DE
7.4.19

REGIMENTAL DOCUMENTS

NAME Beaubier David, Horner REGT. NO. Lieut UNIT 52nd Bn H. Q. FILE NO. 5944

	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)		Returned 28-4-19 ZP. Personal Services Militia D.O.s. Ottawa	7-4-19	Pera 295 48	DEATH
2	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. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
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1	MEDICAL EXAMINATION (M.F.W. 129)					
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	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
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1	R 49					
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	SS Olympic 8-17-3-19					

W 2589
10-4-11-18
17-2-35-1377

DUPLICATE.

181st. Overseas Battalion. C.E.F. 865678

ATTESTATION PAPER.

No. 865678

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Beaubier.
1a. What are your Christian names?	David Homer. Horner
1b. What is your present address?	436 - 12th. Street, Brandon, Man.
2. In what Town, Township or Parish, and in what Country were you born?	Brandon, Manitoba.
3. What is the name of your next-of kin?	D. W. Beaubier.
4. What is the address of your next-of-kin?	Brandon, Man. 436 - 12th. St.
4a. What is the relationship of your next-of-kin?	Father.
5. What is the date of your birth?	Feb. 4th. 1898.
6. What is your Trade or Calling?	Student.
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	McGill University Corps.
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

David H Beaubier (Signature of Recruit)

Date June 1st. 1916 A W Booth (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

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

David H Beaubier (Signature of Recruit)

Date June 1st. 1916. A W Booth (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath

before me, at Brandon, Man. this 1st. day of June, 191 6.

A W Bartlett (Signature of Justice)
J. P.

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

Description of David Homer Beaubier. on Enlistment.

Apparent Age 18 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft	8½ ins.
Chest measurement — Girth when fully expanded	36	ins.
Chest measurement — Range of expansion	3½	ins.
Complexion	Fair.	
Eyes	Blue	
Hair	Light	

Religious denominations.

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

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

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

Small scar on roght temple.

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the **Canadian Over-Seas Expeditionary Force.**

Date June 1st. 191 6. D. Wallace

Place Brandon, Manitoba. Captain A.M.C.
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

David Homer Beaubier. having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

D W Beaubier Lt. Col. (Signature of Officer)

O.C. 181st. Overseas Battalion. C.E.F.

Date June 24th. 1916. 191 .

ORIGINAL.

MEDICAL HISTORY SHEET.

Beaubier, *Christian Name* David Homer.

Examined { on 1st. day of June. 191 6.
at Brandon, Manitoba.

Approved by D Wallace

Rank Captain A.M.C. M.O.

Birthplace { City or Town Brandon, Man.
County

Apparent age 18 years 4 mos.

Trade or occupation Student.

Height 5 Feet 8½ Inches.

Weight 148. Lbs.

Chest measurement { Minimum 32½ inches.
Maximum expansion 3½ inches.

Physical development Good.

Small-Pox Marks None

Vaccination Marks { Arm Right. 0 Left. 0
Number

When Vaccinated last Never.

(*a*) Marks indicating congenital peculiarities or previous disease None

(*b*) Slight defects but not sufficient to cause rejection None

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
1-6-16	OK	D Wallace M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
20-6-16	pos.	0.c.5. M.O.
29-6-16	pos.	2nd. M.O.
2nd 2	22/10/18	2-Headquarter cert. M.O.

Enlisted on 1st. *day of* June. 191 6 *at* Brandon, Manitoba.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	181st. Overseas Battalion. CEF.	Promoted Lieutenant 12-9-1916 86 5678. Lieut.	Good	11-10-1916.
Transferred to	18th Res. Bn. 52nd Bn. 7/2.			APR 29 1917 9-11-17

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
C.C.H. Matheson Bath	11-9-18	D.W. Buttock R. Leg. Lum R. Gland	Cat. A. Specialist Surg.

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.

M. F. B. 313.
400M.—1-16.
H. Q. 1772-39-439.

ORIGINAL.

For your information
Please dispose of this
M.H.S. in accordance to
Army Council Instruction
No 479 of 1918 para 19.

ORIGINAL.

AL HISTORY SHEET.

Surname ..... *Christian Name* David Homer.

Examined { on 1st. day of June. 191 6.
at Brandon, Manitoba.

Birthplace { City or Town Brandon, Man.
County .....

Apparent age 18 years 4 mos.

Trade or occupation Student.

Height 5 Feet 8½ Inches.

Weight 148. Lbs.

Chest measurement { Minimum 32½ inches.
Maximum expansion 3½ inches.

Physical development Good.

Small-Pox Marks None

Vaccination Marks { Arm Right. 0 Left. 0
Number .....

When Vaccinated last Never.

(*a*) Marks indicating congenital peculiarities or previous disease None

(*b*) Slight defects but not sufficient to cause rejection None

Approved by D Wallace

Rank Captain A.M.C. M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
1-6-16	OK	D Wallace M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
20-6-16	pos.	D.C.O. M.O.
29-6-16	pos.	D.C.O. M.O.
2nd	22/10/18	Headquarters M.O.

Enlisted on 1st. *day of* June. 191 6 *at* Brandon, Manitoba.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	181st. Overseas Battalion. CEF.	Promoted Lieutenant 12-9-1916 86 5678. Lieut.	Good	11-10-1916.
Transferred to	18th Res. Bn 52nd Bn O/S.			APR 29 1917 9-11-17

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
C.C.H. Matheson Bath	11-9-18	D.W. Buttock R. Leg (Gun R. Gland)	Cat. A. Specialist Treatment.

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.

M. F. B. 313.
400M.—1-16.
H. Q. 1772-39-439.

ORIGINAL.

