

REGT. NO. 2043128 UNIT 16 Sty H. Q. FILE NO.

MENARD, GEORGE

REGT. NO

2043128

UNIT

16 July

H. Q. FILE NO.

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

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

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

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

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

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

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)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

msc

Dr. J. H. C. C. C.

10.1 dm

1848-1849

Wendell Park

W 2589
DOM-11-18
772 38 1377

War Service Badge
Class "A" No. 277690

SHORT FORM.

Occupational Group No. 6

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No.	2042128		
2. Rank.	Gunner		
3. Name.	Turnard. George Lra.		
4. Unit.	16 th Battery C.F.C.		
5. Date of Discharge	29-5-19	Place	Kingston Ont
6. Reason for Discharge	Demobilization		
7. Authority.	P.O. 1420		
8. Proposed Residence after Discharge	Kingston Ont. S.P.O.		
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. 239 Turnard Gg Signature of Soldier.			
10. CONFIRMATION. The discharge of the above named man is hereby confirmed. Place Date Signature for G. C. Discharge Station (O. C. Discharging Unit.)			

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 (O.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 (O.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). *adone*
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group..... **B**

Checked by No. **105**

Date..... **12-5-14**

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No. 2543/28

Folio. 13

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?
- 1a. What are your Christian names?
- 1b. What is your present address?
2. In what Town, Township or Parish, and in what Country were you born?
3. What is the name of your next-of-kin?
4. What is the address of your next-of-kin?
- 4a. What is the relationship of your next-of-kin?
5. What is the date of your birth?
6. What is your Trade or Calling?
7. Are you married?
8. Are you willing to be vaccinated or re-vaccinated and inoculated?
9. Do you now belong to the Active Militia?
10. Have you ever served in any Military Force?
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

Ménard
Ira George
257 Montreal St Kingston
Garden Isle Ont
Mrs. H. Ménard
257 Montreal St Kingston
Mother
15 April 1894
Lineman Telephone
Single
Yes
Army Service Corps 5 yrs
Yes
Yes

War Service Badge Class "A" No. 13
Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? No
If so, what was the nature of the disability?
Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? No
If so, what was the reason?

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Date: May 24 1917 I. Ménard (Signature of Recruit)
Ed. Webb (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Ira George Ménard, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date: May 24 1917 I. Ménard (Signature of Recruit)
Ed. Webb (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, KINGSTON, ONT. this 25 day of May 1917.
Ed. Webb Major (Signature of Justice)
O. C. 73rd Battery, C.F.A., C.E.F.

Description of Ira George Menard on Enlistment.

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

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

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

Height.....5 ft. 5 1/2 ins.

Chest measurement. { Girth when fully expanded.....36 1/2 ins.
Range of expansion.....4 1/2 ins.

Complexion.....Dark

Eyes.....Brown

Hair.....Black

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

Left foot moderately flat

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.....25th May.....1917.

Place.....Kingston

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.

Ira George Menard.....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.

Signature of Officer)

Date.....25th May.....1917.

To be made out in duplicate.

War Service Badge
Class "A" No.

H.Q. 54-21-23-53

~~ORIGINAL~~
DUPLICATE

13

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.....3rd Section, Depot Divisional

.....Ammunition Column

(2) Regimental Number.....2043128

(3) Full Name of Soldier.....Menard, Ira George

(4) Place of Birth.....Garden Isle, Ont.

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

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

(b) Present Postal Address.....257 Montreal St.,

.....Kingston, Ont.

(7) Are you a widower?.....

(8) Have you any children?.....

If so, give number of boys and girls.....

Also their names and ages.....

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

If so, state name and address

(10) Is your Mother alive?.....Yes.....

If so, state name and address.....Mrs. Lizzie Menard.....

.....257 Montreal St. Kingston, Ont.....

(11) If your Mother is a widow.....Yes.....

Are you her sole support, or not?.....Yes.....

(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.

.....\$25 per month.....

.....Father dead, brother married.....

(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.....

