1st Enl. 2nd Enl.

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

1 Attestation Papers..... 2

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

3 pc

1 p.c.

M. F. W. 62.
25m.—11-15.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name Bourque Edward Edmund

(1) 181339

(2) Regt. No. 817836 Rank Pte.

Corps 140th Bn. C. C. F. 31735

Med Unfit

1

10. 12

10. 12

11-13

Card Sept 28/16 M. Jones

Bishop's Transferred to 5th Bn

140-TH. BATT.

DUPLICATE.

817836

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? Bourque.
1a. What are your Christian names? Edward Edmund.
1b. What is your present address? Painsec Settlement, Westmoreland Co., N.B.
2. In what Town, Township or Parish, and in what Country were you born? Painsec Settlement, Westmoreland County, N.B.
3. What is the name of your next-of kin? Edmund Bourque.
4. What is the address of your next-of-kin? Painsec Settlement, Westmoreland Co., N.B.
4a. What is the relationship of your next-of-kin? Father.
5. What is the date of your birth? September 11th, 1894.
6. What is your Trade or Calling? Bricklayer & Stonemason.
7. Are you married? NO.
8. Are you willing to be vaccinated or re-vaccinated and inoculated? E.E.B. Yes.
9. Do you now belong to the Active Militia? No.
10. Have you ever served in any Military Force? No.
If so, state particulars of former Service.
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.

H

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Edward Edmund Bourque., 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.

Edward E. Bourque (Signature of Recruit)

Date June 9th, 1916. 191 . Corpl Howard M. Jamieson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Edward Edmund Bourque., 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.

Edward E. Bourque (Signature of Recruit)

Date June 9th, 1916. 191 . Corpl Howard M. Jamieson (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 St. John, N.B. this 9th day of June 1916.

X (Signature of Justice)

M. F. W. 23.
400M.—1-15.
H. Q. 1772-39-841.

Pte. Bourque enlisted on Nov 11th, 1915, with the 104th at Sussex, N.B., and his papers have never been received from there at this office.

Description of Edward Edmund Bourque. on Enlistment.

Apparent Age 21 years 9 months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... ft. ..... ins.

Chest measurement: Girth when fully expanded ..... ins.

Range of expansion ..... ins.

Complexion Dark.

Eyes Brown.

Hair Dark Brown.

Religious denominations:
- Church of England .....
- Presbyterian .....
- Methodist .....
- Baptist or Congregationalist .....
- Roman Catholic Yes.
- 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).

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 9th, 1916. 191 .

Place West St. John, N.B.

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.

Edward Edmund Bourque. 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.

(Signature of Officer)

Date June 9th, 1916. 191 .

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 817836 Rank Private Name E.E. Bourque

Corps 140th Battalion CEF. who was* Discharged Med. unfit

On September 14th -16 191..., to .....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-9-16 191..., to Sept 14-9-16 191..., the inclusive date of transfer or discharge.

Dr.	$	c	Cr.	$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques } No.			Regt'l Pay 14 days at $ 1.00c	14	00
Advances by Cheques } No.			Field Allow. 14 days at $ .10c	1	40
Assigned Pay No.			Other Allowances*		
Other Charges*			15 days Sub. at 60Cts.	9	00
Payment on transfer or discharge No.	24	40	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	24	40	Total	24	40

*Give Particulars.

A monthly stoppage of $ 15.00 (†) has been (‡) been paid on account of Assigned Pay for the month of August-16 191... to (Assignee) .....

(Address) .....

(†) 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.

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

REMARKS:—

State (1) date of enlistment 11-11-15

(2) if married and if a Separation Allowance Card has been submitted No

(3) cause of discharge and authority H.Q. 649-1-6 dated 11-5-16

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date .....

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

Date September 9th-16

Place Camp Valcartier, P.Q.

G. Harper Capt.
Paymaster 140th O. S. Batt. C.E.F.
Paymaster

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

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

M. F. W. 44.

200M.—6-16.
H. Q. 1772-39-903

Forwarded 30-9-16 BA

140

MEDICAL HISTORY SHEET.

Surname Bourque Christian Name Edward Edmund

Examined on 16th day of Nov 1915 at Sussex N.B.

Approved by [signature] Capt

Birthplace City or Town Pamsaic Settlement County Westmoreland, N.B.

Rank M.O.

Apparent age 21 yrs.

Trade or occupation Brick & Stone Mason

Height 5 Feet 9 Inches.

Weight 165 Lbs.

