

MAJOR

I.D. number

No. d'identification

ASSELIN

Surname

Nom de famille

OLIVAR

Given names

Prénoms

**NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL**

Oplw

ATIA

**PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL**

Location

Lieu

276

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« CONTENU CONFIDENTIEL »**

276

ORIGINAL

Unit 163rd Battn C.E.F. Rank Major Name Olivar Asselin.

OFFICERS' DECLARATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS.)

1. (a) What is your Surname? Asselin
- (b) What are your Christian Names? Olivar
2. (a) Where were you born? (State place and country) St. Hilarion, P.Q. Canada
- (b) What is your present address? 74 St. James St. Montreal. Canada
3. What is the date of your birth? Nov. 8th, 1874
4. What is (a) the name of your next-of-kin? Alice LeBoutillier-Asselin
- (b) the address of your next-of-kin? 134 East, St. Joseph Blvd. Montreal, Canada
- (c) the relationship of your next-of-kin? Wife.
5. What is your profession or occupation? Journalist.
6. What is your religion? Catholic.
7. Are you willing to be vaccinated or re-vaccinated and inoculated? If necessary.
8. To what Unit of the Active Militia do you belong? Apptd. by Authority of the Militia Council, on the unattached list; to take effect Nov. 26, 1915.
9. State particulars of any former Military Service. 1 year in U.S. Army, Cuba war.
10. Are you willing to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes.

The undersigned hereby declares that the above answers made by him to the above questions are true.

Olivar Asselin, Major (Signature of Officer.)

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider him* fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date Dec 14 1915

Place Montreal

S. A. P. L. L. M.
Medical Officer.

*Insert here "fit" or "unfit."

ORIGINAL



UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
CANADIAN OVERSEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICERS

1. What is the name of the vessel?
2. What is the home port of the vessel?
3. What is the date of your departure?
4. What is the name of your commanding officer?
5. What is the name of your vessel?
6. What is the name of your vessel?
7. What is the name of your vessel?
8. What is the name of your vessel?
9. What is the name of your vessel?
10. What is the name of your vessel?

QUESTIONS TO BE ANSWERED BY CREW MEMBERS

1. What is the name of your vessel?
2. What is the name of your vessel?
3. What is the name of your vessel?
4. What is the name of your vessel?
5. What is the name of your vessel?
6. What is the name of your vessel?
7. What is the name of your vessel?
8. What is the name of your vessel?
9. What is the name of your vessel?
10. What is the name of your vessel?

QUESTIONS TO BE ANSWERED BY ALL PERSONNEL

1. What is the name of your vessel?
2. What is the name of your vessel?
3. What is the name of your vessel?
4. What is the name of your vessel?
5. What is the name of your vessel?
6. What is the name of your vessel?
7. What is the name of your vessel?
8. What is the name of your vessel?
9. What is the name of your vessel?
10. What is the name of your vessel?

CANADIAN EXPEDITIONARY FORCE

L.F. 4-33.

L.B.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank)..... **Major.**

(Name in full)..... **Oliver ASSLIN.**

Enlisted in..... **The 163rd Battalion.**

CANADIAN EXPEDITIONARY FORCE, on the..... ~~XXXXXXXXXXXXXXXXXXXXXXXXXXXX~~

day of..... ~~XXXXXXXXXXXX~~ 191..... AND WAS APPOINTED to COMMISSIONED RANK

in..... **The 163rd Battalion.**

CANADIAN EXPEDITIONARY FORCE on the..... **Fourteenth**..... day

of..... **December**..... 191..... **5.**

He SERVED in CANADA,..... **Bermuda, England and France, with the 163rd Battalion., 10th Reserve Battalion., Attached 22nd Batta. 23rd Reserve Battalion., 87th Battalion, and Quebec Regimental Depot.**

and was STRUCK OFF THE STRENGTH on the..... **Eighth**..... day

of..... **June**..... 191..... **9.** by reason of..... **General Demobilization.**

Dated at Ottawa, this..... **Twenty-ninth**..... day

of..... **April**..... 191..... **XX 1920.**

..... *[Signature]*..... **Major.**
..... **for.**..... Director of Personal Services.

[Handwritten mark]

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.

163rd B'n. (F.C.) C.E.F.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number.....

(3) Full Name of Soldier..... Major Asselin Olivar

(4) Place of Birth..... St. Hilarion, Que. Canada

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

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

(b) Present Postal Address..... 1261 St. Hubert St Montreal Canada

(7) Are you a widower?..... No

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

If so, give number of boys and girls..... Three boys no girls

Also their names and ages.....

Jean	born	Jan 24.	1905
Paul	"	Jul 1	1906
René	"	Jan. 14	1916

(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 Cédulie Tremblay, wife
Esdras Roy, 540 City Hall Ave, Montreal

(11) If your Mother is a widow Remarried

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.

(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? Yes

If so, in what Company? Great West Ass. Co. (of Canada) N.Y. Life Ins. Co.

La Sauvegarde, L'Alliance Nationale Les Artisans
Have you made arrangements for payment of your Insurance premium yes through wife

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

Olivier Asselin, major -
H. Desrosiers Lt Col.
Officer Commanding.

Date 10/10/16

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book. <i>1257</i> Year <i>1918</i>	Regimental No.	Rank. <i>Major</i> Unit. <i>10th Ches.</i>	Surname. <i>Asselin</i>	Christian Name. <i>Bermuda - 6</i> CANAL Service. - <i>6</i> <u>FRANCE.</u> <i>5</i> <u>TOTAL.</u> <i>34</i>
Station and Date. <i>CCOH</i>	Disease <u>ONSET.</u> <i>Int. Der. Knee. R.</i> <i>March 1918. To Hosp. 21.8.18</i> <u>WHERE.</u> <i>England:</i>			
<i>matched ball</i> <i>31/8/18</i>	<u>HISTORY OF DISABILITY.</u> States that knee condition had come on gradually, accentuated by strain at football - in March 1918 Sent to GCH. 21.8.18. X-ray there neg. Clinical Exam. neg. to complaints. To CCOH. 31.8.18.			
<u>PERSONAL AND FAMILY HISTORY.</u> <i>nil:</i>				
<u>PRESENT CONDITION.</u> <i>good.</i> <u>DIGESTIVE SYSTEM.</u> <u>CIRCULATORY SYSTEM.</u> <u>RESPIRATORY SYSTEM.</u> <u>NERVOUS SYSTEM.</u> <u>G.U. SYSTEM.</u>				
<u>LOCAL CONDITION.</u> <i>Exam. of Knee - nothing abnormal found</i> <i>Treatment. Baths:</i> <i>Boarded. A.</i> <i>Harnikell Capt.</i>				
<i>1-9-18</i>				

Station
and Date.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book	Regimental No.	Rank.	Surname.	Christian Name.
		Major	Asselin	J
		Unit.	Asselin	Age.
Year	10	Res.	43	Service. 2 3/2
Station and Date.	Disease			
12 Can Gen Hospital 20-8-18	J. O. Rt. Knee			
	Had trench fever, May 1917. He was ill about two weeks.			
	In March 1918 while playing football he wrenched right knee while running. He remained on the field for about five minutes but did not take any active part in the game.			
	He did not notice any swelling in knee afterwards but found knee weak especially on inside of knee when turning to the left.			
	This condition of weakness continued for 3 or 4 weeks after which time it completely disappeared.			
	About the first of June 1918 while after taking part in a course of P. I. and other strenuous exercises he noticed a similar weakness in knee which became slightly swollen and he noticed a small swelling in popliteal space.			
	This swelling and pain disappeared completely with rest.			
	Movement of knee is perfectly free			

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station
and Date.

and painless but it is weaker
than other knee when flexed.

He was examined by
medical board in London who
recommended that he be sent
into hospital for transfer to Buxton

He is otherwise fit.

J. R. Irvine capt.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station C.C.O.H. Matlock Bath, Derbys.

Date 1-9-18.