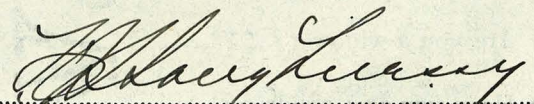
(15) Are you insured?.....No.....

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.

Date.....May 24th 1917.....



Officer Commanding.

3rd Sect. Depot Div. Ammn. Col

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No 277690

THIS IS TO CERTIFY that No. 2093128 (Rank) Gunner

Name (in full) Ira George Menard enlisted in
the 3rd Section Depot D. A. C.CANADIAN EXPEDITIONARY FORCE at Kingston on the 29th
day of May 1917

HE served in 16th Battery in France

Demobilization.

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

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

Age 25

Height 5' 5 1/4"

Complexion Dark

Eyes Brown

Hair Black

Menard I G
Signature of Soldier

Marks or Scars

Two scars Rt. Hip

Bullet wounds 1904

One ball mark Lt. Arm

S. D. Cunningham

Captain
for D. C. Dispersal Area Station H.

Issuing Officer.

Date of Discharge



Rank

Date 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.

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

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

500M.—9-16

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

Casualty Form—Active Service.

Unit, Regiment or Corps.

3rd Section 5th Divisional Am. Column

Regimental No.

2043128

Rank

Pte.

Name

Menard Ira George

Enlisted (a)

May 24/17

Terms of Service (a)

Duration of war + 6 months

Service reckons from (a)

May 25/17

Date of promotion to present rank

Date of appointment to lance rank

Numerical position on roll of N. C. Os.

Extended

Re-engaged

Class A

Qualification (b)

Military Civil: Lineman Telephone

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 at... Alex... Date... 3.2.18

Disembarked at... Lpool... Date... 16.2.18

Res. C.F.A.

T.O.S. from Canada

Witley

17-2-18

Bo. Pt. 11-52

RES. BDE. C.F.A. PROCEEDED O/SEAS TO

C7A

WITLEY

AUG 20 1918 PT. II D.O. No. 233

LIEUT. & ASST. ADJUTANT. RESERVE BRIGADE, CANADIAN FIELD ARTILLERY.

22-8-18.CGBD.

Arr.as Reinf.& TOS.Can.Art.Pool

22-8-18. NR.734 Pt.II O.111

25-8-18. do

Left Base for C.C.R.C.

25-8-18. NR.1357

26-8-18.CCRC.

Arrived at C.C.R.C.

26-8-18.NR. 1318.

5.9.18. Can. Corps

Posted to 6 Bde C.F.A.

6.9.18. A941. CERC MR (1569) 6.9.18. O.D. 123 16.9.18

do do

T.O.S. 6 Bde C.F.A.

7.9.18. A941 CERC MR (1569) 6.9.18. O.D. 113-1918

(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.]

CERTIFIED CORRECT.
22 AUG 1918
CAN. RECORDS, LONDON.

2043128 Gm. Menard I. G.

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				
7.9.18.	6 Bde.	Joined 6 Bde C.F.A. Proceeded to England		15.8.18. 15/4/19	B. 213 invaluable for h.b. Col a.d.g. Edn Sect 8 & 9.3.2.8.4
17/5/19.		B. O. B. ON PROCEEDING TO CANADA. Part II Order 44. H. Wing 666			Goodly to for 20 Bty
		Embark H.M.T. Cedric. Liverpool 19-5-19 H.P. Sully Capt. & Adit			
19-3-19.	T. O. S. 3.1.1.1.	Discharged 2.2.3.1.1.	Kingston	Pt. 2 Order. 1.5.1.	for O. C. Dispersal Area Station

TLH Rank Name **MENARD, Ira George** Reg'l No. **2043128**
Dft. 73rd BATTY C F A To. CRA If in perm. Corps, }
 Unit What Unit? }
 Married or Single **Single**

Place and Date of Enlistment **Kingston, May 24th. 1917** Place of Birth **Garden Isle? Ont.**

Name and Address, Next-of-Kin **Mrs. L. Minard,**
257, Montreal St., Kingston. Relationship **Mother**

Assigned Pay Monthly \$ Payable to

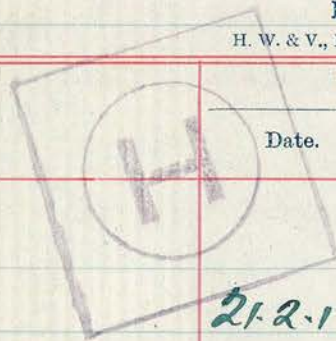
Separation Allowance \$ Payable to

Relationship

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—9546-16.



