ORIGINAL

12 M. D. 1 Depot Battalion 1st Depot Batt. Sask Regiment

Regtl. No. 259116

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

1. Surname: Johnson.
2. Christian name: Edwin Johnson.
3. Present address: Grosnebourg.
4. Military Service Act letter and number: 13911. L. C.
5. Date of birth: Oct 11, 1894.
6. Place of birth (town, township or county and country): St. Zoaide Que.
7. Married, widower or single: Single
8. Religion: Catholic
9. Trade or calling: Farm. Labour.
10. Name of next-of-kin: Palmir Johnson
11. Relationship of next-of-kin: Father
12. Address of next-of-kin: Mount. Laurier. Que
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: None
15. Medical Examination under Military Service Act:—

(a) Place Moose Jaw. (b) Date 28 Jan 1918. (c) Category G. 2.

DECLARATION OF RECRUIT

I, Edwin ~~Johnson Peter~~, do solemnly declare that the above particulars refer to me, and are true.

Edwin Johnson (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	23 yrs	0 mths.	
Height	5. ft	3. ins.	
Chest measurement	fully expanded	34 ins.	
	range of expansion	32 ins.	
Complexion	fair.		
Eyes	Blue.		
Hair	fair.		

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

✓

N. J. G. Minie Capt.

O. C. Depot Btln.

Regt.

Place Regina Sask. Date 12/4/18

M. F. W. 133.
500 M.—8-17.
1772—39—1158.

Jan 13-1919

REGIMENTAL DOCUMENTS

NAME JOLICOEUR EDORIE (Pte) REGT. NO. 259116 UNIT 69th H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	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)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
2	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				10368	Wounds
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	76493					Box
1	B112					#
					AO-191	-4913

ORIGINAL

JAN 25 1918

#259116

M.S.A. 15.

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Jolicoeur Christian name Edoire

2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 14911 L.C.

3. Consecutive number on schedule of men reporting for service (if he appears on it) 877.

4. Address (including street and number, if any) Gravelbourg Sask.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 22nd day of January 1917, by the undersigned medical board sitting at Moose Jaw, Sask.

5. Age as stated 23 Years 0 Months. 6. Apparent age 23 Years 0 Months

7. Height 5 Feet 3 Inches. 8. Weight 130 Pounds.

9. Chest measurement Minimum 32 Ins. Maximum 34 Ins. 10. Complexion Fair Eyes Blue Hair Fair

11. Physical development Good (Good / Fair / Poor) 12. Smallpox marks

13. Number of vaccination marks Right arm Left arm None 14. When vaccinated last Never

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

16. Slight defects but not sufficient to cause rejection

The man denies having had Rheumatism / Tuberculosis / Syphilis (Strike out disease admitted or suspected.) We find no evidence of past Rheumatism / Tuberculosis / Syphilis

R.V. 20/20
L.V. 20/20
Hearing R. Nor.
L. Nor.

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A III

President.

Member. Member.

Signature of Man Edoire Jolicoeur

Cld. to Schedule by No. 6

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
13/4/18		Guy Cook Capt. M.O.	13/4/18	+	Guy Cook Capt. M.O.
		M.O.	19/4/18	+	M.O.
		M.O.	25/4/18	+	M.O.

Joined 12 day of Apr 1918 at Regina

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	3DBBR.	259116		12/4/18
Transferred to 15th Canadian Res. Batn				15 AUG 1918

Mos Corp

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result

N. B.—This sheet is 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.

Surname Johnson Christian Name Edwin

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				

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. 259116 Rank Pte Surname Tolicour
(Given name in full) Eddie

Unit or Corps C.A.M.C. Birthplace St Jerome Que

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

1. GENERAL DESCRIPTION.

Physique good Weight 135 lbs. Height 5 ft. 5 in. Colour of Eyes Blue

Nutrition good

Pulse 78 reg.

Condition of arteries good.

Vision Rt. 6/12 Left 6/12

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

none.

Opinion as to general health and physical condition good

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

Nervous System no Genito Urinary System no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System no

Disturbance of Mentality no Muscular System no Digestive System no

Osseous and Joint System no Any other general condition 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.

M. N. S. 1/04 m. a.

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Wilton (Overseas)

Date 18.7.19 Signed [illegible] Capt. 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 [illegible]

(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.)

Sutton. D.A.G. 14148
13.6.19.