- 1. Rank and Name MAJOR, ASSELIN, O.
- 2. Unit 10th Can. Res. Bn. 2nd Que. R. D. Bramshott, Hants.
- 3. Age 43 4. Total Service 34 Mos. War Service { (a) at home 6; Bermuda 6
(b) abroad 5 Mos.
- 5. Address 10th Can. Res. Bn. --- Bramshott, Hants.

STATEMENT OF CASE,

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability INT. DEK. KNEE, RIGHT.
- 7. Date of origin of disability March 1918. To Hosp., 21-8-18.
- 8. Place of origin of disability England.
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

States that knee condition had come on gradually and accentuated
by strain at football in March 1918. Sent to G.C.S.H., 21-8-18.
X Ray there negative. Clinical examination, negative. No Complaints.
To C.C.O.H. 31-8-18.

*I concur in the findings
of the Board of Medical Officers
here recorded.*
W. H. Selman
Major, D.A.D.M.S.
*For D.M.S.
Canadian Contingents.*

OPINION OF THE MEDICAL BOARD.

- NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.
(ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
(iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
(iv.) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? No
(b) in the service? Yes.
- 11. Was it attributable to military service? Yes.
If so, to what specific military conditions is it attributed? G.S. conditions.

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease, are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions? N.A.

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

14. What is the officer's present condition? This Officer has no disability in
knee now. General condition is good. Heart and Lungs normal.
The board consider him fit for General Service.

15. To what degree is the officer disabled at the present time? _____
(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20 under 20, or nil.)

16. Is the disability permanent? No.

17. If not permanent, how soon is re-examination recommended? _____ months.

18. Is it necessary that the officer should be re-examined by the same Board? No.

19. What treatment is the officer receiving, and where, and from whom? Nil.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No.

21. Does the officer require the constant attendance of another person? No.

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

- A.—Fit for general service _____ Yes.
- B.—Fit for service in a garrison or labour unit abroad _____ N.A.
- C.—Fit for home service :—
 - (i) Active duty with troops _____ N.A.
 - (ii) Sedentary employment only _____ N.A.
- D.—For admission to a command depot _____ N.A.
- E.—Requiring indoor hospital treatment :—
 - (i) In an officers' military or auxiliary convalescent hospital _____ N.A.
 - (ii) In an officers' hospital _____ N.A.
- F.—Permanently unfit for any further military service _____ N.A.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? } _____ N.A.

A.C.Rankin, Lt. Col. C.A.M.C. President.

W.J.McAlister, Major, C.A.M.C. } Members.

H.A.Mitchell, Capt. C.A.M.C. }

"C".

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station CCoH Matlock Bath Delys
Date 1-9-18

- 1. Rank and Name MAJOR ASSELIN, O.
- 2. Unit Int. Ser. 10 Can Res. Bn. 2 Que. R.D. Bramshott.
- 3. Age 43 4: Total Service 34 War Service { (a) at home 6 Bermuda
(b) abroad 5
- 5. Address 10th Can. Res. Bn. Bramshott.

STATEMENT OF CASE

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

- 6. Disability Int. Ser. Knee R.
- 7. Date of origin of disability March 1918. To Hosp. 21.8.18.
- 8. Place of origin of disability England.
- 9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

States that knee condition had come on gradually and accentuated by strain at football in March 1918. Sent to GCH. 21.8.18. X-ray there negative. Clinical exam. negative. No complaints: To CCoH. 31.8.18.

I concur in the findings of the Board of Medical Officers here recorded.
[Signature]
Major, B.A.D.M.S.
For D.M.S.
Canadian Contingents.

OPINION OF THE MEDICAL BOARD.

- NOTES.—(i.) The Board will on no account inform the officer of its opinion on any of the following questions.
- (ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.
- (iii.) Expressions such as "may," "might," "probably," should be avoided, if possible.
- (iv.) When there is more than one disability the replies will distinguish between them.

- 10. Was the disability contracted (a) before entering the service? no
(b) in the service? yes
- 11. Was it attributable to military service? yes
If so, to what specific military conditions is it attributed? G.S. conditions

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease, are to be regarded as attributable to military service.]

- 12. If not attributable to, was it aggravated by, military service? n.a.
If so, by what specific military conditions? n.a.

- 13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? no.

14. What is the officer's present condition ?

This officer has no disability in knee joint.
General condition is good. Heart and lungs
normal.
The board consider him fit for G.S.

15. To what degree is the officer disabled at the present time ?

(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20 under 20, or nil.)

16. Is the disability permanent ?

no

17. If not permanent, how soon is re-examination recommended ?

months.

18. Is it necessary that the officer should be re-examined by the same Board ?

no

19. What treatment is the officer receiving, and where, and from whom ?

nil.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature ?

no

21. Does the officer require the constant attendance of another person ?

no.

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

- A.—Fit for general service
- B.—Fit for service in a garrison or labour unit abroad
- C.—Fit for home service :—
 - (i) Active duty with troops
 - (ii) Sedentary employment only
- D.—For admission to a command depot
- E.—Requiring indoor hospital treatment :—
 - (i) In an officers' military or auxiliary convalescent hospital
 - (ii) In an officers' hospital
- F.—Permanently unfit for any further military service

yes

no.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with ?

Acharan to Co Comm President.

W. P. ... Maj.
Kamik ... Capt. } Members.

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. Rank Major Surname Asselin
(Given name in full)
 Unit or Corps 163 Bn att'd 87th Bn Birthplace Plver St. Marion Que

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

1. GENERAL DESCRIPTION: *Estimated*
 Physique Good Weight 134 lbs. Height 5 ft. 6 1/2 in. Colour of Eyes Grey
 Nutrition Good
 Pulse 76 - regular
 Condition of arteries Good
 Vision Rt. 6/12+ Left 6/12+
 Hearing (conversational voice) Rt. 20 ft.
 Left 20 ft.

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

Small scar on left wrist. pre enlistment.

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 yes Any other general condition yes

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.

31-5-17 P.U.O.
21-8-18 I.D Rt Knee. X-ray showed normal joint.
Officer says at times knee still becomes painful
No disability now.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Bramahatt (Overseas)

Date 21-5-19

Signed R. J. Johnston 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 Shirley Asselin, major

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

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date

Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

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

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

C-20

[OVER]

CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters)

ASSELIN, D.

REGIMENT

87 Bn

RANK

MAJOR

No.

Date of Examination in England

21/5/19

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

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



7-F

PRESENT DENTAL REQUIREMENTS

1. FILLINGS

17

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

Resin

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

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

(a) In Canada

(b) In England

(c) In France

Signature of Dental Officer

[Signature]

A. B. E. L. I. N. D.

MAY 19

11/11/11

2-7

11/11/11

11/11/11

11/11/11

(A) Report		(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date	From whom received	Authority of Part II. of Orders			
			Embarked Canada	27.11.16	
7.1.17	165 th Res Bn		SOS to 10 th Res Bn	7.1.17	Px II 7
	10 th Res Bn		TOS	---	" 11
6.5.17	"		On board for Ins. Course 7 sea	6.5.17	" 57
29.5.17	22 nd Bn		Att for instructional purposes	8.8.17	" 38
24.5.17	Hq Bn	Shoreham	SOS 10 th Res to 22 nd Bn (Retained in France)	---	RO 2316
6.6.17	C.R.O.		Adm #14 Staly Hosp. Boulogne	21.5.17	62 693 P.O.
			Discharged	4.6.17	" 697
12.7.17	22 nd Bn		10 days leave	19.6.17	Px II 73
23.7.17	---		leave to be Att. on Return to England	6.7.17	" 75
18.7.17	Hq Bn	Shoreham	On board to London	17.7.17	RO 3194
	2 nd G.R.D.		On board Canal Mission Paris	30.7.17	Px II 148
29.11.17	---		Reported & detailed to Depot Coy	27.11.17	" 259
23.3.18	---		SOS to 10 th Res Bn	22.3.18	" 70
	10 th Res Bn		TOS	---	" 77
25.10.18	---		SOS to 23 rd Res on Proc to 87 th Bn	25.10.18	" 253
18.11.18	87 th Bn		TOS	26.10.18	" 117
16.1.19	---		Proc to England on duty & det to G.R.D.	28.12.18	" 3
3.1.19	G.R.D.		TOS & det to Hq. On Hb for duty	30.12.18	" 2
31.5.19	SOS	O.M.F.C	Proceeding to Canada		

Nothing to be written in this margin.