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.				
Arrived in England					
21-2-18	Rec'd Bde B.S.A.	Taken on strength	In Nisley	10-2-18 17-2-18	S/S MISSANABIE Pndg 52
21-8-18	do	S.O.S. on Proceeding of leave as Imp. Gns	do	20-8-18	At 23340 C.A. Pool At 111.D 26-8-18
17-9-18	6 Bde C.F.A.	T.O.B. on Posting From C.A. Pool.	Field Gns.	7-9-18	At 11340 C.A. Pool At 123.D 16-9-18
16-4-19	..	Proc. to Eng.	"	15-4-19	- 46
24-4-19	H Wing CCC	Tos Pndg RTD	W. TLEY	16-4-19	DO 30
24-5-16	do.	S.O.S. to Canada	do.	19-5-19	- 46
		To Canada	58-H-61	19-5-19	



[illegible]

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

War Service Badge

Class "A" No.

DIRECTIONS TO
DENTAL OFFICERS

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

MENARD GEORGE IRA

REGIMENT

20TH BATTERY, C.F.A.

RANK

Driver

No.

2043128

Date of Examination in England

APR 26 1919

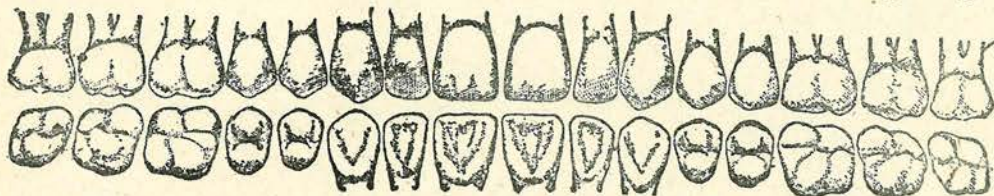
Date of Examination in France

1. This form will be made out for each individual at the time of Demobilization in England or France.

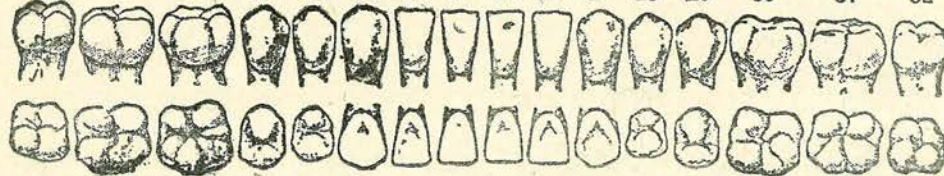
2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16



17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

3, 4, 7, 18, 20, 31

2. EXTRACTIONS

3. CROWNS

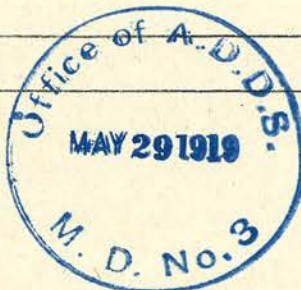
4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower



HAS HE EVER REFUSED DENTAL TREATMENT?

No

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

(a) In Canada

Yes

(b) In England

(c) In France

1

Signature of Dental Officer

Ch. Hymuscan

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT

NAME OF SOLDIER

Menard J. D.

