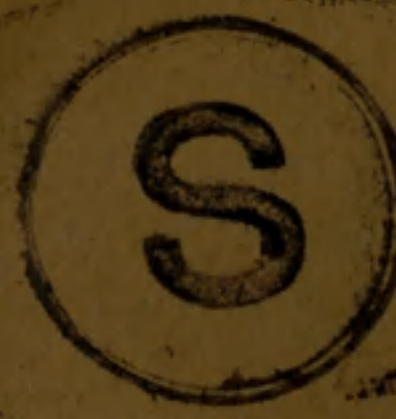


10/1/19and



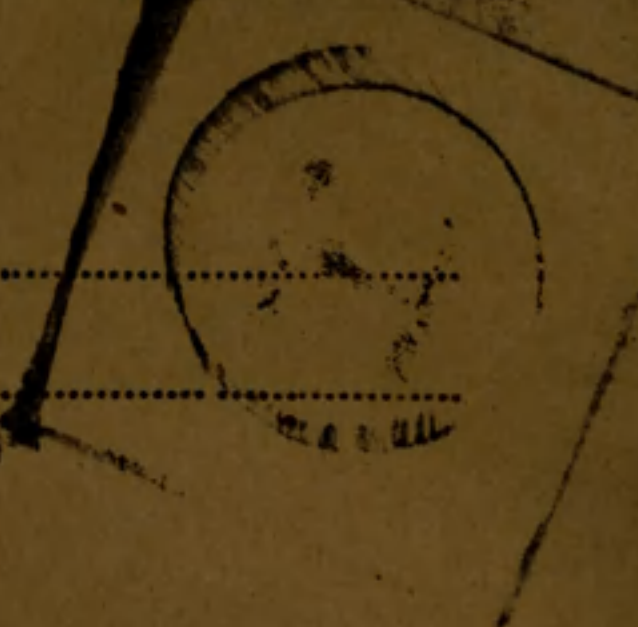
- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 1 2
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... 1
- Proceedings on discharge..... 1
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Arch* Parchment Certificate..... 1
- Medical Report for Invalids.....
- Medical History Sheet..... 1
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit..... 1
- Last Pay Certificate..... 1
- MFW 129* 2
- Dental* 1
- AD 122* 1
- MFW 113* 1
- MFW 195* 1

DISCHARGE DOCUMENTS

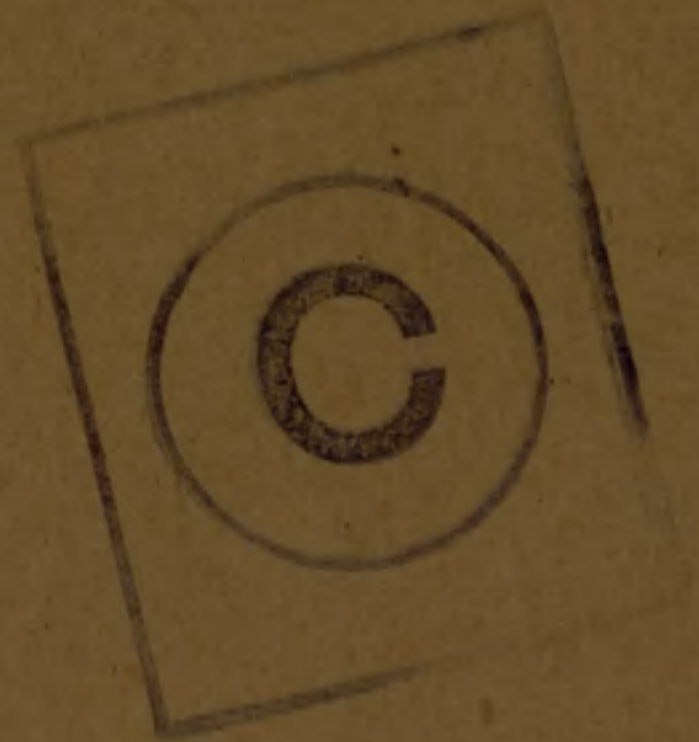
Name *BOUCHARD PIERRE*
 3283621
 Regt. No. _____ Rank *Pte*
 Corps *1st/2nd Inf Regt*