CERTIFIED TRUE COPY
 from beyond the
[Signature]
H. M. T. S. MAURSTANLAT,
 Capt
EMBARKED 31-5-19

Mr Dewar

For O.C. a wing C.C. B. Ramshott.

DUPLICATE. *copy to replace Original*

SERVICE AND CASUALTY FORM (Part I).

Army Form B.103-I.
Part I.

Army Form B. 103 (II.) to be gummed on here, if required.

CERTIFIED CORRECT

MAY 1919

CANADIAN RECORD OFFICE

Nothing to be written in this margin.

Forms/B. 103/8

HWV(R1460)

3/19

100,000

P2151

W10416

(1)*Substantive rank *Acting rank <i>Major</i> <small>*(To be entered in pencil to facilitate alteration.)</small>	(2) Regiment or Corps <i>165th Bn</i>	(3) Regtl. No.
(4) Surname <i>Asselen</i>		
(5) Christian Names <i>Oliver</i>		
(6) Army Form, number of, Attestation Form or Record of Service paper		
(7) Whether of British or of Alien origin (<i>vide</i> A.C.I. 578 of 1918)		
(8) Date of birth as stated on enlistment		
(9) (a)		

(10) Enlistment (b)	(11) Engagement (c)	Initials and Rank of an Officer.
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)	
(14) Any subsequent variations (if any) of conditions of service	(Authority)	(date)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) Record of Occupation in Civil life (<i>vide</i> Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin	(Place)	Signature of Posting Officer
(18) Demobilizer (f)	(Date)	
(19) Pivotal-man (f)	or (21) Corps trade and rate	
(20) Qualifications (g)		
(22) Extended {		(23) Re-engaged {
(24) Miscellaneous entries:—		

NOTES.—(a) Here enter particulars of any subsequent claim as to actual age after verification by birth certificate (*vide* A.C.I. 470 of 1918). (b) Whether direct or voluntary enlistment, or called up under the Military Service Acts. (c) Whether for specified term of years or for duration of the war. (d) Whether "for Home Service only," or "not to be transferred without the soldier's consent," &c. (e) If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. (f) Required for demobilization purposes. (g) Signaller, Shoeing-smith, &c.

545 Marie-Anne,
Montreal,
Que.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—6-16.
H. Q. 1772-39-819.

Mrs

26-10-17 W.K.

To Whom *Glice de S. Gsselin* By Whom Assigned *Gsselin, C.*

Address ~~1261 St Hubert St~~ Regtl. No.

~~Front Pictorial~~
~~2079~~
~~Que~~
Montreal

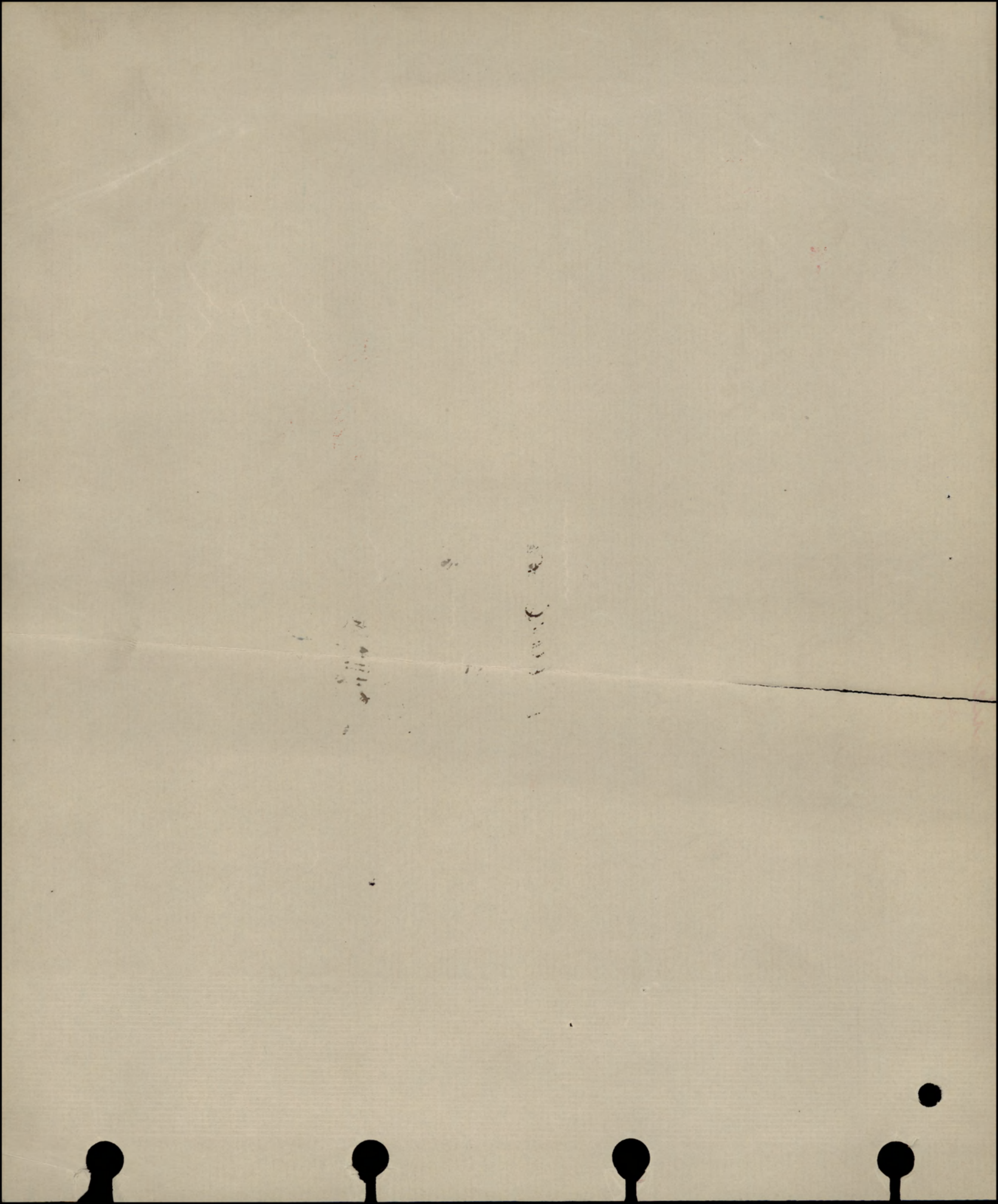
Rank *Major*
Corps *163rd Battr, B. E. F.*

Rate *\$100⁰⁰*
~~NOV 1 1916~~
Dec. 1. 16

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

Sheet No. 2.