REGIMENT

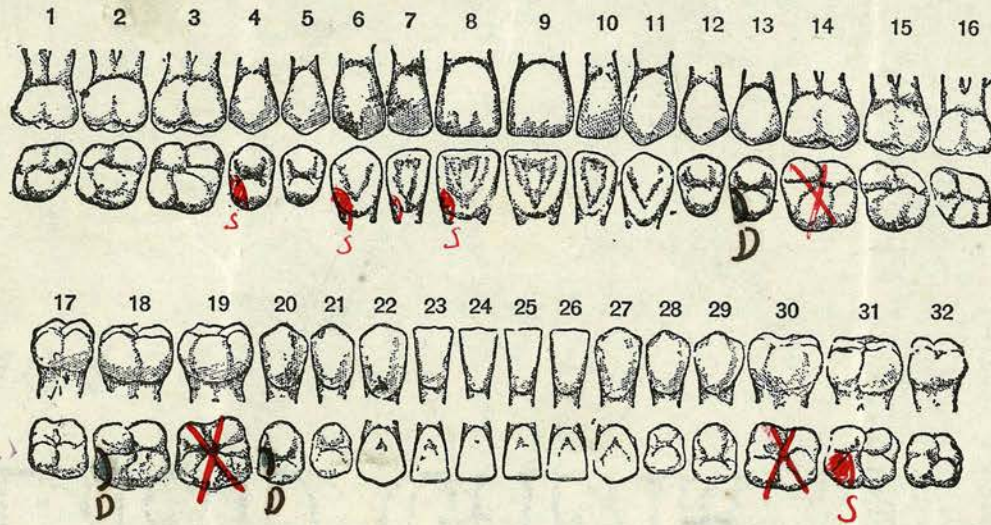
D.A.C. No. 3

RANK

Dr

No.

2043128



INSTRUCTIONS

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.

Condition on first Examination	Date	Amalgam Temporary Filling (a) G.P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	Dentures			Gold Clasp	Gold Filling	Crowns		Bridge Work	OPERATOR	Military Dist.	REMARKS
											U	L	P			Gold	Porcelain				
	13/7/17	4 46.8 31																	J M McIntyre		3 Cavities #13.18.20
			3 11.20 13							3 14.19 20									E. J. Oliver		COMPLETE.

MEDICAL HISTORY SHEET

2043128

Surname **Menard** Christian Name **Ira George**

Examined { on **25th.** day of **May** 191 **7**
at **Kingston Ontario.**

Approved by

Chellitt

Birthplace { City or Town **Garden Isle**
County **Ontario.**

Rank

Capt.

M.O.

Apparent age **23**

Trade or occupation **Telephone Lineman**

Height **5** feet **5½** Inches

Weight **140** lbs.

Chest measurement { Minimum **32½** inches
Maximum expansion **36½** inches

Physical development **Good.**

Small-pox Marks **None.**

Vaccination Marks { Arm Right **-** Left **-**
Number **-----**

When Vaccinated last **Never**

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

(b) Slight defects but not sufficient to cause rejection

Left foot moderately flat.

D-20 D-20 A

A

Date

Result

VACCINATIONS

11/8/17

E. G. Hunt

M.O.

Date

Result

ANTI-TYPHOID INOCULATIONS, ETC.

3/7/17

R M Cairns

M.O.

26/6/17

R M Cairns

M.O.

12-2-12

E. G. Hunt

M.O.

16-8-18

E. G. Hunt

Enlisted on **25th.** day of **May** 191 **7** at **Kingston Ontario.**

	CORPS	REG'L NUMBER	HABITS	DATE
Joined on enlistment	#3 Sect. D.A.C.	<i>2043128</i>	<i>Good</i>	<i>25/5/17</i>
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<i>Kingston</i>	<i>Nov 24 1917</i>	<i>slight flat foot</i>	<i>Col. - A</i>
<i>Bromfield Ont</i>	<i>29-5-19</i>	<i>noonan</i> <i>captains</i> <i>President-med. Board</i>	<i>A</i>

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.

Surname Meward

Christian Name Ira George

[illegible]

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

War Service Badge

Class "A" No.

