

REGIMENTAL DOCUMENTS

NAME

*Buote Patrick*

REGT. NO.

*3204611*

UNIT

*6th Det - C 4/8*

M. F. W. 2505  
REFERENCE

FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

NON-EFFECTIVE BY

DEATH

Category

*50461*

DISCHARGE

Category

*Demob*

DESERTION

2 ATTESTATION PAPER (M.F.W. 23, 133, or 51)

1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

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)

1 DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

1 MEDICAL EXAMINATION (M.F.W. 129)

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)

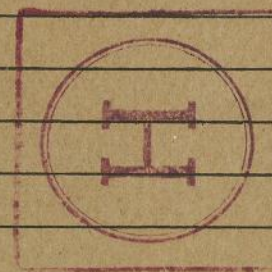
LAST PAY CERTIFICATE (M.F.W. 44)

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 MFW-41



*403186*

*4-8  
4-8  
6-8*

*1*



PUBLIC ARCHIVES RECORDS CENTRE  
War Veterans Allowance District Authority

Address \_\_\_\_\_

Mark your reply:

For attention of:

Head,  
Reference Section,  
Public Archives Records Centre,  
Ottawa 3, Ontario.

Re: Byote, Patrick Service No. 3704611  
(Surname) (Christian Names)

Veteran is stated to have served during WW I  
in the following Units 1st Depot Bn. N.S. Regt. (State War or Wars)

To enable this WAR VETERANS ALLOWANCE DISTRICT AUTHORITY to determine the eligibility of the above-named, will you kindly furnish the following particulars concerning his services:

1. THEATRES OF SERVICE

(1) South African War

Date and port of embarkation for S.A. \_\_\_\_\_

Date and port of disembarkation in S.A. \_\_\_\_\_

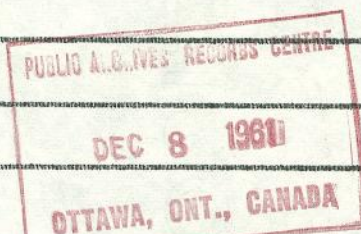
(2) World War I -- (If Canada only, state if with territorial limitations).

Canada only

Date(s) embarked for U.K. \_\_\_\_\_

If Canada and Date(s) disembarked in Canada \_\_\_\_\_

U.K. Only Period(s) of desertion in U.K. \_\_\_\_\_



(3) World War II -- (If Canada only, state if with territorial limitations).

Date of embarkation \_\_\_\_\_

2. Date and place of all enlistments. 14 June - 1918 - Charlottetown, P.E.I.

3. Date of all discharges and reason. 24 July - 1919 - Demobilization

4. Date and place of birth as per attestation paper. 24 May - 1884 - Tignish, P.E.I.

5. Marital status; if married, name in full of wife. Single

6. Any other military service. Nil

7. Decorations, if any. Nil



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.)

No.	3204611
Rank	Private
Surname	Buote
Christian name	Patrick
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	6th Det Can. Garrison Regt. C.E.F.
Date of discharge	JUL 24 1919
Place of discharge	Halifax N.S.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age.....35 years.....2 months.	Descriptive marks
Height.....5 feet.....4 inches.	
Complexion.....medium	
Eyes.....grey	
Hair.....brown	
Trade.....fisherman	
Intended place of residence.....Lignish P.E.I.	
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of	
Demobilisation	
Authority for discharge.....H.Q. 868-8-1	
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.	
3. Conduct and character while in the service have been, according to the records, etc.	
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.)	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	
M. F. B. 218.	
200M.—5-18.	
H. Q. 1772-39-113.	
(OVER)	



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

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

6. Medals and Decorations.....

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).....

(Date).....

Commanding.....

### 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, and that I have received my permanent discharge certificate.

(Place) *Halifax N.S.* (Signature of Soldier.)

(Date) *JUL 24 1919* (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.

.....(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) *Halifax N.S.*

(Signature).....

(Date) *JUL 24 1919*

*Major*  
O. C. 6th Canadian Garrison Regt C.E.F.