ORIGINAL.

Christian Name David Homer

Surname Beaubier,

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
Camp Hughes	6/6/1916	8	9	1916	10	11	1916	Synovitis	63	Seems to have been some form of infection Treatment. Rest and Cold packs.	D Wallace
Brandon	23.10.16	13	2	17	22	2	17	Measles	10	Treated Gen Hosp.	D Wallace
HYDE PARK SECTION, the SOUTHERN GENERAL HOSPITAL, PLYMOUTH. C.C.S.		12	8	18	10	9	18	G.S.W. Buttock Sept Leg. Rt arm	30	Septic wound of Buttock & B removed T & T. wound Rt arm healed. F B removed from leg & thigh healed	H Pierce Gardiner
Milford Bath		10	9	18	19	9	18	do	9	No disability now —	W Gerald Chichester Major

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
13		Lt.	Beaudoin.	David H.
Year 1918	Unit. 52 Can Inf.		Age. 20.	Service. 2 2/12 yrs.

Station and Date.	Disease G. S. Wounds - Rt buttock ① left leg ② Rt arm ③
Aug 12-	-Hit by piece of Shrapnel from high Explosive shell at Amiens on Aug. 8. causing multiple wounds.
	① Flesh Wound in Rt buttock not deep but considerably inflamed - but slightly painful
	② Slight superficial flesh wounds left shin, inner surface left thigh just above knee, and Rt. upper arm. - Wounds all clean. slightly painful.
17. 8. 18	133. F. S.S. A T S.
19. 8. 18	Under ether a piece of shrapnel was removed from wound in buttock. & wound cleaned another small piece was removed from left thigh.
23-8-18.	A T S. S.S. 133 F
31. 8. 18	133 C A. T S. S.S.
10/9/18	Both wounds have healed. No discharge. Transferred to Mailleux
	J. Price.

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

(6365) W2944/P.38 2,950,000 1/18 McA & W Ltd Forms/I. 1237/13 (E 2349)

[P.T.O.

Station and Date.	

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 5-2 Canadian Bde. Military Hospital 5-1 S. General

No. _____ Rank and Name Lieut. B.F. Bedbier Age 24 Service 2 6/12

Disease _____ Date of admission 13. 8. 18 Date of discharge _____ Result _____

Dates of Observation	13	14	15	16	17	18
Days of Disease						

Temperature Fahrenheit — Time: A.M. P.M.

CAN OFF H.P.
MATLOCK BATH.

107°
106°
105°
104°
103°
102°
101°
100°
99°
98°
97°

Pulse per Minute

Respirations per Minute

Motions per 24 hours

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 181/5 (E. 2565)

Signature _____ In charge of case.

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B 131.

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation																																
Days of Disease																																
Temperature Fahrenheit	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.	Time A.M. P.M.
107°	8 6 4 2																															
106°	8 6 4 2																															
105°	8 6 4 2																															
104°	8 6 4 2																															
103°	8 6 4 2																															
102°	8 6 4 2																															
101°	8 6 4 2																															
100°	8 6 4 2																															
99°	8 6 4 2																															
98°	8 6 4 2																															
97°	8 6 4 2																															
	8 6																															
Pulse per Minute																																
Respirations per Minute																																
Motions per 24 hours																																

(6378) Wt. W4612/P566 2,000,000 2/18 McA & W Ltd A.F.B. 131/5 (**E. 2565**)

Signature_____ In charge of case.

Forms
I. 1237.
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
T 670		Lieut	Beaubien	Bt

Year	Unit.	Age.	Service.
1918	52 Batt	24	CANADA 12 FRANCE 9 TOTAL 29.

Station and Date.

CANADIAN CONVALESCENT OFFICERS' MATZ BATH.
AUG 21 1918
ORDERLY ROOM HOSPITAL

Disease Lacerated wound head (accid.)

ONSET 30-7-'18 WHERE France.

HISTORY OF DISABILITY

While resting in trench horse was frightened & stepped on patient - striking head on parapet floor. Adm. to No 3. Br. Gen. Le Treport X-ray neg. for skull injury. Ft. not unconscious at any time. Evac. to 26 v. Gen. Portsmouth 13-8-'18

Transferred to C. C. 21-8-'18.

PERSONAL AND FAMILY HISTORY

In Hosp. since 17 for 4 wks.

No previous illness

PRESENT CONDITION Generally good.

DIGESTIVE SYSTEM O.K.

CIRCULATORY SYSTEM O.K.

RESPIRATORY SYSTEM O.K.

NERVOUS SYSTEM sleeps well.
" "

G. U. SYSTEM No subj. symptoms

LOCAL CONDITION Healed wd 7 scalp fronto
area - No disability now.

22-8-'18 Boarded A.

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12/16. C.F.& S. Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.	

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
1917		Lieut	Beaubien	David Stone

Year	Unit.	Age.	Service.
1918	5th Batt	20	CANADA 10. FRANCE 10 TOTAL 28

Station and Date.

10 SEP. 1918
CANADIAN CONVALESCENT HOSPITAL FOR OFFICERS
MATLOCK BATH

Disease G.S.W. R bullock L. leg. R arm. pen flesh.

ONSET. 8. 8. 18 WHERE. France

HISTORY OF DISABILITY. Hit by piece of shrapnel from HE shell. Causing multiple wds superficial but painful. Wds all clean. No 23 C.C.S 1 day. Then No 8. Gen R. Rouen Trans. to Eng 12. 8. 18. Hyde Park Hosp. Plymouth. Recovery uneventful. No disability

PERSONAL AND FAMILY HISTORY. Negative

PRESENT CONDITION. Good

DIGESTIVE SYSTEM. } O.K.
CIRCULATORY SYSTEM. }
RESPIRATORY SYSTEM. }
NERVOUS SYSTEM. }
G.U. SYSTEM. }

LOCAL CONDITION. Wounds all healed. No disability

Treat M.B. W Cuthbertson Capt

11-9-18 Boarded A

W Jameson Major

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239) P.T.O.

