3453 ORIGINAL

5th M. D. FIRST Depot Battalion SECOND QUEBEC Regiment

Regtl. No. 3283923

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

1. Surname ..... LEBRUN
2. Christian name ..... Alfred
3. Present address ..... St-Bruno, Kamouraska Co. P.Q. Canada.
4. Military Service Act letter and number ..... 180007 E C
   (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 ..... 5th April 1895
6. Place of birth ..... St-Bruno, Kamouraska Co. P.Q. Canada
   (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 ..... Luc Lebrun
11. Relationship of next-of-kin ..... Father
12. Address of next-of-kin ..... St-Bruno, Kamouraska Co. P.Q. Canada
13. Whether at present a member of the Active Militia ..... No
14. Particulars of previous military or naval service, if any ..... No
15. Medical Examination under Military Service Act :—

    (a) Place Quebec, P.Q. (b) Date 12-6-18 (c) Category D3

DECLARATION OF RECRUIT

I, ALFRED LEBRUN, do solemnly declare that the above particulars refer to me, and are true.

Alfred Lebrun (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 23 yrs. 2 mths.

Height 5 ft. 7½ ins.

Chest measurement: fully expanded 35½ ins.; range of expansion 2½ ins.

Complexion Medium

Eyes Brown

Hair Black

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

Slight varicocele
Lumbar on the back

Jas Brodie Lt Col
O. C. 1st DEPOT BATTALION, 2nd QUEBEC REGIMENT

O. C. FIRST Depot Btln.

SECOND QUEBEC Regt.

Place Quebec, P.Q. Date 12th June 1918.

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

M.S.A.

REGIMENTAL DOCUMENTS

NAME LEBRUN ALFRED REGT. NO. 3283923 UNIT 1st D Bn H Q. FILE NO.

2nd QR.

	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)		M			DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category H
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	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)					
1	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
2	DENTAL HISTORY SHEET (M.F.B. 465)					Category
	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
1	MEDICAL EXAMINATION (M.F.W. 129)					
1	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)				16741	
	PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
1	Misc					
1	OBS					
1	R122					
1	Indust Cond					

H

W 2589
100M-11-18
1772-39-1977

23032

REG. NO. 3283923 NAME (SURNAME FIRST) Lebrun, Al.

RANK Pte. CORPS 7th Depot Bn.

AGE 23 SERVICE 3 days.

NAME OF HOSPITAL Military PLACE Quebec.

DATE OF ADMISSION June. 14, 18

DISEASE Scabies.

DISCHARGE July. 3. 18.

OPERATION

DISCHARGED TO DUTY Yes.

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS

W

H. Q.

M. D. No. ~~5~~ "C" 5

Surname Lebrun

Christian names Alfred

Regtl. No. 328923 Rank Pte

Unit 2nd Dub Regt. 1st Dns Bn (112th R.D.)

T. O. S. June 12th 19 18

D. O. Pt. II 162 of 11/6/18

S. O. S. 19

Reason

Auth.

Next of kin Lebrun, Luc

Address St. Bruno, Kamouraska Co P.Q.

Relationship Father

Also notify:

BORN—Place Canada, St Bruno PQ Date Apr. 5th 1895

ATTESTED—Place Quebec, P.Q. Date June 12th 1918

O/S 14-8-18 1391 3

R/C 2-7-19 360 Pte 114

W. 22—75M-5-18. 1772-39 839.

No. 3283923 RANK Pte NAME Lebrun Alfred

T. O. S. UNIT 1st Depot Battalion, 2nd Quebec Regt

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 June 12	1918 June 30	W	From N Coy 12-6-18	D.O. 164 of 6-18

3453

8

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. 3283923 Rank Pte. Surname LEBRUN,

(Given name in full) Alfred.

Unit or Corps 10th CANADIAN RESERVE BATTALION Birthplace St-Bruno, Kamouraska.

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

1. GENERAL DESCRIPTION:

Physique good Weight 160 lbs Height 5 ft. 7 in. Colour of Eyes brown.

Nutrition good

Pulse 72

Condition of arteries good

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).

A number of pox marks on body.