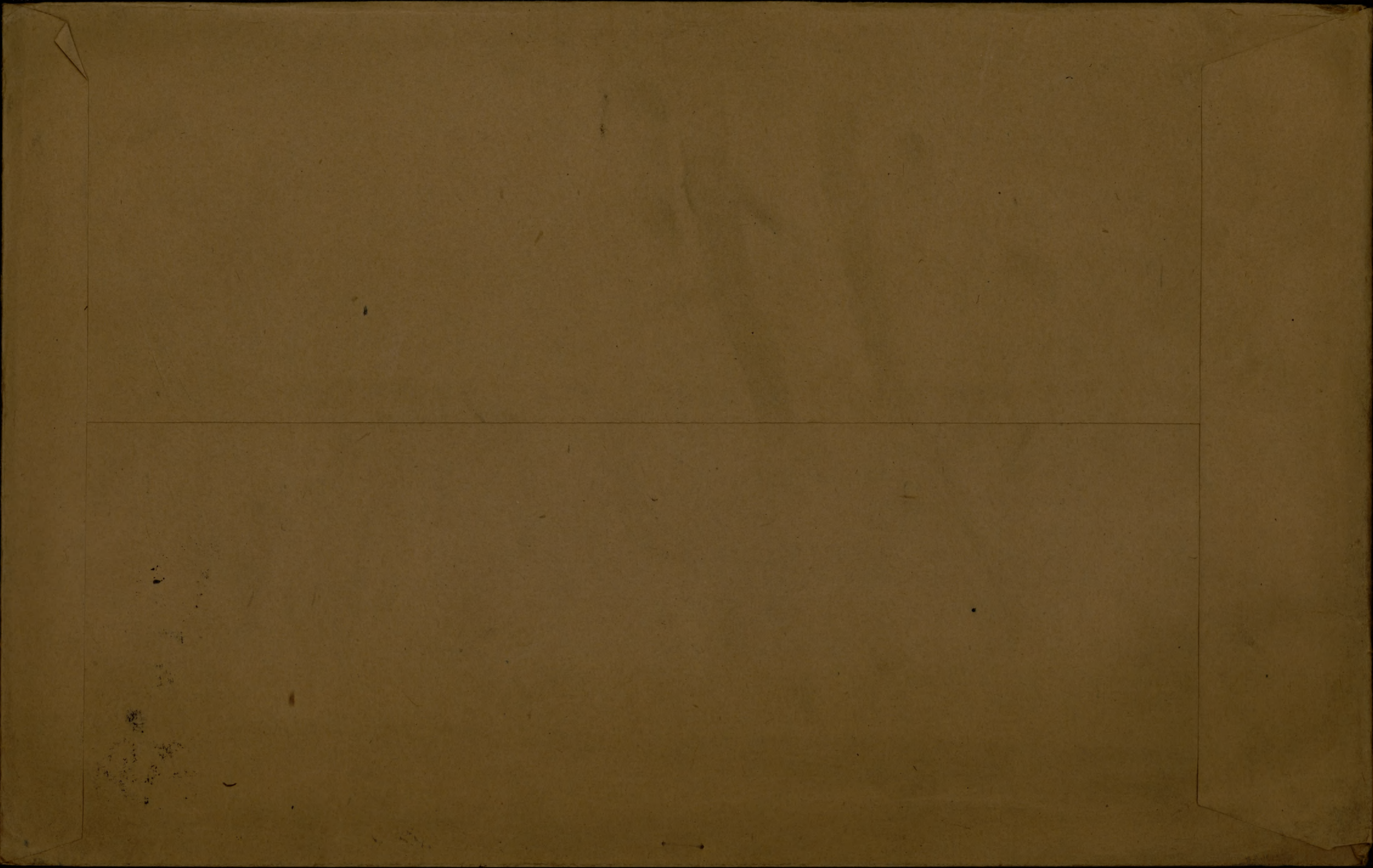
Demobilization

R. O. No.
 H. Q. No.



29607





*g.B.
2/8/18*

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class **ONE**)