# 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.)

## List of Discharge Documents.

Reg. Conduct Sheet.	Militia form B-202	Attestation Paper	Militia form W-22
Squadron		Particulars of Record	W-122
Battery	B-203a	Proceedings on Discharge	B-202
Company			
Field Conduct Sheet	W-128		
Copies of Commissions by C. P.	W-212		
Med. Hist. Sheet	Militia form B-211		
Casualty form	W-24		
Medical Report for Invalidity	B-227	(a) Proceedings on Discharge	
General History Sheet	B-262		
Final Pay Certificate	W-44	(b) Attestation	
Duplicate Discharge Certificate	W-302		
Form of Will	W-22	(c) Medical History Sheet	
Only if discharged "Medically unfit"			
Only if man has not been overseas			

Documents not accompanying this form should be annexed on

I hereby certify that the following documents are transmitted

Chief Commissioning

V.P. - In the case of a man discharged by purchase the date and number of deposit Receipt and amount of same is to be noted below.



## List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263

Squadron }  
Battery } Conduct Sheet, " B. 263a  
Company }

or  
Field Conduct Sheet " W. 178

Copies of Convictions, by C. P. in MS.

Med. Hist. Sheet, Militia form B. 313

Casualty Form " W. 54

Medical Report for Invalid§ " B. 227

Dental History Sheet " B. 465

Last Pay Certificate " W. 44

Duplicate Discharge Certificate " W. 39A

‡Form of Will " W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper Militia Form W. 23

or  
Particulars of Recruit " W. 133

Proceedings on Discharge " B. 218

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.

Documents not accompanying this form should be crossed out.

*I hereby certify that the following documents are unobtainable.*

*Officer Commanding.*

*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.*



## MILITARY SERVICE ACT, 1917.

## MEDICAL HISTORY SHEET.

ORIGINAL

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 Regan Christian name Patrick
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule Not registered
3. Consecutive number on schedule of men reporting for service (if he appears on it) \_\_\_\_\_
4. Address (including street and number, if any) Dookstown, N.B.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 27 day of Nov. 1917, by the undersigned medical board sitting at Moncton, N.B.

5. Age as stated 34 Years 6 Months. 6. Apparent age 34 Years - Months
7. Height 5 Feet 7 Inches. 8. Weight 160 Pounds.
9. Chest measurement { Minimum 36 Ins. 10. Complexion Med. { Eyes Gray  
Maximum 38 1/2 Ins. { Hair Brown
11. Physical development Good { Good  
Fair  
Poor 12. Smallpox marks 22
13. Number of vaccination marks { Right arm Nil  
Left arm Nil 14. When vaccinated last -
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 We find no evidence of past { Rheumatism  
Tuberculosis  
Syphilis

(Strike out disease admitted or suspected.)

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

A2

President.

Member.

Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
17/5/18	Taken	Spurkin M.O.	20/6/18	Good	Spurkin M.O.
		M.O.	20/6/18	"	Spurkin M.O.
		M.O.	6/2/18	"	Spurkin M.O.

Joined 1 day of June 1918 at Ch'town, P.E.I.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>1st DBNSR</u>	<u>3204611</u>		
Transferred to.....	<u>6th, Batt, Can. Garrison Regt, C.E.F.</u>			

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Dookstown</u> <u>N.B.</u>	<u>27-11-17</u>		<u>Category A 2</u>

Signature of Man



Surname.

[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.

# Casualty Form—Active Service.

Unit, Regiment or Corps 1st. DEPOT BATTALION, Nova Scotia Regiment.

Regimental No. 3204611 Rank Pte Name Quote Patrick  
C. E. F.

Enlisted (a) 1-6-18 Terms of Service (a) WAR and 6 Mos. Service reckons from (a) 1-6-18

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

Extended Re-engaged Qualification (b) Miller (fisherman)

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				
		Transferred to 6th Bn. C.G.R. PO 235, Para 15	Halifax N.S.	3-2-18	T.H.E. human capt for O.C. 1st. Depot B'n N. S. Regt.
	Taken on strength 6th.	C.G.R. C.E.F.	Halifax N.S.	3-12-18	29 Mackay Capt Officer i/c Records 6th C.G.R. C.E.F.
		S.O.S. 6th C.G.R. C.E.F. HALIFAX, N.S. 24.7.16 DEMobilIZATION H.Q. 868-8-1 S.O.S. D.O. Pt. 11 No. 205 JULY 24.19			
		29 Mackay Capt OFFICER i/c RECORDS 6th C.G.R. C.E.F.			