[OVER]

C.A.D.C. 309A

E. M. Wing

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

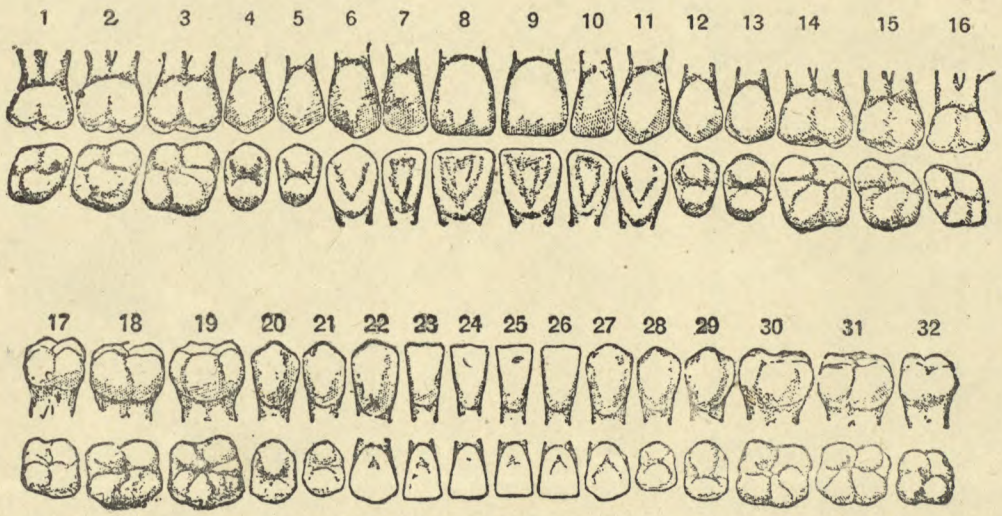
DIRECTIONS TO DENTAL OFFICERS

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) JOLICOEUR – Eddie.

REGIMENT C.A.M.C. RANK pte No 259116

Date of Examination in England 28/7/19 Date of Examination in France



PRESENT DENTAL REQUIREMENTS

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

This is to certify that the Dental Treatment to be completed as shown here has been transferred to M. F. 1. 484.

W. Boyd Capt.
Dental Discharge D.D.S.

HAS HE EVER REFUSED DENTAL TREATMENT?

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

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

Signature of Dental Officer C. C. Graham Capt

Form R 122.
10287—65M—28-7-17.

Rank — Name JOLICOEUR EDORIE — Reg'l No. 259116

Unit 4-83 Sask Rgt — If in perm. Corps, What Unit? — Married or Single Single

Place and Date of Enlistment Regina 12/4/18 — Place of Birth Quebec Prov.

Name and Address, Next-of-Kin Palmir Jolicoeur Mont Laurier Que. (P.Q.) — Relationship Father

Assigned Pay Monthly $ — Payable to — Relationship

Separation Allowance $ — Payable to — Relationship

Discharge, Date and Place — Reason — Character

Report. Date.	Report. From whom received.	Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents
		Arrived in England	15 AUG 1918	HMT	Cassandra
22.8.18	15 Res	T.O.S FROM Canada	Bramshott	16, 8	18 Ft.II O 234
7.1.19	15th Res	S.O.S on Ch to Camb RDTD on proc for duty at NOS C & H Liverpool	Pte	7.1.19	DO 7 } cancd
8.1.19	5th Hp.	T.O.S from Camb.	Pte. Liverpool	7-1-19	— 6 } P.II DO. 143 d/12/2/19
17.7.19	Camcc	T.O.S from 5th C.S.Hp	" Witley	14.7.19	— 167 PPII 147 of 14.7.19 5th C.S.Hp
18.7.18	— " —	S.O.S to M Wing	" — " —	16.7.19	— 168
17-8-19	CAMC M Wing	S.O.S to Canada	" "	16.8.19	DO 129
		102 E 62		16.8.19	

259116 Jolicoeur 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.				

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: Jalicoquis Edouard

Regimental No. 259116 Rank Private Name Edouard Johnson

Enlisted (a) 13/4/18 Terms of Service (a) C. E. F. DURATION OF WAR Service reckons from (a) 13-4-18.