1. Surname	Beuchard
2. Christian name	Pierre
3. Present address	St Onesime, Kamouraska Co. P. Q.
4. Military Service Act letter and number	180433 EC
(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	15 May 1895
6. Place of birth	St Onesime, Kamouraska Co. P. Q.
(town, township or county and country)	
7. Married, widower or single	Single
8. Religion	Roman Catholic
9. Trade or calling	Farmer
10. Name of next-of-kin	Pierre Beuchard
11. Relationship of next-of-kin	Father
12. Address of next-of-kin	St Onesime, Kamouraska Co. P. Q.
13. Whether at present a member of the Active Militia	No
14. Particulars of previous military or naval service, if any	None
15. Medical Examination under Military Service Act :—	
(a) Place	Quebec
(b) Date	17-6-18
(c) Category	A-2

DECLARATION OF RECRUIT

I, **Pierre Beuchard**, do solemnly declare that the above particulars refer to me, and are true.

Pierre Beuchard (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age	23	yrs.	1	mths.	Distinctive marks, and marks indicating congenial peculiarities or previous disease.	
Height	5	ft.	5½	ins.		
Chest measurement	fully expanded		39½	ins.		
	range of expansion		5½	ins.		
Complexion	Fair					
Eyes	Blue					
Hair	Light					

Jas Brodie
FIRST Depot Btin. **SECOND QUEBEC** Regt.

Place **Drill Hall Quebec** Date **11-6-18**

M. S. A.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3283621 (Rank) Private

Name (in full) BOUCHARD Pierre enlisted in
the 1st/2nd Quebec Regiment

CANADIAN EXPEDITIONARY FORCE at Quebec on the 17th
day of June 19 18

HE served in CANADA

and is now discharged from the service by reason of Demobilization

R.O. 1328 H.Q. 868-1-6 & D.O. 2513 of 19-11-18

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

Age 23 1

Marks or Scars

Height 5 5½

Complexion Fair

Eyes Bleu

NIL

Hair Light

Pierre Bouchard

Signature of Soldier

Alban

Lt. Col.

Issuing Officer
O.C. 1st/2nd Quebec Regiment,

Rank

Date of Discharge 21-12-18

Appointment

Signed at DRILL HALL Quebec, this 21st day of December 19 18

in Military District No. 5

File Reference No. 1-B-239

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the
particulars called for on
the back of this cer-
tificate will not be com-
pleted.

1/2 2K 1-13-239

20-11-40
24-11-46

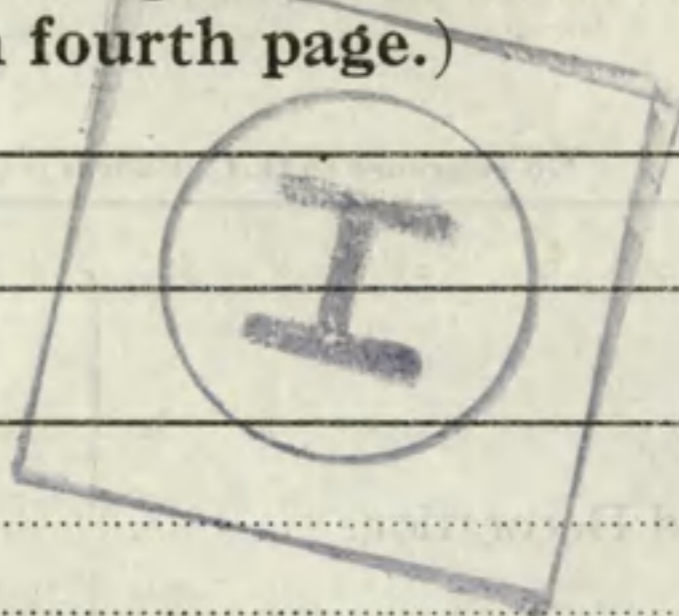


DEC 27 1918

This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)



