

REGIMENTAL DOCUMENTS

8815719

NAME **BILODEAU**

JOSEPH ARISTIDE

pte

REGT. NO. **3282080**

UNIT **10 Com. Res. Bn.** H. Q. FILE NO.

19157

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)

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)

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)

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)

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

H.A.C. 5709

Form C-3

R122

M

Discharge

H

DEATH

Category

DISCHARGE

Category

Demob.

DESERTION

A.M.M.

One

Number 3282080 Rank Pt.

Surname BILODEAU

Christian Name Joseph Aristide

Units 2. R. Theatre of War England

Date of Service 8-8-18

Remarks _____

Latest Address Bethier, Montmagny. Co
P. 2.

Roll No A Page 4070

DESP. APR 10 1923
REGN. NO. 4765848

H M T CARONIA

SAILING 10 24

Embarked 25, 6, 1919

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

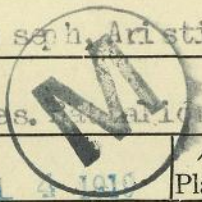
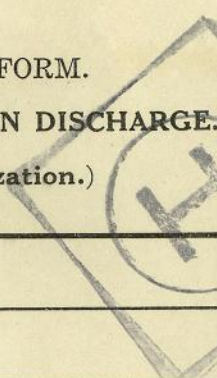
Dispersal Area "E"

Service Group 33

Occupational Group 1

W.S.B. Class

E 5 11-2



1. No. 328 2080

2. Rank. Pte.

3. Name. BILO DEAU, Joseph, Aristide.

4. Unit. 10th Cdn. Res. Bn. Quebec Regt.

5. Date of Discharge JUL 4 1919 Place 1st Dep Bn / 2nd Out Regt Quebec

6. Reason for Discharge DEMOBILIZATION. Cat A
occ Summer 1
N.O.K. Father
Religion R.C.

Demobilization R O 1420 (10) of 12-12-18

7. Authority. Paid for order 185 JUL 4 1919

8. Proposed Residence after Discharge Transportation to
Berthier, Co. Montmagny, P. Q. Canada.

Dead
M-4-29-50967
649-B-50967

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. 39

Aristide Bilodeau
Signature of Soldier.

10. CONFIRMATION.
The discharge of the above named man is hereby confirmed.

Place Quebec

Date JUL 4 1919

Signature [Signature]
Commanding Dispersal Station E.
(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 (C.A.D.C. 5002).
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).
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Service Documents.

Group
 Checked by No. 21
Chris
 Date 10-6-19

Date of Enlistment 1-6-18

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch B

OVERSEAS CONTINGENTS

18142

1 Aug. 1918

92-7132
221

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15 ⁰⁰			
------------------	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 3282080
 Rank Pte Promoted Reverted Discharge
 Soldier's Name Jos. Aristide Bilodeau
 Battalion 1st Dep. Bn. 2nd Quebec Regt - Dft 90
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name
 Address
 Change of Address
 1
 2 JOSEPH BILODEAU,
 BERTHIER,
 CO. MONTMAGNY, P.Q. 15 15.00
 3 % 3282080 PTE JOS. ARISTIDE BILODEAU
 4 FIFTEEN DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1918					
Aug	X 37983		15	15	
SEP	B 40881		15	15	
OCT	B. 45857		15	15	✓
NOV	A. 62062		15	15	✓
DEC	C. 63765		15	15	✓
JAN	D. 73221		15	15	✓
FEB	D. 81108		15	15	✓
MAR	E. 91901		15	15	✓
Apr	E. 5048		15	15	✓
May	B. 7815		15	15	✓
JUN	B. 10627		15	15	✓
July	B. 11770		15	15	
			180	180	

1506-2.57

ENTERED IN
 AUG 15 1918
 BY Mel.
 VOUCHER SECTION

M. F. W. 128
 400M-5-17-1772-30-114
 L. L. 22320-M. & D. 1993.

A/c Closed 31-7-19
 Ret'd per Corona
 Date 2-7-19 M.F.W. 187 11-7-19 M.O. 96801
 Clerk Canfield

AUDITED.

AUTHORITY FOR NEW ACCT. }
 M. R. M.D. 5-B2
 P. Garry 14-8-18
 M. Shipley

AUTHORITY
A.P. NOM. ROLL

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-8-18		EFFECTIVE DATE:-	
AMOUNT:- 15. ⁰⁰		AMOUNT:-	

NAME:- BILODEAU, Jos. Aristide
 NUMBER:- 3282080

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.

Mr. Joseph. Bilodeau, (Father)
Berthier, Co. Montmagny, P.Q.