Opinion as to general health and physical condition good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no

Special Senses no Integumentary System no Respiratory System no

Disturbance of Mentality no Muscular System no Digestive System no

Osseous and Joint System no Any other general condition Yes

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Small Pox March 1918.

No disability

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

[OVER]

8

3453

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

Date 14/5/19 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 Alfred Lebrun

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

THIS SECTION FOR USE IN CANADA—

Examined at QUEBEC, P.Q. (Canada)

Date JUL 4 1919 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 a Medical Board.)

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

345-3

9

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3283923 (Rank) Private

Name (in full) LEBRUN Alfred enlisted in

the 1st Dep Bn. 2nd Quebec Regiment.

CANADIAN EXPEDITIONARY FORCE at Quebec on the 12th

day of June 19 18

HE served in England. Quebec Regiment.

and is now discharged from the service by reason of Demobilization. Medical Unfitness.

Para 11 Order No 1057 4-7-19 Demobilization R O 1420 (1e) of 12-12-18

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

Age	24yrs 2mths	Marks or Scars	
Height	5ft 7½		
Complexion	Medium		
Eyes	Brown		
Hair	Black		

Alfred Lebrun
Signature of Soldier

J. D. LeMoine Jrs
Issuing Officer

Major
Commanding Dispersal Station E.

Rank

Date of Discharge

Dispersal Station "E" JUL 4 1919 Military District No. 5

JUL 4 1919
Date 19

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.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

DISCHARGE CERTIFICATE

CANADIAN EXPEDITIONARY FORCE

Form B 122. 8/C
2353—100M—9-1-16

Rank Name LEBRUN. Alfred. Reg'l No. 3283923.

Unit Pt #112 Dft 2nd Que. If in perm. Corps, What Unit? Married or Single Single

Place and Date of Enlistment Quebec 12th June 1918 Place of Birth St. Bruno. P.Q.

Name and Address, Next-of-Kin Luc Lebrun.
St Bruno, Kamouraska Co. P.Q. Relationship Father

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

H. W. & V., Ld.—9546-16.

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.
		Arrived in England AUG 25 1918			H.M.T. Kia Ora
5-8-18	10 Res	T O S	Bisley	25-8-18	DO 210
24-6-19	" "	S.O.S. to Canada S.L. 84	Ripon	25-6-19	- 147

S.L.84 D.D.4507E/25-6-19

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.				

C.A.D.C. 5009A

3459

1

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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

NAME OF SOLDIER (Block Letters) LEBRUN Clifford

REGIMENT 10th Res. Bn. RANK Pte No. 328392

Date of Examination in England 13/5/19 | Date of Examination in France

DENTAL BOARD 13 MAY 1919 RIPON

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower

This is to certify that the Dental Treatment to be completed as shown here has been transferred to M.F.B. 484.

Capt.
O i/c Dental Discharge D. D. 5

HAS HE EVER REFUSED DENTAL TREATMENT? No

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 yes
- (c) In France

Signature of Dental Officer W. R. Wake Capt

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 5

NAME OF SOLDIER Lemuel Allen

REGIMENT 1st C.M.R.

RANK Pte

No. 384773

34153

6

INSTRUCTIONS

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

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

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

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhœa	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	OPERATOR	Military Dist.	REMARKS
Condition on first Examination	8/7/18										2 / 1,12									Alex. Fortin Lieut	5	Ext. 14 Can. 17, 18.

M.F.B. 465
2'40M 1-17
1772-39 650

DEPARTMENT OF NATIONAL HEALTH AND WELFARE
CANADA

3453

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

M. F. W. 54. (A. F. B. 10s.
500M.—9-16.
H. Q. 1772-39-920.

4

Casualty Form—Active Service.

Unit, Regiment or Corps 1st DEPOT BATTALION 2nd. QUEBEC REGIMENT

Regimental No. 3283923 Rank Private Name Alfred Lebrun
C. E. F.