Chest measurement Minimum 34 inches. Maximum expansion 3 inches

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. 0 Left. 0 Number None

When Vaccinated last Never

(a) Marks indicating congenital peculiarities or previous disease Scar (3/4" x 3/8") inner side left knee. 1 1/4" Scar dorsum right foot.

(b) Slight defects but not sufficient to cause rejection

R. Eye :- D. 30.
L. Eye :- D. 20.

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

Date	Result	Vaccinations.
		M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
30-1-16		[illegible] M.O.
31-1-16		[illegible] M.O.
29/7/16	+	D. C. Malcolm M.O.

Enlisted on 11th day of November 1915, at Moncton, N.B.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	104th Batt	~~181339~~		11-11-15.
Transferred to..	140th O.S. Bn.	817,836.		6-2-16.

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Valcartier	7-8-16	Double flat feet	Hospital
Convalescent Home Quebec.	5-9-16.	Double flat foot.	Discharged as medically unfit!

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.

100M.—5-15.
H. Q. 1772-39-439.

Surname Bourque Christian Name Edouard Edmund

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.
Valcartier Camp. ~~Observation~~ HOSPITAL	AUG 10 1916										
Convalescent Home Quebec		11	8	16	7	9	16	Double flat feet	27	Disease originated previous to enlistment. Any aggravation due to service completely recovered from	J. Stage Major A. M. C. Medical Officer I/C.

DUPLICATE

Cmdr MPR

ATTESTATION PAPER.

No. 181339

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname?	Bourque.
1a. What are your Christian names?	Edward Edmund.
1b. What is your present address?	Pansaic Settlement.
2. In what Town, Township or Parish, and in what Country were you born?	Pansaic Settlement. N.B.
3. What is the name of your next-of-kin?	Edmund E. Bourque.
4. What is the address of your next-of-kin?	Pansaic Settlement. N.B.
4a. What is the relationship of your next-of-kin?	Father.
5. What is the date of your birth?	Sept. II 1894.
6. What is your Trade or Calling?	Brick & Stone Mason.
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.	No.
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, Edward Edmun Bourque, 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.

Edward E. Bourque (Signature of Recruit)

Date Nov. 16 191 5 Fred G. Coholan (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Edward Edmun Bourque, 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.

Edward E. Bourque (Signature of Recruit)

Date Nov. 16 191 5 Fred G. Coholan (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 Sussex N.B. this 16 day of Nov. 191 5

R. J. Maclauchlan (Signature of Justice)

J. P. IN AND FOR THE COUNTY OF KINGS N.B.

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Description of Edward Edmund Bourque on Enlistment.

Apparent Age 21 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft. 9 ins.
Chest measurement. Girth when fully expanded	37 ins.
Chest measurement. Range of expansion	1½ ins.
Complexion	Dark
Eyes	Grey
Hair	Brown
Religious denominations: Church of England	
Presbyterian	
Methodist	
Baptist or Congregationalist	
Roman Catholic	Yes
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.)

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 declares that he is not subject to fits of any description.

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

Date Nov. 16. 1915 J. A. M. Burnett

Place Sussex N.B.

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.

Edwrad Edmund Bourque 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.

(Signature of Officer)

LIEUT.-COLONEL
COMMDG. 104th O.S. BATTN. C.E.F.

Date Nov. 16. 1915

M. F. W. 41
10 M.—5-16.
1772-39-889.

Name Pte Bourque E. E.

B756

Regimental No. 817836

Unit 140th Battn

Date of enlistment 11-11-15

Place of " Nil

Married (yes or no) Not Mentioned

Amount of pay assigned monthly $ 15.00

To whom payable Edmond. S. Bourque

Name and address of next-of-kin Edmond S Bourque Co. West N. B.

Date and place discharged 31-9-16 Inclus

Reason for discharge Returned to Valcartier

Character on discharge No. Auth.

ob 2376. M. & D. 6692.

	Date 1916 From	To	PAY No. of Days	Rate	Amount	Field Allowance No. of Days	Rate	Amount	Other Credits L.R.	Total Credits	Voucher No.	Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
Aug	11	31	21	1.00	21 00	21	.10	2 10	11 00	34 10		852	19 10	853 15 00		34 10	
					21.00			2.10	11.00	34.10 →			19.10	15.00		34.10 →	

Returned to Valcartier

(31-9-16)

34.10

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

No. 817836 RANK Pte. NAME Bourque, E. E.

T. O. S. UNIT Casualties, C. E. F.

M. D. 5.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Aug. 11	1916 Aug. 31	H.		

Reg. No. 817838 Name Bourque, Edouard

Rank Pte Corps 140 Bn Age — Service —

Ledger No. Serial No.

