

# TRIPPLICATE

## ATTESTATION PAPER.

No. 3341

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio. O Eng. 1257

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Oliver Ernest Febery
  2. In what Town, Township or Parish, and in what Country were you born?..... Bristol England
  3. What is the name of your next-of-kin?..... (wife) Harriett Febery
  4. What is the address of your next-of-kin?..... Spruce St Potter Street London Ont. Canada
  5. What is the date of your birth?..... 18 March 1879
  6. What is your Trade or Calling?..... Carpenter
  7. Are you married?..... ye
  8. Are you willing to be vaccinated or re-vaccinated?.....
  9. Do you now belong to the Active Militia?..... 7th Fusiliers
  10. Have you ever served in any Military Force?.. no
  11. Do you understand the nature and terms of your engagement?..... ye
  12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?} ye
- ..... O. E. Febery (Signature of Man).  
 ..... H. J. Bennett (Signature of Witness).

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

I, Oliver Ernest Febery, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

..... O. E. Febery (Signature of Recruit)  
 Date 9 Nov 191 5 ..... H. J. Bennett (Signature of Witness)

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

I, ....., 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.

..... O. E. Febery (Signature of Recruit)  
 Date 9 Nov 191 5 ..... H. J. Bennett (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 London this 9th day of November 191 5  
 ..... (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.  
 ..... (Approving Officer)  
 O. E. Febery

8 - MAR Rec'd

# Description of Oliver Ernest Feby on Enlistment.

Apparent Age 36 years ..... months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 8 ins.

Chest measurement { Girth when fully expanded ..... 40 ins.  
 Range of expansion ..... 3 ins.

Complexion ..... Dark

Eyes ..... Blue

Hair ..... dark Brown

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

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

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

*Scars of burus back of head & on left temple*

## 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 ..... 1st Nov 1915

*B. Bell* Capt.

Place ..... London Ont

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.

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

*A. H. Greenlees* herein (Signature of Officer)

Date ..... 1st Nov 1915

O.C. 7th, 76. 68

W 1/4  
28-7-19

NAME SPR FEBREY OLIVER ERNEST

REGT. NO. 3341

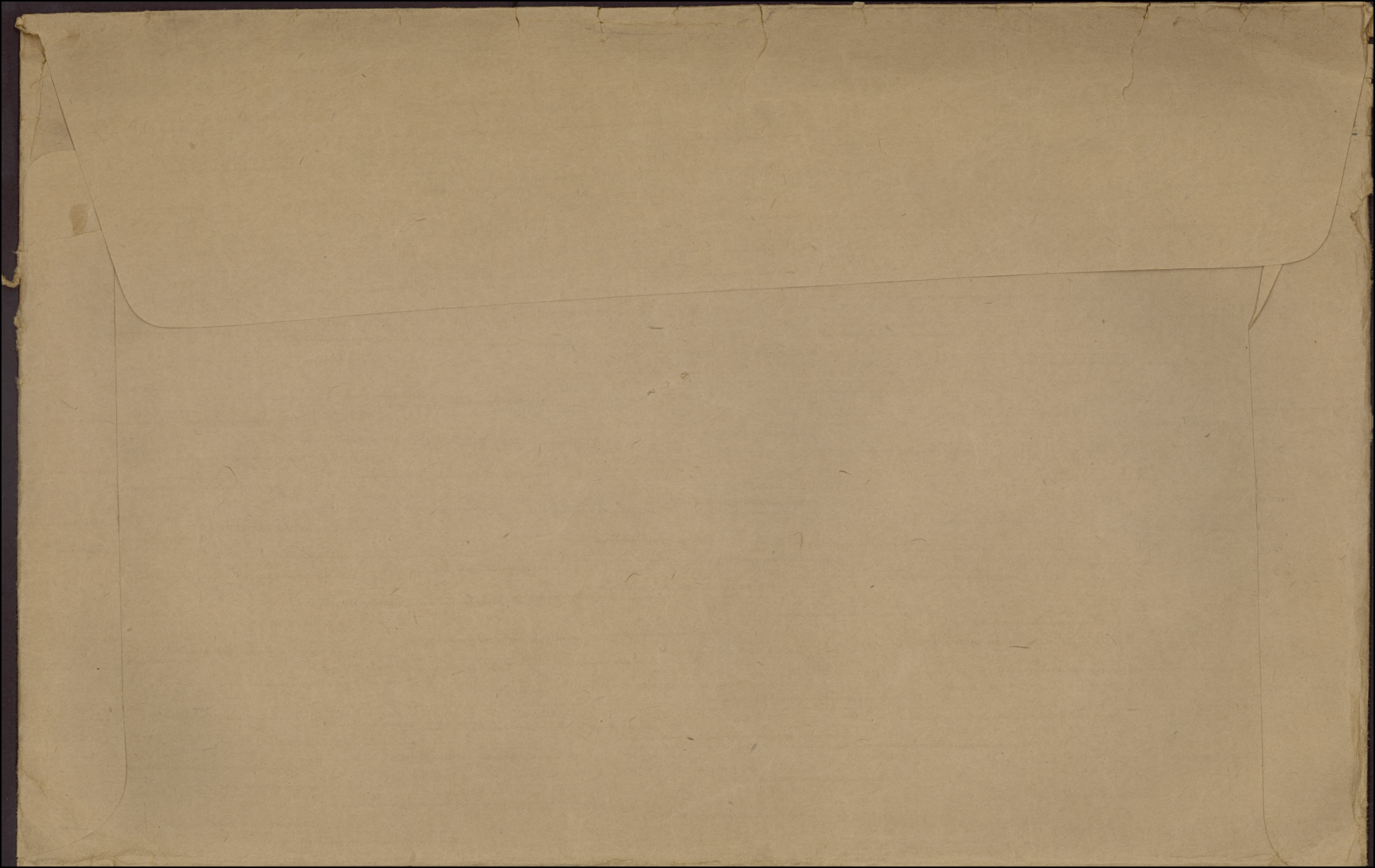
UNIT CON ENGRS

H. Q. FILE NO.

**H**

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY	
1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)		<b>M</b>			DEATH	
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category	
TRAINING HISTORY SHEET (M.F.W. 113)						
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)						
1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)						
1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)						
4 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE	
DENTAL HISTORY SHEET (M.F.B. 465)					Category	
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)						
1 MEDICAL EXAMINATION (M.F.W. 129)					DEMOR	
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)						
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)						
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION	
LAST PAY CERTIFICATE (M.F.W. 44)						
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)		<b>H</b>				
PARTICULARS OF CHARACTER (A.F.W. 3226)						
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)						
1 DENT CERT						
1 DISP "						
2 RFB 117						
1 MFW 67						
1 [unclear]						
1 [unclear]						
1 [unclear]						
					1 15-14 15-14 5-17 1	

03103



Number

3341

Rank

Spr.

Surname

FEBREY

Christian Name

Oliver Ernest

Units

C. E.

Theatre of War

France

Date of Service

10/8/16

Remarks

Latest Address

G. P. O. London, Ont.

Roll No.

Page 17462

200m.-2-21.M.

DESP. OCT 13 102  
REGN. NO. 43113

NAME *Febrey Oliver Ernest*

REGT'L NO *3341*

RANK AND CORPS

*Spr. No 11<sup>th</sup> Fld Co, Gen Engrs*

H. Q. FILE NO. 649-

FOLLOWS

NO.

*15<sup>th</sup> Fld Engrs*

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

*08848*

*13-2-17*

*Adm. to No 3 Stat. Hosp Feb 6th 1917  
Fract of the Fibula Serv*

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a 104	No 13 Stat Boulogne	6-2-17	Fract Rt Fibula Sec Acc
B 130	Norfolk War Hosp Norwich	17-2-17	" " " " "
B 179	Canbours Hillingdon H. Uxbridge	10-5-17	" " " " 11-6-17
B. 33.	" " " " Dis.	3-7-17.	" " " "



No. 3341

RANK

*Pte*

NAME

*Febrey O. E.*

T. O. S.

UNIT

*Canadian Engineers Training Depot*

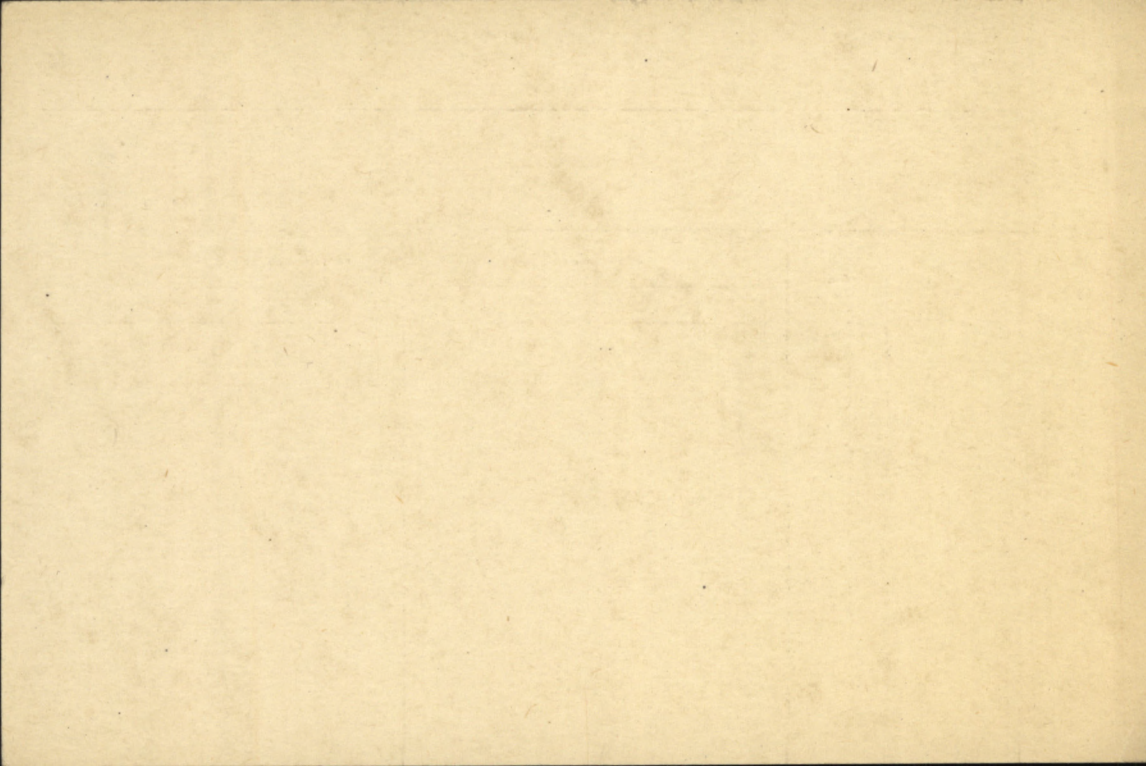
M. D.

