REGIMENTAL DOCUMENTS

NAME Chave Elmer Hargreaves REGT. NO. Lieut. UNIT Can. Eng. H. Q. FILE NO.

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Ref. S.S. Celtic 3/7/19.

W 25/9
100M 11-18

ORIGINAL

# ATTESTATION PAPER.

No. 200645 8

Folio. —

Original

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... C H A V E . Chave
1a. What are your Christian names? ..... Elmer Hargreaves
1b. What is your present address? ..... Maywood P O Victoria, B C
2. In what Town, Township or Parish, and in what Country were you born? ..... Woodstock, Ontario
3. What is the name of your next-of kin? ..... William John Chave
4. What is the address of your next-of-kin? ..... ~~Maywood, P.O.~~ 3400 Douglas St. Victoria, B.C.
4a. What is the relationship of your next-of-kin? ..... Father
5. What is the date of your birth? ..... Oct 10 th 1891
6. What is your Trade or Calling? ..... Civil Engineer & Physical Trainer
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... Yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... Yes

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Elmer Hargreaves Chave, 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.

Elmer H. Chave (Signature of Recruit)

Date 13th June 1917. W. B. Fleming (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Elmer Hargreaves Chave, 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.

Elmer H. Chave (Signature of Recruit)

Date 13th June 1917. W. B. Fleming (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 North Vancouver this 13th day of June 1917.

H. Martyn Jenkins, J.P. (Signature of Justice)

M. F. W. 23
750M—3-16
H. Q. 1772-39-341

Direct Sect. 13-2-18. D.P.

## Description of Chave Elmer Hargreaves on Enlistment.

Apparent Age 25 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 6 ins.

Chest measurement.
- Girth when fully expanded ..... 36½ ins.
- Range of expansion ..... 4½ ins.

Complexion ..... Fresh

Eyes ..... Light-Blue

Hair ..... Brown

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

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).

Vision R: D. 20 L: D. 20

Hearing R. ..... L. ....

## 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 ..... 191 .

Place .....

A S McMurchy
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

MOBILIZATION CENTRE
VICTORIA

Pres. J. Bryant Major

Member A S McMurchy Capt.

Member W J Keys Lieut. Col.

## CERTIFICATE OF OFFICER COMMANDING UNIT.

Elmer Hargreaves Chave 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 M Mitchell (Signature of Officer)
Lt. Colonel C. E.
O. C. Engineer Training Depot

AUG 16 1917

Date ..... 191 .

# 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.....Rank Lieutenant Surname CHAVE.

(Given name in full)

ELMER HARGREAVES.

Unit or Corps C.E.R.B. Birthplace WOODSTOCK. ONT.

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

1. GENERAL DESCRIPTION:

Physique good Weight 145 lbs. Height 5 ft. 7 in. Colour of Eyes Blue

Nutrition good.

Pulse 70

Condition of arteries good.

Vision Rt. 20/20 Left 20/20

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

Identification marks, scars, or deformities. (Give cause and date of origin).

Nil

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 Nil Genito Urinary System Nil Cardio-Vascular System Nil

Special Senses Nil Integumentary System Nil Respiratory System Nil

Disturbance of Mentality Nil Muscular System Nil Digestive System Nil

Osseous and Joint System Nil Any other general condition Nil

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.

Nil

(If space is insufficient, continue on back of form.)

[OVER]

# EXAMINATIONS

## THIS SECTION FOR USE OVERSEAS—

Examined at Overseas (Overseas)

Date 15 4 19 Signed H. T. Manning 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 E. H. Chave

(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.)

M. F. B. 465
100m.—1-16
1772-39-250

# DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

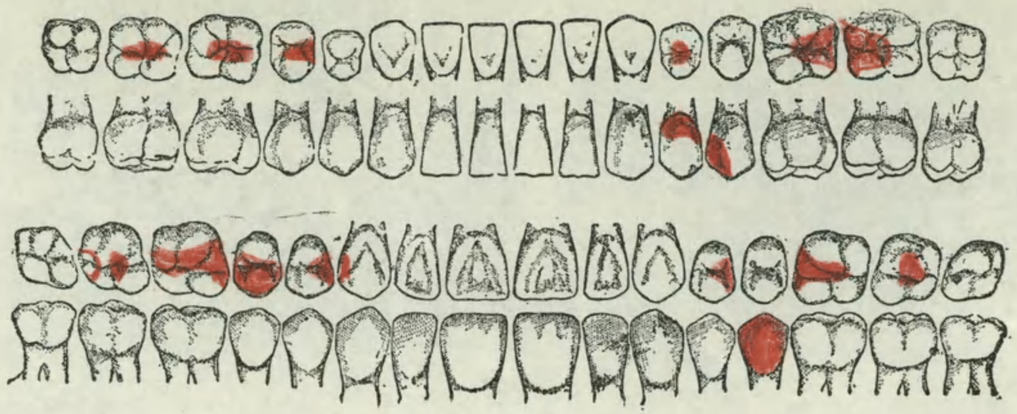
DIVISION ..... K.

NAME OF SOLDIER ..... Lo Mans J. H.

No. ..... 5

REGIMENT ..... L. E.

RANK ..... Agent



Teeth to be extracted
M are missing

Good.

| DATE | No. | Fillings: Amal. | Fillings: Phosp. | Fillings: G. Per. | Fillings: Cement | Extracted | Anesthetic | Treated | Crowns | Cleaned | As 2° 3 | Pulp Removed | Put Pulp | Artificial Teeth | OPERATOR | REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1918 | | | | | | | | | | | | | | | | |
| June 28 | | | | | | | | | | | | | | | Capt Simpson | Can - 15 |

# MEDICAL HISTORY SHEET.

*Surname* Chave *Christian Name* Elmer Hargreaves

Examined { on ..... day of ..... 191 ..... / at ST. JOHNS, P.Q. (FEB 4 1918)

Birthplace { City or Town Woodstock / County Ont

Apparent age 27

Trade or occupation Civil Engineer

Height 5 Feet 7 Inches.

Weight 145 Lbs.

Chest measurement { Minimum 32 inches. / Maximum expansion 36½ inches.