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



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



NAME *Boote, Patrick*REGIMENTAL NO. *3204611*RANK *Pvt.*ENLISTED AT *Habersham*PROMOTIONS, &c.  
AND DATEDATE *3.12.18*IF SERVED PREVIOUSLY, STATE UNIT. &c. *U.S. B. N. R.*MARRIED, WIDOWER, OR SINGLE *Single*NEXT OF KIN *Annie Boote* RELATIONSHIP *Mother*ADDRESS OF *Piquish. Lot 2. P. O. I.*ASSIGNMENT OF PAY \$ *10.00* TO *Fisherman*ADDRESS *P. O.*SEPARATION ALLOWANCE, ENTITLED OR NOT *Yes*DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER *24.5.84*IN WHOSE FAVOUR *5.7.**Comp Medium Eyes Gray Hair Brown*



## CASUALTIES, &amp;c.

NATURE E.G. ABSENCE, PROMOTION, &c.	PART II. D. O.		REMARKS IF IN HOSPITAL, NOTE NAME, &c.
	No.	DATE	
Trans. from 1 <sup>st</sup> B. 3/12/18.	224.	10-12-18.	
Trans B Co 1-1-19	242	28.12.18	
S.A. 24-7-19. Demobd.	205	24.8.19	H2. 778-8-1



Surname *Buote* H. Q. ....  
Christian names *Patrick* M. D. No. *6* .....  
Regtl. No. *3204611* Rank *Pte* T. O. S. .... 19 ....  
Unit *1st Dpo Bn N. S. Regt.* D. O. Pt. II ..... of .....  
S. O. S. *24. 7. 19 19* Reason *Demob* .....  
Auth. *D.O. 265 of 24. 7. 19*

Next of kin *Mrs. Annie Buote* Relationship *Mother* .....  
Address *Lignish Lot 2* Also notify: .....  
*P. E. I.*

BORN—Place *P. E. I. Lignish* Date *May 24<sup>th</sup> 1884* .....  
ATTESTED—Place *Newcastle, N. B.* Date *27. 10. 19* .....  
O/S ..... R/C .....



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

This is to Certify that No. 3204611 (Rank) Private

Name (in full) Patrick Buote enlisted in

the 1st Depot Bn Nova Scotia Regt

CANADIAN EXPEDITIONARY FORCE at Charlottetown P.E.I. on the fourteenth

day of June 19 18

HE served in Canada

and is now discharged from the service by reason of Demobil

H.O. 868 - P - 1

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

Age 35  $\frac{1}{2}$  yrs

Height 5' 4"

Complexion medium

Eyes grey

Hair Brown

P Buote

Signature of Soldier

Marks or Scars

G L Mot

Issuing Officer

Rank

O. C. 6th Det Canadian Garrison Regt. C. E. F.

Date of Discharge JUL 24 1919

Signed at Halifax N.S. this JUL 24 1919 day of 1919

in Military District No. 6

File Reference No. \_\_\_\_\_

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

No. \_\_\_\_\_ (Rank) \_\_\_\_\_ Name \_\_\_\_\_

Unit \_\_\_\_\_

Address on Discharge \_\_\_\_\_

Character and Conduct \_\_\_\_\_

Former Occupation \_\_\_\_\_

Special Qualifications of Value in Civil Life \_\_\_\_\_

Medals and Decorations \_\_\_\_\_

Remarks \_\_\_\_\_

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 19 \_\_\_\_\_

Name of Officer

Rank

Appointment

On demobilization the  
particulars called for on  
the back of this cer-  
tificate will not be com-  
pleated.