50th 7.19

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
L.P. 3. from Canada	1-8-18	Plc

UNIT AND TRANSFERS

ORIGINAL UNIT:- No. 90 1-2nd Que Reg
 DATE ACCOUNT FIRST OPENED:- 1-8-18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET Y SFD	UNIT TRANSFERRED TO
			10 th 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
26 Sep	10 Res	£11	19 47				
201	803	£5	21 33				
			43 80				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
L.P. 3. from Canada	1-	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Dis 10 Can 27/19. NR. 10118. Rep. 10 Respon. M 19. 4

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
1918	<u>Led. Postals. 62.63.</u>			<u>L.P.C. Credit Balance 18.83.</u>							
July 31	<u>Eal. from Canada</u>								39 10		
Aug.	<u>P. Pay</u>	34	10	<u>ban. A.P.</u>				15	58 20		
				<u>A.R. 3518 10/9/18 Drumham</u>	4 87				53 33		
								15	18		
Sept	<u>RP</u>	33		<u>ap</u>				15	71 33		
				<u>ARB 4885 " 2-9-18</u>	4 87				66 46		
				<u>" 1542. 10 Res 26-9-18</u>	4 30				59 16		
								15			
Oct	<u>P. f</u>	34	10	<u>Cap.</u>				15	78 26		
				<u>AR 792 " 10-10-18</u>	9 30				70 96		
				<u>" 2009 " 25-10-18</u>	5 11				65 85		
								15			
								15			
Nov.	<u>P. P.</u>	33		<u>C.A.P.</u>				15	83 85		
				<u>8 AR. 2275 " 12-Nov. 10 22</u>					73 63		
Dec.	<u>P. P.</u>	34	10	<u>C.A.P.</u>				15	92 73		
				<u>30 AR. 2435 " 27-11. 29 69</u>							
				<u>48 " 2587 " 5-12. 5 36</u>					57 68		
				<u>66 " 2781 " 19-12. 12 17</u>					45 57		
1919	<u>P. P.</u>	34	10	<u>C.A.P.</u>				15	64 61		

~~Sept~~ 7.19

UNIT AND TRANSFERS

ORIGINAL UNIT - No. 90 1-2nd Que Reg
 DATE ACCOUNT FIRST OPENED:- 1-8-18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
			10 th 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
26.59	10 Res.	£4	19 44				
201	803	£5	211 33				
			43 80				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
I.P.C. from 1st	1-	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Des 10th Jan 1919. NR. 10118. Rep. 10 Respon. M 19. 4

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
1918	<i>Led. Balances</i> 62.63			<i>L.P.C. Credit Balance</i> 18.83							
July 31	<i>Eat. from Canada</i>								39 10		
Aug.	P. Pay	34 10		ban. A/c.				15	58 20		
				A.R. 3518 16/9/18 Drenshaw	4 84				53 33		
		34 10			4 84		15		18		
Sept	RP	33		a/c				15	71 33		
				AR 4885 " 2-9-18	4 84				66 46		
				" 1542. 10 Res 26-9-18	4 30				59 16		
		33			12 17		15				
Oct	P. f	34 10		Cal.				15	98 26		
				AR 1792 " 10-10-18	7 30				90 96		
				" 2009 " 25-10-18	5 11				65 85		
		34 10			12 41		15				
Nov.	P.P.	33		C.A.P.				15	83 85		
				8 AR. 2275 " 12-Nov. 1022					73 63		
Dec.	P.P.	34 10		C.A.P.				15	92 73		
				30 AR. 2435 " 27-11. 2969							
				48 " 2587 " 5-12. 536					57 68		
				66 " 2781 " 19-12. 1217	45 27				45 57		
1919	Jan	34 10		C.A.P.				15	64 61		
		10 120			57 41		145				
Feb	P.P.	30 80		C.A.P.				15	80 41		
Mar	P.P.	34 10		17 AR. 3076 " 10-1. 779							
				51 " 3308. " 21-1-19. 779					64 83		
				87 " 352 " 14-2-19. 730					57 53		
				116 " 3698 " 25-2-19. 779					49 74		
				A. Bay.				15	68 84		
				127 " 3844 " 6-3-19. 14 60					54 24		
				140 " 3922 " 11-3-19. 9 73					44 51		
					55 -		30				
		64 90									

COMPILED BY *W. Morrison*
 CHECKED BY *J. J. Jagan*

1919

NUMBER

3282080

RANK

Private

NAME

BILODEAU

J. A.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
April											
	P.P.	33		A. Pay.					44 51 ✓		
				8 Ar. 4157. 10 Res. 25/3	9 73			15	62 51		
				" 63 1 10/4	9 73				52 78		
May	PP	34	10	Cap					43 05		
				AR 290 10 Res 25/41.9	7 73			15	62 15		
				" 487 - 14/5/19	9 73				54 36		
		67	10		36 98			30	44 63		
June		33		Cap					62 63		
				AR 639 - 10 Res - 26.5 1947							
				✓ 803 ✓ 30.5 2433							
				" 1026 ✓ 19.6 978 1253					18 10 c		
		33			52 23			15			

111.61
66 95
44 63

- O.S. Com. 25.6.19
S.L. 84. P.R.O.