Physical development Good

Small-Pox Marks Nil

Vaccination Marks { Arm Right. 1 Left. 2 / Number Two

When Vaccinated last Childhood

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

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

Vision D 20 either eye

Hearing Normal

Approved by [signature]

Rank Capt M.O.

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

| Date. | Result. | Vaccinations. |
|---|---|---|
| 22.2.18 | Good | Capt M R Sleet M.O. |
| | | M.O. |
| | | M.O. |

| Date. | Result. | Anti-Typhoid Inoculations, Etc. |
|---|---|---|
| 21.6.17 | 1cc sgle | Capt M R Sleet M.O. |
| 28.6.17 | 1cc sgle | MRS M.O. |
| 5.7.17. | 1cc sgle | MRS M.O. |

*Enlisted on* ..... *day of* ..... *191* ..... *at* .....

| | Corps. | Regt'l Number. | Habits. | Date. |
|---|---|---|---|---|
| Joined on enlistment | | | | 25.1.18 |
| Transferred to | | | | |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

| Station. | Date. | Disease. | Result. |
|---|---|---|---|
| ST. JOHNS P.Q. Seaford | JUN 27 1918 July 30.1918 | Nil. | [signature] President Medical Board, St. Johns, P.Q. General Service (A) [signature] Capt PRESIDENT, STANDING MEDICAL BOARD |

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

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

Surname Shaw Christian Name E. A.

| STATION. | Date of Arrival at the Station. | Dates of Admission into Hospital. | | | Dates of Discharge from Hospital | | | DISEASE. | Number of days in Hospital. | Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. | Signature of Medical Officer. |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Day | Month | Year | Day | Month | Year | | | | |

Unit ..... Rank Lieut Name Chave Elmer Hargreaves

# OFFICERS' DECLARATION PAPER

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE

ORIGINAL

### QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

1. (*a*) What is your Surname? Chave
   (*b*) What are your Christian Names? Elmer Hargreaves
2. (*a*) Where were you born? (State place and country) Woodstock, Ontario
   (*b*) What is your present address? Eng. Training Depot - St. Johns, Que.
3. What is the date of your birth? October 10, 1891
4. What is (*a*) the name of your next-of-kin? William John Chave
   (*b*) the address of your next-of-kin? 3400 Douglas St. Victoria B.C.
   (*c*) the relationship of your next-of-kin? Father
5. What is your profession or occupation? Civil Engineer
6. What is your religion? Baptist
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes
8. To what Unit of the Active Militia do you belong? Canadian Engineers
9. State particulars of any former Military Service Joined Can. Eng. Vancouver B.C. June 1917
10. Are you willing to serve in the

    CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes.

The undersigned hereby declares that the above answers made by him to the above questions are true.

Elmer Hargreaves Chave (*Signature of Officer.*)

Taken on strength (place) St Johns PQ

(date) 25th January 1918

R. C. [illegible] Major, C. E. Eng. Trg. Depot.
(*Signature of Commanding Officer.*)
for O. C. Engineer Training Depot.

### CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date FEB 4 1918 191

Place ST. JOHNS, P.Q.

[illegible] Capt.
~~Medical~~ Officer.

*Insert here "fit" or "unfit

M. F. W. 51
100m.—4-16.
H. Q. 1772. 39-917

# CANADIAN EXPEDITIONARY FORCE

J.B.C. 11-37
C.W.

## Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

**This is to Certify** that (Rank) Lieutenant

(Name in full) Ewart Farquhar GRANT

Enlisted in Canadian Engineers Training Depot as 3006458 (Sapper)

CANADIAN EXPEDITIONARY FORCE, on the Fifteenth

day of June 191 7 AND WAS APPOINTED to COMMISSIONED RANK

in Canadian Engineers Training Depot

CANADIAN EXPEDITIONARY FORCE on the Twenty-fifth day

of June 191 8.

He SERVED in CANADA, and England with the Can. Engineers Training Depot., 2nd Can. Engineers Rep. Bn., 3rd Canadian Engineers Reserve Bn., Attached Khaki College, Senford,

and was STRUCK OFF THE STRENGTH on the Eighteenth day

of July 191 9 by reason of General Demobilization

Dated at Ottawa, this Twenty-fourth day

of December 191 9.

JM

Lt.-Col
for Director of Personal Services.