G13

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. 204325 Rank DVR Surname MENARD

(Given name in full)

GEORGE IRA

Unit or Corps 20TH BATTERY, C.F.A. Birthplace Garden Island Ont.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 137 lbs. Height 5 ft. 6 in. Colour of Eyes Brown
Nutrition Good
Pulse 94 Regular
Condition of arteries Sept
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).

Two scars N. thigh.
(bullet wounds, 1904)
one scar mark L. 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.

Nil

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Siobly.....(Overseas)

Date 14-4-19..... Signed J. B. Davis G.M......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 J. B. Davis.....

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

THIS SECTION FOR USE IN CANADA—

Examined at Barnfield.....(Canada)

Date May 29-19..... Signed J. B. Davis G.M......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 J. B. Davis.....

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

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

APPROVED

R. R. MacLachlan
Capt. A. M. C.
For A. D. M. S. No. 3

No. 3043128 RANK *Pte.*NAME *Menard L. G.*T. O. S. *24/3/17*
*Nov. paylist.*UNIT *73rd. Battery Draft. No 6*M. D. *3*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1917</i> <i>Nov. 1</i>	<i>1917</i> <i>Nov. 30</i>	<i>n.</i>		
<i>Dec.</i> <i>1918</i> <i>Jan.</i>		<i>n.</i> <i>n.</i>		

No. 2043128 RANK *Priv.*NAME *Menard J. G.*T. O. S. 24-5-17. 00147 UNIT # 3 Section Divl. Enn. Col.
30-5-17.M. D. *Ret.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
May 24	May 31	<i>✓</i>	<i>Leave 26-5-16 to 1-6-17</i>	<i>20147.</i>
<i>June</i>		<i>✓</i>	<i>ext to 17-6-17.</i>	<i>20149</i>
<i>July</i>		<i>✓</i>		
<i>Aug</i>		<i>✓</i>		
<i>Sept</i>		<i>✓</i>		
Oct 1	Oct 17	<i>n.</i>	<i>Transf. to 43rd Bty 17-10-17</i>	<i>to 4-17-10-17.</i>

No. 204 3128 RANK *Gnr.*NAME *Menard, J. G.*T. O. S. *fld from #3 sect* UNIT*Kepo. D.A.C.
(Auth. Oct L.P.C.)**73rd Battery*M. D. *3.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>Oct 17</i>	<i>Oct 17</i>	<i>n</i>	<i>Proc. of 23-11-17.</i>	<i>100.56.23-11-17</i>
<i>Oct 18</i>	<i>Oct 31</i>	<i>n</i>		
<i>Nov</i>		<i>e</i>		

a-42
Army

Number. 2043 128

Rank. Gnr.

B

Surname. MENARD

Christian Name. Ira George

Units. C.F.A.

Theatre of War. France

Date of Service. ~~7-8-18~~ 22-8-18

Remarks. 38 Ordnance St.

Latest Address. G.P.O. Kingston

~~D.O.B., M.A. #3.~~ Out

14 $\frac{2}{31}$

Roll No. "B" Page 5507.
Kingston
Out.

No.

RANK

NAME

T. O. S.

UNIT

M. D.

PAID
FROMPAID
TOSIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY



A. Morris

Col

1917
Lieut. G.S.
Seven Nov

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

M

22893

Dec. 1/17

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

20			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 2043128

Rank Snr. Promoted Reverted Discharge

Soldier's Name J. G. Menard

Battalion 73 Batty. C.F.A. C.E.F. 6 Dft.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. L. Menard

Address 257 Montreal St.,
Kingston, Ont.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec 17	U 65872		20	20	126 75. ✓ / Mailed 28/12/17.
Jan 18	Z 67930		20	20	✓
Feb	Z 74140		20	20	✓
Mar	O 93984		20	20	✓
Apr	M 9128		20	20	✓
May	R 12995		20	20	✓
June	L 25178		20	20	✓
July	L 33441		20	20	✓
Aug	P 35936		20	20	✓
Sept	S 47169		20	20	✓
Oct.	X 51440		20	20	✓
Nov.	J 57894		20	20	✓
Dec	G 65981		20	20	✓
Jan	X 73781		20	20	✓
Feb	W 72788		20	20	✓
Mar	R 90492		20	20	✓
Apr	P 902		20	20	✓
May	S 5727		20	20	✓
			360	360	

M. F. W. 128.
40M. 6-7-17238-1141
L. L. 22320-M & D. 1933.

A/c Closed 31-5-19.