June

67 10
33

Cap

36 98

30

62 63

AR 639 - 10 Res - 26.5 1947
✓ 803 ✓ 30.5 2433
" 1026 - 19.6 975 1353

10/10 c

33

52 53

15

- .O.S. Com. 25.6.19
S.L. 84. P.R.D.

LPL

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

REGT. NO. *328208*

M. OR S.

NEXT OF KIN

RELATIONSHIP

PARTICULARS

EFFECTIVE DATE

AUTHORITY

ORIGINAL UNIT
C.E.F.

ADDRESS

PLACE OF
ATTESTATION

IS SEPARATION ALLOWANCE PAID?

DATE EFFECTIVE

DATE OF
ATTESTATION

TO WHOM PAID

RELATIONSHIP

ASSIGNED PAY \$

ADDRESS

PAYABLE TO

ADDRESS

STOP PAYMENT FORM
ASSIGNED PAY
RENDERED, DATE

DISCHARGED

PLAC

BALANCE FROM
PREVIOUS
ACCOUNT

MONTH	PAY AND F.A.			OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGI-MENTAL CHARGES		CH	
	NO. OF DAYS	RATE	AMOUNT		\$	C.	\$	C.	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.	\$		C.
			\$	C.					NO.	DATE	NO.	DATE	NO.	DATE					
July	10	1.10	11	70	35	116	9 10	9 10											
				W.S.G.	S.A.	TOTAL	WAR SERVICE GRATUITY					WSG	SA						
	127 days min.			280		280													

Address.
Berthier.
Co. Montmagny.
P.D.

5334

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE



THIS IS TO CERTIFY that No. 3282080 (Rank) Pte.

Name (in full) BELO DEAU, Joseph, Aristide. enlisted in
the 1st Depot Bn., 2nd Quebec Regiment.

CANADIAN EXPEDITIONARY FORCE at Quebec, Canada. on the 1st
day of June, 1918. 19

HE served in England with 10th Cdn. Res. Bn. from 20-3-18

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

Part 4 Orders # 185 of 4-7-19
Demobilization R O 1420 (1c) of 12-12-18

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

Age 22 Years
Height 5ft. 4in.
Complexion Medium ~~Brown~~
Eyes Brown
Hair Black

Marks or Scars _____

Aristide Belodeau
Signature of Soldier

J. De Meunier
Issuing Officer
Major
Commanding Dispersal Station E.

Date of Discharge _____



Rank _____
JUL 4 1918
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.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

(7)

5334

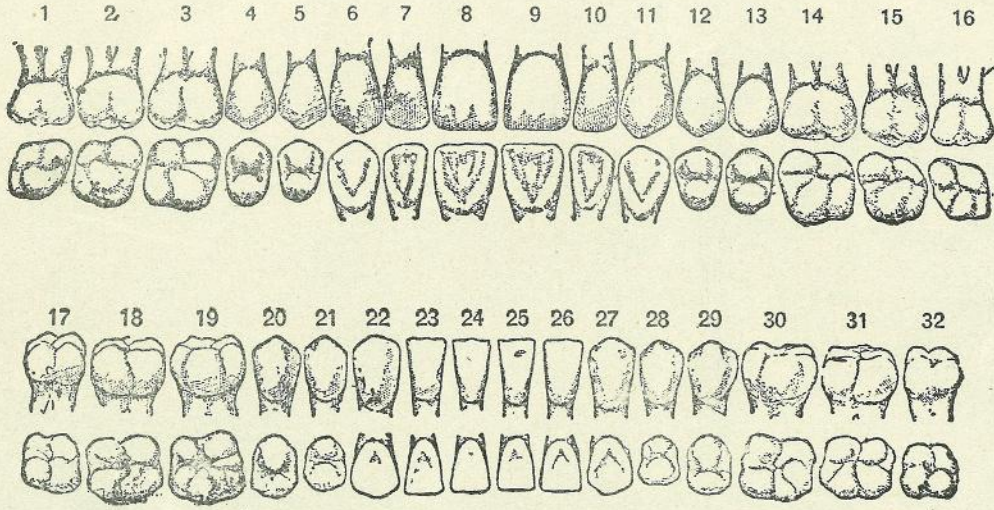
DIRECTIONS TO DENTAL OFFICERS

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BILODEAU J. A

REGIMENT 10th Res RANK pte No. 32802080

Date of Examination in England 12.5.19 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



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 15
2. EXTRACTIONS _____
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. L. 484.