M. F. W. 2618a
30m.—4-19.
1772-39-1428

C.A.D.C. 5009A

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

# DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

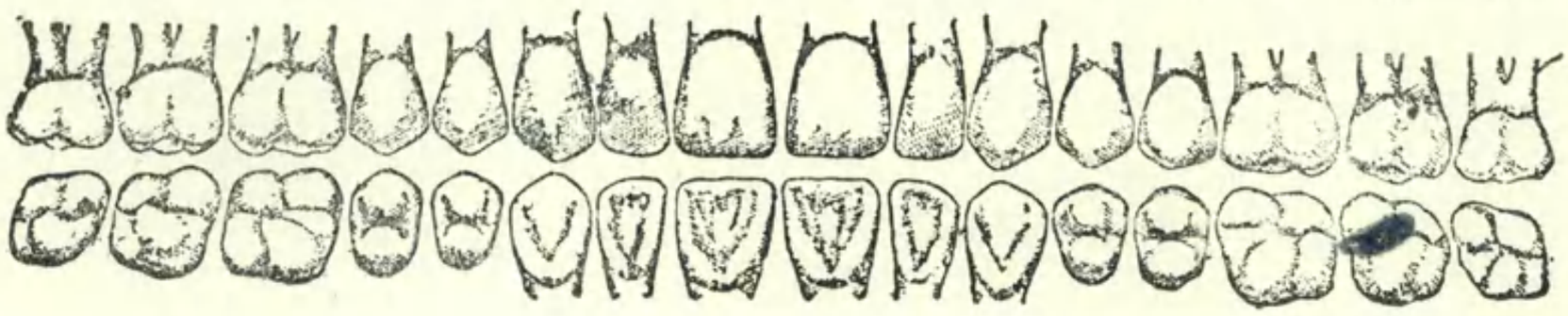
**DIRECTIONS TO DENTAL OFFICERS**

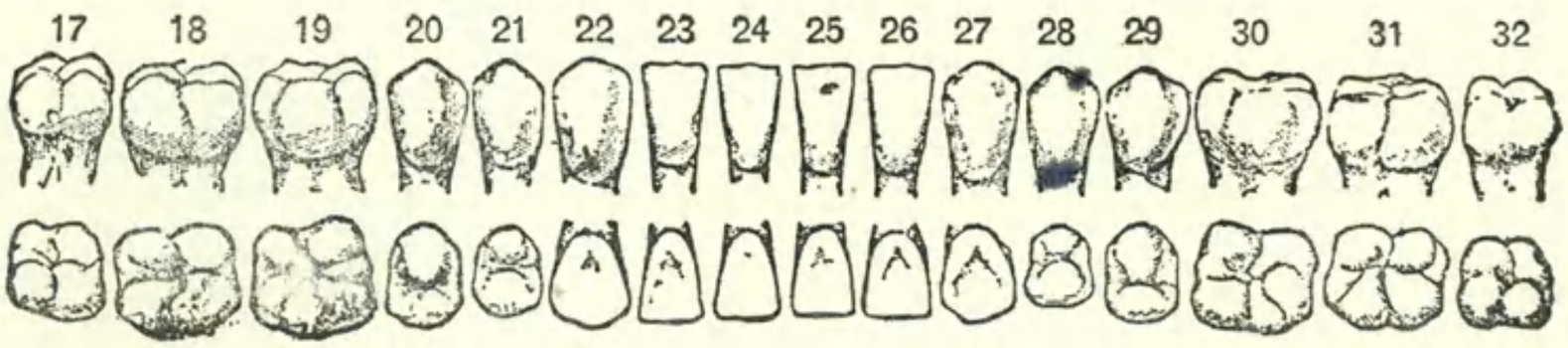
1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

NAME OF SOLDIER (Block Letters) C H A V E, E.H.

REGIMENT 3rd CERB. RANK Lieut. No.

Date of Examination in England 15/4/19. | Date of Examination in France




PRESENT DENTAL REQUIREMENTS

1. FILLINGS 15. 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
- (*b*) In England Yes
- (*c*) In France

*Signature of Dental Officer* [illegible]

C.A.D.C. 5009A

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

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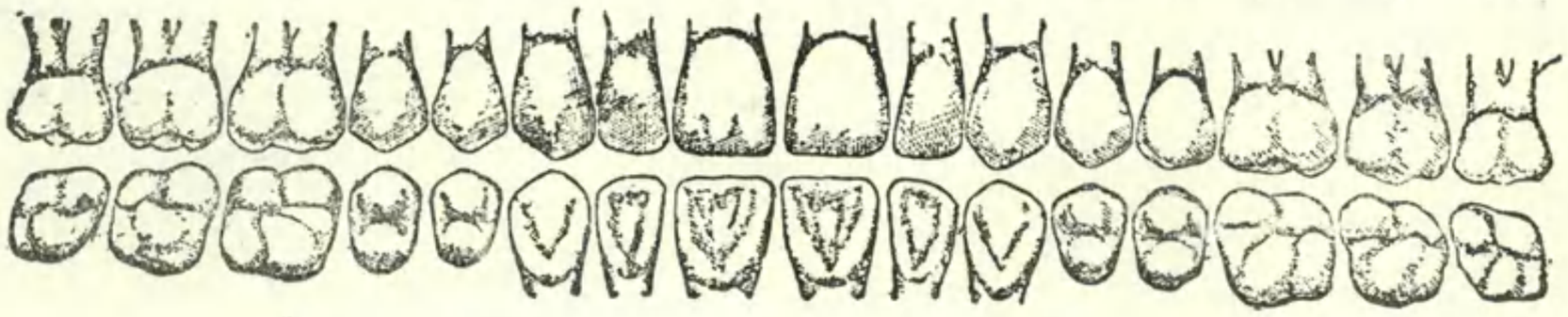
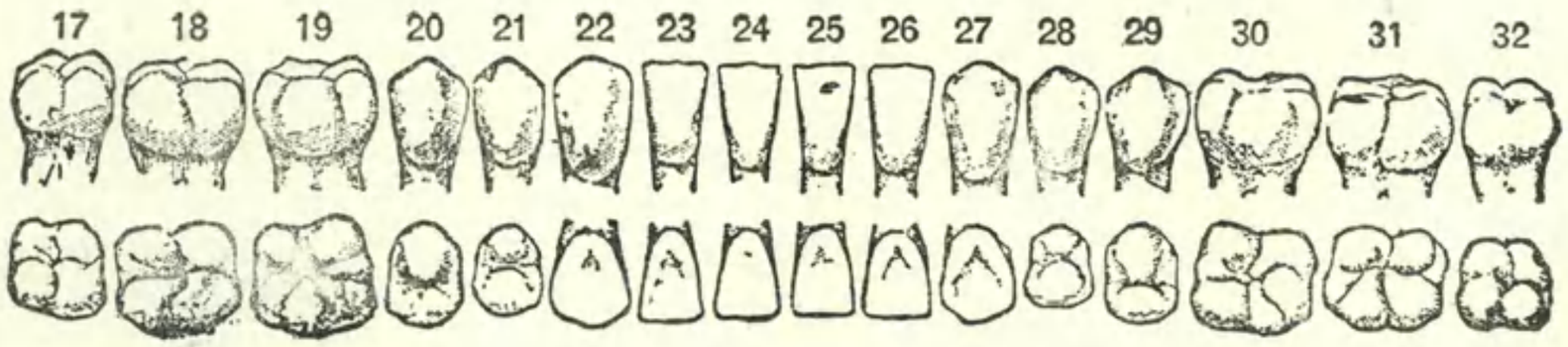
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

NAME OF SOLDIER (Block Letters) CHAVE, E.H.

REGIMENT 3rd CERB. RANK Lieut. No.

Date of Examination in England 15/4/19. Date of Examination in France




## PRESENT DENTAL REQUIREMENTS

1. FILLINGS 15. 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
- (*b*) In England Yes
- (*c*) In France

*Signature of Dental Officer* [illegible]

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Temporary Original not available

# Casualty Form—Active Service.

Unit, Regiment or Corps C. E.