Station and Date.	

FORM OF WILL.

I, David Horner Beaubier (Name in full)

Regimental Number Lieutenant serving in 181st. O's Battalion, CEF.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Jerome Edward Beaubier
436 12th st
Brandon, Manitoba

Name and Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Jerome Edward Beaubier
436 12th st
Brandon, Manitoba

Name and Address of person or persons to receive personal estate* *(See note).*

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this ninth day of March A. D. 1917

David H. Beaubier Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

THE TWO WITNESSES MUST SIGN HERE

Signature of First Witness P. Barkus

Address of Witness 537 Furnace Place Winnipeg

Occupation of Witness Clergyman

Signature of Second Witness Speaker

Address of Witness Ymca.

Occupation of Witness Secretary

M. F. W. 82
300M-5-16.
1772-39-983.

ORIGINAL

181st Overseas

Unit Battalion, CEF. *Rank* Lieutenant *Name* David Horner Beaubier.

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE ANSWERED BY OFFICER

[ANSWERS]

1. (*a*) What is your Surname ? Beaubier.

   (*b*) What are your Christian Names ? David Horner.

2. (*a*) Where were you born ? (State place and country) Brandon. Manitoba. Canada.

   (*b*) What is your present address ? 436 Twelfth St. Brandon. Manitoba. Canada.

3. What is the date of your birth ? 4 February 1898.

4. What is (*a*) the name of your next-of-kin ? Mrs Lucy E. Beaubier.

   (*b*) the address of your next-of-kin ? 436-12, Brandon. Manitoba. Canada.

   (*c*) the relationship of your next-of-kin ? Mother.

5. What is your profession or occupation ? Student.

6. What is your religion ? Anglican.

7. Are you willing to be vaccinated or re-vaccinated and inoculated ? Yes.

8. To what Unit of the Active Militia do you belong ? 99th Manitoba Rangers.

9. State particulars of any former Military Service None

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.

David H Beaubier (*Signature of Officer.*)

Taken on strength (place) Brandon. Manitoba.

(date) 12-9-1916

D W Beaubier Lt-Colonel.
(*Signature of Commanding 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 12 - 9 - 1916 191

Place Camp Hughes. Manitoba.

D Wallace Captain.
A.M.C. *Medical Officer.*

*Insert here "fit" or "unfit

M. F. W. 51
100m.—4-16.
H. Q. 1772. 39-917

OFFICER'S DECLARATION PAPERS

CANADIAN OVERSEAS EXPEDITIONARY FORCE

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..... 181st Overseas Battalion, C.E.F.

(2) Regimental Number .....

(3) Full Name of Soldier..... David Horner Beaubier,

(4) Place of Birth..... Brandon, Manitoba.

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

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

(b) Present Postal Address.....

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

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

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

Also their names and ages.....

M. F. W. 67.

300M.—5-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?.....Yes.....

If so, state name and address ...Lt-Colonel D.W.Beaubier,.....
436 Twelfth St. Brandon. Manitoba. Canada.

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

If so, state name and address.....Mrs Lucy E. Beaubier,.....

.....436 Twelfth St. Brandon, Manitoba. Canada.....

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

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

(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.

Mother.....

.....

.....

(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.

.....

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

If so, in what Company ?.....

Have you made arrangements for payment of your Insurance premium.....

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

D. W. Beaubier.....Lt-Colonel.
Officer Commanding.
181st Overseas Battalion, C.E.F.

Date.....11-10-1916.....

CONFIDENTIAL.

Army Form A. 45.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station C.C.O.H. Matlock Bath. Derby

Date 11.9.18

1. Rank and Name Lieut. Beaumont David Horner.
2. Unit. 52 Can Batt^n ~~1st R.C.R.D~~ Seaford. MANITOBA Regt
3. Age 26 4. Total Service 28. War Service { (a) at home 18 / (b) abroad 10
5. Address 18th Reserve Depot Bn. Seaford.

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 G.S.W. R. buttock, L. leg, R. Arm (pen. flesh.)
7. Date of origin of disability 8.8.18
8. Place of origin of disability France.
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.

Hit by pieces of shrapnel from H.E. Shell Causing multiple wds. superficial but painful wds all clean No 23 C.C.S 1 day. Then No 8 Gen. Hosp. Rouen. Trans. to Eng. 12.8.18. Hyde Park Hosp Plymouth. Recovery uneventful. No disability. To CCOH 10.9.18

19-8-18 - Reunion at Plymouth Hosp. - F.B.

from Buttock & Thigh - Ofns

I concur in the findings of the Board of Medical Officers recorded.

Major, D.A.D.M.S.
For D.M.S.
Overseas 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.

[P.T.O.

14. What is the officer's present condition ? His officer's general condition is now good. Heart & lungs sound. Wounds are all healed & now present no disability. He has no other complaints.

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 ? Basto C. C. Off.

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

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 N. A.

(ii) In an officers' hospital

F.—Permanently unfit for any further military service

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

President.

Members.

(C.S. 2342) Wt. W.764—P. 955 500m. 19/4/18 3025 H.S. & Co.

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 ..... Lt. ..... Surname ..... BEAUBIER .....