Ret'd per. Cedric

Date 27-5-19 M.F.W. 1874-6-19

J. H. Kelly

Derby L.P.M.R.D. 110202
4-6-19 J.H.M.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque
No.Amount
S/AAmount
A/P

Total

REMARKS

ASSIGNED PAY: *ENGLAND OR CANADA.* SEPARATION ALLOWANCE: *ENGLAND OR CANADA.* NAME: *MENARD Ira Geo.*

EFFECTIVE DATE: *1/12/17* EFFECTIVE DATE: *2000* NUMBER: *2043178*

AMOUNT: *2000* AMOUNT: *2000*

NAME, ADDRESS, RELATIONSHIP & AUTHORITY: *Mr. L. Menard, 257 Montreal St, Montreal, Quebec, Canada*

WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

AUTHORITY: *Lt Col* DATE EFFECTIVE: *1/12/17* RANK OR APPOINTMENT: *Col.*

UNIT AND TRANSFERS

ORIGINAL UNIT: *6th Bn. 73rd Batty*

DATE ACCOUNT FIRST OPENED: *1/2/18*

AUTHORITY: *Lt Col* DATE EFFECTIVE: *1/2/18* DATE LEDGER SHEET T'S'D: *1/2/18* UNIT TRANSFERRED TO: *Res. Bty*

888 2/5 AR 38706 Cr 28 cents.

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
<i>74</i>	<i>38</i>	<i>SC 22</i>	<i>3 73</i>				
<i>74</i>	<i>166</i>	<i>2 Bn</i>	<i>9 33</i>				
<i>204</i>	<i>1415</i>	<i>5th Bn</i>	<i>63 58</i>				
			<i>- 66 59</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
<i>Lt Col</i>	<i>1 00</i>	<i>= 10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE

Dr to Cr 374/19 LR 742 Bn 24 Bn 123 Sal Ltc Credit 4 55

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>Mar.</i>	<i>Balance from Cr</i>								<i>15 01</i>		
<i>Apr.</i>	<i>Y.P.</i>	<i>33 -</i>		<i>60 P</i>				<i>20 -</i>			
				<i>AR 262 CRN 10.4.18</i>	<i>2 43 -</i>						
				<i>" 1 73 Bn 24.4.18</i>	<i>10 -</i>						
				<i>" 616 CRN 24.4.18</i>	<i>2 43</i>				<i>13 15</i>		
<i>May</i>	<i>Y.P.</i>	<i>33 -</i>		<i>60 P</i>	<i>1 486</i>			<i>20 -</i>			
		<i>34 10</i>		<i>AR 99, CRN 8/5</i>	<i>4 87 -</i>			<i>20 -</i>			
				<i>" 1476 " 23/5</i>	<i>2 43 -</i>				<i>19 95</i>		
<i>June</i>	<i>Y.P.</i>	<i>34 10</i>		<i>60 P</i>	<i>7 30</i>			<i>20 -</i>			
		<i>33 -</i>		<i>AR 1648 CRN 11/6</i>	<i>4 87</i>			<i>20 -</i>			
				<i>" 2044 " 24/6</i>	<i>9 73</i>				<i>18 35</i>	<i>Agreed June</i>	
<i>July</i>	<i>Y.P.</i>	<i>33 -</i>		<i>60 P</i>	<i>14 60</i>			<i>20 -</i>			
		<i>34 10</i>		<i>AR 2804 CRN 11/7</i>	<i>4 87 -</i>			<i>20 -</i>			
				<i>" 2952 " 23/7</i>	<i>4 87 -</i>				<i>22 71</i>		
		<i>34 10</i>			<i>9 74</i>			<i>20 -</i>			

Happy

888 2/5 AR 38706 Cr 28 cents.