No.	3283621
Rank	Private
Surname	BOUCHARD
Christian name	Pierre
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	1st/2nd Quebec Regiment,
Date of discharge	21-12-18
Place of discharge	DRILL HALL Quebec,

1. DESCRIPTION AT THE TIME OF DISCHARGE.

	Descriptive marks
Age 23 years 1 months.	
Height 5 feet 5 1/2 inches.	
Complexion Fair	
Eyes Bleu	
Hair Light	
Trade Farmer	NIL
Intended place of residence (To be given as fully as practicable.)	Sb Onesime Kamouraska

2. The above-named man is discharged in consequence of *Remobilization*

R.O. 1328 H.Q. 868-1-6 & D.O. 2513 of 19-11-18
Authority for discharge.....

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

3. Conduct and character while in the service have been, according to the records, etc.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Farmer
[Signature]

5. He is in possession of the following number of G. C. Badges:

Not Applicable

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

Not Applicable

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) *DRILL HALL Quebec,*

Albanien Lt. Col.

(Date) *21-12-18*

Commanding *1st/2nd Quebec Regiment,*

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) *DRILL HALL Quebec,*

Pierre Bouchard (Signature of Soldier.)

(Date) *21-12-18*

Rene Lefebvre (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

Not Applicable (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....*187*days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place) *DRILL HALL Quebec,*

(Signature) *Albanien* Lt. Col.

(Date) *21-12-18*

O.C 1st/2nd Quebec Regiment,,

Medical Examination upon leaving the Service

Of an Officer fit for general service or a Soldier fit for duty.

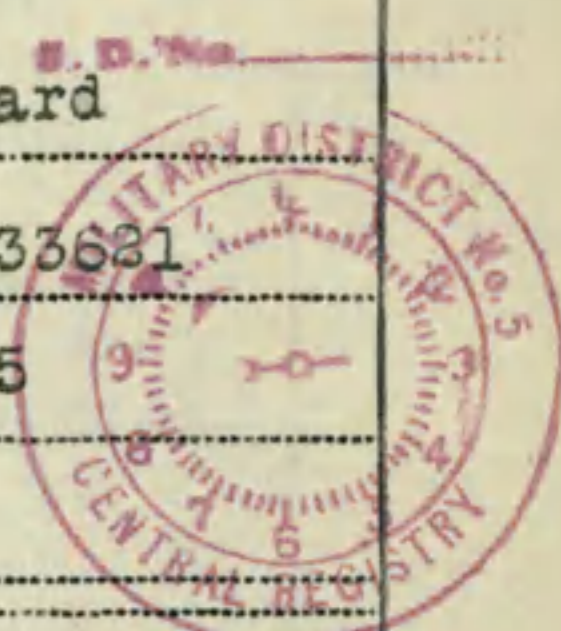
Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Spr Name Pierre Surname Bouchard

Unit or corps 1/2 Quebec Regt (If a soldier) Regtl. No. 32833621

Born at St Onesime Co Kam on, (date) May 16th 1895

Signature (for identification) P Bouchard



The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE-Any deformity, maiming or lameness? If so, describe.

Weight
143 lbs.

Colour of eyes
Blue

Height
5' 5 1/2" in.

Identification Marks
Nil

2. NUTRITION AND DIATHESIS? Good

After searching enquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? Is there a history of previous disability?
No

4. RESPIRATORY SYSTEM? Is there a history of lung trouble?
No

5. HEART?

Abnormal Sounds? No

Abnormal Size? No

Pulse Rate? 75 Intermittence or Irregularity? No
Muscular Tone? Good

6. ARTERIES.-(a) Any hardening or nodulation? No
(b) Blood Pressure. Normal

7. DIGESTIVE SYSTEM? Condition of teeth and tonsils to be included).
Good

8. GENITO-URINARY SYSTEM?

Normal

Urinalysis-S.G.?