(Given name in full)

David Hosea

Unit or Corps 52nd Batt'n Manx Birthplace Brandon Manx

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

1. **GENERAL DESCRIPTION:** Estimated Hgt

Physique Good Weight 160 lbs. Height 5 ft. 8 in. Colour of Eyes Blue

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.)

Scars: Rt upper arm
Rt buttock and Rt thigh
and Rt leg - due
to G Swd. 8/8/18
Scar on forehead - Injury
as child

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. yes Respiratory System. yes

Disturbance of mentality. no Muscular System. no Digestive System. no

Osseous and Joint System. yes 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.

Synovitis Lt knee 8/9/16 - 10/11/16 -
Good recovery no disability
Measles 13/3/17 - 22/3/17 - Good recovery
G.S.W. Rt arm - Lt thigh + leg 8/8/18
Healed - no disability
Fracture of skull as child - no disability
now. scar still remains on forehead
Pneumonia 1906 - good recovery - no disability

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Bramshott (Overseas)

Date 14/2/19 Signed W. D. Jamieson Capt Chmc 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 D. H. Beaubier

(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.)

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

J.M. 10-28.
E.S.

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Lieutenant

(Name in full) DAVID MORROT BEAUMONT,

Enlisted in The 101st Battalion (Private #365678)

CANADIAN EXPEDITIONARY FORCE, on the First

day of June 191 6 AND WAS APPOINTED to COMMISSIONED RANK

in The 101st Battalion,

CANADIAN EXPEDITIONARY FORCE on the Twelfth day

of September 191 6.

He SERVED in CANADA, ENGLAND and FRANCE with the 101st Battn., 18th Reserve Battn., 52nd Battn., Manitoba Regimental Depot, Military District #10.

and was STRUCK OFF THE STRENGTH on the First day

of April 191 9 by reason of General Demobilization.

Dated at Ottawa, this Twenty-seventh day

of October 191 9.

Wounded 8-8-18.

J. Clearihoe

Director of Personal Services.

for

M. F. W. 2618a
30m.—4-19.
1772-39-1428.

C.A.D.C. 5009 A

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

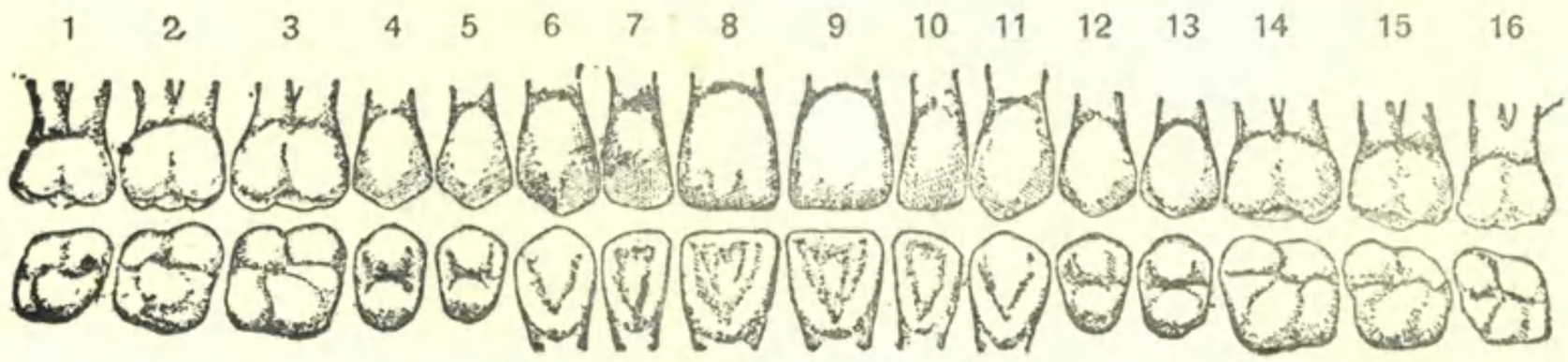
DENTAL CERTIFICATE FOR DEMOBILIZATION

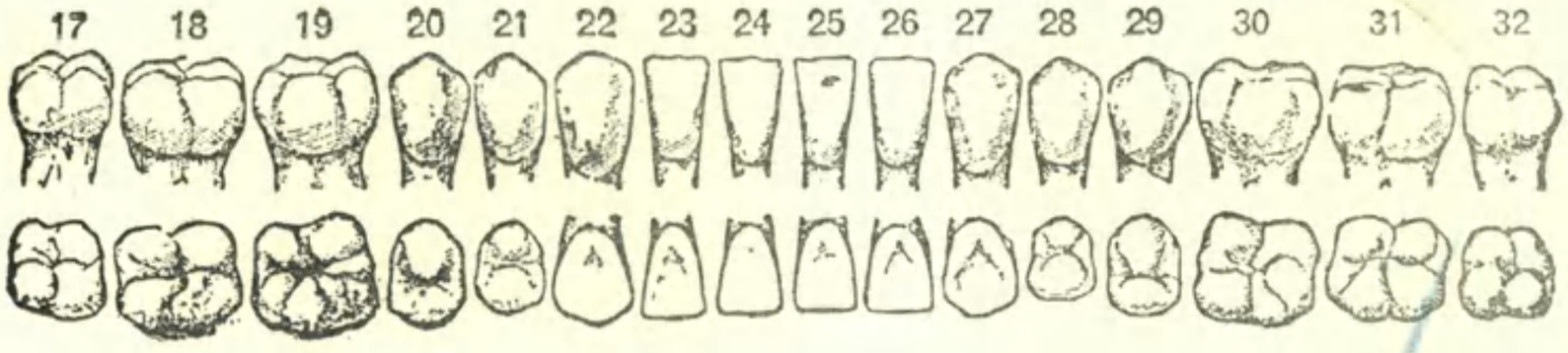
Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) BEAUBIER. D. H.

