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Canada

REGIMENTAL DOCUMENTS

NAME Thivierge, Laurent REGT. NO. 393336 UNIT 10th Coy Les Eboulements H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					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)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)					Category Dem 1
	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)					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)			07039		
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	64 D 6 500 qa					
1	6 D 3					
1	MDWC 7					
4	8102					
						1
						1-5
						1-5

[illegible] SAILING, No. 24
Embarked 25, 6, 19.

5" V

E-5

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

Dispersal Area "E"
Service Group 32
Occupational Group 7
W.S.B. Class

1. No. 3232263

2 Rank. Pte

3. Name. THIVIERGE Laurent

4. Unit. 10th Canadian Reserve Battalion. (2nd Dep. Bn., 1st P.Q.R.) Quebec Regiment.

5 Date of Discharge JUL 4 1919 Place Quebec

6 Reason for Discharge DEMOBILIZATION Cat:- "A"
Demobilization R O 1420 (1c) of 12-12-1[illegible] Occp:- Laborer
N. of K:- Mother
Rel:- R.C.

7. Authority. Part Inst Order # 185 for 4-7-19

8. Proposed Residence after Discharge

67 Morin St. St Sauveur. Quebec 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. ? 39

Laurent Thiviergé
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Quebec

Date JUL 4 1919

[illegible] Major
Commanding Dispersal Station E.

Signature
(O. C. Discharging Unit.)

M.F.B. 218a—300M-11-18—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).
13. Pay Book (Active Militia).
14. War Service Gratuity Form (M.F.W. 2595).
15. Service Documents.

Group 4

Checked by No. 71

Chas

Date 11-6-19

TRIPLICATE

#2 M. D. Second Depot Battalion First Central Ont. Regiment

Regtl. No. 323222 63

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One.)

M.S.A.

1. Surname THIVERGE ~~THIVERGE~~ THIVIERGE
2. Christian name ~~Laurier~~ Laurat
3. Present address 106 Seaton St. Toronto Ont. Can.
4. Military Service Act letter and number (Not registered)
5. Date of birth 27th June, 1893
6. Place of birth (town, township or county and country) City of Quebec
7. Married, widower or single Single
8. Religion Roman Catholic
9. Trade or calling Labourer
10. Name of next-of-kin Mrs. Josephine Theverge
11. Relationship of next-of-kin Mother
12. Address of next-of-kin 67 Morris St. Quebec Canada
13. Whether at present a member of the Active Militia No.
14. Particulars of previous military or naval service, if any Nil.
15. Medical Examination under Military Service Act:—

(a) Place Toronto Ont. (b) Date February 25th (c) Category A2

DECLARATION OF RECRUIT

I, ~~Laurier~~ Laurat Theverge, do solemnly declare that the above particulars refer to me, and are true.

Laurat Thiverge (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	24	yrs	8	mths.	Distinctive marks, and marks indicating congential peculiarities or previous disease.
Height	5	ft	6	ins.	
Chest measurement — fully expanded	35			ins.	
Chest measurement — range of expansion	31			ins.	
Complexion	Dark				
Eyes	Brown				
Hair	Brown				

W. H. Kuslick Maj.

for O. C. Second Depot Btln.

First Central Ont. Regt.

Place Toronto, Ont. Can. Date November 11th, 1917.

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

DUPLICATE

M.S.A.

To be made out in duplicate. H.Q. 54-21-23-53

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.....

(2) Regimental Number 3332 263

(3) Full Name of Soldier Thibvergeé Jeanne Harriet.

(4) Place of Birth Quebec. Ont.

(5) Are you married, or not? Single.

(6) If married, state,
(a) Full name of your wife. Not Applicable.

(b) Present Postal Address " "

(7) Are you a widower? " "

(8) Have you any children? " "

If so, give number of boys and girls " "

Also their names and ages.....

M. F. W. 67.

500M.—9-16.
1772-30-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? Yes

If so, state name and address Mr Amede Thieverge, 67 Morin St Quebec. Ont

(10) Is your Mother alive ? Yes.

If so, state name and address Mrs Josephine Thieverge. 67 Morin St. Quebec Ont.

(11) If your Mother is a widow No

Are you her sole support, or not ? No

(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.

Not Applicable.

(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.

Not Applicable.

(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.

Not Applicable.

15) Are you insured ? ~~Yes~~ No

If so, in what Company ? Not Applicable.

Have you made arrangements for payment of your Insurance premium Not Applicable.

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

G. F. Gabriel Major
for *Officer Commanding.*

Date Feb 25th 1918. 2nd Depot Bn. C.O.R.

Name Thivierge Drafted 11-11-17.

Date of Embarkation for England arr. 19-4-18

Proceeded to France No.

Returned to England

Date returned to Canada 25-6-19

P.R.2855.

Checked 3-3-30

THIVIERGE, LAUREAT (Authy A.P.