Reaction?

Albumen?

Sugar?

9. SKIN, MIDDLE EAR, EYE
or any other part? No

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

No

11. Opinion as to the health and physical condition of the one examined?

Good

Examined at

Lucas

Signed

Francis J. [unclear]

M.O.

Date

Dec 22nd / 18

Signed

M.O.

P. Bouche

Signature note of soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

M.F.W. 129

7-17.

MEDICAL HISTORY SHEET. *3283621*

1. Surname *Bouchard* Christian name *Pierre*
 2. Number of report for service or claim for exemption according to Postmaster's Receipt or schedule *180433 EC*
 3. Consecutive number on schedule of men reporting for service (if he appears on it)
 4. Address (including street and number if any) *St Anselme St Kamouraska*



The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the *17th* day of *June* 19*18*, by the undersigned medical board sitting at *Hull Hall Quebec*

5. Age as stated *23* Years *1* Months. 6. Apparent age *23* Years *—* Month
 7. Height *5* Feet *5 1/2* Inches. 8. Weight *143* Pounds.
 9. Chest measurement { Minimum *34* Ins. Maximum *39 1/2* Ins. } 10. Complexion *Fair* { Eyes *Blue* Hair *Light* }
 11. Physical development *Good* { Good Fair Poor } 12. Smallpox marks *—*
 13. Number of vaccination marks { Right arm *—* Left arm *—* } 14. When vaccinated last *—*
 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

Signature of Man *Pierre Bouchard*

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category *A2*
 17. (a) Vision. R. *220* L. *220*
 (b) Hearing. R. *OK* L. *OK*
J. Vaillancourt, Capt. President.
[Signature] Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M. O.			M. O.
		M. O.			M. O.
		M. O.			M. O.

Joined *17th* day of *June* 19*18* at *Quebec*

Joined on enlistment	CORPS	REG'TL NUMBER	HABITS	DATE
Transferred to				<i>17-6-18</i>

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

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<i>Quebec</i>	<i>23/2/18</i>	<i>Diph</i>	<i>Aii</i> <i>MacD. J. Capt.</i> <i>Hull Quebec</i>

CANADIAN CONTINGENT EXPEDITIONARY FORCE

M. D. 5

LAST PAY CERTIFICATE

26

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F. 1916).

Regimental No 3383631 Rank Pte Name Bouchard Pierre
 Corps 1st/2nd Que. Reg. who was* discharged
 On 31-12-18 191... to 191...
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-12-18 191...
 to 31-12-18 191..., the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month	6.60	
Advances } No.			Reg'tl. Pay <u>31</u> days at \$ <u>1.00</u>	21.00	
by } No.			Field Allow. <u>21</u> days at \$ <u>10</u>	2.10	
Assigned Pay and Sep'n Allee. No.			Separation Allowances* (Monthly)		
Other charges <u>kit shortage</u>		50	Other Allowances* <u>clothing</u>	35.00	
Payment on transfer or discharge No. <u>3077</u>	64	20	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	64	70	Total	64	70

*Give particulars.

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of Assigned
 Pay for the month of 191... } (to) Assignee
 and Sep'n Allee. for month of 191... }
 (Address) nil

(†) Insert amount to be assigned, whether it has been paid or not.
 (‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

Out Allowance of \$..... has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment 25-11-18
 (2) if married and if a Separation Allowance Card has been submitted Single No.
 (3) cause of discharge authority Bn O. 355
 (4) authority for transfer

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay List of the Unit.

Date 21-12-18
Quebec, P.Q.
 Place

Alfred Maurice Lieut.
1st/2nd Que. Regt a/Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster; triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263

Squadron }
Battery } Conduct Sheet, " B. 263a
Company }

or

Field Conduct Sheet " W. 178

Copies of Convictions, by C. P. in MS.