REGIMENT 52nd Batt. RANK Lt. No.

Date of Examination in England | Date of Examination in France 7/1/19





DIRECTIONS TO DENTAL OFFICERS

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
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*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 — YES.

Signature of Dental Officer S. Rushbrook

CERTIFIED CORRECT
24 NOV. 17
CANADIAN RECORD OFFICE

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

F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. 181st Overseas Battalion, CEF. War Service Badge Class "A" No.

Regimental No. ~~1-6-16~~ Rank. Lieutenant. Name. David Horner Beaubier.
C. E. F.

Enlisted (a). ~~12-9-16(P)~~ Terms of Service (a). War and six months Service reckons from (a). ~~1-6-16~~ 16/4/17

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). Student

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
		Embarked	Halifax	16-4-17	H.M.T. Grampian.
		Disembarked	Liverpool	29-4-17	H.M.T. Grampian.
4-5-17	O.C. 181st	Transfd to 18th Reserve.	Dibgate	29-4-17	B.086. A. H. Beaubier Lieut. Col. O. C. 181st Overseas Battalion C.E.F.
MAY 9 - 1917	18th Res: Bn.	TAKEN ON STRENGTH.	DIBGATE.	APR 29 1917	Part II D.O. 176
9-11-17	O.C. 18th C.R.Bn	DRAFTED to 52nd Bn	Dibgate	8-11-17	Pt II. D.O. 9 1 Ass Asst. 18th C.R.Bn 4/6
2.11.17	00/121/D/8538 (a) 4a)	Arrd. Rft. for 52nd Batt		9.11.17	Dis. 1881. Pa 101 13/11/17
11.11.17	36.2 B.D.	To Lunch	Do.	11.11.17	ark.
24.11.17	O.C. 52 B.	James Lunch	"	22.11.17	Asst
22.18	"	M-Cse 3 Do. Clerks		22.18	"
232.18	"	Regt Lunch	"	162.18	"

(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.

Pte. D. H. Beaubier

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				
9.3.18	52 B.	14 days Leave	U.K.	6.3.18	B213 for 14/18
23.3.18	"	From Leave	Fld.	22.3.18	"
13.7.18	"	on Command 1st Grenadier Guards for Instn.		12.7.18	" 3 Fld. G. 655/1 10/7/18
27.7.18	-	Rejoined from Command	Fields	18.7.18	" 8.
9.8.18	1 Cdn	Gsw Multiple	CCS	8.8.18	a 6801 9th. 68/18
9.8.18	8 Gen	"	8 Gen	9.8.18	G 7632
11.8.18	"	"	England	11.8.18	G 9174
11.8.18	"	" +detached to Manitoba	H.S		W3083/5738
		Regt Depot, Seaford	Panama	11.8.18	9th O 744/18
					K. Lewis Lieut for Lt-Col. A.A.G Edn Sect, 3rd Ech. G.H.Q
20.8.18.	C.C. M.D.	T.O.S. M.D. on pstg: from Service Unit & shortened Hosp:	Seaford.	12.1.18.	Pt II D.O. 272.
24.9.18.	C.C. M.D.	S.O.S. M.D. on pstg: to 18th Res: Bn.	Seaford.	19.9.18.	Pt II D.O. 261
26.9.18	18th Res: Bn.	TAKEN ON STRENGTH.	Seaford	19.9.18	Part II D.O. 269
26.9.18	Do.	Granted leave from 19.9.18 to 10.10.18	"	10.10.18	Part II D.O. 269.
29.10.18	Do.	Drafted to 52nd. Bn.	"	29.10.18	Part II D.O. 302

L. Wood CAPTAIN
18th Res. Bn. Adjutant.

Ar● Form B. 103. Regimental Number.....

Casualty Form—Active Service.

Regiment or Corps 52 Bn

Rank Lt Surname Beaubier Christian Name G. H.

Religion..... Age on Enlistment.....years.....months

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

Date of promotion to present rank..... Date of appointment to lance rank.....

Extended {.....} Re-engaged {.....} Qualification (*b*).....

{.....} {.....} or Corps Trade and rate.....

Occupation..... Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
31.10.18	G.J.B.D	Arrived G.J.B.D.	G.J.B.D	30.10.18	WR 492 B.D. 1/19/18
		Left for G.C.R.C		31.10.18	" 493
1.11.18	G.C.R.C	arrived	Hd	1.11.18	" a.1743
5.11.18	G.C.R.C	To Unit	Hd	5.11.18	" A.1977
9.11.18	52 Bn	Joined		5.11.18	Bn
O.C. Cdn. C.O.S. for demobilisation to O.T.C. Conc. Camp. Le Havre		Proceed	N/R. Pt. 2. D/S. 8/19 10.2.19		
		Proceeded to England			
		C M Hewett Lieut. for Lt. Col A.A. Cdn. Sect. G.H.Q.			
S.O.S.		O.M.F.C. Lo. C.E.F. Daily Order			
		J. Farquhar Lieut. for Lieut.-Col., C. 52nd. Canadian Infantry Battalion.			

R.D. Blandford. Adjutant, No. 8 Trans-Atlantic Con.

EMBARKED, S.S. OLYMPIC SOUTHAMPTON 17-3-19

(*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.

W. 8685—M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E/1807. P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
1-4-19	M.H.Q. Ottawa	T.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 10	17 3/19	C.E.F. R.O. No. 1848-19
4 4/19	M.H.Q. Ottawa	S.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 10	1 4/19	C.E.F. R.O. No. 1860-19
		O. Guyachard Lieut. for Director Personal Services			

Forms R. 150.
3232. 15 M. 14/12/16.