Gilice de B. Gosselin

Name of Soldier

*Gosselin, O.
Major*

L. L. Job 4503. - Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>#100⁰⁰</i>
April	1916			<i>NOV 1 - 1916 Dec 1/16</i>
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		729487	100	<i>Please cancel Nov. Cheque for Nov. Only. Capt Garnier's letter 6/16 was 18/16</i>
Dec.		35156	100	
Jan.	1917	<i>036416</i>	<i>100</i>	
Feb.		<i>042548</i>	<i>100</i>	<i>100 R</i>
March		<i>04855</i>	<i>100</i>	<i>100 L</i>
April		<i>2414</i>	<i>100</i>	<i>100 L</i>
May		<i>P6298</i>	<i>100</i>	
June		<i>Q12973</i>	<i>100</i>	<i>100 R</i>
July		<i>Q219890</i>	<i>100</i>	<i>1000 6 front Postals Due 24/17/18 5 \$1,000 545 Marie Anne Montreal, 2000-11-10</i>
Aug.		<i>R26927</i>	<i>100</i>	
Sept.		<i>Q33618</i>	<i>100</i>	
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Mrs

24

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

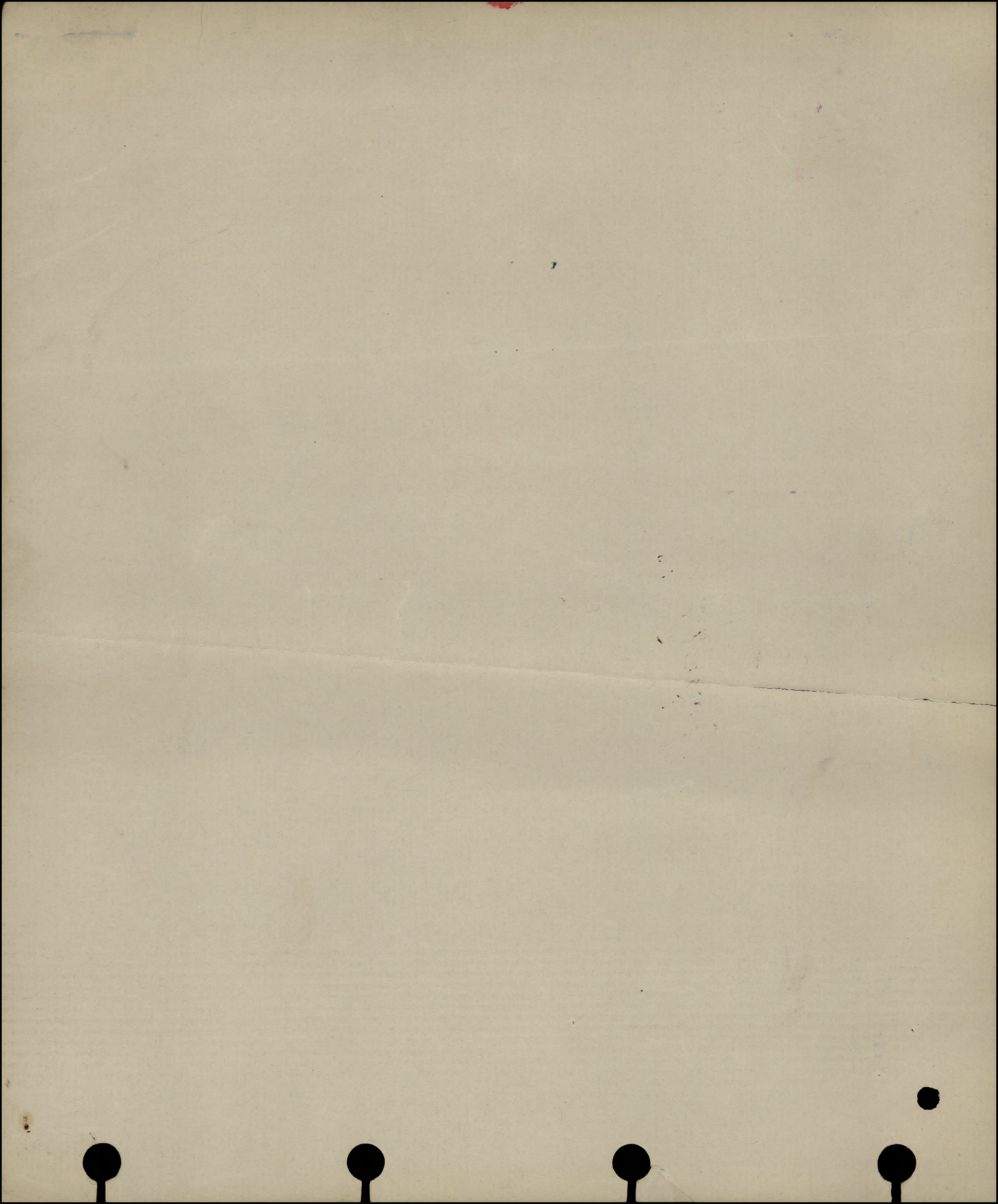
To Whom *Mrs. Alice Leboukhillier Asselin*
 Address *1261 St. Hubert St.
 Montreal*

By Whom Assigned *Asselin, Oliver*
 Regtl. No.
 Rank *Major*
 Corps *Staff 163rd Bn.*

Rate \$ *100⁰⁰* JUN 1 - 1916

a.p. acct closed 8/6/16 G.B. suspended PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-4-16.
 1772-39-818.

Sheet No. 2.

Mr A. Asselin

L. L. Job 310.-Req. 6574.

PAYMENTS.

Name of Soldier

Asselin
163 Bata

C.
Mjr

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>100.⁰⁰ Major</i>
April	1916			<i>Acct closed June '16</i>
May				
June		<i>I 8094</i>	<i>150</i>	
July		<i>9112 25'</i>	<i>100</i>	
Aug.		<i>Cancelled P 11029</i>	<i>100</i>	
Sept.				<i>Overpaid 200.00 refund written for 11/16</i>
Oct.				
Nov.				<i>Classified 22/10/20</i> <i>P&A.C.</i>
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Acct clear
opt records in full
by P.M. 163 Bata
See file 568-0-6
P&A.C. 22-10-20

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

26/11/15 (and 2/12/16) 14-12-15

MILITIA AND DEFENCE

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-818.

20

SEPARATION ALLOWANCE

Name Mrs. Alice Le B. Asselin

Name of Soldier Asselin Oliver

Address ~~St. Joseph Boulevard~~
~~137 E. Montreal,~~

Regtl. No.

~~1261 St. Hubert Street.~~
~~Montreal~~
Quebec

Rank Major 2nd in Command

Corps 163rd Battalion (F.C.)

Relation to Soldier

To what Corps belonging

wife, child or mother

when called out

Wife
~~1261 St. Hubert St~~
~~Montreal Que~~

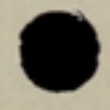
PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				Trois Pistoles
Oct.				Jul
Nov.				
Dec.				545 Marie Anne
Jan.	1915			Montreal
Feb.				23/17
March				203
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916	M20420	78	78
Feb.		729702	50	50
March		230621	80	80 ready date of end.



Handwritten text, possibly a date or initials, oriented vertically.

Handwritten mark or initials.



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Alice Le B. Asselin ^{Wife} **PAYMENTS.**

Name of Soldier

Asselin Oliver

Major

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	J 44	50	50
May		K 2660	50	50
June		C 2110	50	50
July		O 9999	50	50
Aug.		es 10634	50	50
Sept.		J 15121	50	50
Oct.		G 18594	50	50
Nov.		G 21645	50	50
Dec.		H 24714	50	50
Jan.	1917	H 28148	50	50
Feb.		G 31273	50	50
March		G 34416	50	50
April		I 42	50	50
May		I 3206	50	50 → 908
June		N 6229	50	50
July		I 9677	50	50
Aug.		K 13123	50	T
Sept.		J 16164	50	B
Oct.			50	50
Nov.				50 → 1108 ✓
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

1261 St Hubert St Montreal

Trois Pistoles Inc

545 Marie-Anne Montreal

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

Surname ASSELIN /

Christian Names Olivar /

10th Res Bn - 1-3-17
AFB 158
1-4-17

Rank Major /

Name and Address of Next-of-Kin

Wife / 22nd Bn 1-5-17

Promotion

Alice LeBoutillier-Asselin / 7-27

Timing CM 26 Nov 15

154, East St. Joseph Blvd.
545, Marie-Anne Street,
Montreal, Quebec, Canada.