Enlisted (a) 12-6-18 Terms of Service (a) Can. Exp. Force Service reckons from (a) 12-6-18

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				
		Embarked Canada		19.8.18	
		Disembarked England		25.8.18	
5.9.18	O.C. 10th Can. Res. Bn.	T.O.S. on ~~transfer from~~ arriving from Canada	B.Stott	25.8.18	D.O.P. 11210
24/10/19	O.C. 10th Can. Res. Bn.	Struck Off Strength on proceeding to Canada	Ripon	25/10/19	D.O.P. II. 147.

Lieut. Asst. Adjutant,
10th Canadian Reserve 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.

3453

4

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				
				JUL 4 1919	
		DISPERSED WITH EFFECT		JUL 4 1919	
		PART II ORDER No. 155			
		Demobilization R O 1420 (1c) of 12-12-18			

Major
Commanding Dispersal Station E.

CLINICAL CHART.

(To be pasted into Case Book opposite Patient's case.)

5

Corps 1st Depot Det R Hospital Station Penton

No. 3283923 Rank and Name Pte Lebrun Alfred Age 23 Service 3 days

Disease S Capris Date of Admission 14/6/18 Date of Discharge 3/7/18 Result Died Case Book 560 Folio 13

Dates of Observation																														
Days of Disease	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	8					
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.
107°																														
106°																														
105°																														
104°	Admitted																													
103°																														
102°																														
101°																														
100°																														
99°																														
98°																														
97°																														
Pulse Minute	60	78	76	84	84	88	64	72	84	84	84	84	60	90	90	96		72	82	90	100	102	102	100	96					
Respiration Minute	20 T	20 T	20 T	20 T	20 T	20 T	20 T	20 T	20 T	20 T	20 T	20 T	20 T	20 T	20 T	20 T		20 T	20 T	20 T	20	20 T	20	20 T	20					

Signature H. J. Robillard, Lieut. In charge of case.

3453

P 820
12474—375M—15-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY. * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:–	EFFECTIVE DATE:–
AMOUNT:–	AMOUNT:–

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

NAME:– LEBRUN. alfred

NUMBER:– 3283923

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
1 S & C.		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:– 112 Dpt 2nd Quebec

DATE ACCOUNT FIRST OPENED:– 6/8/18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			10th R.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK.

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
29.5.19	765	10 Res.	19.96				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALLCE
1 S & C	1 –	10		
Ledger Bal 239.67				
L.P.C. Cr Bal 219.65				

Disb to Can. Fg R 10078. 30.5.19 Ripon to Ripon MD 5

PARTICULARS OF RENDERING NON-EFFECTIVE:–

MONTH	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
5/8/18	J. S & C. Canada.								15 50		
	A/P 6-8-18 to 31-8-18	28 60							44 10	13	
		28 60									
Sept	A/P	33		Clse A/P					77 10	28	
				aR 18 Bromley 27-9-18	4 87				72 23		
				aR 1479 " 13-9-18	4 87				67 36		
				aR 1623 10 Res Bn 26/9/18	4 87				62 49		
		33			N pl 14 61						
Oct	Pte Pay	34 10		aR 1864 10 Res 10/10/18	7 30				89 29		
				aR 2077 " 25/10/18	5 11				84 18	43	
		34 10			12 41						
Nov	Pte Pay	33 –		aR 2337 10 Res 12/11/18	10 22						
				aR 2494 " 27/11/18	5 36						
				aR 2542 " 27/11/18	24 33				77 27	58	
Dec	PP	34 10		aR 2834 " 19/12/18	12 17				99 20	73	
Jan	PP.	34 10		— — —	— –				133 30	88	
		101 20			52 08						
Feb	P.P.	30 80		aR 3129 10 Res 10/1/19	7 30				156 80	103	
				" 3360 " 21/1/19	7 79				149 01		
				" 3571 " 14/2/19	7 30				141 71		
				" 3750 " 25/2/19	7 79				133 92		
Mar	P.P.	34 10							168 07	118	
				aR 3971 10 Res 11/3/19	7 30				160 77		
		64 90			37 48						
Apr	P.P.	33		— — —					193 72		
				aR 4204 10 Res 25/3/19	7 30				186 42		
				" 108 " 10/4/19	16 22				176 22		
									20		

Carried Forward.