E.T.

Surname BEAUBIER **Christian Names** DAVID HORNER. ✓

Rank Lieut. **Name and Address of Next-of-Kin** Mother.
Mrs Lucy E. Beaubier. ✓
436, 12th . Brandon. Manitoba. Canada.

Unit 181st Bn to Manitoba Regt: ✓

Place of birth Brandon. Manitoba. Canada. ✓

Married (Yes or No)

Appointments

Date of leaving Canada 16/4/17. M.O. 114, d/25/4/17. **Date and Cause of Resignation**

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
9-5-17	18 Res Bn	SOS. on arrival from Canada		29-4-17	Gaz O. 116
13-11-17	5th Reg Dep	SOS 18 Res. proceed O/seas to 5th Bn		8.11.17	Gaz O. 749
"	5th Bn	SOS. 5th Bn as Reinforcement from England		9-11-17	Gaz O. 101
19-3-18	do	Granted 14 days leave to U.K.		6-3-18	Gaz O. 24
22-7-18	do	To 1st Grenadier Guards for Instruction		12-7-18	Gaz O. 61
10-8-18	a.m.s.	Repted from Base Wounded		8-8-18	O.R. 1056
12-8-18	do	Adm 8 Gen. Hosp Rouen.		9-8-18	O.R. 1057 Shell. G.S.W. R. Buttock l. leg R. arm sl.
23.8.18	5th Bn	Invalided [illegible] under to M.R. Depot.		11.8.18	Gaz O. 74
20.8.18	D.R.D.	SOS. on evac from France		12.8.18	Gaz O. 132
15-8-18	a.m.s.	adm 4 Southern Gen. Hosp Plymouth		12-8-18	O.R. 1060 Shell G.S.W. R. Buttock l. leg R. arm sl.
18-9-18	do.	Discharged adm Can. Can. Off. Hosp Matlock Bath		19-9-18 / 11-9-18	O.R. 1094 / O.R. 1089 do.
24-9-18	D.R.D.	SOS. Reposted to 18 Res Bn.		19-9-18	Gaz O. 269

A.F.B. 103. 29 NOV. 17

A.F.B. 103.

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				
29.10.18	18 Res Bn	SOS. proceeded Overseas to 5th Bn		29.10.18	P.C.O. 302
14.11.18	5th Bn	Ceases to be dtd. to M.R.D. returned to Strength to rejoin Unit		30.10.18	P.C.O. 109
17-2-19	do.	Proceeded to England		10-2-19	P.C.O. 8.
		Sailed for Canada		17.3.19	Sailing List 41
15-3-19	5th Bn	SOS. proceeded to Canada		17-3-19	P.C.O. 19

A.F.B. 10c
1 NOV. 1918

14074

D. M. S. 1347.

Surname	Christian Name	Reg. No.
BEAUBIER	D. H.	

Rank	Unit
Lieut.	52nd. Batt'n.

MEDICAL BOARD held at	Date	Serial No.
(1) Buxton Area	11-9-18.	

Other Medical Boards at	Date	Serial No.
(2)		
(3)		
(4)		
(5)		

Condition found by Board

GSW. rt. Butt. rt. Leg. lt. Arm.

Disposition Recommended

(1) Fit for General service.

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at **Date**.....

Disposition

Remarks

Indicate by a P.T.O. if continued on other side.

Surname. Christian Name.

BEAUBIER D. H.

Rank. Unit.

Lieut. 52nd. Batt'n.

	Date of admission.
No.8 General Hospital, Rouen.	9-8-18.
HS.to Hospital 4th.South.Gen.Hosp.Plymouth	12-8-18.
Canadian Conval.Offs.Hosp.Matlock	11-9-18.
Transferred ..... Hosp.	
..... Hosp.	
..... Hosp.	
..... Hosp.	

Reported from Base, Wounded:-8-8-18.

Diagnosis. GSW.Mult.,rt.Buttock,rt.Leg, rt.Arm slt. RW

Later diagnosis. .....

.....

.....

.....

Discharged:-19-9-18

Disposition. Date.

~~10-8-18~~	1056
12-8-18	1057-3.
15-8-18	1060-7.
.....	.....
18-9-18	1089-3.
24-9-18	1094-5.

C.L. ..... Remarks.

C.L. .....

C.L. .....

C.L. .....

C.L. .....

C.L. .....

C.L. .....

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

No. 865678 RANK Pte. Lieut NAME Beaubier, D. H.

T.O.S. 1-6-16 Do III UNIT 181st Battalion C.E.-S
of 16-6-16

M.D. 10.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
June 1	June 30	—		
	July	—		
	Aug	—		
	Sept	—		
	Oct	—		
	Nov	—	From Lieut 12-9-16	Do 237 of 9-11-16
	Dec	—		
1917	1917			
	Jan	—		
	Feb	—		
	Mar	—		
	April	—		

UNIT SAILED
APR 18 1917

DESP. MAY 26 1922
REGN. No. 35715

Number ..... Rank LIEUT

Surname BEAUBIER

Christian Name DAVID HORNER

Units ..... Theatre of War FRANCE

Date of Service 8.11.17

Remarks B7/13 Oak Lake

Latest Address [redacted]

Roll No. B Cagl 135704

200m.-2-21.M. Man Reg

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
105-6-1.	Rep. from Base. Wdd	8-8-18	—
1089-3.	C. C. Off. Matlock Bath	11-9-18	Mult. G.S.W. R. Batt. Rt. leg. Rt arm
1094-5	" " " " Ditto	19-9-18	" " "

NAME Beaubier, David Harold REGT'L No.