UNIT AND TRANSFERS			
ORIGINAL UNIT:- <i>6th Bn. 73rd Palt.</i>			
DATE ACCOUNT FIRST OPENED:- <i>1/2/18</i>			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
<i>Spec Law</i>	<i>1/7/18</i>		<i>Res Arty</i>

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
<i>74</i>	<i>38</i>	<i>SC 276</i>	<i>3 73</i>				
<i>64</i>	<i>166</i>	<i>2 560</i>	<i>9 33</i>				
<i>254</i>	<i>1415</i>	<i>5 560</i>	<i>63 58</i>				
			<i>- 66 59</i>				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
<i>Spec Law</i>	<i>1 00</i>	<i>= 10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE *Spec Law 30/4/19 AR 7427 Bn 24 Bn 183 Bal LHC Credit 4 55*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>Start 1/18</i>	<i>Balance from Law</i>								<i>114 45</i>		
<i>Mar.</i>	<i>Bal Dir.</i>								<i>15 01</i>		
<i>Apr.</i>	<i>G.P.</i>	<i>33 -</i>		<i>Cap.</i>				<i>20 -</i>			
				<i>AR 262 CRA 10.4.18</i>	<i>2 43 -</i>						
				<i>" 1 73 Bn 24/1</i>	<i>10 -</i>						
				<i>" 616 CRA 24.4.18</i>	<i>2 43</i>				<i>13 15</i>		
<i>May</i>	<i>G.P.</i>	<i>33 -</i>		<i>Cap.</i>	<i>14 86</i>			<i>20 -</i>			
		<i>34 10</i>		<i>AR 99, CRA 8/5</i>	<i>4 87 -</i>			<i>20 -</i>			
				<i>" 1476 " 23/5</i>	<i>2 43 -</i>				<i>19 95</i>		
<i>June</i>	<i>G.P.</i>	<i>34 10</i>		<i>Cap.</i>	<i>7 30</i>			<i>20 -</i>			
		<i>33 -</i>		<i>AR 1648 CRA 11/6</i>	<i>4 87</i>			<i>20 -</i>			
				<i>" 2044 " 24/6</i>	<i>9 73</i>				<i>18 35</i>	<i>by new June</i>	
<i>July</i>	<i>G.P.</i>	<i>33 -</i>		<i>Cap.</i>	<i>14 60</i>			<i>20 -</i>			
		<i>34 10</i>		<i>AR 2804 CRA 11/7</i>	<i>4 87 -</i>			<i>20 -</i>			
				<i>" 2952 " 23/7</i>	<i>4 87 -</i>				<i>22 71</i>		
<i>Aug</i>	<i>"</i>	<i>34 10</i>		<i>Cap.</i>	<i>9 74</i>			<i>20 -</i>			
		<i>34 10</i>		<i>AR 3418 CRA 13/8</i>	<i>4 87</i>			<i>20 -</i>			
				<i>" 1289 CRA 31/8</i>	<i>3 57</i>				<i>28 37</i>		
<i>Sept</i>	<i>"</i>	<i>34 10</i>		<i>Cap.</i>	<i>8 44</i>			<i>20 -</i>			
		<i>33 00</i>		<i>AR 646 CRA 3/9</i>	<i>7 14</i>			<i>20 -</i>	<i>34 23</i>		
		<i>33 -</i>			<i>7 14</i>			<i>20 -</i>			