Med. Hist. Sheet, Militia form B. 313

Casualty Form " W. 54

Medical Report for Invalid§ " B. 227

Dental History Sheet " B. 465

Last Pay Certificate " W. 44

Duplicate Discharge Certificate " W. 39A

‡Form of Will " W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper Militia Form W. 23

or

Particulars of Recruit " W. 133

Proceedings on Discharge " B. 218

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

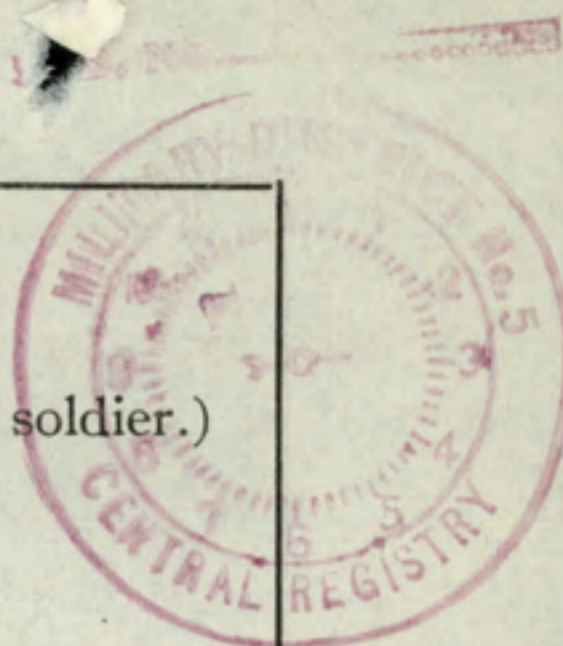
I hereby certify that the following documents are unobtainable.

Officer Commanding.

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)



DEC 27 1918

NONE

Pierre Bouchard

WITNESS

Rene LaRoche

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

M. F. W. 54. (A. F. B. 103.)

500M.—9-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps

Regimental No. 3283621 Rank Pte Name Pierre Bouchard
C. E. F.

Enlisted (a) 11-6-18 Terms of Service (a) C.E.F. Service reckons from (a) 17-6-18

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

Extended Re-engaged Qualification (b) Farmer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
21-12-18		DISCHARGED UNDER R.O. 1328 H.Q. 868-1-6 & D.O. 2513 of 19-11-18	Quebec	21-12-18	<i>[Handwritten signature]</i> REGIMENTAL ATTACHE, 2nd QUEBEC BATTALION



(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.]

21

Surname Bouchard
Christian names Pierre
Regtl. No. 3283621 Rank Pte
Unit 2nd Que Regt 1st Depo Bn
H. Q.
M. D. No. 5
T. O. S. June 11th 1918
D. O. Pt. II 161 of 10/6/18
S. O. S. Dis. 21/12/18
Reason Went mob.
Auth. D.O. 355 of 21/12/18
1/22/19

Next of kin Bouchard Pierre Relationship father
Address St Onésime
Kamouraska Co
P. Q.
Also notify:

BORN—Place Canada St Onésime P. Q. Date May 15th 1895
ATTESTED—Place Quebec, P. Q. Date June 11th 1918
O/S..... R/C.....



1st DEPOT BATTALION, 2nd QUEBEC REGIMENT

Name in full: **Bouchar Pierre**

Rank: **Private.**

No **3283621**

Enlisted at: **Quebec Que**

Date: **11-6-18.**

Married, Widower or Single: **Single.**

Previous Unit: **None.**

Next-of-Kin and Address: **Pierre Bouchard (Father)
St Onesime Co Kamouraska, Que Canada,**

Religion: **R.C.**

Category: **A-2**

Company: **"S"**

Occupation: **Farmer $\frac{3}{4}$**

Remarks:

CASUALTIES: Extracts from Part II Orders

Nature of Casualty	D. O. Part II Number:	Nature of Casualty:	D. O. Part II Number:
Pted S Co S D Discharge	329-1. 356		