HOSPITALS	DATE	DIAGNOSIS 6
Immigration C.H. Que.	11.8.16.	Double Flat Feet
Duty	9.7.16.	

P. T. O.

HOSPITALS	DATE	DIAGNOSIS

M. F. W. 2553.
75M.—9-19.
1772-39-1332.

No. 817836 RANK Pte. NAME Bourque, Edward E

T.O.S. Trans. from MD #5 - 1/9/16 (Do 186 of 8/9/16) UNIT 140th Battalion

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Sept 1st	1916 Sept 14	✓	Disch M.U. 14/9/16	Do 187 of 9/9/16
				UNIT SAILED SEP 25 1916
			O/c closed by Payment S.	

No. 181339 RANK Pte NAME Bourque Edward E

T. O. S. 11-11-15 UNIT 104th Battalion, C. E. F
(A. O. 33. 18-11-15)

M. D. 6

PAID FROM 1915	PAID TO 1915	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
nov 11	nov 30	✓		
Dec		✓		
1916				
Jan		✓		
Feb 1	Feb 5	✓	trans to 140th Bn. 6-2-16	A. O. 33. 9-2-16

No. 817836 RANK Pte. NAME Bourque, E. E.

T. O. S. UNIT 140th Battalion B.E.F.

Transfd 104th Bn 6-2-16
(DO 4 - 9-2-16)

M. D. 6

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
Feb. 6.	Feb. 29.	✓		
Mar		✓		
Apr.		✓		
May		✓		
June		✓		
July		✓	Prom. to Cpl. fr. 1/7/16	DO 127 of 1/7/16
			Rev. to Ranks, at own request 26/7/16	DO 147 of 26/7/16
Aug 1st	Aug 10	✓	Transf. to D 5. 10/8/16 (Likely Transf. to NSC)	DO 162 of 14/8/16

S. O. S. Dis
14/9/16. 5

CARD NO.

FOLL.

SURNAME. Bourque

CHRISTIAN NAMES Edward Edmund

REGL. No. 817836 RANK Pte

UNIT 140th Bn.

FORMER CORPS Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Bourque, Edmund

RELATIONSHIP TO SOLDIER Father

ADDRESS Painsec Settlement, Westmorland Co. N.B.

COUNTRY OF BIRTH Canada Painsec Settlement N.B. DATE Sept. 11th 1894

PLACE OF ATTESTATION St. John, N.B. DATE June 9th 1916

Prev. enlisted in the 104th Bn. at Sussex N.B. Nov. 11th 1915 No. 181,339 on paper

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Bricklayer ~~Stonemason~~ RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 21 YEARS 9 MONTHS

HEIGHT Not stated FEET INCHES

CHEST MEASUREMENT Not stated INCHES EXPANSION INCHES

COMPLEXION Dark EYES Brown HAIR D.K. Brown

DISTINGUISHING MARKS Not stated

MEDICAL EXAMINATION. PLACE St. John, N.B. DATE June 9th 1916

Present Address, Passamaquoddy Settlement, N.B.

(At Station or Hospital where finally disposed of.)

Station and Hospital } ..... Arrived from } .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. } .....

Administrative Medical Officer.

Militia Form B. 227.
20 m-5-15.
H. G. 1772—39—117.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal. }

Date of final disposal }

How finally disposed of }

The original Report is invariably to accompany the discharge documents of invalids.

Cla II
6

Military District No. 5
Quebec, Que.
SEP 1 1916
17-8-36-1
M. D. No. 5
DEPT. MILITIA & DEFENCE
OCT 12 1916
649-B-5048
CANADA

MEDICAL HISTORY OF AN INVALID.

1.—Station. Quebec Convalescent Home

2.—Regiment of Corps. 140th Bn.

3.—Regimental No. and Rank. } 817836 — Private

4.—Name. Edouard Bourque

5.—Age last Birthday. 22 years -

6.—Enlisted { on November 11th /15 at Moncton

7.—Former Trade or Occupation. } Bricklayer

8.—General remarks on his :—

(a) Conduct. In the Home Good

(b) Habits. Good

(c) Temperance. Good

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

Date Aug. 30th 1916.

9.—Service.	Years.	Days.
Canada	PERIODS. From	To
140th Bn. C.E.F.	Nov. 11th /15	Present.

