Ha. 30-7-19

REGIMENTAL DOCUMENTS

NAME BARRE Charle S. V. REGT. NO. Pte 3172169 UNIT 2/2 Ave. R H. Q. FILE NO. 9939

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
S	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		C			DEATH
/	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
/	TRAINING HISTORY SHEET (M.F.W. 113)					
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
/	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 200A or A.F.B. 121)					
/	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
/	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob
	MEDICAL EXAMINATION (M.F.W. 129)		H			
	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)					
/	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)					

W 25[illegible]
100[illegible] 11-18
1772-49-1277

2nd DEPOT BN. 2nd QUEBEC REGT. DUPLICATE

GHV 4 M. D. ..... Depot Battalion ..... Regiment

Regtl. No. 317216 9 D-

GB 24-10-18

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE.)

1. Surname: BARRE
2. Christian name: Charles Stasilas Victorien
3. Present address: 1161 StHubert st Montreal PQ Can
4. Military Service Act letter and number: 113944 DC
   (If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension, or surrender)
5. Date of birth: June 22 1897
6. Place of birth (town, township or county and country): Winnipeg Man
7. Married, widower or single: Single
8. Religion: Roman Catholic
9. Trade or calling: Reporter
10. Name of next-of-kin: Mr Stnislas Barre
11. Relationship of next-of-kin: Father
12. Address of next-of-kin: 1161 StHubert st Montreal PQ Can
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: Montreal PQ (b) Date: 20-8-18 (c) Category: B2

DECLARATION OF RECRUIT

I, BARRE Charles Stnislas Victorien, do solemnly declare that the above particulars refer to me, and are true.

Charles Stanislas Victorien Barre (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age: 21 yrs. 2 mths.

Height: 5 ft. 7 ins.

Chest measurement: fully expanded 33 ins.; range of expansion 3 ins.

Complexion: Brown

Eyes: Grey

Hair: Brown

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

A. MacKay J. Prieur

Commanding 2nd Depot Bn. 2nd Quebec Regt.

O. C. ..... Depot Btn.

..... Regt.

Place: Montreal PQ Can Date: 20-8-18

M. F. W. 133.
500M.—5-18.
1772—39—1158

2nd DEPOT BN. 2nd QUEBEC REGT.

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

District 4

Name of Soldier BARRE Charles Victorien Stanislas

Regiment

Rank Private

No. D-

M.F.B. 465.
200M.—6-18.
1772-39-950.

INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

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

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

	Date		Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
													U	L	P			Gold	Porcelain				
Condition on first Examination																							

GHV MILITARY SERVICE ACT, 1917. B ORIGINAL

MEDICAL HISTORY SHEET.

1. Surname BARRE Christian name Charles Stanislas Victorien

2. Number of report for service or claim for exemption according to Postmaster's Receipt or schedule 113944 3017 2169

3. Consecutive number on schedule of men reporting for service (if he appears on it) 0-----

4. Address (including street and number if any) 1161 StHubert st Montreal PQ Can

The following are accurate particulars with re ard to the above named man as ascertained by the medical examination on the 20th day of August 1918 19....., by the undersigned medical board sitting at Peel St Bks Montreal PQ Can

5. Age as stated 21 Years 2 Months. 6. Apparent age ..... Years ..... Month

7. Height 5 Feet 7 Inches. 8. Weight 130 Pounds.

9. Chest measurement { Minimum 30 Ins. / Maximum 33 Ins. } 10. Complexion Brown { Eyes Grey / Hair Brown }

11. Physical development Good { Good / Fair / Poor } 12. Smallpox marks .....

13. Number of vaccination marks { Right arm ..... / Left arm 1 } 14. When vaccinated last Child

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

16. Slight defects but not sufficient to cause rejection .....

The man denies having had { Rheumatism, Tuberculosis, Nervous or Mental disorder. Epilepsy Syphilis, Asthma. } We find no evidence of past { Rheumatism. Tuberculosis, Nervous or Mental disorder. Epilepsy Syphilis Asthma }

(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 C2

17. (a) Vision. R. V. D. A. 80 L. 80

(b) Hearing. R. OK L. .....

..... President.

..... Member. ..... Member.

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
		M. O.			M. O.
		M. O.			M. O.
		M. O.			M. O.

Joined 20th *day of* August *19* 18 *at* Montreal .PQ Can

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment		D 317 2169		20-8-18
Transferred to.....	2nd DEPOT BN.		2nd QUEBEC REG'T.	

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 Charles Stanislas Victorien Barre

If raised in category, record category in a square. The M. O. will initial and date.

M. F. B. 313.

300M —4-18.

1772-39-439.

Surname BARRE Christian Name Charles Stanislas Victorien

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				

M. F. W. 54. (A. F. B. 105.
500M.—9-16
H. Q. 1772-39-9-0.

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

Casualty Form—Active Service.

3172169

GHV Unit, Regiment or Corps 2nd DEPOT BN. 2nd QUEBEC REG'T.

Regimental No. D Rank Private Name BARBE Charles Stanislas Victorien

Enlisted (a) 20-8-18 Terms of Service (a) C.E.F. Dofw. Service reckons from (a) 20-8-18

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) .....

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				
29.8.18	2nd 2nd Que Regt.	S. O. S. on Return to Registrar's Records, D. O. Part II No. 240 d/ 29-8-18 ~~Amended by~~ " " " ~~No.~~ ~~d/~~ J. C. Simpson Captain M. S. A. District Officer, M.D. No. 4.	Montreal	20-9-18	D.O. Pr II 240

(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				

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

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

H

1. No. 3172169

2 Rank. Private

3. Name. BARRE, Charles Stanislas Victorien.

4. Unit. 2nd Depot Battalion, 2nd Quebec Regt. Montreal, Que.

5 Date of Discharge 20-9-18 Place Montreal, Que.

6 Reason for Discharge ~~Demobilization~~ OK

Struck off strength on return to Registrar's Records 20-9-18

D.O.# 240 d/ 29-8-18

Discharged under authority of P.C. 3051 of 11-12-18.

7. Authority. Routine Order # 1438.

8. Proposed Residence after Discharge 1161 St. Hubert St. Montreal, Que.

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.?

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Montreal, Que.

Date 7-4-19.

Signature J. C. Stuart Captain,
(O. C. Discharging Unit,)
M.S.A., D.O., M.D. #4.

M.F.B. 218a—300M.-11-18—1772-39-113.