Form R 122.
10287—6531—28-7-17.

TLH Rank Name ~~THIVIERGE~~, Laurier, Reg'l No. 3232263

Unit 3rd Dft. 2nd Bn. 1st C.O.R If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Toronto, Ont Novr 11th. 1917 Place of Birth City of Quebe

Name and Address, Next-of-Kin Mrs. Josephine ~~Thiverge~~ THIVIERGE,

67 Morris St. Quebec, Canada. Relationship Mother

Assigned Pay Monthly $ Payable to

Relationship NO AP

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		19-4-18	S/S TUNISIAN
22.4.18	12 Res	T.O.S. from Canada	Pte Witley	21.4.18	A-II 96
30.5.18	" "	S.O.S to 18th Can Res Bramshott	" "	30.5.18	A-II-0-128
31.5.18	10th Res	T.O.S. from 12th Res	" Bramshott	30-5-18	" 127
24-6-19	"	To S/L by Canada S L 84	" Ripon	25-6-19	" 147
		S.L.84 D.D.4507E/25-6-19			

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 2ND. DEPOT BN. 1ST. C.O.R.

Regimental No. 3232263 Rank Pte. Name ~~THIVIERGE Laurier~~ T. Laurence Laurier.
C. E. F.

Enlisted (a) 11-11-17 Terms of Service (a) D. of W. & 6 months Service reckons from (a) 11-11-17

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) 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
		M.S.A.		APR - 5 1918	
APR - 5 1918	2nd D. Bn., S.O.S. on TRANSFER to 1st C.O.R.	Discharged	TORONTO,	Part II D.O. # 95	
		Embarked Canada	Halifax	8/4/18	H.M.T. Tunisian
		Arrived England	Liverpool	20/4/18	
1.5.18	12th Res. Bn. C.O.R.	Transferred S. 12th Res.	Ratln	Witley	21.4.18 Part II 106
30.5.18	12th Res.	S.O.S. to 10th Res. Bn	Witley.	30.5.18	Pt II 128
31.5.18	10th Res Bn	T.O.S. from 12th Can Res. Bn	Bramshott	30.5.18	D.O. Pt II 127

(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				
24/6/19	O.C. 10th Can. Res. Bn.	Struck Off Strength on proceeding to Canada	Ripon	25/6/19	D.O.D. -147

Lieut. Asst. Adjutant.
10th Canadian Reserve Battalion.

JUL 4 1919

DISPERSED WITH EFFECT

PART II ORDER No 185 4-7-19

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

Major
Commanding Dispersal Station E.

MILITARY SERVICE ACT, 1917.

DUPLICATE

M.S.A.

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 Theverge Christian name Laurier

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

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

4. Address (including street and number, if any) 106 Seaton St, Toronto, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 25th day of February 1918, by the undersigned medical board sitting at Toronto Can.

5. Age as stated 24 Years 8 Months. 6. Apparent age 24 Years 8 Months

7. Height 5 Feet 6 Inches. 8. Weight 138 Pounds.

9. Chest measurement { Minimum 35 Ins. / Maximum 31 Ins. } 10. Complexion Dark { Eyes Brown / Hair " }

11. Physical development. Fair { 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

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

17.
(a) Vision R. 30 L. 30
(b) Hearing. R. normal normal

Throat normal. Nose normal throat normal.

E. Rowan Lt. Col. President.

Earl Haig Capt. Member. E R Fraser Capt. Member.

Signature of Man Laurier Theverge

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
4/2/18		H.M. Rogers Capt. M.O.	4/2/18		M.O.
		M.O.			M.O.
		M.O.			M.O.

Joined 11th day of November 1918 at Toronto Ont.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	2nd. Bn.	3232263		
Transferred to 1st. C.O.R.				

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.

M. F. B. 313.
300M.—10-17.
1772-39-439.

Surname Theverge Christian Name Laurier

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				
EXHIBITION CAMP HOSPITAL		18	3	m18	22	3	18	Influenza	5	Recovered; fit for duty	W. L. D. [illegible] Captain, A.M.C.

CASE HISTORY SHEET.

No. 3232263 Rank Pte Name THEVERGE E. Age 24

Unit 2Bn.1stCOR. Completed years of service (Where and how long) ____

Date of admission March 18-18. Date of discharge March 22/19 MAR 22 1918

Diagnosis Influenza. Place of origin Toronto. Ont.

CONDITION ON ADMISSION AND PROGRESS OF CASE

Complaints, Cold, sore throat, headache.
Duration Cold for two weeks.

Findings. T. 99. P. 76. R 20.
Throat inflamed. Chest and heart normal
reflexes normal. (19) quiet fair (20) Improved. T. normal.

FAMILY HISTORY

(Tuberculosis, mental or nervous diseases.)

TREATMENT Cachets Aromatic sponge at bed time 89/ mandurgent T.D

(Especially any specific or special form.)