RANK AND CORPS Lieut. 52nd Bn. (Form. 184th Bn) HQ. FILE No. 649.

CABLE NO.	CABLE DATE	NATURE OF CASUALTY	FOLLOWS No.	FOLLOWS
O 713. 6-3.	12-8-18.	Repts. wdd. Aug. 8/18.		Brandon. Man.
n.o.k.		Mrs. Lucy. E. Beaubier (mother) 436-12th St. ✓		
W.D.M. 51.	28-8-18.	Admd. 4th. S.Gen. H. Plymouth. Aug 12/18. G.S.W. Rt. Buttk. lt. leg. rt. arm. slt.		

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

Date	Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

Form R. 149.

Name BEAUBIER David Horne *Rank* Lieut. *Reg. No.*

Unit 52nd Bn.

Next of Kin Canada

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
8-8	Rep. from Base (Tel. KI 616 10-8)		WOUNDED	1051	10/13	14/8
9-8	8 Gen Hos Rouen (WO)	Myr Gdn R Bank		1057	✓	
12-8	4 So Gen Hos Plymouth 23876	L Gdn R Rom Sls		1060	✓	NDBm 5/
	Ex HS					
11-9	Can. Con. Off., Hos., Matlock Bath 7001		✓	1089		
				1094		
19-9	Discharged 70 3					

SURNAME. Beaubier

CHRISTIAN NAMES David, Horner

REGL. No. 465678 RANK Pte.

UNIT 181st

FORMER CORPS McGill University Corps

CARD NO. 4

S.O.S. Dis 15-6-17 To

Bw.

NEXT OF KIN.

NAMES IN FULL Beaubier, D. W.

RELATIONSHIP TO SOLDIER Father

ADDRESS 436 - 12th St., Brandon, Man.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Brandon, Man. DATE Feb. 4th 1898

PLACE OF ATTESTATION Brandon, Man. DATE June 1st 1916

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

Name altered on Nominal Roll 15/6/17

MARRIED SINGLE WIDOWER

TRADE OR CALLING Student RELIGION Anglican

DESCRIPTION.

APPARENT AGE	YEARS		MONTHS
HEIGHT	FEET		INCHES
CHEST MEASUREMENT	INCHES	EXPANSION	INCHES
COMPLEXION	EYES	HAIR	

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE Camp Hughes, Man. DATE Sep. 12th 1916

Present address 436 - 12th St., Brandon, Man.

SURNAME. Beaubier.

CHRISTIAN NAMES David Horner

REGL. No. RANK Lieut.

UNIT 181 st.

FORMER CORPS 99th. Rangers.

(2) 10
108 1-4-19
Demob 1-4-19
109 3 of 3-4-19
1920
Bn.

NEXT OF KIN.

NAMES IN FULL Beaubier, Mrs. Lucy E.

RELATIONSHIP TO SOLDIER Mother

ADDRESS 436-12th St., Brandon Man.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada. Brandon Man. DATE Feb. 4th. 1898

PLACE OF ATTESTATION Brandon Man. DATE Sep. 12th. 1916

O 0/S 18-4-17

R/C 24-3-19 290/11 Lieut

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 17 2-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING Student RELIGION Church of England

DESCRIPTION.

APPARENT AGE	18 YEARS	4 MONTHS
HEIGHT	5 FEET	8 1/2 INCHES
MEASUREMENT	36 INCHES	EXPANSION 37 1/2 INCHES
COMPLEXION	Dark EYES Blue	HAIR Light

DISTINGUISHING MARKS Small scar on right temple.

MEDICAL EXAMINATION. PLACE Brandon, Man. DATE June 1st 1916

Present Address 436-12th St., Brandon, Man.

FORM P. 15
5986–25M–19/1/17

ASSIGNED PAY.

UNIT. Rates

NAME OF	~~DATE~~	AUTHORITY	
18 Res Bn	Pay	$2 00	P.D
52 Bn.	Y.R.	$0 60	"
	Mess.	$1 00	"

RANK. mess.

	~~DATE~~	AUTHORITY
Lieut	29 4/17	Fr Can. 6 P.M.
	2 5/17	

NAME. 14

Name Beaubier
Initials David Horner
Bank of montreal.

Beneficiary
Address

Amount. $
Separation Allowance issued. Yes or No.....

Addn Outfit allce $100

1918-19

DATE 1918.	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
Apl 3	Balance Forward.					Nil -		
" 11	Pay R.		108 -					
" 23	Bank.	1094.		108 -		0		
May 6	Pay R.		111 60					
" 23	Bank	2551.		111 60		0		
June	Pay R.		108					
22	Bank	4126.		108		0		
July	Pay R.		111 60					
25	Bank	5607		111 60				
Aug	Pay R.		111 60					
24	Bank	7161		111 60				
Sep	Pay R.		108					
25	Bank	9127		108				
Oct	Pay R.		111 60					
22	Bank	10362		111 60		0		
" 31	Addl Outfit Allce		100					
31	Bank.	10853		100		0		
Nov 22	Pay R & A.F.A. 12 9/18		140					
	Bank	12542		140				
Dec 11	Pay R.		124					
	Bank	13730		124				
13	Imperm Leave Outfit 8/8/18		276			£16.6.0 8 79 5 Admin fund		
	Bank	15504	124					
Jan 21	Pay R.			124				
Feb 14	Pay R.		112					
	Bank	17062		112				

FORM P.15
5986—25M—19/1/17

ASSIGNED PAY.

UNIT.

