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY

PAY

F.A.

P.F.A.

SUBSCE
ALLCE

PARTICULARS OF RENDERING NON-EFFECTIVE:--

List to Canada 1/31/19 Return A 3137 Return P.D. 13. Cash 500.00. Substantiated

MONTH

PARTICULARS

CR 1

CR 2

PARTICULARS

DR 1

DR 2

DR 3

DR 4

BALANCE

DEBITED

SEPARATION

Mar 31 Balance Forward

April Pto Pay

May Pto Pay

June Pto Pay

July Pto Pay

Aug Pto Pay

Sept Pto Pay

Oct Pto Pay

Nov

Dec

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEBITED	SEPARATION
Mar 31	Balance Forward	33		DR. 31 16/1/18 Hq Bn.	535				291 1/4 240	200 00 235	
April	Pto Pay	33		DR 96 4/5/18 Hq Bn.	803						
May	Pto Pay	34 10		DR 182 22/5/18	Hq Bn				320 70 210		
June	Pto Pay	33		DR 224 4/6/18 Hq Bn.	854						
		34 10		DR 145 18/6/18	Hq Bn				315 60 285		
July	Pto Pay	34 10		DR 244 4/7/18 Hq Bn.	846				311 1/4 300		
		34 10		DR 506 24/9/18	803						
Aug	Pto Pay	34 10		DR 824 5-8-18 Hq Bn.	354				301 1/4 315		
		34 10		DR 1049 18-8-18	354				301 1/4 315		
Sept	Pto Pay	33		DR 1161 3-9-18 Hq Bn.	354				424 1/4 320		
		33		DR 1402 15-9-18	354				420 1/4 320		
Oct	Pto Pay	34 10		DR 1543 2-10-18	373				417 1/4		
		34 10		DR 2105 17-10-18	373				451 1/4 325		
Nov				CR 2584 1-11-18 Hq Bn.	373						
				DR 2958 14/11	1306						
Dec				DR 4104 2/12	373						
				DR 4712 19/12	373						
					24 1/2						
					20 1/2						
					528 15 390						