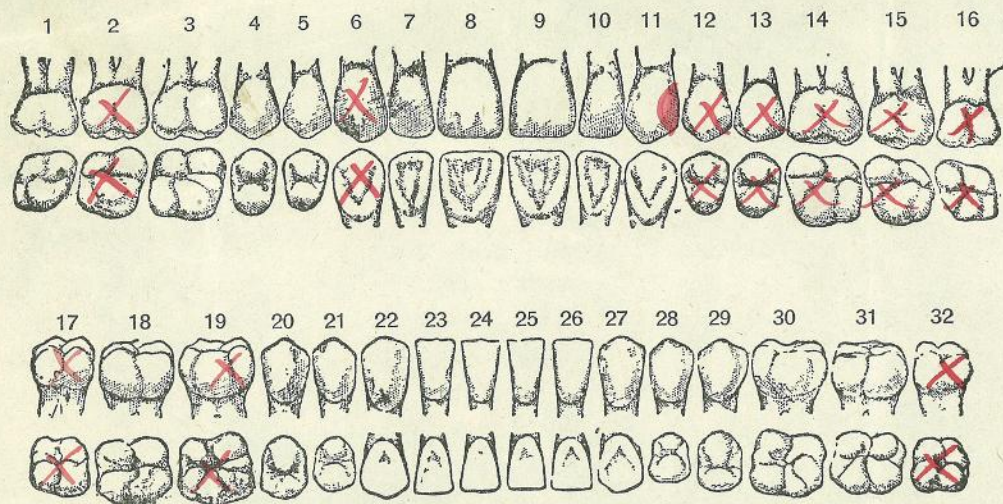


REGIMENT.

RANK

No.

No. 1198075



1. On examination the condition of patient's mouth to be marked on diagram in red ink.

2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

[illegible]

OFFICE IN CHARGE OF  
JAN 27 1919  
HALIFAX.  
DENTAL SURGERY



# 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. 3704611 Rank Pte Surname Bonte  
(Give name in full)

Unit or Corps 6th C.G.R. Birthplace Patrick Lynch P.E.D.

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

## 1. GENERAL DESCRIPTION:

Physique good Weight 160 lbs. Height 5 ft. 7 in. Colour of Eyes Grey  
Nutrition good  
Pulse 68  
Condition of arteries good  
Vision Rt. 20/40 Left 20/30  
Hearing (conversational voice) Rt. 25 ft.  
Left 25 ft.

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

Nil

Opinion as to general health and physical condition .....

## 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.

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

[OVER]



## EXAMINATIONS.

### THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

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 Medical Board.)

### THIS SECTION FOR USE IN CANADA—

Examined at.....(Canada)

Date *July 31 1919* ..... Signed *R. L. Brown* .....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 ...*Banta*.....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 8, overleaf, only.)

[OVER]



6 M. D. 1st Depot Battalion N.S. Regiment  
Regtl. No. 204611

# PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

- Surname Buote
- Christian name Patrick
- Present address Tignish, Lot 2 P.E.I.
- Military Service Act letter and number *Not registered*  
(If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension, or surrender)
- Date of birth May 24 1884
- Place of birth Tignish, P.E.I.  
(town, township or county and country)
- Married, widower or single Single
- Religion Roman Catholic
- Trade or calling Fisherman
- Name of next-of-kin Mrs. Annie Buote
- Relationship of next-of-kin Mother
- Address of next-of-kin Tignish Lot 2 P.E.I.
- Whether at present a member of the Active Militia No
- Particulars of previous military or naval service, if any No
- Medical Examination under Military Service Act :—  
(a) Place Newcastle N.B. (b) Date 27-10-17 (c) Category A2

## DECLARATION OF RECRUIT

I, Patrick Buote, do solemnly declare that the above particulars refer to me, and are true.

*Witness* *Patrick Buote* (Signature of Recruit)

## DESCRIPTION ON CALLING UP

Apparent age 34 yrs. 6 mths.  
Height 5 ft. 7 ins.  
Chest measurement } fully expanded 36 ins.  
range of expansion 2 1/2 ins.  
Complexion Medium  
Eyes Grey  
Hair Brown

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



*Instaler*  
O. C. Depot Btin. MAJOR  
O. C. "H" COY. 1st DEPOT B'N N.S. REG'T Regt.

Place Date