NAME OF	DATE	AUTHORITY
52 B.	Pay 2 F. A 1 In. 1.	

RANK

	DATE	AUTHORITY
Lieut.		

NAME.

Name Beaubien
Initials David Horner
Bank of Mont.

Beneficiary

Address

Amount. $

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
1919								
Feb 28	Adv. P & A Pack	Bank	17193	124		124	Rtd to Can	
March 14	Pay R.		124				L.P. 6 to 31/3/19	
							Fr to N.Z. Ledger	
							P & A to cease 31/3/19	
							No 27268.	
							Transf. fr 13-12 7 4/19	

FORM P. 15
5986—25M—19/1/17

ASSIGNED PAY.

1917-18

UNIT.

NAME OF	DATE	AUTHORITY
18th Res: Bn		Pay 2.00 Pd.
		Tk 0.50 "
		Insg 1.00 "

RANK. Lieut

Trees. DATE 29.4.17. AUTHORITY From Canada C.P.M d/2.5.17

NAME. Name Beaubier
Initials David Homer
Bank of Montreal.

Beneficiary
Address
Amount. $
Separation Allowance issued. Yes or No.....

1917-18

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								
May 14	Cr bal. $55.50 - Mess 29-30 4/17	Cash	#566	57 50				
22	May Pay R. Mess ½ 29 4/17	Vr	2492	113 60				
17	Cr bal fr Can 30 4/17	Can Dr	3914	55 50				
25		Bank	6029	111 60		0		
June 9	Pay R.			108				
21		Bank	7999	108		0		
July 10	Pay R			111 60				
27		Bank	13082	111 60		0		
Aug 9	Pay R.			111 60				
23		Bank	14394	111 60		0		
29	Rations 7-31 7/17		4162				£1 13 4	✓
Sept 13	Pay R			108				
25		Bank	21863	108		0		
29	Rations 1-31 8/17		5673				£2 1 4	
Oct 11	Pay (R)			111 60				
15	Rations 1-6 9/17		6698				8/-	
19		Bank	26190	111 60		0		
Nov 14	Pay (R)			108				
20		Bank	30662	108 -		0		
Dec 10	Pay (R)			111 60				
13		Bank	35096	111 60		0		
1918 Jan 10	Pay (R)			111 60				
24		Bank	39336	111 60		0		
Feb 8	Pay (R)			100 80				
19		Bank	44053	100 80		0		

Fwd

FORM P. 15
5986--25M--19/1/17

ASSIGNED PAY.

UNIT. NAME OF | DATE | AUTHORITY

RANK. | DATE | AUTHORITY

NAME.

Beneficiary

Address

Amount. $

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

18 Res Bn | Lieut. | Name Beaubien
Initials D. H.
Bank of montreal.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1918								
Mch 8	Pay (R)		111 60					
- 21	Bank.	42552		111 60		0		

AUDITOR | PAYMASTER

56

B. 1615

"Olympic" 25-3-19

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

~~NUMBER~~ S. | REGT. No. | RANK Lieut | NAME (IN FULL) Beaubier David Horner. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. S. Salt | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO "A" | DATE | AUTHORITY

DATE OF ATTESTATION | TRANSFERRED TO Mil. Dist. No. 2 | DATE 17/2/19 | AUTHORITY 2093

ASSIGNED PAY $ Nil | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Bank of Montreal, Brandon Man

STOP PAYMENT FORM ASSIGNED PAY RENDERED. DATE | EFFECTIVE

DISCHARGED | PLACE MD 10 | DATE 9/4/19 | REASON D | AUTHORITY 2093 | IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. No. 1 NO.	COL. No. 1 DATE	COL. No. 2 NO.	COL. No. 2 DATE	COL. No. 3 NO.	COL. No. 3 DATE	CASH PAYMENTS COL. No. 1 $	COL. No. 1 C.	COL. No. 2 $	COL. No. 2 C.	COL. No. 3 $	COL. No. 3 C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																				
31-3-19					4	20			4	20																	9	00			9	00	4	80			Over Paid Messing from 17/6/15/2/19 = 9 days @ 1/- Diff. between Messing & Subs. from 26/1 to 31/2/19 = 6 days @ 70c
1/4/19-1/11	1	3.00	3	00	1	70			4	70																	4	80			4	80	-	10			Subsistence 7/- Effective 7/4/19. 10 cents to be recovered p.w. S.S.
			3	00	1	70			4	70																	4	80			4	80	-	10			
June 6	153	30					459	-			75981	2	70														10						178	90			10c Ds. as above
July 1											77945	2	90																				98	90			90-4 p.w. Wds
Aug 1											13029	03	98	90													10						3	-			3.82 = 5 x Final
							459	-					458	90													-	10			459	00					

Cancelled

AUDITED AUG 7 1919 Asst. Clerk

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1300.

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 Med. Board (M.F.B.227 or M.F.W.129)
5. Dental Certificate (C.A.D.C. 5009a).
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.
10 Disposal certificate

Group B
Checked by No.
Date 17/3/19

Disposal Area W.D. F. 10
Occupational Group. # 19.

War Service Class

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

1. RANK LIEUT.
2. NAME BEAUBIER David Homer
3. UNIT 82nd Man. Regt.
4. DATE STRUCK OFF STRENGTH 1-4-19. PLACE Port Arthur Ont.
5. REASON Demobilization.
6. AUTHORITY R.O. 1860
7. PROPOSED RESIDENCE Brandon Man.

Holleran 26/1/22

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.

M. F. W. 2591.
20M—11-18.
1772-39-1380.

Emb. S.S. Olympic. Southampton 17-3-19

24-4-19 BW