Regimental No. ..... Rank Lieut. C. E. F. Name Chave Elmer Hargreaves

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

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 | | | | |
| 22.7.19. | OVERSEAS | T.O.S. DISTRICT DEPOT XI<br>S.O.S. XI on demobilization<br>T. Area. | HASTINGS PARK VANCOUVER, B.C.<br>" " | 4.7.19.<br>18.7.19. | D. O. Pr. II 203/- 1919. |

Asst. Adjutant, District Depot, M. D. XI
Lieut.

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

[P.T.O.

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

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

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps ENGINEER TRAINING DEPOT

Regimental No 2006458 Rank Spr C. E. F. Name Chave Elmer Hargraves

Enlisted (a) 13 : 6 : 17 Terms of Service (a) War Service reckons from (a) 13 : 6 : 17

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) Civil Engineer & Physical Trainer

| 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 | | | | |
| | | Appointed L/Cpl. | St. John's | 20/10/17 | D.O. E.T.D. #295, '17 |
| | | | Sos. to Comm | 24.1.18 | |

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

[P.T.O.

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

MARRIED SINGLE WIDOWER

TRADE OR CALLING Civil engineer RELIGION Baptist.

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE St. Johns P. Q. DATE Feb. 4th. 1918

Present address, Eng. Dr. Dpo. St. Johns P. Q.

ITL 4 CARD NO.

SURNAME. Chave,

CHRISTIAN NAMES Elmer Hargreaves

REGL. NO. RANK Lieut

UNIT Can. Eng. Tr. Dpo.

FORMER CORPS Can. Eng.

T.O.S. 20-1-18

D.O. Part II 10 31 31-1-

NEXT OF KIN.

NAMES IN FULL Chave, William John

RELATIONSHIP TO SOLDIER Father

ADDRESS 3400 Douglas St, Victoria B. C.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Woodstock Ont. DATE Oct. 10th. 1891

PLACE OF ATTESTATION St. Johns P. Q. DATE Jan. 25th. 1918

O/S 29-6-18 1301/1

R/C 11-7-19 369/2 Lieut RCE

L. L. 25989. M. & D. 8191.

M. F. W. 22. 100M.—8-17. H. Q. 1772-39-339.

No. 2563. RANK Sapper. NAME Chave, E. N.

T.O.S. 13-6-17. UNIT 6th Field Coy. Can. Engineers.
(D.O. 165 of 14-6-17)

M.D. 11.

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|---|---|---|---|---|
| | | | PARTICULARS | AUTHORITY |
| 1917. June 13 | 1917. June 30 | ✓ | | |
| July | | ✓ | | |
| Aug. 1 | Aug 5. | ✓ | Trnsfd. C.E.F. 5-8-17 | D.O. 220 of 8-8-17. |

SURNAME. Chave

CARD NO.

CHRISTIAN NAMES Elmer Hargraves

Com.
S.O.S. Dis 24-1-18 4

REGL. No. 2006458 RANK Spr.

UNIT Can. Eng. T.D.

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Chave, William John

RELATIONSHIP TO SOLDIER Father

ADDRESS 3400 Douglas St.
Victoria, B.C.

COUNTRY OF BIRTH Canada Woodstock, Ont. DATE Oct. 10th 1891

PLACE OF ATTESTATION North Vancouver, B.C. DATE June 13th 1917

L. L. 10437. M. & D. 7253. M. F. W. 22. 100M.—11-16. H. Q. 172-39-339.

R.Om.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Civil Engineer & Physical Trainer RELIGION Baptist

DESCRIPTION.

APPARENT AGE 25 YEARS MONTHS

HEIGHT 5 FEET 6 INCHES

CHEST MEASUREMENT 36½ INCHES EXPANSION 4½ INCHES

COMPLEXION Fresh EYES Light blue. HAIR Brown

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Not stated DATE

Present Address. Maywood P.O.
Victoria, B.C.

Ga 28354

AUG 4 1921

C

B

Number ..... Rank LIEUT

Surname CHAVE

Christian Names ELMER HARGREAVES

Unit ..... Theatre of War ENG.

Date of Service 11.7.18. 3.7.19

Remarks

Ck.

Latest Address 3400 Douglas St.
Victoria B.C.

Page 329

Roll No. 2

Canadian Engineers.

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-9-20.

# Casualty Form—Active Service.

Unit, Regiment or Corps. ENGINEER TRAINING DEPOT

Regimental No. ..... Rank Lieut. C. E. F. Name Chave, Elmer H.

Enlisted (a). 25/1/18 Terms of Service (a) C. E. F. Service reckons from (a) 25/1/18

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

Extended. ..... Re-engaged. ..... Qualification (b). Civil Engineer

| 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 for Overseas | Montreal . | 29-6-18 | R. W. Porteous Capt. T. A. C. S. |
| 30-7-18 | C.S.M.E. | attached C.S.M.E. 22/7/18 | Seaford. Sussex. | 22-7-18 | D.O. 2. C.S.M.E. No. 53. |
| 31.8.18 | 2 C.E.R.B. | TOS on arrival from Canada | Seaford | 11.7.18 | Pt II 87. |
| 23.10.18. | 2.C.E.R.B | of Coy. C.S.M.E. | Seaford. | 21-10-18 | Pt II 132. |
| 10-12-18 | 3 C E R B | TOS. from 2nd C E R B | Seaford | 11-12-18 | Pt II #109 |
| 23-1-19. | 3 C E R B | attached to Khaki College for all purposes | Seaford | 23-1-19 | Pt. II #19 – (C.E.T.C. EA. 13) |
| 29-1-19 | 3rd C.E.R.B. | Errata: 23-1-19 amended to read with effect 23-1-19 | Seaford. | 27-1-19 | Pt. II #24 |
| 3-2-19 | 3rd C.E.R.B. | S.O.S. to C E R D for purposes proceeding on leave to Cambridge University. | Seaford | 2-2-19 | Pt. II #28. |

H. O. Jones Lt. ADJT. C.E.
ADJT., 3rd C.E. RES. B No.

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

[P.T.O.

| Report | | Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case | Place | Date | Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents |
|---|---|---|---|---|---|
| Date | From whom received | | | | |
| 4-2-19 | C.E.R.D. | To Sm pesty from 3rd C.E.R.B & shown on leave | Seaford | 2-2-19 | Pt II D.O. 35- Lt. for off Command. C.E. Regt Depot. |
| 9-4-19 | 3rd C.E.R.B. | Attached from C.E.T.C. | Seaford. | 9-4-19 | Pt II D.O. 84. |
| 30-6-19 | 3rd C.E.R.B | Cease to be attached ~~on~~ from C.E.T.C. on transfer from O.M.S.F. to C.E. Int Canada | Seaford | 30/6/19 | Pt II D.O. 142 |

Lieut. C.E.
Adjt. 3rd Res. Bde. C.E.R.B.