Unit 163rd Battrn /

Place of birth St. Hilarion, Quebec, Canada. /

Married (Yes or No) Yes. /

Appointment

Date of leaving Canada 27.11.16 1495 12.16 Date and Cause of Resignation

M A

RL 9A.48H

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	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
7.1.17.	10 th Res Bn	T.O.S. with effect		7.1.17.	Pt II Ord 1, Pt II Ord 7 (163 rd Bn)
5.2.17.	10 th Res Bn	Proceeded to London on duty.		1.2.17.	Pt II Ord 26.
6-3-17	# u	"On Command having proceeded on instructional course.		6.3-17	Pt II Ord 51. R.O. 1024
29.3.17	22 nd Bn	Attached to 22 nd Bn for instructional purposes		5.3.17	Pt II Ord 38
24.5.17.	Shoreham.	S.O.S. of 20 th Res Bn to 22 nd Bn retained in France.		8.3.17	RO 2316.
		Discharged.		4.6.17	CL 697
6.6.17	CRO	Adm. No 14. Stat Hosts. Boulogne.		31.5.17	CL 693 P.U.O. Severe
12.7.17	22 nd Bn	Granted 10 days leave of absence.		19.6.17	Pt II Ord 73.
18.7.17.	Shoreham.	"On Command to London.		17.7.17.	RO 3194.
23-7-17	22 nd Bn	Ceases to be att. 22 nd Bn on returning to England		6.7.17	RO 4 Pt II Ord 75, RO 3411 S'ham.
3.8.17	Shoreham	Detached from 2 nd Q.R.D. on duty to ^{Paris} Gen. Med. Mission		20.7.17	R.O. 3463, Pt II Ord 148. 2 nd Q.R.D.
29.11.17	2 nd Q.R.D.	Having reported is detailed to Depot Coy.		27.11.17	Pt II Ord 259
23.3.18	do	S.O.S. on Posting to 10 th Res Bn.		22.3.18	Pt II Ord 77, Pt II Ord 77, Pt II Ord 77
27.5.18	10 th Res Bn	S.O.S. on Trans to 20 th Res Bn		28.5.18	Pt II Ord 77, by Pt II Ord 80

A.F.B. 1066.

21 MAR. 1917

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				
22. 8. 18	AMS.	Adm No 12 Can Gen Hosp. Bramshott.		20. 8. 18	CH1066. I.D. Knee R.
24. 8. 18	AMS	Adm Granville Can. Spec. Hosp. Buxton		22. 8. 18	CH1068. - 20 -
		Discharged		5. 9. 18	CH1086
11. 9. 18	do.	Adms. Can. Conv. Officers Hosp. Mallock Bath		1. 9. 18	CH1083. - 20 -
25. 10. 18	10 Res Bn	S.O.S. to 23 Res Bn on Proc. of Seas as Reinf. to 87 th Bn		25. 10. 18	PT II of 253 amended by PT II of 254 3 000T. 1918
19. 11. 18.	87 th Bn	T.O.S. on Arr as Reinf. + carried Supernumerary to Entomb.		26. 10. 18	PT II of 117. A.F.B. 103
16. 1. 19	do.	Proc. to England for duty + detached to Que R.D.		28. 12. 18	PT II of 3.
3. 1. 19	Que R.D.	T.O.S. on Posting from 87 th Bn + deta to HQ of FC for Spec. Duty with Prime Minister		30. 12. 18	PT II of 2.
27. 5. 19	AWing	T.O.S. of this Unit pending RTC		6. 5. 19	PT II 27
9. 6. 19	..	S.O.S. on return to Canada		31. 5. 19	PT II 31
16. 6. 19	BRTD	S.O.S. on transfer to CE 4 in Canada		31. 5. 19	PT II 138
		Sailed to Canada.		31. 5. 19	SH 68
5. 11. 20	W.D.	Awardee Legion d'Honneur (Chevalier) by the President of the French Republic. Postal Address			L932113
		87. Bath. Bramshott			18988
		(personal letter 5/5/19)			
		S.O.S. C.E.F. 8 Jan 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. *87. B.*

Regimental No. Rank *Major* Name *Asselin* *O*
C. E. F.

Enlisted (a) Terms of Service (a) Service reckons from (a)

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

Extended. Re-engaged. Qualification (b)

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>156/19</i>	M.H.Q. Ottawa	T.O.S. C.E.F. in Canada on General Demobilization	M.D. No. <i>4</i>	<i>30</i> <i>8/19</i>	C.E.F. R.O. No. <i>2007-19</i>
<i>13-6-19</i>	M.H.Q. Ottawa	S.O.S. C.E.F. in Canada on General Demobilization	M.D. No. <i>4</i>	<i>8-6-19</i>	C.E.F. R.O. No. <i>2018-19</i>

W. J. Hunter, Capt
 for Director Personal Services

(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
 (b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

ORIGINAL

Original

MEDICAL HISTORY SHEET.

Surname Asselin Christian Name Oliver

Examined on 14 day of Dec 1915 at Montreal Birthplace City or Town St Hilairon County P. 2

Approved by [Signature] Rank Lt Col M.O.

Apparent age 41 Trade or occupation Journalist Height 5 Feet 6 3/4 Inches Weight 130 Lbs. Chest measurement Minimum 32 inches Maximum expansion 36 1/2 inches Physical development good Small-Pox Marks none

Table with columns: Date, Fit or Unfit, EXAMINED FOR RE-ENGAGEMENT, M.O. Entry: 30 JUL 1917

Vaccination Marks Arm Right Left Number 0 2

Table with columns: Date, Result, VACCINATIONS, M.O. Entry: 16/10 not-needed again J.R. Dishow

When Vaccinated last 1900 (a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Table with columns: Date, Result, ANTI-TYPHOID INOCULATIONS, ETC., M.O. Entry: 20 July 1918 J.R. Allen

Enlisted on 14 day of December 1915 at Montreal Canada

Table with columns: CORPS, REG'TL NUMBER, HABITS, DATE. Entry: 16th Batt CEF, Montreal

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Table with columns: STATION, DATE, DISEASE, RESULT. Entry: COTT Montreal Bath 1-9-18 Int. Der. Knee R. A. Hamrick, Capt.

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.

CANADIAN

J.M.C.

No 12
Christian Name
Albin

Surname
Asselin

STATION	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
14 Sty. Hosp. B8logne.		31	5	17	4	6	17	P.U.O.		Dis. to duty.	693-697 PC.
CAN. GENERAL HOSPITAL		19	AUG	1918	20	8	18	ED. R. KERR	2 days	Sent for transfer to Granville Buxton by sub.	<i>[Signature]</i> MAJOR, REGISTRAR No. 12 CAN. GENERAL HOSPITAL.
Granville Can. Spec. Hosp Buxton Derbyshire*		21	8	18	31	8	18	ED. R. KERR	11	X-Ray shows unusual joint. Ho. washed 4 to 10 mins daily with ^{no} effect, generally healthy, good transp. heart & bath fit.	Cor. Chemist Capt C.W.C. <i>[Signature]</i> Hammond Capt
CCO & matlock bath		31	8	18	5	9	18	do	5		

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

26-11-15 (from 11-2-16)

Separation and Assigned Pay Branch

A

4552

Dec 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

\$50.		30	
-------	--	----	--

RATE OF ASSIGNMENT

100			
-----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. _____
 Rank *Major* Promoted _____ Reverted _____ Discharge _____
 Soldier's Name *O. Asselin*
 Battalion *163rd Batten C.E.F.*
 Beneficiary *Mrs. Alice de B. Asselin*
 Relationship *Wife* *M.F. 2554 8/18*
 Address _____ *Rec OK 22-1148*

PARTICULARS OF ASSIGNMENT

Name *Mrs Alice de B. Asselin*
 Address ~~*261 St. Hubert St*~~
 Change of Address *Montreal*
 1 ~~*Trait Pistolet Juv.*~~
 2 ~~*545 Marie-Anne, Montreal*~~
 3 ~~*5745 Marie Anne, Montreal*~~
~~*St Geo. de Malabar, Co. Gaspe P.Z.*~~
2. 7. 18. (for 2 mos)

Date	Cheque No.	Amount S/A	Amount A/P	Total
Sept. 30-17		1,108	1,000	\$2,108 00
Oct B	51618	50	100	150
Nov	D 52786	50	100	150
Dec	61002 C	50	100	150
Jan	065448	50	100	150
Feb	94302 B	50	100	150
Mar	90641 A	50	100	150
Apr	7367 I	50	100	150
May	8725 C	50	100	150
June	17123 B	50	100	150
July	30127 M	50	100	150
Aug	32690 A	50	100	150
Sept	39489 A	50	100	150
OCT	46122 A	50	100	150
NOV	54208 A	50	100	150
Dec	65298 B	50	100	150
Jan	73344 B	50	100	150
Feb	80159 A	50	100	150
Mar	85713 D	50	100	150
APR	2932	50	100	150
MAY	7630	50	100	150
JUN	10280	50	100	150
		2158	2100	

568-0-6 REMARKS

AUDITED.