CONDITION ON DISCHARGE

(and disposal made of case.) Recovered. Fit for duty

Date March 22/18

Medical Officer i/c case.

M. F. B. 313a.
50M.-11-17.
1772—39-439.

12210
6

CLINICAL CHART.

(To be pasted into Case Book opposite Patient's case.)

Corps 2nd Bn. 1st COR. *Hospital Station* Ex. Camp.

No. 3232263 *Rank and Name* Pte. THEVERGE E. *Age* 24 *Service*

Disease Influenza. *Date of Admission* 18-3-18. *Date of Discharge* March 25/18 *Result* *Case Book* *Folio*

Dates of Observation		19	30	31.																															
Days of Disease		Sick.	6																																
Temperature Fahrenheit		TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME	TIME
		a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.	a.m. p.m.
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	·2																																		
	·8																																		
	·6																																		
Pulse per Minute		68	72	72																															
Respirations per Minute		18	20	18																															
Motions																																			

M. F. B. 288.

50m.—7-16.
H. Q. 1772-39-513.

Signature [illegible] *In charge*

$ 32 3 2 2 6 3

Surname Thivierge

Christian names Laurier

Regtl. No. 3 2 3 2 2 6 3 Rank Pte

Unit 1st Can. Ont. Regt. 2nd Bn.

H. Q.

M. D. No. 2

T. O. S. Nov. 11th 1917

D. O. Pt. II 57 of 24-2-18

S. O. S. 19

Reason

Auth

Next of kin Thierirge, Mrs. Josephine Relationship Mother

Address 67 Morris St.,
Quebec P. Q.

Also notify:

BORN—Place Canada, Quebec P. Q. Date June 27th 1893

ATTESTED—Place Toronto Ont. Date Nov. 11th 1917

O/S 9/4/18 1198

R/C 2/7/19 369/132 2. Mi.

W. 22—100M-7-18. 1772-39-839.

12210.

REG. NO. 3232263 NAME (SURNAME FIRST) Messenger E.

RANK Pte CORPS 2 Bn. 1st. C.O.R.

AGE 24 SERVICE

NAME OF HOSPITAL Ex. Camp PLACE Toronto, Ont.

DATE OF ADMISSION 18-3-18.

DISEASE Influenza.

DISCHARGE 22-3-18.

OPERATION

DISCHARGED TO DUTY yes.

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

No. 3232263 RANK Pte. NAME Thivierge L.

T. O. S. 11-11-17 Deb. Paylist. UNIT 2nd Depot Battalion 1st C.O.R.

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
To 7 nov. 11	1918 Oct. 28	m.	M. S. A. Defr. 11-11-17 A. A. F. 10-11-17 to 25-2-18 Forfeits 107 days pay	D. O. 57, 26-2-18. Deb. Paylist.
apr 1	Mar apr 5	✓ m.	Transfd O/S 5-4-18	D. O. 95, 5-4-18.

26

Fmd

Number 3232263 Rank Ste

Surname † HIVIERGE

Christian Name Laureat

Units 12 O R Theatre of War England

Date of Service 19-4-18

P

Remarks

Latest Address 67 Morin St
St. Sauveur
Que

Roll No. A Page 2038

200m.-2-21.M.

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. 217.

No. 3232263 Rank Pte. Surname CHIVIERGE,
(Given name in full) Laurent.

Unit or Corps 19th CANADIAN RESERVE BATTALION Birthplace Quebec P.Q. Canada.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 142 lbs Height 5 ft. 6 in. Colour of Eyes Brown

Nutrition Good

Pulse 72

Condition of arteries Normal

Vision Rt. C Left C

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.

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

[OVER]

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Ripon (Overseas)

Date 17—5—19 Signed A. B. Vuona 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 Gabriel Duvergé

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

THIS SECTION FOR USE IN CANADA—

Examined at QUEBEC, P. Q. (Canada)

Date JUL 3 1919 Signed [signature] 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.)

[OVER]

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3232263 (Rank) Pte

Name (in full) THIVIERGE Laurent enlisted in

the 2nd Depot Bn 1st C.O.R.

CANADIAN EXPEDITIONARY FORCE at Toronto, Ont on the ~~11th~~ 25

day of ~~November~~ February 19 17

HE served in England Quebec Regiment

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

~~AK 2 Order # 185 of 4-7-19~~ 6161 E 20 Demobilization R O 1420 (1c) of 12-12-

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

Age	25yrs 8mths	Marks or Scars	
Height	5feet 6		
Complexion	Dark		
Eyes	Brown		
Hair	Brown		

Laurent Thivierge
Signature of Soldier

J Dachy Le Moine
Issuing Officer

Date of Discharge

Dispersal Station "E" JUL 4 19 Military District No. 5

Major
Commanding Dispersal Station E.
Rank

Date July 4th 19 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.

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