EMBARKED Liverpool 3"7".19
DISEMBARKED Halifax 11,7,19
S.S. CELTIC SAILING NO. 86.

s R 150.
2½m—30/5/17

**Surname** CHAVE

**Christian Names** Elmer Hargreaves

**Rank** Lieut.

**Promotion**

**Unit** C.E.

**Place of Birth** Ontario.

**Married (Yes or No)**

**Appointments**

**Name and Address of Next-of-Kin**

William John Chave (Father)
3400 Douglas St.Victoria,B.C.

M

**Date of leaving Canada** 11.7.18.(R.L.28-15 5/151,152,153) **Date and Cause of Resignation**

| 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 | | | | |
| 28.8.18. | A.G.1a. | Retained in OMFC (CE) | | 11.7.18 | .8-1-139.R.L.28-15 7/4,6. |
| 31-8-18 | C.E.T.Centre | T.O.S. on arr from Can & on Comd to C.S.M.E. | | 11.7.18 | Pt 2 of 87 |
| | | Cease to be attd | | 21-10-18 | " 125. C.S.M.E |
| 9.12.18 | 2.Ch.R.B | S.O.S to 3. Ch R Bn | | 11.12.18 | " 172. T.O.S Pt II 0.109. 3. Ch R Bn |
| 4.2.19 | C.E.R.D. | T.O.S. on posting from 3rd C.E.R.Bn. & shown on indefinite leave (Cambridge University) | | 2.2.19 | Pt. II of 35. |
| 8-4-19. | C&RD | On Indefinite leave pending R.T.C. | | 1-4-19 | Pt. 2.0.189. |
| 9-8-19 | C&RD | Ceases leave & is S.O.S on transfer to C.E. & in Canada | | 3-4-19. | Pt. 2. 0 221- |
| | | Sailed for Canada. | | 3-4-19 | Sail List 86. |

22007

| Report | | Record of Promotions, reductions, transfers, casualties, etc., during active service. The authoriiy to be quoted in each case. | Place | Date | REMARKS. Taken from Official Documents | |
|---|---|---|---|---|---|---|
| Date | From whom received | | | | | |

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

M. F. W. 54. (A. F. B. 108.
500M.—9-16
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 3rd. C. & R. B.

Regimental No. ..... Rank Lieut. C. E. F. Name Chave R. H.

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

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 | | | | |
| 17-7-19 | M.H.Q. Ottawa | T.O.S. C.E.F. in Canada on General Demobilization | M.D. No. 13 | 3/7/19 | C.E.F. R.O. No. 2082-19 |
| 1-8-19 | M.H.Q. Ottawa | S.O.S. C.E.F. in Canada on General Demobilization | M.D. No. 11 | 18-7-19 | C.E.F. R.O. No. 2102-19 |

H. Winter. Capt.
for Director Personal Services

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

[P.T.O.

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

FORM P. 15. H.W.V.Ld.—3717-18.
12519—16M—1-3-18

**ASSIGNED PAY.** | **UNIT.** NAME OF | RATE OF P. AND A. | **RANK.** | ~~DATE~~ Mess | AUTHORITY | **NAME.** 4

Beneficiary: C. E. | Pay | Limit | 22/7/18 | Alg. 1a. 8.1.139 22-8-18. | Name C Have
Address | F.A. | | | | Initials Ethel Hargreaves
| Messing | | | | Bank of Montreal Trafalgar Square
Amount. $
Separation Allowance issued. Yes or No.....

Add Outfit allce 1/8/19 $100.

| DATE 1918 | PARTICULARS | | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialed by P.M. in every case. | INITIALS |
|---|---|---|---|---|---|---|---|---|---|
| Aug 2 | Aar £18. | Direct | 5879 | | 87 60 | | 87 60 | | |
| 28 | Pr A pr 1/7/18-31/8/18 Mess pr 22/7/18-31/8/18 | Vo 10711. | | 202 20 | | | | | |
| 28 | do. do. | Bank. | 7272 | | 114 60 | | | Yr 11. to 4 | |
| 28 | Outfit allce | | 6213 | | | | | £20-10-11 Sept 1918 | |
| Sept 13 | Sept Pay. | | | 108. | | | | | |
| 25 | | Bank. | 8930 | | 108. | | | | |
| Oct 15 | Oct Pay | | | 111 60 | | | | | |
| 22 | | Bank. | 10667 | | 111 60 | | | | |
| Nov | Pay R | | | 140 | | | | | |
| | | Bank | 12623 | | 140 | | | | |
| Dec | Pay R. | | | 124. | | | | | |
| | | Bank | 13485 | | 124. | | | | |
| 1919 Jan 21 | Pay (R) Jan | | | 124 | | | | | |
| | | Bank | 15442 | | 124. | | | | |
| Feby | Pay (R) Feby. | | | 112. | | | | | |
| 22 | | Bank | 17006 | | 112. | | | | |
| Mch | Pay (R) March | | | 124 | | | | | |
| 17 | Sub. 3-28/2/19. | | 14011 | | | | | 10-13-8 | |
| | | Bank | 18394 | | 124 | | | | |
| April | Pay (R) | | | 120. | | | | | |
| 16 | Sub- 1-7/4/19. | | 699 | | | | | 2.17.7. | 14.00 |
| | 1.31/3/19 | | | | | | | 12.14.9 | 62.00 |
| 17 | Advance Apr Pay P/A | Bank | 726 | | 244. | Dr 124. | | | |
| May | Pay R | | | 124. | | | | Ret at Can & Pet 3/5/19 (Stford) | |
| July 3 | C.O.A. Direct. | | 14486 | | 400 | | | | |
| | " 29/6/19. | | Vo 37 | 100 | 147/19 | Transf fr 6-12 Vo 8145. | | Lfe & N.E. Ledge | |