*1916*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916 apr 1 may 1</i>	<i>1916 apr 30 may 12</i>	<i>v w</i>	<i>Proc of</i>	<i>rec 1149 15/5/16</i>







Name **FEBREY,** ✓  
**Oliver Ernest** Rank **Sapper.** ✓ Reg. No. **3341.** ✓  
 Unit **4th.Divisional Engineers.** **11th.Fld.Coy.** ✓  
 Next of Kin **CANADA.** ✓

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917.			<b>Frac.Lt.Fibula</b>			
6-2.	No.13.Stat.Hosp.	Boulogne.	Sev.(Acc)	A104.	8948.	
17-2.	Norfolk.War Hosp.	Norwich.	do.	do.	B130.	
10-3	Can Cour. Hosp.	Hillington House Wct.	..	B179		
3	Discharged		do	B33.		CEH 1226



Surname **Febrey** Christian Name or Names **O.E.** Reg. No. **3541**  
Rank **Spr.** Unit **4th C.E. (11 F.C.)** Co. Troop Batty.

Hospital **13 Stat. Boulogne** Date of Admission **6-2-17.**

Transferred *Norfolk War Hospital* **17. 2-7.**  
*Hillingdon. Ho Lybridge.* Hosp. **10. 5. 17**

Hosp.

Diagnosis **Frac. L.Fibula Sev. (acc.)**

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

C.L. 14-2-17 AI04

*Dis. 3. 7. 17*  
REMARKS

*" 24-2-17 B/30.*  
*12-5-17 B/179*  
*11-10-17 B/33*

A.M.D. 2 Dept.

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

R

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

M. F. W. 12.  
 50m.—4-16.  
 H. Q. 1772-39-819.

To Whom *Harriet Febrey*

Address *Spence St*

*London Junction Pottiesburg*  
*London* *Out*

Rate *\$ 20.00* MAY 1 1916

*Wife*  
 By Whom Assigned *Febrey O. E.*

Regtl. No. *3341*

Rank *Spr*

Corps *Can. Engineers 15 Fld. Co.*

PAYMENTS SEE ALSO ACCOUNT IN SPEC. REM. LEDGER.

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



200  
160  
40  
400

XIX 20

1000  
1000

1 2500

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 Engineer Training Depot  
Ottawa, Ont.

(2) Regimental Number 3341

(3) Full Name of Soldier Oliver Ernest (Febrey)

(4) Place of Birth Bristol, Eng.

(5) Are you married, or not? Yes

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

(b) Present Postal Address London Junction, Ont.

(7) Are you a widower?

(8) Have you any children? 4

If so, give number of boys and girls 2 Boys 2 Girls

Also their names and ages Sydney Oliver 12 Ernest Alex 9

Edith May 10 Margaret Alice 4

(9) Is your Father alive? Yes

If so, state name and address Job Febrey, ~~Blackwell~~, ~~Bristol~~ Eng  
West Town, Backwell, Bristol, Eng.

(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.

Yes.

(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.

MAY 2 1916

Date.....

*J. Armstrong*  
for Officer Commanding.

MILITIA AND DEFENCE  
**ASSIGNED PAY**

M. F. W. 12a.  
 50m.—4-16.  
 1772—39—819.

Sheet No. 2.

Harriet Febrey *Wife*  
**PAYMENTS.**

Name of Soldier

Febrey O.E.

L. L. Job 310.—Req. 6574.

#3341 *Can. Eng. 15 Pld. Co.*

Month.	Year.	Cheque No.	Amt.	Remarks.
				# 20.00 MAY 1 1916
April	1915			
May				
June		T 1446	40	
July		G 8821	20	
Aug.		JP 13720	90	
Sept.		X 17265	20	
Oct.		X 22279	20	
Nov.		R 26489	10	
Dec.		G 32080	20	
Jan.	1916	36636	20	
Feb.		Q 42984	20	
March		S 50541	20	20 H
April		U 670	20	20 E.
May		M 7609	20	
June		K 14666	20	20 T.
July		S 21853	20	Pa
Aug.		Y 28334	20	Pa
Sept.		Y 35700	20	Lu
Oct.		N 41399	20	
Nov.		X 46935	20	
Dec.		O 56349	20	How
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*W.S. EX*

*W.S.*

*360*

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier \_\_\_\_\_

**PAYMENTS.**

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

165.  
 315.  
 ---  
 480

# Report on Wounds or other Injuries, received otherwise than in Action.

114  
Gen. No.  
4269.

## Certificate of Medical Officer.

No. 3341 Spr. Febrer O.E. Can, Engineer 11<sup>th</sup> Hd Coy

was admitted to hospital on the 6. 2. 17 suffering from Fract of Fibula acc

The disability is of a trivial nature, and in all probability

† will not interfere with his future efficiency as a soldier.

† Here insert "trivial" or "serious."

† Here insert "will" or "will not."

\* Here insert "claims" or "does not claim."

\* He claims that he was in the performance of military duty at the time of the accident.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

Station Stationary Hospital

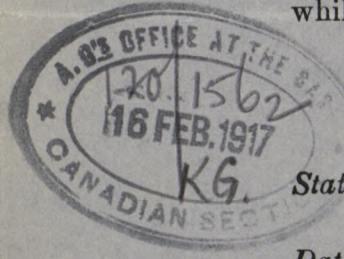
Date 8. 2. 17

AW Nuttall Capt.  
Medical Officer in Charge.



## Certificate to be signed by soldier.

I, \_\_\_\_\_ hereby declare that the injury sustained by me on the \_\_\_\_\_ did not occur while I was in the performance of military duty.



Station \_\_\_\_\_

Date \_\_\_\_\_

{ Soldier's  
Signature.  
\_\_\_\_\_  
{ Signature  
of Medical  
Officer.  
\_\_\_\_\_

## Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

I certify that the injury to the above-named soldier † occurred while he was in the performance of military duty.

† Here insert "occurred" or "did not occur."

If on duty, state (a) The date of the injury. (b) The place where it occurred. (c) The nature of the duty. (d) Whether the soldier was in any way to blame.

† While proceeding on duty Jan. 29/17 from rear billets to advance billets the above named man slipped on bathmat and injured his ankle. He was in no way to blame.

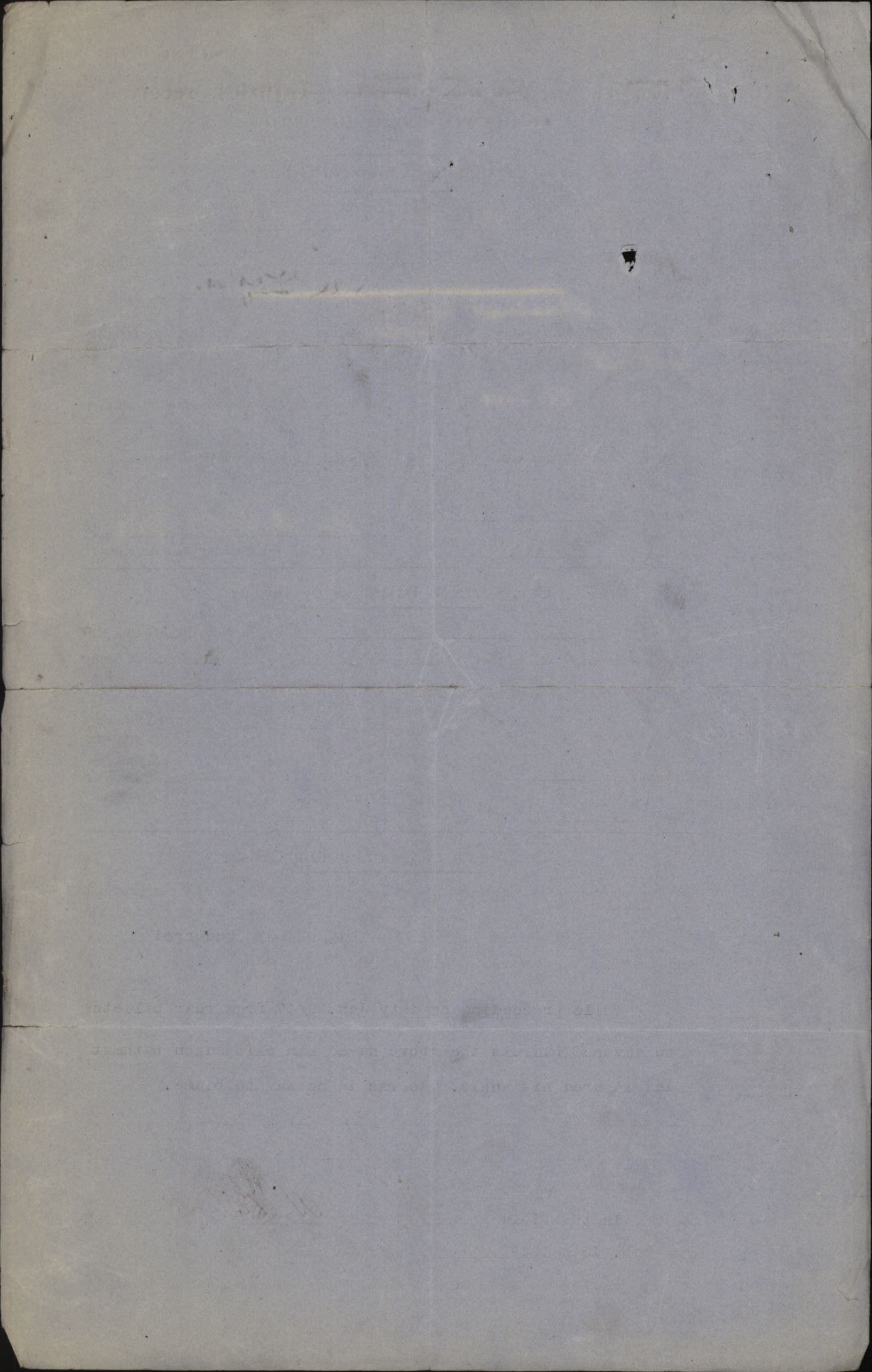
The soldier has been so informed.