10.—Disease or Disability. Double flat foot

11.—Date of origin, cause, present condition and whether the same is the result of service or climate. (1) (2) (3) (4)

(1) September, /15 (Previous to enlistment)
(2) Indeterminate
(3) Both feet flat
(4) No. but temporarily aggravated by service

Has it been aggravated by intemperance, vice or misconduct?

No.

7

Carded 30-9-16 BB

M. F. B. 227.
20m.—5-15.
H. Q. 1772—39—117.

[OVER]

12.—In gunshot wounds, or other injuries, state how caused; whether received in action or in Field Service, and at what place, and whether on or off duty. If not received in action, was a Court of Inquiry held?

13.—In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

14.—If aggravated, though not primarily caused by his service as a soldier, explain how it has been so aggravated.

Any aggravation by service completely recovered from.

15.—Is the disability permanent? If not, state its probable duration. (1) To what extent will it prevent his earning a full livelihood?

(1) Probably yes

(2) No disability now as result from service.

16.—Full particulars of medical treatment of case up to date of invaliding.

Rest

21/10/16

17.—If previously proposed for discharge on medical grounds, state the date, the disability, for which recommended for discharge, and the cause of remand of Corps.

18—State if for discharge on account of unfitness for service.

Yes.

[signature] Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

(In which it should be stated how far the Board concurs in the above Report.)

The Board having met and examined Pte. E. Bourque, concur in the above report and recommend that he be discharged from service as medically unfit.

Signatures :— J. B. Page — Major A. M. C. Medical Officer I/C. President.

Station Tucker Conv Hosp. Emile Nadeau

Date Aug 30th 1916 [signature] Members.

Date SEP 1 - 1916 [signature] Assistant Director of Medical Services.

Approved.

Date 21/10/16 [signature] Director of Medical Services.

[OVER]

3/176

(At Station or Hospital where finally disposed of.)

Station and Hospital } ..... Arrived from } .....

Date .....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

Date of final Medical Board or decision. } .....

Administrative Medical Officer.

Militia Form B. 227.

150 m—5-16.
H. Q. 1772—39—117.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal. }

Date of final disposal }

How finally disposed of }

The original Report is invariably to accompany the discharge documents of invalids.

MEDICAL HISTORY OF AN INVALID.

1. Station. Valcartier Camp.
2. Regiment or Corps. 140. Battn C.E.F.
3. Regimental No. and Rank. Private. 817,836.
4. Name. Bourque, Edward Edmund.
5. Age last Birthday. 21 years.
6. Enlisted on 11-11-15. at Moncton, N.B.
7. Former Trade or Occupation. Mason. Date. 7-8-16.
8. General remarks on his :—
   (a) Conduct. Good
   (b) Habits. Good
   (c) Temperance. Temperate

   (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

DEPT MILITIA & DEFENCE
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H.Q. CANADA

9. Service. Years. 2 Days. 71

	PERIODS.	
	FROM.	TO.
104th.O.S.Batt.,C.E.F.	11-11-15.	5-2-16.
140 O/S. Battn C.E.F.	6-2-16.	7-8-16.

10. (a) Disease or disability. Double Flat Feet.
    (b) Date of origin. Sept: 1915
    (c) Place of origin. Moncton N.B.
    (d) Cause. unknown

11. Present Condition. (Most Important). (To include full description of present disabling condition or conditions.) General condition good. Heart and lungs normal. Both feet are flat, the right more marked than left. Used arch supports before enlistment and since ~~then~~, but without relief of condition or symptoms. Feet are now more markedly flat than on enlistment.

12. (a) Is the disability the result of service or climate? No
    (b) Has it been aggravated by intemperance, vice or misconduct? No

M. F. B. 227.

150 M—5-16.
1772-39-117.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.) Scar 3/4" x 3/8 inner side left knee
Scar 1 1/4 dorsum Rt foot.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held? Not applicable

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise. not applicable

14. Treatment foot plates

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent? yes.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes? one month

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. 100% during period of disability.

18. State if for discharge on account of unfitness for Service. unfit.

D. Malcolm Capt
M. O. 140th. O. S. Batt., C. E. F
Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10.
11.
12.
15. Yes.
16.
17.

18 Is he unfit for Military Service. yes.

Recommendations:

Transfer to Hospital for appropriate treatment.

Signatures:—

Walter L. Barlow Capt President.

E. E. Locke
J. E. Affleck Capt A.M.C. Members.

Station. Valcartier
Date. 7-8-16

Date. 11 8/16
Approved.
Date. 18 8/16

[signature]
Asst. Director of Medical Services.

Oscar A. Cannon Capt
Director-General of Medical Services.