[Signature]
 Capt.
 O I/c Dental Discharge D. D. 5

HAS HE EVER REFUSED DENTAL TREATMENT? no.

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

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

Signature of Dental Officer

[Signature]
 Capt.

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. 3382080 Rank Pte. Surname BILO DEAU,
 (Given name in full)
Joseph, Aristide.
 Unit or Corps 10th Cdn. Res. Bn. Birthplace Berthier, Co. Montmagny, Can.

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

I. GENERAL DESCRIPTION:

Physique Good Weight 132 lbs. Height 5 ft. 4 in. Colour of Eyes Hazel
 Nutrition Good
 Pulse 72 regular
 Condition of arteries Soft
 Vision Rt. 6/6 Left 6/6
 Hearing (conversational voice) Rt. 20 ft.
 Left 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin).
Note outer surface of right shoulder

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.

No disability

5334

EXAMINATIONS

(E)

THIS SECTION FOR USE OVERSEAS—

Examined at New York (Overseas)

Date 12-5-19 Signed J. M. Baldwin 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 Bilodeau J. P.

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

THIS SECTION FOR USE IN CANADA—

Examined at Quebec (Canada)

Date 3-7-19 Signed J. M. Baldwin 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

(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.)

(D) 5334
Reg'l No. 3282080

Rank _____ Name *Bilodeau Joseph Aristide*
 Unit *90th Dfl 1ST BN 2ND QUE* If in perm. Corps, }
 What Unit? }

Place and Date of Enlistment *Quebec P.Q. Can. 1st June 1918* Place of Birth *Berthier P.Q. Can.*

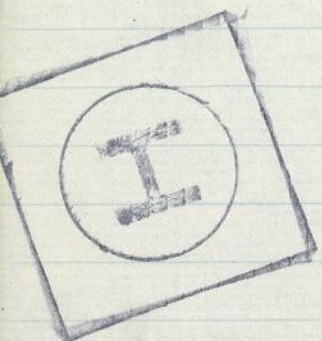
Name and Address, Next-of-Kin *Joseph Bilodeau*
Berthier, Montmagny Co P.Q. Can. Relationship *Father.*

Assigned Pay Monthly \$ _____ Payable to _____
 Relationship _____

Separation Allowance \$ _____ Payable to _____
 Relationship _____

Discharge, Date and Place _____ Reason _____ Character _____

H. W. & V., Ltd.—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.				
					<i>Arrived in England. 8 8 18 S S SOMALI</i>
<i>20 8. 18</i>	<i>10 Re</i>	<i>S.O.S.</i>	<i>Belott</i>	<i>8.8.18</i>	<i>Do #196</i>
<i>24-6-19</i>	<i>"</i>	<i>Post to Canada S.H. 84</i>	<i>Repton</i>	<i>25.6.19. 147</i>	
					<i>SL.84 D.D.4507E/25-6-19</i>

90th dft

5334

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

M. F. W. 54. (A. F. B. 19s

500M.—9-16

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

Casualty Form—Active Service.



Unit, Regiment or Corps. 2nd Depot Bn 2nd Quebec Rgt

Regimental No. 3282080 Rank Private Name Bilodeau Joseph Aristide
C. E. F.

Enlisted (a) 1-6-18 Terms of Service (a) Can Expt. 3000 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. }

Extended Re-engaged Qualification (b) Employed as Farmer.

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				
		<i>Embarked Quebec</i>		<i>21-7-18</i>	<i>L.M.C.</i>
		<i>Arrived London</i>		<i>8.8.18</i>	<i>"Simali"</i>
<i>20-8-18</i>	<i>O.C. 10th Can. Res. Bn.</i>	<i>T.O.S. on transfer from arriving from Canada</i>	<i>B. Sholl</i>	<i>8-8-18</i>	<i>D.O.P. 11 196</i>
<i>18-6-19</i>	<i>O.C. 10th Can. Res. Bn.</i>	<i>Struck Off Strength on attachment to 23rd Co. Bn. on proceeding to Canada</i>	<i>Ripon</i>	<i>18-6-19</i>	<i>137 P. 142</i>
					<i>Cancelled</i>
<i>21/6/19</i>	<i>O.C. 10th Can. Res. Bn.</i>	<i>Struck Off Strength on proceeding to Canada</i>	<i>Ripon</i>	<i>21/6/19</i>	<i>D.O.P. II 147</i>
					<i>Lieut. Asst. Adjutant, 10th Canadian Reserve Battalion.</i>

1) 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.]