Station In the Field

Date Feb. 13th 1917

H. L. Trotter  
Major O. C.  
O. C. 11. Field Coy. Div. Eng. C. E. F.  
Commanding

This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.





3.11.15

## MILITIA AND DEFENCE

M. F. W. 11.  
20m.—11-15.  
H. Q. 1772-39-818.

## SEPARATION ALLOWANCE

Name	<i>Harriett Febrey</i>	Name of Soldier	<i>Febrey Oliver E.</i>
Address	<i>Spruce Str., London Junct., London, Ont.</i>	Regtl. No.	<i>8841.</i>
Relation to Soldier	} <i>wife</i>	Rank	<i>Sapper.</i>
wife, child or mother		Corps	<i>Canadian Engineers</i>
		To what Corps belonging	}
		when called out	

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Absent without leave from 15/11/16 (amt 29/2/16)</i>
Sept.				
Oct.				
Nov.				
Dec.				<p style="text-align: center;"><b>ACCOUNT CLOSED</b></p> <p style="text-align: center;">DATE <b>MAR. 7 1916</b> PER <i>[Signature]</i></p>
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	✓ 1916	<i>019704</i>	<i>58 - 58</i>	<i>(N 21690 Cancelled) Discharged 15/11/16 (amt 28/2/16)</i>
Feb.		<i>14 21690</i>	<i>20</i>	
March				

REMARKS ON THE  
STATE OF THE UNION  
1917

1917	1916	1915	1914	1913	1912	1911	1910	1909	1908	1907	1906	1905	1904	1903	1902	1901	1900	1899	1898	1897	1896	1895	1894	1893	1892	1891	1890	1889	1888	1887	1886	1885	1884	1883	1882	1881	1880	1879	1878	1877	1876	1875	1874	1873	1872	1871	1870	1869	1868	1867	1866	1865	1864	1863	1862	1861	1860	1859	1858	1857	1856	1855	1854	1853	1852	1851	1850	1849	1848	1847	1846	1845	1844	1843	1842	1841	1840	1839	1838	1837	1836	1835	1834	1833	1832	1831	1830	1829	1828	1827	1826	1825	1824	1823	1822	1821	1820	1819	1818	1817	1816	1815	1814	1813	1812	1811	1810	1809	1808	1807	1806	1805	1804	1803	1802	1801	1800	1799	1798	1797	1796	1795	1794	1793	1792	1791	1790	1789	1788	1787	1786	1785	1784	1783	1782	1781	1780	1779	1778	1777	1776	1775	1774	1773	1772	1771	1770	1769	1768	1767	1766	1765	1764	1763	1762	1761	1760	1759	1758	1757	1756	1755	1754	1753	1752	1751	1750	1749	1748	1747	1746	1745	1744	1743	1742	1741	1740	1739	1738	1737	1736	1735	1734	1733	1732	1731	1730	1729	1728	1727	1726	1725	1724	1723	1722	1721	1720	1719	1718	1717	1716	1715	1714	1713	1712	1711	1710	1709	1708	1707	1706	1705	1704	1703	1702	1701	1700	1699	1698	1697	1696	1695	1694	1693	1692	1691	1690	1689	1688	1687	1686	1685	1684	1683	1682	1681	1680	1679	1678	1677	1676	1675	1674	1673	1672	1671	1670	1669	1668	1667	1666	1665	1664	1663	1662	1661	1660	1659	1658	1657	1656	1655	1654	1653	1652	1651	1650	1649	1648	1647	1646	1645	1644	1643	1642	1641	1640	1639	1638	1637	1636	1635	1634	1633	1632	1631	1630	1629	1628	1627	1626	1625	1624	1623	1622	1621	1620	1619	1618	1617	1616	1615	1614	1613	1612	1611	1610	1609	1608	1607	1606	1605	1604	1603	1602	1601	1600	1599	1598	1597	1596	1595	1594	1593	1592	1591	1590	1589	1588	1587	1586	1585	1584	1583	1582	1581	1580	1579	1578	1577	1576	1575	1574	1573	1572	1571	1570	1569	1568	1567	1566	1565	1564	1563	1562	1561	1560	1559	1558	1557	1556	1555	1554	1553	1552	1551	1550	1549	1548	1547	1546	1545	1544	1543	1542	1541	1540	1539	1538	1537	1536	1535	1534	1533	1532	1531	1530	1529	1528	1527	1526	1525	1524	1523	1522	1521	1520	1519	1518	1517	1516	1515	1514	1513	1512	1511	1510	1509	1508	1507	1506	1505	1504	1503	1502	1501	1500	1499	1498	1497	1496	1495	1494	1493	1492	1491	1490	1489	1488	1487	1486	1485	1484	1483	1482	1481	1480	1479	1478	1477	1476	1475	1474	1473	1472	1471	1470	1469	1468	1467	1466	1465	1464	1463	1462	1461	1460	1459	1458	1457	1456	1455	1454	1453	1452	1451	1450	1449	1448	1447	1446	1445	1444	1443	1442	1441	1440	1439	1438	1437	1436	1435	1434	1433	1432	1431	1430	1429	1428	1427	1426	1425	1424	1423	1422	1421	1420	1419	1418	1417	1416	1415	1414	1413	1412	1411	1410	1409	1408	1407	1406	1405	1404	1403	1402	1401	1400	1399	1398	1397	1396	1395	1394	1393	1392	1391	1390	1389	1388	1387	1386	1385	1384	1383	1382	1381	1380	1379	1378	1377	1376	1375	1374	1373	1372	1371	1370	1369	1368	1367	1366	1365	1364	1363	1362	1361	1360	1359	1358	1357	1356	1355	1354	1353	1352	1351	1350	1349	1348	1347	1346	1345	1344	1343	1342	1341	1340	1339	1338	1337	1336	1335	1334	1333	1332	1331	1330	1329	1328	1327	1326	1325	1324	1323	1322	1321	1320	1319	1318	1317	1316	1315	1314	1313	1312	1311	1310	1309	1308	1307	1306	1305	1304	1303	1302	1301	1300	1299	1298	1297	1296	1295	1294	1293	1292	1291	1290	1289	1288	1287	1286	1285	1284	1283	1282	1281	1280	1279	1278	1277	1276	1275	1274	1273	1272	1271	1270	1269	1268	1267	1266	1265	1264	1263	1262	1261	1260	1259	1258	1257	1256	1255	1254	1253	1252	1251	1250	1249	1248	1247	1246	1245	1244	1243	1242	1241	1240	1239	1238	1237	1236	1235	1234	1233	1232	1231	1230	1229	1228	1227	1226	1225	1224	1223	1222	1221	1220	1219	1218	1217	1216	1215	1214	1213	1212	1211	1210	1209	1208	1207	1206	1205	1204	1203	1202	1201	1200	1199	1198	1197	1196	1195	1194	1193	1192	1191	1190	1189	1188	1187	1186	1185	1184	1183	1182	1181	1180	1179	1178	1177	1176	1175	1174	1173	1172	1171	1170	1169	1168	1167	1166	1165	1164	1163	1162	1161	1160	1159	1158	1157	1156	1155	1154	1153	1152	1151	1150	1149	1148	1147	1146	1145	1144	1143	1142	1141	1140	1139	1138	1137	1136	1135	1134	1133	1132	1131	1130	1129	1128	1127	1126	1125	1124	1123	1122	1121	1120	1119	1118	1117	1116	1115	1114	1113	1112	1111	1110	1109	1108	1107	1106	1105	1104	1103	1102	1101	1100	1099	1098	1097	1096	1095	1094	1093	1092	1091	1090	1089	1088	1087	1086	1085	1084	1083	1082	1081	1080	1079	1078	1077	1076	1075	1074	1073	1072	1071	1070	1069	1068	1067	1066	1065	1064	1063	1062	1061	1060	1059	1058	1057	1056	1055	1054	1053	1052	1051	1050	1049	1048	1047	1046	1045	1044	1043	1042	1041	1040	1039	1038	1037	1036	1035	1034	1033	1032	1031	1030	1029	1028	1027	1026	1025	1024	1023	1022	1021	1020	1019	1018	1017	1016	1015	1014	1013	1012	1011	1010	1009	1008	1007	1006	1005	1004	1003	1002	1001	1000	999	998	997	996	995	994	993	992	991	990	989	988	987	986	985	984	983	982	981	980	979	978	977	976	975	974	973	972	971	970	969	968	967	966	965	964	963	962	961	960	959	958	957	956	955	954	953	952	951	950	949	948	947	946	945	944	943	942	941	940	939	938	937	936	935	934	933	932	931	930	929	928	927	926	925	924	923	922	921	920	919	918	917	916	915	914	913	912	911	910	909	908	907	906	905	904	903	902	901	900	899	898	897	896	895	894	893	892	891	890	889	888	887	886	885	884	883	882	881	880	879	878	877	876	875	874	873	872	871	870	869	868	867	866	865	864	863	862	861	860	859	858	857	856	855	854	853	852	851	850	849	848	847	846	845	844	843	842	841	840	839	838	837	836	835	834	833	832	831	830	829	828	827	826	825	824	823	822	821	820	819	818	817	816	815	814	813	812	811	810	809	808	807	806	805	804	803	802	801	800	799	798	797	796	795	794	793	792	791	790	789	788	787	786	785	784	783	782	781	780	779	778	777	776	775	774	773	772	771	770	769	768	767	766	765	764	763	762	761	760	759	758	757	756	755	754	753	752	751	750	749	748	747	746	745	744	743	742	741	740	739	738	737	736	735	734	733	732	731	730	729	728	727	726	725	724	723	722	721	720	719	718	717	716	715	714	713	712	711	710	709	708	707	706	705	704	703	702	701	700	699	698	697	696	695	694	693	692	691	690	689	688	687	686	685	684	683	682	681	680	679	678	677	676	675	674	673	672	671	670	669	668	667	666	665	664	663	662	661	660
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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. 3341 Rank Rpm Surname FAISERY  
(Given name in full)  
OLIVER ERNEST  
 Unit or Corps 1 C E R B Birthplace BRISTOL ENG

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

1. GENERAL DESCRIPTION:

Physique good Weight 170 (est) lbs. Height 5 ft. 8 in. Colour of Eyes Blue  
 Nutrition good  
 Pulse 75  
 Condition of arteries good  
 Vision Rt. 20/20 Left 20/20  
 Hearing (conversational voice) Rt. 21 ft.  
 Left 21 ft.