Acc Closed 30-6-19
Ret'd per... Mauritania
Date... 6-6-19 M.F.W. 187 mp. 4
Clerk... P. McKay M.R. 120986



M. F. W. 128
 400M-617-1772-38-1141
 L. L. 22520-M. & D. 7583.

Surname. Christian Name.
ASSELIN O.
 Rank. Unit.
 Major 22nd. Batt. 10th R. Bn.
 Date of admission.

Hospital No. 14 Sta. Hosp. Boulogne 31-5-17
 12 Canadian General Hosp., Bramshott. 20-8-18.
 Granville Red Can. Spec. Hospital Buxton. 22-8-18.
 Canadian Conval. Offs. Hosp. Matlock. 1-9-18
 Hosp.
 Hosp.
 Hosp.

Diagnosis. P.U.O. sev. *l*
 I.D. Rt. Knee. *rw.*
 Later diagnosis.

Disposition. Date.
 Dis. to Duty: -4-6-17.
 Discharged: -5-9-18.

C.L. 6-6-17..... 693 Remarks.
 C.L. 11-6-17..... 697-2.
 C.L. 22-8-18. 1066-2.
 C.L. 24-8-18. 1068-3.
 C.L. 11-9-18 1083-6.
 C.L. 14-9-18 1086-7.
 C.L.

A.M.D. 2 DEPT.
 Bch. of D.G.M.S. O.M.F.C. London.

Surname

Christian Name

Reg. No.

ASSELIN

O.

DMS. 4-A-296.

Rank

Unit

Major

10th, Res. Bn.

MEDICAL BOARD held at

Date

Serial No.

(1) Buxton Area

1-9-18.

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

I.D. rt. Knee.

Disposition Recommended

(1) Fit for General service.

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at

Date.....

Disposition

Remarks

G.C.S.H.

Hospital.

Ward Palace 54 No. of Bed _____ Date _____

Regl. No.	Rank and Name.	Corps.	Part to be X-Rayed.
	Major Casselin	10 th Res.	T 61

SHORT HISTORY OF CASE.

(To be completed by M.O. i/c case.)

Injury Rt. knee -
 injured knee
 playing football
 base 1917 - no
 locking - no
 fracture - knee
 wear since - 8x10⁻²
 X Ray condition joint
 structures

REPORT ON RESULT OF X-RAY EXAMINATION.

(To be completed by Radiographer.)

age 43

No. of Plate 6794

No visible bone lesion - knee joint
right

Signature of M.O. C. H. Church

Date 26-8-18

Signature of Radiographer W. H. Pagan

Date Major C. H. Church

Docs

18 ²/₂₁

CHANGE OF ADDRESS

No.	Rank	Surname	Christian Names
	Major	Asselin	Oliver.

Address 90, St James St.
Montreal
P.Q.

auth letter d 15/2/21

Cardok BR 1-3-21

MA Section Awards.

M

NAME

*Asselin**O'Brien*

REGT'L NO.

H. Q. FILE NO. 649.

RANK AND CORPS

*Maj.**22nd Bn.*

FOLLOWS

NO.

CABLE

NATURE OF CASUALTY

FOLLOWS

NO.

DATE

*WSM 79. 25-10-18**2.2**accord. to records with unit no rec. of**v. 1.**cas. Eng. have been made of**WSM 83. 29-10-18**OC. rep. with unit, in good health, no**(Rec. 41-18)**truth in rep. wounded*

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
693 (2)	#14 Stat. Boulogne	31-5-17	P. W. O. - Severe 27-6-17
697 (2)	Disch. to duty	4-6-17	P. W. O. 4-7-17
1066.	12 Can Gen: Brama	20 8. 18.	I. D. Knee. R
1068.	Grand Can spec: Buxton	22 8. 18	" " " "
1083.	Can. Com. Officers: Mallock Path	1 9. 18	" " " "
1086.	Disc	5-9-18	" " " "

Name

ASSELIN
Oliver

Rank Major

Reg. No.

JA

Unit

~~22nd Bn.~~

10th Rec Bn

Next of Kin

Canada

Date

Movement

Place

Casualty

List
No.Notified
N/K O.

W.O. List

1917

31-5

14 Stat. Hosp. Blgne

P.U.O. Sev.

693

4.6.17

Disch. to Duty

697.

20.8.18

12 Ban Gen Hospital 24543

I.D.R. Kneel 1066

C

22.8

12 Ban Gen Hospital 24663

I.D.R. Kneel 1068

1-9

C. Conv. Hos. Matlock Bath

7001 I.D. free R

1083

5-9-18

Discharged 7003

1086

Branville Gen. Spl. Hospital,

HOSPITAL.



A. & D. No. 1761 PL. OF ACTION.....

RANK Maj REG. No. _____ UNIT 10th Reserve Can SICK OR WOUNDED

NAME Asselin O AGE 43 RELIGION R.C.

PLACE IN HOSPITAL P. A

DIAGNOSIS J.D. Right Knee

ADMITTED 21. 8. 18 FROM 12 C. G. Bramshot

DISCHARGED 31/8/18 TO.....

TRANSFERRED c. c. o. H. Gyallock Baths

SERVICE AT HOME 27/12 IN FIELD.....

RESULTS

11 days

(See Document Card for M.H. Sheet and other Documents.)

No 12 CAN. GENERAL HOSPITAL

HOSPITAL.

**A. & D.
CARD**

AT.....

A. & D. No. 271 PL. OF ACTION.....RANK Major REG. No. UNIT 10¹⁵ Res: SICK OR WOUNDEDNAME Asselin G. AGE 43 RELIGION RcPLACE IN HOSPITAL 20DIAGNOSIS DD returnedADMITTED 19 AUG 1918 FROM.....

DISCHARGED..... TO.....

TRANSFERRED 20-8-18 Granville BuxtonSERVICE AT HOME 27/12 IN FIELD.....

RESULTS.....

(See Document Card for M.H. Sheet and other Documents.)

SURNAME. *Asselin*

CHRISTIAN NAMES *Oliver*

REGL. No. RANK *Major*

UNIT *163rd*

FORMER CORPS *U. S. Army (1 yr.)*

A-4
CARD NO. **4511**
Sol 8-6-19 Demet
FOLL. *Qs 168 & 17-6-19, 118*

Bn.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *Asselin Mrs. Alicia Bouthier*

RELATIONSHIP TO SOLDIER *wife*

ADDR *545 Marie Anne,
Montreal, P.Q.*

Seaf. 21-9-18.

COUNTRY OF BIRTH *Canada St. Kilian* DATE *Nov. 8th - 1874*

PLACE OF ATTESTATION *Montreal P.Q.* DATE *Dec. 14, 1915*

Sailed H. M. S. Metayama 27-11-16 *638 B* *1* *P/E 6-6-19*

MARRIED

yes

SINGLE

WIDOWER

TRADE OR CALLING

Journalist

RELIGION

Catholic

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

Montreal, P. Q.