FORM P. 15. H.W.V.Ld.—3717-18.
12519—16M—1-3-18

| ASSIGNED PAY. | UNIT. NAME OF | RATE OF P. AND A. | RANK. | DATE | AUTHORITY | NAME. |
|---|---|---|---|---|---|---|
| Beneficiary | C.E. | Pay | Pvt | | | Name CHAVE |
| Address | | F.A. | | | | Initials E. H. |
| | | Messing | | | | Bank |
| Amount. $ | | | | | | |
| Separation Allowance issued. Yes or No..... | | | | | | |

| DATE 1919. | PARTICULARS | CK. NO. | CR. | DR. | ASSIGNED PAY PAID IN CANADA | BALANCE | SPECIAL AUTHORITIES To be initialed by P.M. in every case. | INITIALS |
|---|---|---|---|---|---|---|---|---|
| July | Balce Forward | | | | | Nil. | | |
| | ~~A. O. Allen~~ | | | | | | | |

AUDITOR | PAYMASTER

M. OR S.

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

REGT. NO. | RANK Lieut | NAME (IN FULL) CHAVE. E.H. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

Celtic. July 3rd July 11th 19.

| PARTICULARS | EFFECTIVE DATE | AUTHORITY |
|---|---|---|
| English. L.P.C. cancl | | 31.5.19. |

ORIGINAL UNIT C.E.F. 3rd C.E.R.B. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ Nil | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 3400 Douglas St Victoria B.C.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE Dispersal T. | DATE 18.7.19. | REASON Demobilization. | AUTHORITY | IF ENTITLED TO POST DISCHARGE PAY

| MONTH | PAY AND F.A. NO. OF DAYS | RATE | AMOUNT $ | C. | OTHER CREDITS $ | C. | | | TOTAL CREDITS $ | C. | ACQUITTANCE ROLLS COL. NO. 1 NO. | DATE | COL. NO. 2 NO. | DATE | COL. NO. 3 NO. | DATE | CASH PAYMENTS COL. NO. 1 $ | C. | COL. NO. 2 $ | C. | COL. NO. 3 $ | C. | ASSIGNED PAY $ | C. | REGIMENTAL CHARGES $ | C. | OTHER CHARGES $ | C. | $ | C. | TOTAL DEBITS $ | C. | BALANCE DEBIT $ | C. | CREDIT $ | C. | PARTICULARS OR REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| BALANCE FROM PREVIOUS ACCOUNT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | English. L.P.C. Clear. |
| 31.5.19. | | 3.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18.7.19. | 48 | 3.00 | 144 | - | 32 | - | | | 176 | - | 1084. | | | | | | +90 | - | | | | | | | | | | | | | 90 | - | | | 86 | | Other credits 32.00 = Pressing allow. credited 15 Date of Embarkation 3.7.19. |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Audited for W.S. M.F.W. 187. |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | To date to make Payments W.S. |
| 122 days | 366 | | 86.00 | | | | | | 452 00 | | Aug 16 | | 1141049 | | 176 00 | | | | | | | | | | | | | | | | 176 00 | | 366 00 | | | | |
| 31 days additional Cost | | | 93 00 | | | | | | 93 00 | | Aug 20 | | ~~1141523~~ | | ~~93 00~~ | | | | | | | | | | | | | | | | | | ~~276~~ | | | | 1141523 Cancelled |
| | | | | | | | | | 545 00 | | Sept 12 | | 1143469 | | 93 | | | | | | | | | | | | | | | | 93 | | 183 | | | | |
| | | | | | | | | | | | Oct 10 | | 1577673 | | 93 | | | | | | | | | | | | | | | | 93 | | 183 | | | | |
| | | | | | | | | | | | Nov 18 | | 1586954 | | 90 | | | | | | | | | | | | | | | | 90 | | 93 | | | | |
| | | | | | | | | | | | Dec 18 | | 1600980 | | 93 | | | | | | | | | | | | | | | | 93 | | | | | | |
| | | | | | | | | | 545 | | | | | | | | | | | | | | | | | | | | | | 545 | | | | | | |

War Service Gratuity
Service 2 years ____ months

Certified that all payments have been made on this account for which covering authority has been received to date.

A. Lind. Lieut.,
Paymaster, Demobilization Pay
M.D. No. 11

I certify that all payments of War Service Gratuity have been made on this account to the period of Service shown on the M.F.W. 2596 received.

A.S. Allman Capt.
Officer i/c War Service Gratuity
M.D. No. 11

200M-3-19.—L. L. 58788-... & D. 9985.
M. F. W. 2.96.
1772-39-1390.

644-C-19565

M. F. W. 129.

50m.—7-17.
1772—39—1142.

# Medical Examination upon leaving the Service

## of an Officer fit for general service or a Soldier fit for duty.

☞ Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

DEPT. MILITIA & DEFENCE FEB 28 1918 H.Q. CANADA

Rank Lt/Cpl. Name Elmer H. Surname Chase

Unit of Corps Can. Engineers (If a soldier) Regtl. No. 200458

Born at Woodstock Ont. on, (date) 10/10/91

Signature (for identification) Elmer H. Chase

B.P.O. C.E.F. MAR 1918

The examination is to be made jointly by two Medical Officers.

SECTION "D"

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 145 lbs. Colour of eyes Blue

Height 5 ft. 7 in. Identification Marks Nil

2. NUTRITION AND DIATHESIS? Good

After searching enquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? Is there a history of previous disability? None

4. RESPIRATORY SYSTEM? Is there a history of lung trouble? None

5. HEART?

Abnormal Sounds? Nil

Abnormal Size? Nil

Pulse Rate? 76 Intermittence or Irregularity? Nil Muscular Tone? Good

6. ARTERIES.—(a) Any hardening or nodulation? None

(b) ~~Blood Pressure.~~

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included). Good

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.? 1019 Reaction? Acid Albumen? Nil Sugar? Nil

9. SKIN, MIDDLE EAR, EYE or any other part? All normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. None

11. Opinion as to the health and physical condition of the one examined? Class A2

Examined at ST. JOHNS, P.Q.