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) Nil Farm Labourer

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked	Montreal	28 JUL 1918	
		Disembarked	Liverpool	15 AUG 1918	
AUG 22 1918		Taken on the Strength of the 15th Can Res Battn.	BRAMSHOTT.	15 AUG 1918	Pt II 231
7 JAN 1919	O.C. 15th RES. BN.	STRUCK OFF STRENGTH TO CAMC R&S Depot Liverpool	BRAMSHOTT.	7 JAN 1919	PART II - DAILY ORDERS No. 7 ADJUTANT, 15th RESERVE BATTALION
8-1-19	No. 5 CANADIAN GENERAL HOSPITAL	T.O.S. from CAMC Casualty Co., Shorncliffe.	Liverpool	7-1-19.	PT. 2 DO. No. 6. D 8/1/1919.
14-4-19.	— Do —	S. O. S. TO CAMC CASUALTY Co WITLEY	LIVERPOOL	14-4-19.	PT. 2 DO. No. 149 D 14/4/1919.
					A. Brown MAJOR C. A. M. C. REGISTRAR, FOR O. C. No. 5 CANADIAN GENERAL HOSPITAL, LIVERPOOL

(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				
		S.O.S. OF O.M.F.C. ON PROCEEDING TO CANADA			
		for discharge		D.O. 128	d/16-8-19.
					J McLaren Lieut
					for O.C.
					"M" Wing. C.C.C.
		Embark S.S. BELGIC Liverpool 15.8.19 Lieut.			
		Embark S.S. BELGIC Liverpool 15.8.19 Lieut.			
		J K Stewart			
		Demobilization R O 1420 (1c) of 12-12-18			
		DISPERSED WITH EFFECT AUG 26 1919			
		PART II ORDER No. 238 AUG 26 1919			
		J Darley Moine Major			
		Commanding Dispersal Station E.			

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 259116 (Rank) Pte

Name (in full) JOLICOUR Edouie enlisted in

the 1st Depot Bn S. R.

CANADIAN EXPEDITIONARY FORCE at Regina on the 12th

day of April 1918

HE served in b. a m. 6 in England

Demobilization R O 1420 (1c) of 12-12-18 Demobilization.

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

Part II Order 238 of 26-8-19

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

Age 24 yrs 9 mos.

Height 5' 5½"

Complexion Fair

Eyes Blue

Hair Fair.

Marks or Scars

E Jolicoeur

Signature of Soldier

R H Brown

Captain & Adjutant

For O.C. Depot No. 5.

Issuing Officer

Date of Discharge

Dispersal Station "E" AUG 26 Military District No. 5

Rank

Date Aug 26th 1919

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

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

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

Name (in full) ..... enlisted in

the

CANADIAN EXPEDITIONARY FORCE at ..... on the .....

day of .....

19 ..

He served in .....

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

Authorized Officer.

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

Age	Marks or Scars
Height	
Complexion	
Eyes	
Hair	

Signature of Soldier

Date of Discharge

Issuing Officer

Rank

Date 19

N.B.—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.

~~V.S.~~ "E.6-
CARD NO.

Los Hlp 25-8-19
Demob. FOLL.
Clo 238 926-8-19
#5-2020

SURNAME. Jolicoeur.

CHRISTIAN NAMES Edoire

REGL. No. 259116. RANK Pte.

UNIT Sask. Regt. 1st Dpo. Bn. #23 R.D.

FORMER CORPS Mil.

T. O. S. April 12 1918

D.O. Part II No 161

NEXT OF KIN.

NAMES IN FULL Jolicoeur, Palmir.

RELATIONSHIP TO SOLDIER Father.

ADDRESS Mount Laurier, Ont.
(sent for)

(sent for)

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, St. Joride, Ont. DATE Oct. 11th 1894

PLACE OF ATTESTATION Regina, Sask. DATE Apr. 12th, 1918.

O/S. 29-7-18. 1356/10.

7/C 23-8-19. 398/60. Pte.

L. L 26989 M. & D. 8191.

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

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

Number 259116 Rank Pte

Surname JOLICOEUR

Christian Name Edouard

Units Sask Rgt Theatre of War Eng

Date of Service 15-8-18

Remarks

Latest Address Mount Laurier P.Q.

Roll No. a Page 2746

200m.-2-21.M.

Box No. 493

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:–	EFFECTIVE DATE:–
AMOUNT:– Nil	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.

NAME:– JOLICOEUR Edorie

NUMBER:– 259116

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
L.S.C.		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:– 83 Draft. 1st Sask. Reg. Dep.

DATE ACCOUNT FIRST OPENED:– 16-7-18.

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			1st Res.