DATE

Dec. 14th - 1915

Present address

74 St. James St., Montreal, P. Q.

No

RANK

Major

NAME

Asselin Phoebe

T. O. S.

UNIT

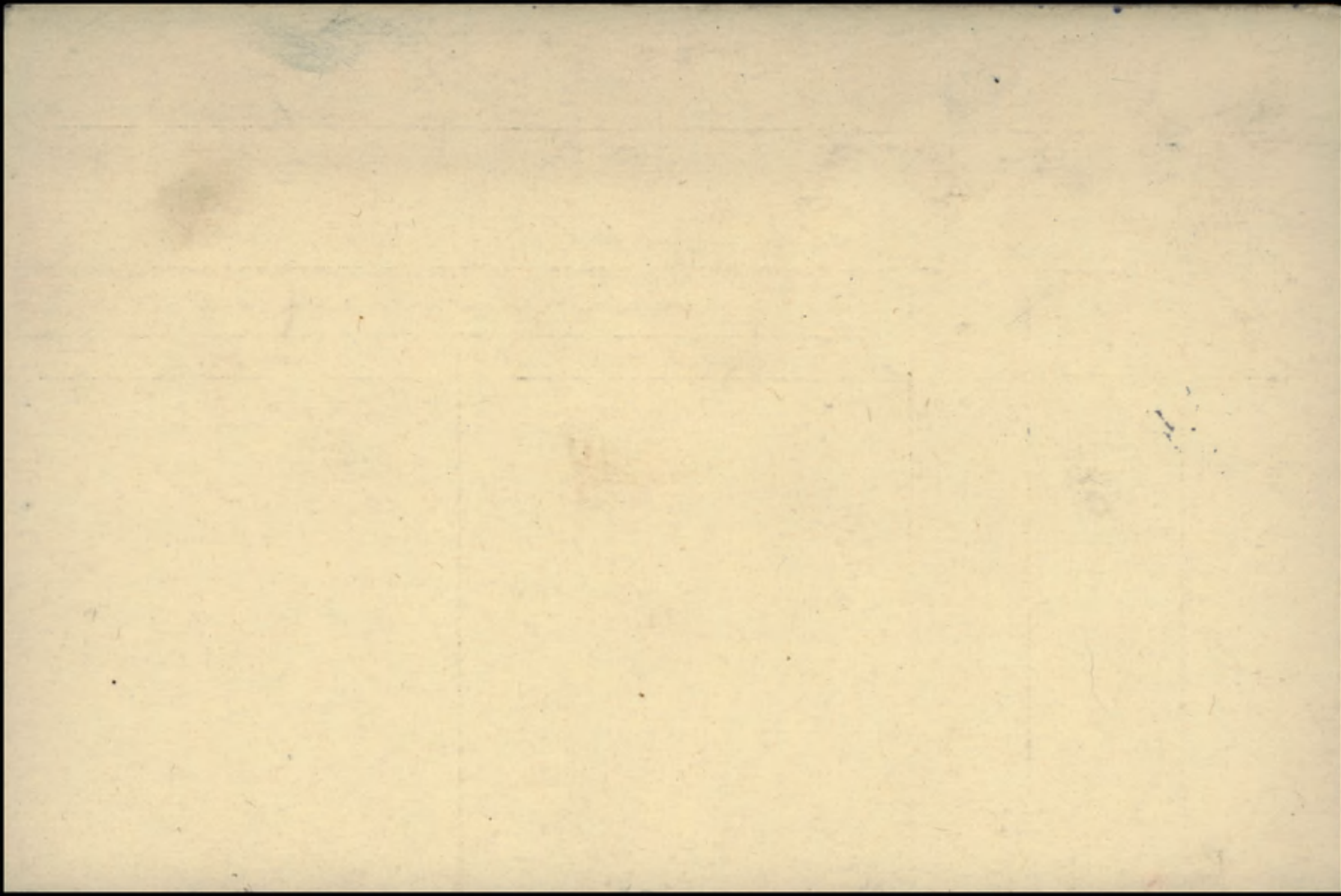
163rd Battalion, C. E. F.

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Nov 26	Dec 31	✓		
Jan 1	Jan 31	✓		
Feb 1	Feb 29	✓		
Mar 1	Mar 31	✓		
Apr.		✓		
May		✓		
June		✓		
July		✓		
Aug.		✓		
Sept.		✓		
Oct.		✓		
Nov		✓		
Dec 1	Dec 15	✓		

UNIT SAILED

NOV 27 1916



Number..... Rank **MAJOR**.....

Surname **ASSELIN**.....

Christian Names **OLIVAR**.....

Unit..... Theatre of War **FRANCE**

Dates of Service **27. 11. 16** .. **6. 3. 17** .. **31. 5. 19**

Remarks.....

Latest Address *withd. 15-2-21 90 St James St*
~~545 *Home Avenue*~~.....
Montreal, Que

Roll No. *B. Page 1847*

B.
X

9 16572 - Kewy
94 6917 Kewy

APR 12 1921

SEP 3 1921

PROCEEDINGS OF AN OFFICER OR NURSING SISTER
STRUCK OFF STRENGTH
OF THE
CANADIAN EXPEDITIONARY FORCE

BR 2070

1. RANK

Major

2. NAME

Asselin Oliver

3. UNIT

87th Batt.

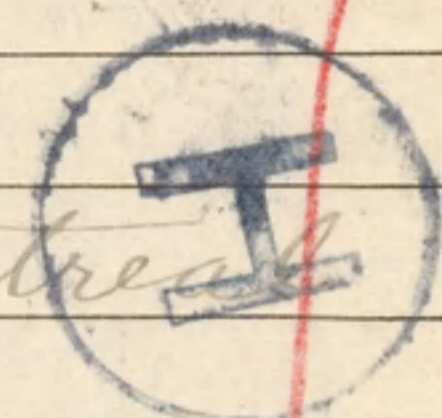
4. DATE STRUCK OFF STRENGTH

PLACE

Montreal

5. REASON

Demob. 8-6-19 RO 2018-19



6. AUTHORITY

7. PROPOSED RESIDENCE

*545 Marie Anne St.
Montreal, P. Que.*

This folder should contain the following documents:

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

1. Triplicate Declaration Paper (M.F.W. 51) or Triplicate Attestation Paper (M.F.W. 23).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Medical Boards (A.F.A. 179 or M.F.B. 227).
5. Dental Certificate (M.F.B. 465).
6. Proceedings on Striking Off Strength (M.F.W. 2591).
7. Last Pay Certificate (P. 41).
8. War Service Gratuity Form (M.F.W. 2595).
9. Sundry Documents.

*Declassified 18-4-37
602-1-8*

*Montreal
31/5/19*

Group _____
Checked by No. *10*
Pa
Date *30-5-19*

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount.

* Separation Allowance issued. Yes or No.....

NAME OF

RATE OF P. AND A.

DATE

AUTHORITY

2 Q.R.D.

Pay 4.
F.A. 1.
Messing 1.

Major

7^{12/16}

Fr. Can.
A.O. 1142 C.T.D.
9/12/18

Name
Initials
Bank

Asselin
Oliver
of Montreal

100⁰⁰ - Add. Outf. d. 1⁹/₁₈

✓

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918								
Apr 18	Apr Pay R. A. P. Can.		180		100	50	✓	
24	Bank 1173			30				
May 13	May Pay R. Sub 1-23 ³ / ₁₈ : 26 ¹ -28 ³ / ₁₈ A. P. Can	1955	186		100		£ 1-6-1- 6 ³⁶	
24	Bank 2551			86				
June 12	June Pay R. A. P. Can.		180		100			
22	Bank 4047			80				
July 12	A. P. Can July Pay R.		186		100			
24	Bank 5568			86				
Aug 9	Aug Pay R. A. P. Can		186		100			
24	Bank 7235			86				
Sep 10	A. P. Can. Sep. Pay R.		180		100			
21	Draw a/cce. 12 ⁵ / ₁₈	5947					16/-	3 ⁵⁹
24	Bank 9103			80				
24	Draw a/cce. 5 ⁹ / ₁₈	7591					8/6	207
Oct 12	A. P. Can. Oct Pay R.		186		100			
21	Bank 10349			86				
31	Add. Outf. a/cce. 1-8-18.	Bank 10930	100		100			

ASSIGNED PAY.