Identification marks, scars, or deformities.  
 (Give cause and date of origin).  
Your vaccination scars on left arm.

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.

admitted to #13 State Hosp. Boulogne  
fractured ankle 6-2-17  
Norfolk, war Hosp Hastings 17-2-17.  
Rejoined unit. 3-4-17.  
Present condition - no disability.

# EXAMINATIONS

## THIS SECTION FOR USE OVERSEAS—

Examined at Seaford.....(Overseas)  
Date 24-4-19..... Signed L. D. McLaughlin M.O.  
*Capt.*

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 L. D. McLaughlin.....

(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.)

MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

137

To Whom *Mrs. H. Felbey*  
 Address *Sponge St.*  
*Petersburg*  
*London Ist.*  
 Rate *\$25.00* *London*

By Whom Assigned *Felbey O E.*  
 Regtl. No. *3341*  
 Rank *Spr*  
 Corps *Brit Hosp.*

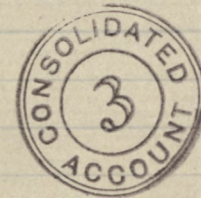
SPECIAL REMITTANCE

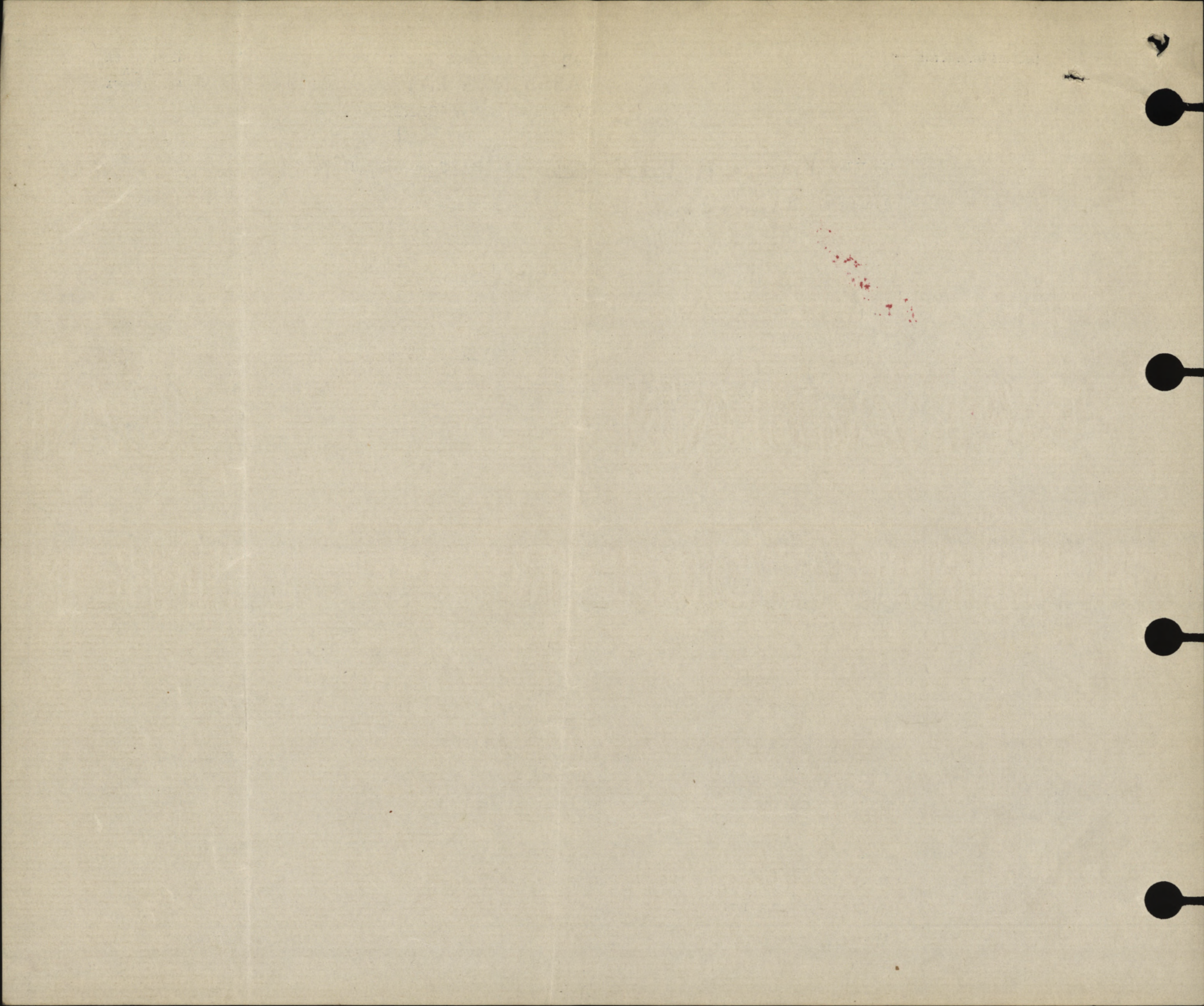
*Sched 386 26 6/17* *Cent.*

PAYMENTS

ALSO ACCOUNT IN CURRENT LEDGER.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July		<i>A 12267</i>	<i>25 -</i>	
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





26 FEB 1917

MEDICAL HISTORY SHEET.

3341

Surname Febrey **FEBREY** Christian Name Olive Ernest

Examined { on 1 day of Nov 1915  
at London Ont  
Birthplace { City or Town London Ont  
County Bristol England

Approved by [Signature]  
Rank Capt M.O.

Apparent age 36  
Trade or occupation Carpenter  
Height 5 Feet 8 Inches.  
Weight 174 Lbs.  
Chest measurement { Minimum 37 inches.  
Maximum expansion 40 inches.  
Physical development Good  
Small-Pox Marks None

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		<u>23 FEB 1917</u> M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left  
Number 4 4  
When Vaccinated last 1881

Date	Result	VACCINATIONS.
<u>16-6-16</u>	<u>good</u>	<u>W. a. 1 withm [unclear]</u> M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection  
Defective Teeth

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>21/3/16</u>	<u>Shuck</u>	M.O.
<u>4/4/16</u>	<u>Shuck</u>	M.O.
<u>20/7/16</u>	<u>2nd [unclear]</u>	M.O.

Enlisted on 1 day of Nov 16/7/1917 JAG H 2-W. 1915 at London M.O.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>Canadian Engineers.</u>	<u>3341</u>	TETANUS ANTITOXIN DATES INJECTED	<u>1-11-1915</u>
Transferred to..	<u>1 FLD Coy CE</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.

Attention of Dental Corps

Old Medical History Sheets of all 1917-1918  
Forwarded by the Office commanding their  
Army then leave England.

CANADIAN

Surname

Febrey

Christian Name

Canadian Convalescent Hospital,  
Hillingdon House, Uxbridge

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				
NORFOLK WAR HOSPITAL, THORPE, NORWICH.		17	2	17	9	5	17	Spains left ankle	82		
Hillingdon House, Uxbridge Cdn. Mil. Hosp. Uxbridge		9	5	17	3	7	17	do	55	To Command Depot for P. T.	

*E. Spruce*  
MAJOR, R.A.M.C.

FOR LT. COL. R.A.M.C.  
OFFICER IN CHARGE

*H. J. ...*  
Registrar  
for C.S. Canadian Conv. Hospital,  
Hillingdon House, Uxbridge.



## SEPARATION ALLOWANCE

Sheet No. 2.

Harriet Febrey

OVERSEAS CONTINGENTS

Wife  
PAYMENTS.

Name of Soldier

Oliver E. Febrey

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

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	R627	60 - 60	
May		q 1739	20	20
June		R 2568	20 - 20	
July	13	y9956	20	20
Aug.		R12192	20	20
Sept.		H15629	20	20
Oct.		S19303	20	20
Nov.		g 21016	20	20
Dec.		g 24993	20	20
Jan.	1917	L 26062	20	20
Feb.		L 29486	20	20
March		L 33093	20	20
April		M 845	20	20
May		M 4322	20	20
June		P 7525	20	20
July		P 11035	20	20
Aug.		U 12826	20	20
Sept.		T 17160	20	20
Oct.		Z 19317	20	20
Nov.		Y 22211	20	20
Dec.		D 26083	20	20
Jan.	1918			5-18
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

Name of Soldier \_\_\_\_\_

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

MEDICAL CASE SHEET.\*

Atut 6

078

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	3341	Sgt.	Febrey	O.S.
Year	Unit.	Age.	Service.	
	C.S. 11 <sup>th</sup> F.C.	37	21/6	
Station and Date.	Disease			
	Sprained R. Ankle			
9. 5. 17				
10. 5. 17	Some swelling below L. ankle.			
	Pain on movement -			
	Heat - Mass. L. ankle.			
	P.T. tibial.	Shawbirds		
15. 5. 17	Same -	fair. Ok		
29. 5. 17	"	" Ok		
5. 6. 17	" Med. Rheum.	" Ok		
12. 6. 17	<del>Same</del> Duty.	Ok Ok		
	Trans to Capt Norton Shawbirds			
20/6/17	R.R. 2. M. Office Sun ft.	Summerton		
	<del>8/11</del>			

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station  
and Date.