Date FEB 4 1918

Signed [illegible] M. O.

Signed [illegible] M. O.

Elmer H. Chase
Signature note of Soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, this report should be sent at once to the O. C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding

0472

# List of Discharge Documents.

| | | | |
|---|---|---|---|
| Reg. Conduct Sheet, | Militia form B. 263. | Attestation Paper, | Militia Form B. 235. |
| Squadron / Battery / Company } Conduct Sheet, | " B. 263a. | Proceedings on Discharge | " B. 218. |
| Copies of Convictions, by C. P. | in MS. | | |
| Med. Hist. Sheet, | Militia Form B. 313 | | |
| Medical Report for Invalid* | " B. 227. | | |
| Statement of Man's Account on Transfer and Last Pay Certificate, | " D. 877. | | |

*Only if discharged "Medically unfit."

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet (in the event of such having been prepared.)

*N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.*

Not applicable

This space to be for numbers

# Proceedings on Discharge.

**(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page).**

MILITIA DEPT. FEB 13 1918 H.Q.

No. 2006458

Rank Lance-Corporal

Surname Chase

Christian Name Elmer Hargreaves

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) Canadian Engineers

Date of Discharge January 24, 1918

Place of Discharge St. Johns, P.Q.

**1.** DESCRIPTION AT THE TIME OF DISCHARGE.

Age 26 years 3 months.
Height 5 feet 6 inches.
Complexion Fresh
Eyes Light Blue
Hair Brown
Trade Civil Engineer & Physical Trainer
Intended place of residence (To be given as fully as practicable.) E. T. S. St. Johns

Descriptive Marks

Nil

**2.** The above-named man is discharged in consequence of having been granted a commission of Lieutenant. (HQ-360-17-220. MO4 11-C-304)

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

**3.** Conduct and character while in the service have been, according to the records, etc.

Very good

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

**4.** Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Civil Engineer and Physical Trainer

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

Disch. Sect. 13.2.18. D.O.

5. He is in possession of the following number of G. C. Badges:

Nil

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations..... Nil

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) ST. JOHNS, P. Q. ..... W. W. Mitchell .....

Lt. Colonel C. E.
O. C. Engineer Training Depot.
*Commanding* .....

(Date) Jan. 24, 1918.

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) ST. JOHNS, P. Q. Elmer H. Chave .....(*Signature of Soldier.*)

(Date) Jan. 24, 1918 E. F. Woolley Capt. (*Signature of Witness.*)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... Elmer H. Chave .....(*Signature of Soldier.*)

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) ST. JOHNS, P. Q.

(Date) Jan. 24, 1918.

(*Signature*) W. W. Mitchell

Lt. Colonel C. E.
O. C. Engineer Training Depot.

**Reservations referred to at Para. 8.**

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

Nil

Elmer H. Chave

(OVER)

2-63

2006458

# MEDICAL HISTORY SHEET

Surname Chave Christian Name Elmer Hargraves

Examined on 30 day of May 1917 at Victoria

Birthplace City or Town Woodstock County Ont

Apparent age 25.

Trade or occupation Civil Engineer

Height 5 feet 6 Inches

Weight 137 lbs.

Chest measurement Minimum 32 inches Maximum expansion 36½ inches

Physical development Good

Small-pox Marks nil

Vaccination Marks Arm Right Left X Number 2

When Vaccinated last childhood

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Vision R: D. 20 L: D. 20

Hearing R. n L. n

Approved by A. Bruce Murphy

Rank Capt. M.O.

| Date | Fit or Unfit | Examined for Re-Engagement | |
|---|---|---|---|
| | | A Bruce Murphy | M.O. |
| | AT | Sawhenny | M.O. |
| | Fit | | M.O. |
| | | MOBILIZATION CENTRE VICTORIA | M.O. |
| Pres. | | | M.O. |
| Member | | | M.O. |
| Member | | | M.O. |

| Date | Result | Vaccinations | |
|---|---|---|---|
| | | | M.O. |
| | | | M.O. |
| | | | M.O. |

| Date | Result | Anti-Typhoid Inoculations, Etc. | |
|---|---|---|---|
| 21/6/17 | good | W. Edwin Newcombe | M.O. |
| 28/6/17 | good | W. Edwin Newcombe | M.O. |
| 2/8/17 | good | W. Edwin Newcombe LIEUT. C.A.M.C. | M.O. |

Enlisted on 13 day of June 1917 at North Vancouver

| | Corps | Regt'l Number | Habits | Date |
|---|---|---|---|---|
| Joined on enlistment | 6th Field Co Can. Eng. | 2563 | | 13/6/17 |
| Transferred to | | 2006458 | | |

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD

| Station | Date | Disease | Result |
|---|---|---|---|
| VANCOUVER | AUG 6 1917 | | A. Bruce Murphy Capt. Chairman |
| VICTORIA, B. C. | MAY 30 1917 | | |

INSPECTING MEDICAL BOARD No. 2 MONTREAL, P.Q.

N.B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Servcie, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.

500M.—3-16.

H. Q. 1772-39-439.

Surname..... Christian Name.....

| STATION | Date of Arrival at the Station | Dates of Admission into Hospital | | | Dates of Discharge from Hospital | | | DISEASE | Number of days in Hospital | Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations. | Signature of Medical Officer |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Day | Month | Year | Day | Month | Year | | | | |
| | | | | | | | | | | | |

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.....

Canadian Engineers
ENGINEER TRAINING DEPOT

(2) Regimental Number 2006458.

(3) Full Name of Soldier Chawe, Elmer Hargraves,

(4) Place of Birth Woodstock Ontario Canada

(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? no

(8) Have you any children? no

If so, give number of boys and girls —

Also their names and ages —

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive? Yes

If so, state name and address William John Chave 3400 Douglas St Victoria B.C.