UNIT.

RANK

RANK.

NAME.

NAME OF

RATE OF P. AND A.

DATE

AUTHORITY

Beneficiary

Address

Amount.

\$ 100. *can*

Separation Allowance issued. Yes or No.....

2 *Q.R.D.*

Pay 4
F.A. 1
Messing 1.

Major

Name
Initials
Bank

*Asselin
Oliver
of Mont.*

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918								
Nov 22	<i>a.P. can</i>				100			
	<i>Pay R</i>		180					
	<i>Bank</i>	12542		80				
Dec 11	<i>Pay R.</i>		186					
	<i>a.P. can</i>				100			
	<i>Bank</i>	13730		86				
1919	<i>Adv. P. & A.</i>	14433		86				
Jan 6	<i>Trav allow 26-30/18</i>	11434					3-9-0 1679	
	<i>a.P. can</i>				100			
Feb 21	<i>Pay R.</i>		186					
Feb 19	<i>Pay R.</i>		168					
	<i>a.P. can.</i>				100			
	<i>Bank</i>	17062		68				
Mich 12	<i>Pay R.</i>		186					
	<i>a.P. can.</i>				100			
	<i>Bank</i>	14683		86				
25	<i>Trav allow 24/18 - 29/18</i>	14440					24-5-6 20 ⁸⁰	
Apr 12	<i>Pay (R)</i>		180					
	<i>a.P. can</i>				100			
	<i>Bank</i>	1101		80				
May 12	<i>Adv. P. & A 6 30/19</i>	1972		166				
	<i>Pay May (R)</i>		186					
	<i>a.P. can.</i>				100			
June 2	<i>Trav allow 4-6/19</i>	2812						
	<i>a.P. can.</i>				100			
	<i>Pay R.</i>		180					

*Retat can
2 P. & A to 30/19. B. Holt
L. E. P. Hedges
2-4-0 108
Trav allow for 6-12.
443/19 6405.*

ASSIGNED PAY.

UNIT.

RANK.

NAME.

9-A-330

Beneficiary

Address

Canada

163rd Batt

NAME OF DATE AUTHORITY

Major

Mess DATE

AUTHORITY

4-12-16 From Canada
R.O.#1142 C.S.D.
(Branch) of 9-12-16

Name

Aselin

Initials

U. L. W.

Bank

of Montreal

Amount. \$ 100⁰⁰ fr. 1-12-16

Separation Allowance issued. Yes or No.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case	INITIALS
1916								
	Nov 16-31 ¹² / Dec 7-31 ¹² / 16 G. Bal 75 ⁰⁰ A. 100 ⁰⁰ Bank			80		80		
1917	Jan 19 A.P. Can. (2 mths)				200			
	2 Cr. Bal. Can. V 157		75					
	Pa. d. 16 ¹² / 16. Mess fr 1 ¹² / 16 to 31 ¹² / 16. V 16625		105					
	Pay Jan (R)		186					
27	Bank	19288		86				
Feb. 20	Pay Feb. (R)		168					
21	A.P. Can.				100			
24	Bank	21931		68				
Nov 13	Payllch		186					
12	A. Plan				100			
28	Bank	24818		86				

1916-17

✓

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address *Canada*

Amount. \$ *100*

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY

163 Bⁿ

DATE AUTHORITY

Major

7/27/16
Rank Canada
NO 1117 CFS.
(Branch) 7/27/16

Name *Asselin*
Initials *Chier*
Bank *Montreal*

To receive Subs allowance @ \$10⁰⁰ pd. whilst with Canadian military mission to Paris (in place of Messing)

DATE

PARTICULARS

1917-18

CK. NO.

CR.

DR.

ASSIGNED PAY PAID IN CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialled by P.M. in every case.

INITIALS

<i>9/17</i>	<i>at. lean</i>									
<i>16</i>	<i>at. lean</i>									
<i>17</i>	<i>Bank</i>	<i>3009</i>			<i>80</i>					
<i>May 16</i>	<i>at. lean</i>						<i>180</i>			
<i>19</i>	<i>Paym (R)</i>				<i>186</i>					
<i>23</i>	<i>Bank</i>	<i>5932</i>			<i>86</i>					
<i>June 12</i>	<i>at. lean</i>						<i>180</i>			
<i>21</i>	<i>June Pay (R)</i>				<i>180</i>					
	<i>Bank</i>	<i>7976</i>			<i>80</i>					
<i>July 16</i>	<i>July Pay (R)</i>				<i>186</i>					
<i>24</i>	<i>at. lean</i>						<i>180</i>			
	<i>Bank</i>	<i>17984</i>			<i>86</i>					
<i>Aug 8</i>	<i>Trav. Allee 8-10⁷/₁₇</i>	<i>2837</i>							<i>\$1.13.6</i>	<i>8¹⁵</i>
<i>"</i>	<i>do 5-7¹/₁₇ + 17⁷/₁₇</i>	<i>2841</i>							<i>\$1.6.0</i>	<i>6³²</i>
<i>Aug 13</i>	<i>at. lean</i>						<i>180</i>			
<i>20</i>	<i>August Pay (R)</i>				<i>186</i>					
<i>24</i>	<i>Bank</i>	<i>17070</i>			<i>86</i>					
<i>23</i>	<i>Rations 7-30⁷/₁₇</i>	<i>3825</i>							<i>\$1.12.0</i>	
<i>27</i>	<i>Trav. Allee 29⁷/₁₇ - 2⁸/₁₇</i>	<i>4018</i>							<i>\$3.0.0</i>	<i>7⁶⁰</i>
<i>Sept 13</i>	<i>at. lean</i>						<i>100</i>			
<i>19</i>	<i>Sept. Pay (R)</i>				<i>180</i>					
<i>18</i>	<i>Trav. Allee 6-7⁷/₁₇</i>	<i>5338</i>							<i>18/6</i>	<i>4⁵⁰</i>
<i>22</i>	<i>Bank</i>	<i>21610</i>			<i>80</i>					
<i>Oct 12</i>	<i>at. lean</i>						<i>100</i>			
<i>18</i>	<i>Oct. Pay R.</i>				<i>186</i>					
<i>23</i>	<i>Bank</i>	<i>26282</i>			<i>86</i>					<i>Ed. form.</i>

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$ 100.00

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY

DATE AUTHORITY

167 Pu
Pay 4.00
F. d 1.00
M. 1.00

Major

Name Asselin
Initials Oliver
Bank of M.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1917								
Nov 16	Nov. Pay R. A. P. ban.		180		100			
22		Bank 30553		80				
Dec 10	A. P. ban Dec Pay R.		186		100			
14		Bank 32995		86				
15	Trav. Allow 18-26 '17	10488					5.14-6 #27 86	
Jan 8	A. P. ban Jan Pay R.		186		100			
23		Bank 39354		86				
Feb 11	A. P. ban Feb. Pay R.		168		100			
21		Bank 40953		68				
20	Travallow 25-26 '18	14133					18/6 #4 50	
Mar 11	Mar Pay R. A. P. ban		186		100			
13	Off. Mess. det. 18-17/11/17 (while on spec. mission to Paris)	10636		109			Recover 59 meh 50 apt.	
25		Bank 62598		27		50		
Apr 10	Travallow 22 '18	381					3/6 85%	