3. 11. 15


## MILITIA AND DEFENCE

M. F. W. 11.  
20m.-11-15.  
H. Q. 1772-39-818.

## SEPARATION ALLOWANCE

Name *Harriet Febrey* Name of Soldier *Febrey, Oliver E.*  
 Address ~~*Spence Street,*~~ Regtl. No. *8841.*  
*London Junction* Rank *Sapper.*  
*London, Ont.* Corps *Canadian Engineers.*  
 Relation to Soldier }  
 wife, child or mother } *Wife.* To what Corps belonging }  
 when called out } ✓✓

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>This soldier reported discharged 15/1/16 P.M. L. 28/2/16 and reported not discharged P.M. L. 20/3/16.</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			 <i>Classified 16/1/20</i> <i>5808 - D - 74</i> <i>SHH.</i> <i>(N. 21690 cancelled)</i>
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.		1916	<i>Q. 19704</i>	
Feb.		<i>N. 21690</i>	<i>20.</i>	
March				

17-1-5

17-1-5

17-1-5

17-1-5

17-1-5

17-1-5

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

Canadian Printing and Stationery Services, London

**DIRECTIONS TO  
DENTAL OFFICERS**

NAME OF SOLDIER (Block Letters) FEBREY O.E.  
 REGIMENT 1<sup>ST</sup> CERB RANK SPR No. 3341  
 Date of Examination in England 25-4-14 Date of Examination in France \_\_\_\_\_

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



*282A*

**PRESENT DENTAL REQUIREMENTS**

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
  - (a) Full Upper
  - (b) Part Upper
  - (c) Full Lower
  - (d) Part Lower

*PER UPPER PLATE*

**CONTENTS COPIED**  
C. A. D. C., M. D. No. 1.

HAS HE EVER REFUSED DENTAL TREATMENT? no

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

- (a) In Canada YES.
- (b) In England
- (c) In France

Signature of Dental Officer \_\_\_\_\_

*[Signature]*  
 \_\_\_\_\_ Capt.  
 C. A. D. C.

100  
C. 10

1/2

[Faint, illegible text, likely bleed-through from the reverse side of the page. The text is mirrored and difficult to decipher.]

[Faint, illegible text at the bottom of the page, possibly a footer or a stamp.]



WGB - Rank *Sapper* Name FEBREY, Oliver Ernest

Reg'l No. 3341

Unit **15TH FIELD COY. C.E.** If in perm. Corps, }  
What Unit? }

Married or Single *Married*

Place and Date of Enlistment *London, Ont 3<sup>rd</sup> Nov. 1915*

Place of Birth *Bristol, England*

Name and Address, Next-of-Kin *Harriett Febrey*

*Spruce St. London Junction, Pellersbury, London, Ont* Relationship *Wife*

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place

Reason

Character

N/E, B.B. No. *3471*  
*133-59*  
File R.L.  
Category *C.P. Gen.*

*Amse*

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.				
		<i>Arrived in England</i>	<i>29 MAY 1916</i>		<i>S.S. Baltic</i>
<i>10-6-16</i> <i>12 AUG. 1916</i>	<i>4<sup>th</sup> Div. Engrs</i>	<i>1.06. 4<sup>th</sup> Div. Engrs posted to 11.7. Coy</i>	<i>Pranshott</i>	<i>1-6-16</i>	<i>Pl II. D.O #30</i>
	"	<i>Embarked in France.</i>	"	<i>10 AUG. 1916</i>	" <i>93</i>
<i>14 2/17</i>	"	<i>Adm no 13 Staly Hoapl</i>	<i>Boulogne</i>	<i>6<sup>2</sup> 17</i>	<i>CL A104</i> <i>Frco ill Febula</i> <i>same (accident)</i>
<i>28.2.17</i>	<i>11<sup>th</sup> Coy.</i>	<i>Trans. to Acc. Shoreham.</i>	<i>Field.</i>	<i>16.2.17</i>	<i>Pl II. D.O. #11.</i>
<i>24. 2.17</i>	<i>11<sup>th</sup> Coy.</i>	<i>Adm. Norfolk War Hoapl.</i>	<i>Shore</i> <i>Norwich</i>	<i>17.2.17</i>	<i>CL. B 120. do do S.</i>
<i>2.3.17</i> <i>10-3-17</i>	<i>b.c. a.c.</i>	<i>Taken on strength</i>	<i>Hastings</i>	<i>17.2.17</i>	<i>Pl II D 104</i>
<i>CCAC SIO S ON TFR TO ENGS HASTINGS 10 3 17 PT 2. O. 116</i>					
<i>12. 5 17</i>	<i>4<sup>th</sup> Engrs</i>	<i>Adm "Can Conval Hoapl Millingdown Hoapl</i>	<i>Cambridge</i>	<i>10.5.17</i>	<i>b.S. B179 Frac &amp; Febula</i>
<i>5.7-17</i>	<i>b.E.R.D.</i>	<i>S.O.S. on posting to b.E.D</i>	<i>broxboro</i>	<i>3-7-17</i>	<i>Pl II 118 Pl II 158. C.E. T.D 1/57</i> <i>S.O.S.</i>

A.F.B. 103 CHECKED

16 AUG. 1916

127

*Engrs*

# 3341 FEBREY O.E

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.				
10.10.17.	11 Feb	Disch C.C. Hosp. Millington	Uxbridge	3.7.17	CLB33, Inact Lt. Febula Sev
21.5.18	11nd	CERB TOS from CETD Seaford	21-5-18	DO.1	CETD.DO.117
29-1-19	3	Sos to 1 CBAB		29-1-19	24 + 16 CBAB 26d/31/19
	1	of DORE Beskill.		20-1-18	24
8-8-19	1 CBAB	Sgt Bludie withypl.		5-5-19	DO 123 *
25-3-19	5 wing	TOS of Cadre	Rhyl	1-2-19	D.O. 17 *
24-6-19	1	TOS from C.E.C. + Sos to Gen Sailing 79. Sp.		24-6-19	- 140
		S L 49-14-25		24-6-19	
		off Comm DORE	20-3-10		
					74 - 29/3/19 1CB:RB C.E.T.C.

PRINCESS PATRICIA CANADIAN RED CROSS HOSPITAL, GOODEN CAMP, BEXHILL, Sx.

SPECIAL EAR REPORT

No. 7341 Rank. Spr Name Fisher Unit C.E.T.D.

Hearing.

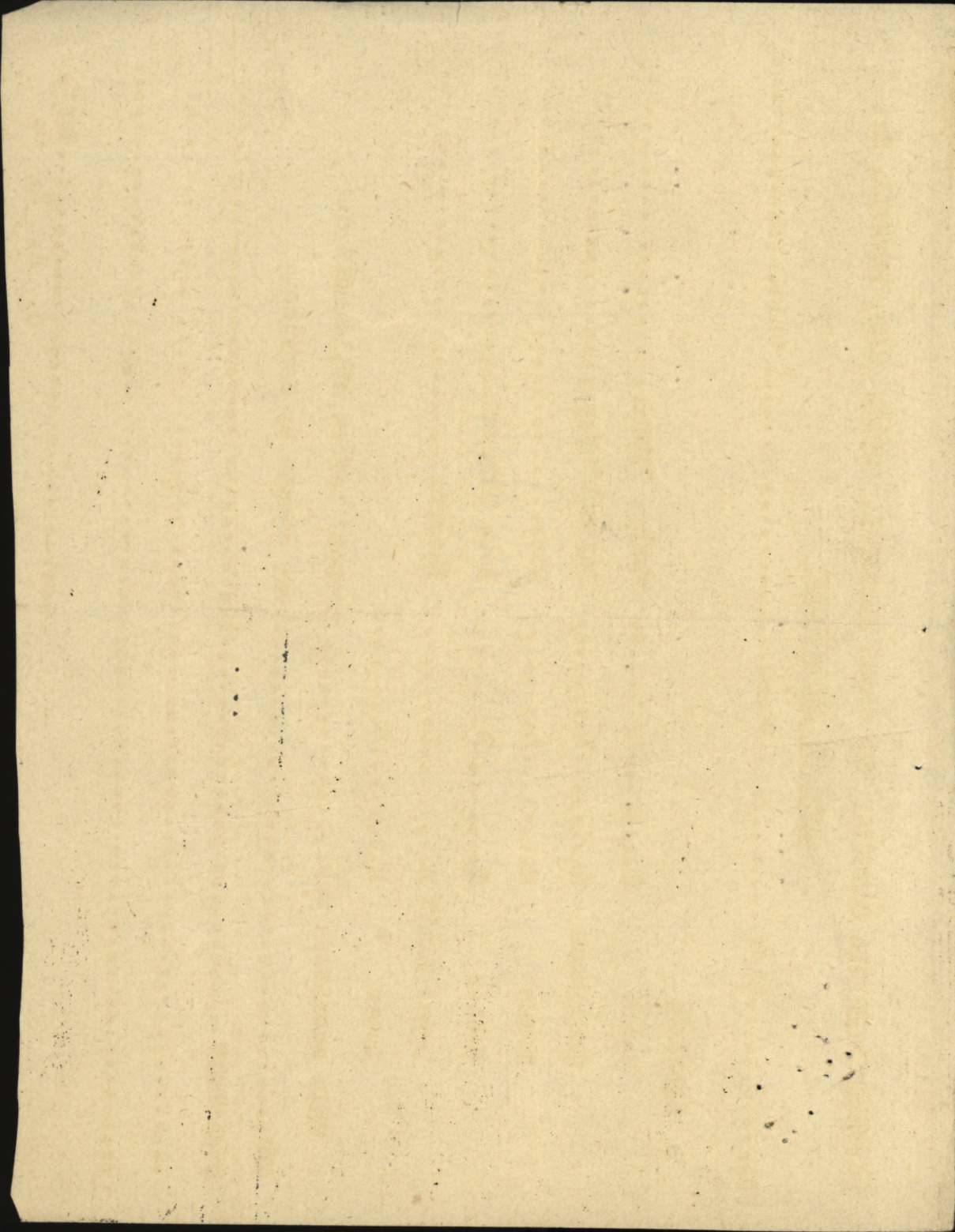
Voice	R. <u>21 ft</u>	L. <u>21 ft</u>	Membr, Tympanum	<u>R. Perforated</u>
Schwaback	R. ....	L. ....	Eustachian	<u>Purulent discharge</u>
Rinne	R. ....	L. ....	Nose	.....
Webber	R. ....	L. ....	Nose Pharynx	.....
Upper Limit	R. ....	L. ....	Pharynx	.....
Lower "	R. ....	L. ....		

This condition was not present before enlistment and

has ..... been caused by service.

Treatment antiseptic drops  
O.M.P.C. one year duration  
Catalyzy B.

..... Capt.  
C. A. M. C.