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

In his 50 *282080* *5334* **(B)**

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 *Bilodeaux* Christian name *Arvide*
- 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. *199405*
- 3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
- 4. Address (including street and number, if any) *Berthier Montmagny*

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the *12th* day of *June* 191*7* by the undersigned medical board sitting at *Drill Hall Quebec*

- 5. Age as stated *21* Years _____ Months _____
- 6. Apparent age *21* Years _____ Months _____
- 7. Height *5* Feet *4* Inches _____
- 8. Weight *108* Pounds _____
- 9. Chest measurement { Minimum *20* Ins. Maximum *33* Ins. }
- 10. Complexion *Tubercular* { Eyes *Brown* Hair *Black* }
- 11. Physical development *Good* { Good Fair Poor }
- 12. Smallpox marks *Nil*
- 13. Number of vaccination marks { Right arm *Nil* Left arm *Nil* }
- 14. When vaccinated last *Nil*
- 15. Distinctive marks and marks indicating congenital peculiarities or previous disease *Nil*

- 16. Slight defects but not sufficient to cause rejection *Nil*
- 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* *Eyes R.L. D 15 - L.F. D 15 - Hearing R.L. OK L.L. OK.*

Ch. Farrell *President.*

W. H. H. H. H. H. *Member.*

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<i>24-6-18</i>		<i>Hausheim</i> M.O.	<i>11-6-18</i>	<i>+</i>	M.O.
			<i>24-6-18</i>	<i>+</i>	M.O.
			<i>27-8-18</i>	<i>98</i>	<i>Eq. 5</i> M.O.

Joined _____ day of _____ 191*7* at _____

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment		<i>3282080</i>		
Transferred to.....				

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.

Signature of Man *Arvide Bilodeaux*

5334

5th

FIRST

M. D.

Depot Battalion

SECOND QUEBEC

ORIGINAL

Regiment

Regtl. No. 3282080

(A)

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE)

1. Surname..... Bilodeau
2. Christian name..... Joseph Aristide,
3. Present address..... Berthier, Co. Montmagny, P.Q. Can.
4. Military Service Act letter and number..... I99405,
5. Date of birth..... August 1st., 1897,
6. Place of birth..... Berthier, Co. Montmagny, P.Q. Can.
(town, township or county and country)
7. Married, widower or single..... Single,
8. Religion..... Roman Catholic,
9. Trade or calling..... Employed as farmer,
10. Name of next-of-kin..... Joseph Bilodeau,
11. Relationship of next-of-kin..... Father,
12. Address of next-of-kin..... Berthier, Co. Montmagny, P.Q. Can.
13. Whether at present a member of the Active Militia..... No.,
14. Particulars of previous military or naval service, if any..... No.,
15. Medical Examination under Military Service Act:—
(a) Place..... Quebec (b) Date..... I-6-18 (c) Category..... A 2

DECLARATION OF RECRUIT

I, Joseph Aristide Bilodeau,, do solemnly declare that the above particulars refer to me, and are true.

Joseph Aristide Bilodeau (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age..... 21 yrs..... 00 mths.

Height..... 5 ft..... 4 ins.

Chest measurement } fully expanded..... 33 ins.
range of expansion..... 3 ins.

Complexion..... Medium,

Eyes..... Brown,

Hair..... Black,

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

[Signature]
 O. C. 1st DEPOT BATTALION, 2ND QUEBEC REGIMENT
 O. C. FIRST Depot Btln.
SECOND QUEBEC
Regt.

Place..... Quebec Date..... I-6-18

IVL. D. A.

m
Surname *Bilodeau*
Christian names *Joseph Aristide*
Regtl. No. *3282080* Rank *Pte*
Unit *2nd Que. Regt. 1st Depo. Can.*
H. Q. *X*
M. D. No. *5E*
T. O. S. *June 1st 1918*
D. O. Pt. II *151* of *91-5-18*
S. O. S. *19*
Reason
Auth.

Next of kin *Bilodeau, Joseph* Relationship *Father*
Address *Berthier, Co. Montmagny, P.Q.* Also notify:
.....
.....
.....

BORN—Place *Canada, Berthier, P.Q.* Date *Aug. 1st, 1897*
ATTESTED—Place *Quebec, P.Q.* Date *June 1st, 1918*
O/S *21/7/18* $\frac{1327}{2}$ R/C *2-7-19* $\frac{360}{101}$ *He*