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

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
1 3 7	1172		~~1460~~	L.P.C.		Bal. Cr.	206 34

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
L.P.C.	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE ~~Fran. Can. 31/7/19 F 1847 B'shop Rwp. M. Welly 18/7/19 M.D 4~~

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR. 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
15-7	L.P.C. Canadian								11 50		
	P.P. 16/7 to 31/8/18.	51 70		aR. 16. 20/8/18. B'ley Camp	4 87				58 33	23	
		51 70			4 87				9 133		
Sept.	"	33 -		" 494. 2-9-18 " "	4 87				57 26	38	
				" 1597. 30-9-18. 15 Res.	29 20				57 26		
		33 -			34 07						
Oct	"	34 10		Chvoos 30/9 15 Res	2 14						
				aR 1778 31/10. ✓	19 47				69 75		
		34 10			21 61						
Nov				aR 1901 15/11 ✓	14 60						
Dec.	✓	67 10		" 2055 30/11 ✓	19 47						
Jan.	✓	34 10		" 3064 21/12 ✓	19 47				117 41		
		101 20			53 54						
Feb.	✓	30 80		R T Waterloo to Lipton 6/12/18	94						
March	✓	34 10		D.R.A.R. 2471 24/1 15 Res	243 -				182 31		
				✓ 2764 15/1 ✓	97 3 -						
				✓ 2586 13/2 ✓	97 3 -				159 48 ✓		
				✓ 2711 27/2 ✓ 5 C.S.H.	1 87				154 61		
				✓ 2835 13/3 ✓	97 3				144 88		
		64 90			37 43						
Apl.	✓	33							177 88	1 43	
May	✓	34 10							211 98		
				aR. 296 ✓ 26/3 5 S.H.	97 3				202 25		
		67 10			97 3						

NUMBER 259116 RANK Pte. NAME JOLICOEUR E.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				Forward					20225		
June	P.P.	33							23525		
				D.N.H.R. 101 17/4 15 Res.	9 73						
July	✓	34 10		✓ ✓ 337 22/5 ✓	14 60				24502		
				✓ ✓ 192 30/4 24 33 ✓	7 30				23972		
				✓ ✓ 533 29/5 ✓	4 87						
				✓ ✓ 826 19/6 ✓	7 30						
				✓ ✓ 916 26/6 ✓	9 73				21582		
		67 10			53 53				~~22094~~		
	Int on deff pay 34/4	5 12							22094		
	~~Forwarded 7/10/14/19 10 Aug. LRD No 161. 13/7/19.~~	1 30									
									22094 ✓		
		5 12									
				8481 M.W.C.C. & L.P.C. 28/7 1	9 73						
				1172 S.B.S.A. L'pool 12/7	14 60						
				9947 J.W.C.C. 11/8 E.L.P.C. 48.66	24 33				17228		
					48 66						
				S.D.S. Canada 16/8/19 L 102 19/8/19							

AUDITOR | PAYMASTER

M. OR S. ~~191~~

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

REGT. No. 259116 RANK Pte. NAME (IN FULL) JOLICOEUR. EDWARD. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil. | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. C.A.M.C. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 12-4-18 | TRANSFERRED TO England | DATE | AUTHORITY

ASSIGNED PAY $ Nil. | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Quebec. DATE 26-8-19 REASON Demob. AUTHORITY DO238 IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	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.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT							206	34	206	34																									206	34	T.O.S. 18-8-19 00238 EX BELLIC CR BAL ORIG L.P.C.
																																					CL O.A.L + 1ST PAY W.S.C.
August	31	1.10	34	10	70	-	35	00	139	10	9947 8481				14802		24 33 9 73		5 00 4 87		301 51										345 44						BOAT + TRAIN MONEY.
																													5 50		5 50		5 50				5 days overpaid on L.P.C.
									345 44																						350 94						
					W.S.C.	S.A.	Total																W.S.C.	S.A.							Total Ch.		Sold		Nfs.		
122 days min.			280	-			280	-															50 00														1st Payment as Above
																							5 50														
																							64 50								140 -		140 -				27-9-19 - 1094045
																							70 -								210 -		70 -				27-10-19 - 1620340
																							70 -								280 -		-	-			26-11-19 - 1622799
			280	-			280	-															280 -								280 -						

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

Add.
P. O. Mont Laurier.
P. Q.

04. 1
DA-E

SHORT FORM.
PROCEEDINGS ON DISCHARGE.
(Demobilization.)

1. No. 259116
2. Rank Pte.
3. Name Folicoin Edouard
4. Unit Cam. B.
5. Date of Discharge AUG 26 1919 Place QUEBEC, P. QUE.
6. Reason for Discharge Demobilization
Demobilization R O 1420 (1c) of 12-12-18
7. Authority Part II Order No 238 of 26.8.19
8. Proposed Residence after Discharge Mont Laurier P. Q.

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. ? E. Folicoin

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place QUEBEC, P. QUE.

Date AUG 26 1919

Signature H. M. Carrie Major (O.C. Discharging Unit)
Commanding Dispersal Station

M.F.B. 218a—150M-3-19—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

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

1. Triplicate Attestation Paper (M.F.W. 23). or
   Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). and dup
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. ~~Supply documents.~~