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

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

50M.—9-16

H. Q. 1772-39-9-0.

# Casualty Form—Active Service.

Unit, Regiment or Corps. *C. E.*

Regimental No. *3341* Rank *Spr* Name *February Oliver E.*

Enlisted (a)..... Terms of Service (a) *W. of W.* 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		Rec rd 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				

TOS No 1 Dist. Depot  
Displ. Stn. K. -24, 6-19  
SOS Dispersed  
6.7.19 D.O. No. 188  
J.B. Farrell Lt.  
For O. C. Dispersal Area Sta. K.

(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, Shoing 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				

CERTIFIED CORRECT.

18 AUG. 1916

CAN. RECORDS, LONDON.

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

Casualty Form—Active Service.

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

250M.—1-16.  
H. Q. 1772-39-920.

Eng 1257

Unit, Regiment or Corps ENGINEER TRAINING DEPOT

Regimental No. 3341 Rank Spr Name Felvey, Oliver Ernest

Enlisted (a) 3-11-16 Terms of Service (a) dur. war hono Service reckons from (a) 3-11-16

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) Carpenter

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 21.5.16	Halifax		
		Arriving England 30.5.16	Liverpool		Baltic

1-6-16 4<sup>th</sup> Div. Engrs Transferred to 4<sup>th</sup> Div Engrs Bramshott 1-6-16

AUG 11 1916 do Proceeded for service Overseas

12-8-16 Landing Return Disembarked Hause 12-8-16

3/2/17 11 C.F. ands Sprained R. Ankle - adm 11 C.F. ands. 1/2/17

6/2/17 13 Staty Fraser L. Fabula, Sw. adm 13 Staty 6/2/17

112 MAR 2-17 13 Staty Sprained ankle r/lfo. to 13 Staty 6/2/17

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





# CANADIAN EXPEDITIONARY FORCE

## DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3341 (Rank) Sapper  
Name (in full) Oliver Ernest Febery enlisted in  
the Canadian Engineers  
CANADIAN EXPEDITIONARY FORCE at London, Ont. on the 3<sup>rd</sup>  
day of November 19 15  
HE served in France with 11<sup>th</sup> Coy. Can. Engrs.  
and is now discharged from the service by reason of Demobilization.  
~~Medical Unfitness.~~

---

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

Age <u>40 yrs 3 mths.</u>	Marks or Scars _____
Height <u>5 ft 8 ins.</u>	_____
Complexion <u>Dark</u>	_____
Eyes <u>Blue</u>	_____
Hair <u>dk. Brown</u>	_____
<u>O E Febery</u> Signature of Soldier	<u>J. Farrell</u> Issuing Officer
Date of Discharge	<u>Luci</u> Rank For O. C. Dispersal Area Sta. K.
<b>DISCHARGE SECTION JUL 6 1919 No. 1 District Depot</b>	Date <u>JUL 6 - 1919</u> 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.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that *3341* *1*  
 the name of *James William Campbell*  
 the *Canadian Expeditionary Force*  
 on the *1st*  
 he served in *the 1st Canadian Trench Company*  
 and is now discharged from the service by reason of  
 Medical Unfitness  
 Demobilization

THE DESCRIPTION OF THIS SOLDIER ON THE DATE below is as follows:

Height	<i>5 ft 10 in</i>
Complexion	<i>Dark</i>
Hair	<i>Dark Brown</i>
Build	<i>Slender</i>
Complexion	<i>Dark</i>
Height	<i>5 ft 10 in</i>
Build	<i>Slender</i>
Complexion	<i>Dark</i>
Hair	<i>Dark Brown</i>

Signature of Soldier: \_\_\_\_\_  
 Issuing Officer: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Rank: \_\_\_\_\_

A. No duplicate of this Certificate will be issued any person finding same is requested to forward it to the

DEPARTMENT OF VETERANS AFFAIRS

To Copy for HO file

Ottawa 4, Ont.  
Date July 14, 1969.

Attention of

NAME FEBREY Oliver E.

SERVICE NUMBER 3341 WW1

C.P.C. No.  
W.V.A. No. 33713

NAVY  
ARMY x  
R.C.A.F.

The DEPARTMENT has received information from

STMO DVA London Ont. Tele. Memo. Date July 10, 1969.

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death July 9, 1969.

Cause of Death

Place of Death Westminster Hospital

Name and Address of next of kin (if known)

Copies to: W.S.R.  
V. I.  
~~NAV~~  
~~DO~~  
H.O.

Destroy form if advice of death already received.

*E. O. Richards*  
for  
Chief, Central Registry

COX FOR HIS LIFE

THE NEW YORK TIMES

JAN 1911

NO. 10

THE NEW YORK TIMES

THE NEW YORK TIMES

THE NEW YORK TIMES

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THE NEW YORK TIMES



MOTIONS &c.  
EFFECTIVE DATE  
AUTHORITY

Reg'l. No. 3341 RANK  
 IF IN PERM. CORPS  
 WHAT UNIT  
 PERMANENT FORCE ALLOWANCES  
 PLACE OF ATTESTATION London, Ont,  
 DATE OF ATTESTATION 3rd November, 1915

Spr. NAME Febrey, Oliver Ernest  
 UNIT 11th Regt. 1st Div Engs. TRANSFERRED TO C.C.A.C. DATE 11/3/14 AUTHORITY C-2. B. 130 24/2/14  
 TRANSFERRED TO British Hosp DATE 31/5/17 AUTHORITY Albion  
 TRANSFERRED TO Metbridge P DATE 21/6/17 AUTHORITY ARou  
 TRANSFERRED TO C.E.R.D. DATE 1/11/17 AUTHORITY

ASSIGNED PAY MONTHLY \$ 20<sup>00</sup> DATE EFFECTIVE 1.6.16  
 PAYABLE TO Mrs. Harriet Febrey, Spence St., Pottissburg, Ont RELATIONSHIP Wife  
London St. London Ont. (Obt F396, 23-3-17)

HOSPITAL &c.  
NAME OF HOSPITAL

ASSIGNED PAY MONTHLY \$  
 PAYABLE TO  
 RELATIONSHIP  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON  
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ACQUITTANCE ROLLS

ACQUITTANCE ROLLS						CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS	
2		3		4		1	2	3	4	C			CREDIT	DEBIT				
No.	DATE	No.	DATE	No.	DATE													
													24 10					<i>Canadian L.P.C.</i>
		<i>86</i>	<i>306.16</i>			<i>9 73</i>		<i>7 30</i>		<i>20 00</i>		<i>37 03</i>	<i>20 07</i>					
<i>141</i>	<i>15.7.16</i>						<i>4 87</i>			<i>20 00</i>		<i>24 87</i>	<i>29 30</i>					
						<i>9 74</i>				<i>20 00</i>		<i>29 74</i>	<i>33 66</i>					
<i>197</i>	<i>26.8.16</i>					<i>2 62</i>	<i>2 62</i>			<i>20 -</i>		<i>25 24</i>	<i>41 42</i>					
						<i>2 61</i>				<i>20 -</i>		<i>25 22</i>	<i>50 30</i>					
						<i>2 62</i>				<i>20 -</i>		<i>25 23</i>	<i>58 07</i>					
						<i>2 41</i>				<i>20 -</i>		<i>25 23</i>	<i>58 07</i>					
<i>438</i>	<i>1.12.16</i>					<i>2 62</i>	<i>11 33</i>			<i>20 -</i>		<i>33 95</i>	<i>58 22</i>					
<i>508</i>	<i>1.1.17</i>					<i>2 62</i>	<i>2 62</i>			<i>20 -</i>		<i>25 24</i>	<i>67 08</i>					
						<i>2 62</i>				<i>20 -</i>		<i>22 62</i>	<i>75 26</i>					
						<i>2 61</i>				<i>20 -</i>		<i>24 48</i>	<i>58 48</i>					<i>Spd to C.C.A.C. eff 11/3/14 C.O.B. 130 24/2/14 5th I, 11.18/14</i>
						<i>43 01</i>	<i>21 24</i>	<i>7 30</i>	<i>4 84 20</i>			<i>29 62</i>	<i>81 88</i>					
													<i>114 88</i>					
										<i>20</i>		<i>20</i>	<i>127 88</i>					<i>Pd British Hospes 31/5/17</i>
						<i>43 01</i>	<i>21 44</i>	<i>7 30</i>	<i>4 87</i>	<i>220-</i>		<i>29 62</i>						

*C*  
*11th Regt. 1st Div Engs.*  
*C*  
*Canadian L.P.C.*  
*Spd to C.C.A.C. eff 11/3/14  
C.O.B. 130 24/2/14 5th I, 11.18/14*  
*Pd British Hospes 31/5/17*



to Mrs. G. Gebrey (Wife) Spence St, Pottsville, Ont, Canada. Dec 1-6-16.

CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
2	3	4	CREDIT				DEBIT				
21	44	7 30	4 97	220 -		296 62	127 88				
					20		128 98				
		25	20	20		65	85 98				20 <sup>th</sup> AP not chgd April 24/6/17 To Usbridge Patients
1703						19 47	77 51				
				20 -		20 -	91 61				
				20 -		20 -	105 71				
				20	30 80	116 49	22 22				and 28 days H.P. & T.R. 194 2/8
38 47	7 30	29 84		300 -	50 80	537 58					

DEBIT	CREDIT	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. PAY	SER. ENG.
		Bal: fwd					15 32		
		Cap					20		
		92.1269H 14/2/18	7 50						
		154 ✓ 26/2/18	4 87						
		27 ✓ 4/2/18	7 50						
		86 ✓ 22/3/18	9 75						
			29 20						
							20		
							22		

34 10



*This man has been attached to Imperial Serv*

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-	1/6/16	EFFECTIVE DATE:-	
AMOUNT:-	20 <sup>00</sup>	AMOUNT:-	
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.	
Mrs Harriet Felroy (Wife)			
London to London Ont			

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
13/3/19	3436	Cooper	7.30				
2/4/19	82	IC&R	24.33				
			<u>31.63</u>				

PARTICULARS OF RENDERING NON-EFFECTIVE

MONTH	PARTICULARS	Cr. 1	Cr. 2	PARTICULARS
1918				
Mar 31	Bal. fwd			
Apr	P Pay	33		a.p.
				147 Bux 24
				294 ✓ 26/4
	Gray Spw Pay	33		Cap
		34 10		553 P.P.R+SH
				846 "
		34 10		
June		33		" 1176. 14 6/18
				a.p.
				1559. 28 6/18
		33		
July	" "	34 10		C.A.P.
				a.R. 1918 12-7-18 B.C.R.
		34 10		" 2284 27-7-18 "
Aug		34 10		Cap
				ad 2003 B.R. Hesp
				3716 "
		34 10		
Sept		33		Cap
				861 Reckill
				166 "
		33		
Oct		34 10		Cap
				299
				Forward

*Trans. to Cr. 1/5/19. Rep. 19/11*

*A.H. Edmunds*

*This man has been attached to Imperial Services & ledger sheets is not to be sent to Canada until specially advised 1937*

ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:- FEBREY <i>Glenn Ernest</i>
EFFECTIVE DATE:-	AMOUNT:-	NUMBER:- 3341	

RELATIONSHIP & AUTHORITY		AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
Wife <i>Febrey (Wife)</i>				<i>Supper</i>

UNIT AND TRANSFERS

ORIGINAL UNIT:- *4th Div Eng*

DATE ACCOUNT FIRST OPENED:- *1/6/16*

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

UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK.

PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A/R	UNIT PAID BY	AMOUNT
<i>Wife</i>	<i>7.30</i>				
<i>S.R.B.</i>	<i>24.33</i>				
	<i>31.63</i>				

DAILY RATES OF PAY AND ALLOWANCES

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

ENDING NON-EFFECTIVE: *Trans to Gen. 1/5/19. Rep. 2/1/19. N. 1580. Seaport/Seaport. 26/4/19.*

PARTICULARS	Cr. 1	Cr. 2	PARTICULARS	Dr. 1	Dr. 2	Dr. 3	Dr. 4	BALANCE	DEFERRED	SEPARATION
								<i>22</i>		
	<i>33</i>		<i>a.p.</i>				<i>20</i>			
			<i>147 Bex 17/4</i>	<i>9.10</i>						
			<i>294 26/4</i>	<i>4.87</i>				<i>1.05</i>		
	<i>33</i>		<i>Cap</i>	<i>12.17</i>			<i>20</i>			
	<i>24 10</i>									
			<i>553 P.P.R+SH 14/5/18</i>	<i>7.30</i>						
			<i>846 " 28/5/18</i>	<i>4.87</i>				<i>2.98</i>		
	<i>34 10</i>			<i>12.17</i>			<i>20</i>			
			<i>1176. 14/18 Bexhill</i>	<i>4.87</i>						
	<i>33</i>		<i>a.p.</i>				<i>20</i>			
			<i>1559. 28/18</i>	<i>4.87</i>				<i>6.24</i>		
	<i>33</i>			<i>9.74</i>			<i>20</i>			
	<i>34 10</i>		<i>C.A.P.</i>				<i>20</i>			
			<i>a.R. 1918 12.7.18 B.C.R.+H. Bexhill</i>	<i>9.73</i>						
			<i>" 2284 27.7.18 " "</i>	<i>4.87</i>				<i>5.74</i>		
	<i>34 10</i>			<i>14.60</i>			<i>20</i>			
			<i>Cap</i>				<i>20</i>			
	<i>34 10</i>		<i>ad 2003 6 R Hosp Bexhill 14/8</i>	<i>9.73</i>						
			<i>3716 " 28/8</i>	<i>2.43</i>				<i>7.68</i>		
	<i>34 10</i>			<i>12.16</i>			<i>20</i>			
			<i>Cap</i>				<i>20</i>			
	<i>33</i>		<i>861 Bexhill 13/9</i>	<i>4.87</i>						
			<i>166 " 27/9</i>	<i>2.43</i>				<i>13.38</i>		
	<i>33</i>			<i>7.30</i>			<i>20</i>			
	<i>34 10</i>		<i>Cap</i>				<i>20</i>	<i>27.48</i>		
			<i>299 " 15/9/18</i>	<i>4.87</i>				<i>22.61</i>		

*Forward*

NUMBER

3341

RANK

Spr

NAME

FEBREY

Oliver, R.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED
Oct	Bal fwd.	3410		Bal fwd.	487			20	22 61	
				5396 Berlin 29/10/18	487				17 74	
		3410			974			20		
Nov	Pra	33		CAP				20	30 74	
				487	12/18	2 43			28 31	
				539	25/18	4 87			23 44	
Dec		3410		CAP				20	37 54	
Jan		3410		do				20	57 64	
		101 20			7 30			60		
				760	18/18	24 33			27 31	
				5126	24-1-19	487			22 44	
				p. 1461	12/2/19	4 87			17 53	
				p. 974	01/1/19	4 87			12 66	
Feb & March		6490		do				40	37 56	
				AR 3463 Kimmel PCamp 25/2/19	7 30				20 26	
				5049 25/2/19 ICBS	9 73				20 53	
		6490			5597			40		
apt.	Pra.	33		CAP				20	33 57	
				82	3/4/19	1			24 33	
				8.4368	15/4/19	PPCP			7 30	
				1570	2/5/19	ICBS			14 60	
		33			4623			20	17 66	
				5919 Kiri Pk. End.	22/5/19	9 73			22 39	
				14997	✓ End.	17/6/19	9 73		32 12	
				13716	✓ End	3/6/19	19 47		51 59	
					38 93					

S.D. 21/7/19  
 Sub 79 Ch

Dr NAME FEBREY, Olweo, 10.

CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
3410		Bal for?	487			20	23 61		
		5376 Berdit. 29/10/18	487				17 74		
3410			974			20			
33		CAF				20	30 74		
		487 12/7/18	2 43				28 31		
		539 25/1/18	4 87				23 44		
3410		CAF				20	37 54		
3410		do				20	51 64		
10120			7 30			60			
		760 18/7/18	24 33				27 31		
		51216 24-1-19	487				22 44		
		A. 1461 12/2/19	4 87				17 53		
		A. 979 30/1/19	4 87				12 66		
6490		CAF				40	37 56		
		A.R. 3463 Kimmel PCamp 25/2/19	7 20				30 26		
		5049 25/2/19 - ICBS	9 73				20 53		
6490			5597			40			
33		CAF				20	33 57		
		82 3/4/19 1	24 33				31 63		
		B. 4368 15/4/19 P.C.P.	7 30				1 95		
33		1570 2/5/19 - ICBS	14 60			20	17 66		
		5919 Kin. Pk. End. 22/5/19	9 73				22 39		
		14997 ✓ End. 17/6/19	9 73				32 12		
		12716 ✓ End. 3/6/19	19 47				51 59		
			38 95						

S.D. 21/6/19  
 Let 79 Ch

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

1D-30-2-10511

18

M. OR S. *M* NAME (IN FULL) *FEBREY Oliver Ernest*  
 NEXT OF KIN *Harriet Febreys W.* IF IN P.F. WHAT UNIT? *6 P.O. London Junction Ont*  
 ADDRESS *London Ont* PLACE OF ATTESTATION *London Ont* TRANSFERRED TO *7.08.88* DATE *24.6.19* AUTHORITY *D.O. 189*  
 IS SEPARATION ALLOWANCE PAID? *30 Paid and Closed by Ottawa 31/19* DATE EFFECTIVE *3-11-15* ASSIGNED PAY *20* DATE EFFECTIVE *31/19*  
 TO WHOM PAID *Harriet Febreys W.* RELATIONSHIP *W.* PAYABLE TO *Harriet Febreys W.* RELATIONSHIP *W.* ANY CHANGE IN ASSIGNEE OR ADDRESS  
 ADDRESS *London Ont* DISCHARGED *London* PLACE *London* DATE *6-7-19* REASON *Dem.* AUTHORITY *D.O. 189* IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT	
30-4-19				194													Bal Per 88 Corradia 5-7-19
15-9-19	70	110	77.00	182.00			144.03	487.15	80.54	40		53.53	183.94				BAL ENG L.P.C. 70-4-19
<b>WAR SERVICE GRATUITY</b>																	
183 days			420	600													1st Pay 88.9 as above
										6		24.00	330	156			14 July ovupd by Ota
												20	326	150			U.P. July pay 8.24 etc
												30	280	120			114.32 B 578/19
													210	90			Chge to adjust to date
													140	60			114.327-9 678/19
													70	30			SEP 3 1919 1164013-17
													70	30			OCT 2 1919 1173693-4
													70	30			NOV 9 1919 1181871-2
													70	30			DEC 4 1919 1187426-7
			420	600									600	180			GRATUITY

BALANCE FROM PREVIOUS ACCOUNT



12

13

14

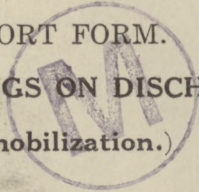
15

16

M.D. 1.

SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)

War Service Badge 263662  
Class "A" No.



1. No. 3341

2. Rank. Spr

3. Name. FEBREY Oliver E.

4. Unit. 66 Reserve 1st Lt Col B

5. Date of Discharge JUL 6 - 1919 Place LONDON, ONT.

6. Reason for Discharge..... Category A 3  
 DEMOBILIZATION..... Occup. Group 2  
 Religion. Catholic  
 Next of Kin. Wife

7. Authority. R. O. 1894 Destination. London

8. Proposed Residence after Discharge..... Casualty? No  
 London 1st Lt  
 by C/O..... Decorations. None  
 Service in France. 18 MOS.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.  
 I hereby acknowledge that at the undernoted place and date I received my discharge Certificate  
 M. F. W.? O. E. Febreay  
 Signature of Soldier.

10. CONFIRMATION.  
 The discharge of the above named man is hereby confirmed.  
 Place. LONDON, ONT. MEMB CASSANDRA  
 Date. JUL 6 - 1919 GLASGOW JUNE 24 19  
 Signature. J. B. Farrell Lt.  
 (O. C. Discharging Unit.)