NUMBER

2043128

RANK

Gnr

NAME

MENARD, L.G.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918				forward					34 23		
Oct	Gnr	34/10		A.P.				20			
				AR 862 14/10 6 C.F.A.	3 73						
				" 924 27/10 "	3 73				40 87		
		34 10			7 46			20			
Nov	Gnr	33		A.P.				20			
Dec	"	34 10		AR 1039 15/10 6 C.F.A.	3 73						
1919	"	34 10		1187 23/11 "	13 06				37 08	apud	
Jan				C. A.P.				20			
								20	65 28		
		101 20			16 79			60			
				AR 1756 27/12 6 C.F.A.	1 30						
				" 1284 17/12 "	6 49						
				" 1573 9/1 "	3 77						
				" 1706 23/1 "	3 77						
				" 1787 9/1 "	9 33						
				" 1939 21/1 "	3 73						
Feb-Mar	Gnr	64 90		Cap.				40			
				" 2162 10/3 6 C.F.A.	3 65				58 14		
		14 90			32 04			40			
Apr	Gnr	33		A.P.				20	71 14		
				AR 38 3/4/19 5 C.F.A.	3 65						
				" 1415 21/4 "	53 53						
				" 106 16/4 2 Dnc	9 13						
				" 4774 7/5 CCC End	9 73						
				" 6684 15/5 "	7 73				14 63		
		33			85 77			20			

S.O.S. to Canada 19/5/19 S.L. 58, 16 Bty 7th DB

Dec	4	34/10	AR 1039 15/10 6 C 3a.	3 73		
Jan 1919	"	34/10	1187 23/11 "	13 06	37 18	apud
			6. A.P.		20	
					20	65 28
		101 20		16 79	60	
			AR 1753 27/12 6 C 3a.	1 30		
			" 1284 17/12 "	6 44		
			" 1573 9/1 "	3 47		
			" 1706 23/1 "	3 47		
			" 1787 9/1 "	9 33		
			" 1939 21/1 "	3 73		
Feb-Mar	Gm	6490	Cap.		40	
			" 2162 10/3 6 C 3a.	3 65	58 14	
		64 90		32 04	40	
Apl	Gm	33	A.P.		20	71-14
			AR 38 3/4/19 5 C 3a.	3 65		
			" 1415 21/4 "	53 53		
			" 106 16/4 2 Dnc	9 13		
			" 4774 7/5 CCC End	9 73		
			" 6684 15/5 " "	9 73	14 63	
		33		85 77	20	

S.O.S. to Canada 19/5/19 S.L. 58. 16 Bly 711-53

REGT. No. 2043128

DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 2043128

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.
ADDRESS					PLACE OF ATTESTATION
					DATE OF ATTESTATION
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$
TO WHOM PAID	RELATIONSHIP				PAYABLE TO
ADDRESS					ADDRESS
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE
					DISCHARGED

[illegible]

REGT No

2043128

RANK *1st*

NAME (in print) _____

^L MENARD, J. G.

(BLOCK LETTERS SURNAME FIRST)

PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
Ira. Geo. Menard			3rd C.S.C.C.		MENARD, Ira. George
Standard Bank			PLACE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
Kingston, Ont.			DATE OF ATTESTATION	TRANSFERRED TO	DATE AUTHORITY
			ASSIGNED PAY \$	DATE EFFECTIVE	
			PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
			ADDRESS		
			STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE	
			DISCHARGED	PLACE DATE REASON	AUTHORITY IF ENTITLED TO POST DISCHARGE

ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS	
COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3										DEBIT		CREDIT			
NO.	DATE	NO.	DATE	NO.	DATE	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.
						19	46	487		97	62	20	00					146	95						
														550		550		550							
						28										28									
War Service Gratuity						W.S.G.																			
						70 00																			
936420						64 50								550				140		210					
955663						70												210		140					
1299392						70												280		70					
1316034						70												350							
OK																									
Returned "Lidius"																									
Bal. per Eng L. P. C.																									
Clothing Allow. and 1st Payment W. S.																									
Pay to Estimate date of discharge.																									
Advances in England.																									
Rent Money, Train Money.																									
Overpaid 5 days on discharge.																									
420974																									
Mace 2595 Rec																									
1st Payt. W. & Gas alon																									
Dr. Bel.																									

RELATIONSHIP OF DEPENDANT

AUTHORITY

NAME OF HOSPITAL

[illegible]

[illegible]

[illegible]