(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.

—

(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? Yes

If so, in what Company? Mutual Life of Canada

Have you made arrangements for payment of your Insurance premium Yes

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

R. McTrow Jr
Lt. C.E.

Lt. Colonel C. E.
*Officer Commanding.*
O. C. Engineer Training Depot.

AUG 13 1917

Date.....

# CANADIAN CONTINGENT EXPEDITIONARY FORCE

## LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 2006458 Rank L/Corporal Name CHAVE, E.H.

Corps Engineer Training Depot. who was* struck off strength

On January 24th 1918. 191..., to - - -

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1st January 191 8, to 24th January 191 8 the inclusive date of transfer or discharge.

| Dr. | $ | c. | Cr. | $ | c. |
|---|---|---|---|---|---|
| Bal. Dr. from prev. month | | | Bal. Cr. from prev. month | 10 | 00 |
| Advances by Cheques: No. 5062 | 15 | 00 | Regt'l Pay 24 days at $ 1 c. 00 | 24 | 00 |
| Advances by Cheques: No. 5215 | 14 | 10 | Field Allow. 24 days at $ c. 10 | 2 | 40 |
| Assigned Pay and Sep'n Allce. No. | | | Separation Allowances* (Monthly) | | |
| Other charges Regimental | 5 | 00 | Other Allowances* CIV. CLTHG. | 13 | 00 |
| Q.M. Stores. | | 55 | | | |
| Payment on transfer or discharge No. 5232 | 14 | 75 | Other Credits* | | |
| Balance Cr. (to be paid by the new unit) | | | Bal. Dr. (to be deducted by new unit) | | |
| Total | 49 | 40 | Total | 49 | 40 |

*Give particulars.

A monthly stoppage of $ Nil (†) has (‡) been paid on account of Assigned Pay for the month of 191... and Sep'n Allce. for month of 191... (to) Assignee

(Address) N I L

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

**On Transfer of an Officer**

Outfit Allowance of $ ..... has been paid by Paymaster, Military District No. .....

REMARKS:—

State (1) date of enlistment 13-6-17

(2) if married and if a Separation Allowance Card has been submitted Single/ Nil

(3) cause of discharge Granted Commission authority H.Q. 360-17-220 D.O. Part "2" #32 d/1-2-18

(4) authority for transfer

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date February 5th 1918.

Place St Johns, P.Q.

L. Lepine Captain
Engineer Training Depot. *Paymaster.*

**N.B.**—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

Dated Bed 13-2-18 DP.

**M. F. W. 44.**

100M.—12-17.
H. Q. 1772-39-903.

M. F B. 465
100m.—7-16.
1772-39-950

# DENTAL HISTORY SHEET

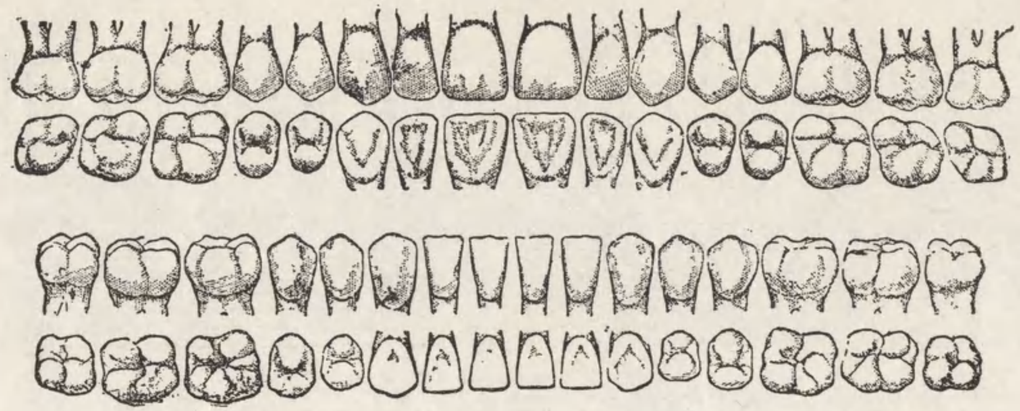
CANADIAN ARMY DENTAL CORPS

DIVISION.....

NAME OF SOLDIER Chave, Edward Hargrave

No. 2006458.

REGIMENT ENGINEER TRAINING DEPOT RANK Spr.



| DATE | | No. | Fillings: Amal. | Fillings: Phosp. | Fillings: G. Per. | Fillings: Cement | Extracted | Anesthetic | Treated | Crowns | Cleaned | As 2° 3 | Pulp Removed | Put Pulp | Artificial Teeth | OPERATOR | REMARKS |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | | | | | | | |

WAR SERVICE BADGE, CLASS "B". No....

M.D. 11
O.C. 19
S.G. 33

U

# Proceedings of an Officer or Nursing Sister Struck off Strength OF THE Canadian Expeditionary Force.

1. RANK Lieutenant
2. NAME CHAVE, Elmer Hargreaves
3. UNIT Canadian Engineers Regimental Depot. (Attached 3rd C.E.R.B.)
4. DATE STRUCK OFF STRENGTH | PLACE Seaford, Sussex.
5. REASON SOS 18-7-19 RO 2102-19

Demobilization.

30.1.27

6. AUTHORITY A.G.1a/8-1-155, d/4-1-19.
7. PROPOSED RESIDENCE

3400 Douglas Street,
Victoria, B.C.

This folder should contain the following documents :—

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report, M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

1. Triplicate Declaration Paper (M.F.W. 51), or Triplicate Attestation Paper (M.F.W. 23).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B.313 or A.F.B.178)
4. Proceedings of Med. Board (M.F.B.227 or M.F.W.129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Proceedings on Striking off Strength (M.F.W. 2591).
7. Last Pay Certificate (P. 41).
8. War Service Gratuity Form (M.F.W. 2595).
9. Sundry Documents.

Chave Elmer H

EMBARKED LiverPool 3'7' 19
DISEMBARKED Halifax 11.7.19
S.S.CELTIC SAILING NO.33.

Group A11
Checked by No. 6
Date 1-7-19

M. F. W. 2591.
(923) Wt. /45P 3/19 15M D.St.