LIST OF SCHWABER DOCUMENTS

1. ...  
 2. ...  
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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

Group A  
 Checked by No. 20  
 Date 24-6-19

Date of Enlistment

MILITIA AND DEFENCE

800

Date of Assignment

3-11-15

# Separation and Assigned Pay Branch

# F

May 1, 1916

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	25	30	
----	----	----	--

RATE OF ASSIGNMENT

20			
----	--	--	--

1-12-17  
P.C. 2257

1-9-18  
P.C. 2753

PARTICULARS OF SEPARATION ALLOWANCE

No. 3341 — (8841)

Rank *Spr.* Promoted Reverted Discharge

Soldier's Name *O. E. Febrey*

Battalion *Can. Engrs. 15 Fld. Co.*

Beneficiary *Mrs Harriet Febrey*

Relationship *Wife*

Address

PARTICULARS OF ASSIGNMENT

Name *Harriet Febrey (Wife)*

Address *London Junction, London, Ont.*

Change of Address

1

2

3

4

M.F.W. 2554-29-7-18

5808-0-3 REMARKS

Date	Cheque No.	Amount S/A	Amount A/P	Total
<i>Dec 31/17</i>		<i>518</i>	<i>400</i>	<i>918</i>
<i>1918</i>				
<i>Jan</i>	<i>967308</i>	<i>30</i>	<i>20</i>	<i>50</i>
<i>Feb</i>	<i>392705</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>March</i>	<i>A135583</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Apr</i>	<i>99950</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>May</i>	<i>Q16419</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Jun</i>	<i>K27146</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>July</i>	<i>O33147</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Aug</i>	<i>M34494</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Sept</i>	<i>R46000</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Oct</i>	<i>Q56262</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Nov</i>	<i>L58870</i>	<i>25</i>	<i>20</i>	<i>45</i>
<i>Dec</i>	<i>N64439</i>	<i>45</i>	<i>20</i>	<i>65</i>
<i>Jan</i>	<i>Q72191</i>	<i>30</i>	<i>20</i>	<i>50</i>
<i>Feb</i>	<i>U79370</i>	<i>30</i>	<i>20</i>	<i>50</i>
<i>Mar</i>	<i>Z82385</i>	<i>30</i>	<i>20</i>	<i>50</i>
<i>Apr</i>	<i>O2758</i>	<i>30</i>	<i>20</i>	<i>50</i>
<i>May</i>	<i>H8068</i>	<i>30</i>	<i>20</i>	<i>50</i>
<i>June</i>	<i>K11500</i>	<i>30</i>	<i>20</i>	<i>50</i>
<i>JUL</i>	<i>L13066</i>	<i>30</i>	<i>20</i>	<i>50</i>
		<i>1053</i>	<i>780</i>	<i>1833</i>

See also acct. in Spec. Rem, Ledger.

This Soldier reported discharged 15-1-16  
 O. M. L. 28-2-16 and reported not discharged  
 P. M. L. 20-3-16

AUDITED *at 17/19*

A/c Closed *31-7-19*  
 Ret'd per. *W. H. Land*  
 Date *5-7-19* M.F.W. 187 *17-1-19*  
 Clerk *M. D. #1 P.C.S.*

M.R.O. 100641



M. F. W. 128  
 Form 617-177439-141  
 L. L. 2220-M & D. 193.

106274  
 701



# Report on Wounds or other Injuries, received otherwise than in Action.

112  
Gen. No.  
4269.

## Certificate of Medical Officer.

No. 3341. Sapper Febray O. E. 11<sup>th</sup> Coy C. E.

was admitted to hospital on the 17 Feb 1917 suffering from ? fracture fibula left.

†Here insert "trivial" or "serious."

The disability is of a † compactly serious nature, and in all probability

†Here insert "will" or "will not."

† will not interfere with his future efficiency as a soldier.

\*Here insert "claims" or "does not claim."

\*He claims that he was in the performance of military duty at the time of the accident.

(If the soldier makes no claim that he was on duty at the time, the certificate below should be signed by him.)

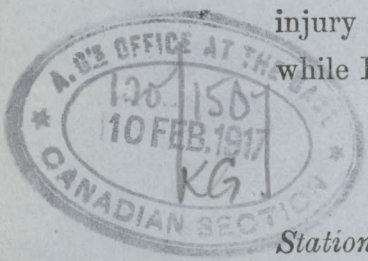
Station No. 23 C. C. S.

G. S. McMillan  
Medical Officer in Charge. *Capt Ranc*

Date 4.2.17

## Certificate to be signed by soldier.

I, \_\_\_\_\_ hereby declare that the injury sustained by me on the \_\_\_\_\_ did not occur while I was in the performance of military duty.



Station \_\_\_\_\_  
Date \_\_\_\_\_  
\_\_\_\_\_  
{ Soldier's Signature.  
{ Signature of Medical Officer.

## Certificate of Commanding Officer.

(This certificate will be completed only in cases of trivial injury where the soldier claims to have been injured while on duty.)

†Here insert "occurred" or "did not occur."

I certify that the injury to the above-named soldier † occurred while he was in the performance of military duty.

If on duty, state (a) The date of the injury. (b) The place where it occurred. (c) The nature of the duty. (d) Whether the soldier was in any way to blame.

† While proceeding from rear billets to Advance billets on duty Jan. 29/17 this Sapper slipped on bathmat fracturing his ankle, he was in no way to blame.

The soldier has been so informed.

Station In the Field

H. L. Lottier Major, C. E.  
O. C. 11th Field Company, C. E.  
Commanding

Date Feb. 7th 1917.

This Army Form will be attached to the Medical History Sheet, on which it will be recorded whether the soldier was on duty, and whether he was to blame.

April 1861

Report on the ...

...

Office of the ...

*[Faint handwritten notes, possibly bleed-through from the reverse side]*

*[Faint handwritten notes, possibly bleed-through from the reverse side]*

*[Faint handwritten notes, possibly bleed-through from the reverse side]*

H. Q. Reference

Ottawa

No. 3341

Rank S. pr

Unit 11<sup>th</sup> Field Comp

Surname

Febrey

Christian names

Oliver Ernest

Kindly forward Medals, to which I am entitled by reason of my service in France

(Theatre of War)

with

11<sup>th</sup> Field Company Canadian Trenches

(Unit with which served in Theatre of War)

No. -

Street -

Town General Delivery

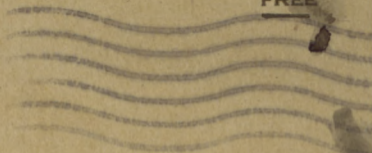
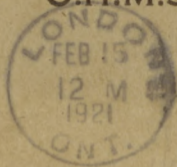
County London

O. E. Febrey  
(Signature)

(WRITE IN BLOCK LETTERS AND IN INK)

O.H.M.S.

POSTAGE  
FREE



SECRETARY, MILITIA COUNCIL,

DIRECTOR OF RECORDS,

OTTAWA, ONT.



## *IMPORTANT.*

### DISPOSAL OF ORIGINAL MEDICAL HISTORY SHEETS.

#### 1. Action by Officer i/c Hospital—

- (a) See that all entries are properly and fully made, and signed.
- (b) Forward to Hospital to which man is transferred, immediately it is done. If discharged to Unit—to Officer Commanding such Unit.

#### 2. Action by Officer Commanding Unit—

- (a) On admission of man to Hospital, forward M.H.S. to such Hospital at once.
- (b) On transfer to another Unit—to Officer Commanding such Unit.
- (c) On proceeding Overseas — return to Record Office, London, without delay.

(Authority, Army Council Instruction 831, April, 1916.)

WHEATON

DISTRICT OF COLUMBIA MEDICAL

HISTORY SHEET

NAME OF PATIENT: \_\_\_\_\_

DATE OF ADMISSION: \_\_\_\_\_

PHYSICIAN: \_\_\_\_\_

OPERATION: \_\_\_\_\_

DIAGNOSIS: \_\_\_\_\_

PROGNOSIS: \_\_\_\_\_

REMARKS: \_\_\_\_\_

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps 15th Field Coy C.E. Regimental Number 3341

\*Substantive Rank \_\_\_\_\_ Surname Febrey Christian Names Oliver Ernest

\*Acting Rank \_\_\_\_\_  
(\* To be entered in pencil to facilitate alteration.)

War Service Badge  
Class "A" No. ....

To be folded on this line.  
Nothing to be written in this margin.

At 1834 W.6425—P1600 500,000 10/18 G.W.P.Co.3973.

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					
			Arrived in England 29 May 88	Batter		
10-6-16	4th Div Engrs.	Do # 30	100 4th Div Engrs. 2 No. 11 Coy	B. Pratt	1-6-16	
12-8-16	"	" 93	Embarked for France	"	10-8-16	
14-2-17	"	"	adm. No. 3 Det Hosp.	Beuloyne	6-2-17	Ch. A 404
28-2-17	11th Coy	" # 11	Trans to C.C.A. Shorham	Field	16-2-17	
24-2-17	"	104	adm. Norfolk War Hosp.	Hastings	17-2-17	
10-3-17	C.C.A.	" 106	Trans to Engrs. Hastings	"	10-3-17	
12-5-17	4th Engrs.	"	adm Can Cons. Hosp	Alleydown Lane	10-5-17	Ch B. 179
5-7-17	C.E.R.D.	118	DoD on posting to C.E.T.D.	Cromber.	3-7-17	
10-10-17	11 F.C.	"	Disch. C.E. Hosp. Hellington	Wexbridge	3-7-17	Ch B. 33
21-5-18	11 E.C.R.B.	# 17	105 from C.E.T.D.	Deepend.	21-5-18	
31-1-19	"	249 26	DoD. to 1/2 C.E.R.B.	"	29-1-19	
			of C. DoA. G. Bexhill		20-1-19	224

L. G. Lundy  
FOR LT: COL: 1/10 RECORDS. C. M.F.

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received					
31-1-19	CERNB		Taken on strength	Seaford	31-1-19	Part II Order 26
5-5-19	CERNB		S.O. to M.D. Wing.			
			Kennel's		5-5-19	O.T. + HV 183
			Colborne Adj. Capt. C.F.			
5-5-19		O.C.M.D.C.W.I. T.O.S. For return to Canada, Rhyll		A.T. D.O. No. 106	6/5/19	
24-6-19		S.O.S. on Proceeding to C.E.F. Can. Rhyll	Part II	D.O. No. 1410	24/6/19	
			<i>J. G. Styles</i>	Lieut.		
			Officer in Charge W.D.O. for O.C.M.D.C.W.I.			

Nothing to be written in this margin.

EMB CASSANDRA  
GLASGOW JUNE 24 19