COMPILED BY: Lt Sheppard

CHECKED BY: Lt Wright

NUMBER 3283923 RANK NAME LEBRUN a

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
April	Brought Forward.	33			17 52	✓			176 2[illegible]		
May	PP	34 10		— — — —					210 3[illegible]		
				AR 337 10 Res 25/4/19	7 79				202 5[illegible]		
		67 10		— — —	25 31				202 51		
June	P.P	33									
	Int on def pay to 31/5/19	4 10							23961		
				AK 766 10 Res 30/5	1996				21965		
				AK 987 " 18/6	973				20992		
		37 10			29 69						
				S.O.S. 25.6.19. 84							

Q.R.B.

Number 3283923 Rank Pte

Surname LEBRUN

Christian Name Alfred

Unit Q.R. Theatre of War England.

Date of Service 25-8-18

Remarks

Latest Address Transportation Co.
St-Bruno Co. Kamouraska.
P.Q. Canada.

Roll No. a Page 664

Ga. 35707 dep.
AUG 31 1971

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. S.C. 179057 Regt'l No. 3280893

2. Rank Private

3. Name Lefevre, Joseph William

4. Unit 1st Depot Battalion, 2nd Grenadier Regt.

5. Date of Discharge | | Place Grenade.

6. Reason for Discharge Demobilization

S.O.S. on return to records of Registrar. 14-8-18.

Part II Orders No. 50-3- Date, 15-8-18.

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

7. Authority

8. Proposed Residence after Discharge.....

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W. ?.....

.....

.....

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place.....

Date.....

.....

Signature.....

(O. C. Discharging Unit.)

M.F.B. 218a—50M.-2-19 1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. No

2. Ra

3. Na

4. Ur

5. Da

6. Re

S.O.S

Pa

7. Au

8. Pro

9.

I

M.

10.

T

Place

Date

M.F.B. 218a—50M.-

H M T·CA[illegible]A
SAILING, [illegible]
Embarked 25, 6, 19.

M 28-11 E-5

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

Dispersal Area "E"
Service Group 33
Occupational Group 1

1. No. 3283923 W.S.B. Class

2 Rank. Pte.

3. Name. LEBRUN, Alfred.

4. Unit. 10th. Canadian Reserve Battalion Quebec Regt. 1st D. Bn. 2nd Que. Regt.

5 Date of Discharge JUL 4 1919 Place Quebec

6 Reason for Discharge DEMOBILIZATION. 12-12-18 Cat: A
Demobilization R O 1420 (10) of
Occ. Group: Farmer (1)
Next of kin: Father
Religion: R.C.

7. Authority. Paid Svd Order # 1805 4-7-19

8. Proposed Residence after Discharge Transportation to:

St-Bruno, Co. Kamouraska. P. Q. Canada.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.? B39

Alfred Lebrun

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Quebec

Date JUL 4 1919

Major
Commanding Dispersal Station E.

Signature

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M F W. 23), or Particulars of Recruit (M.F.W. 133).
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. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discha[illegible] (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (to be closed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.3).
11. Equipment [illegible] Statement Q.M.G. Form (D.O.S. 2).
    or Clothing)
12. Last Pay Certificate (P. 551).
13. Pay Book (A.D.64),
14. War Service Gratuity (Form M.F.W. 2595),
15. Sundry [illegible].

Group A

Checked by No. 21

Date 10-6-19

HM
SAIL
Emba

1.	N
2	F
3.	N
4.	U
5	D
6	F
7.	A
8.	F
9.	M
10.	P
	D

M.F.B. 218a—300

3453 3283923

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

2

1. Surname Lebeau Christian name Alfred

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

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

4. Address (including street and number if any) St Boniface

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 26 day of Dec 1918, by the undersigned medical board sitting at Valcartier

5. Age as stated 23 Years 7 Months. 6. Apparent age 23 Years 7 Month

7. Height 5 Feet 7½ Inches. 8. Weight Pounds.

9. Chest measurement { Minimum 35½ Ins. / Maximum 37 Ins. } 10. Complexion { Eyes / Hair }

11. Physical development { 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 }

(Strike out disease admitted or suspected)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A1

17. (a) Vision. R. L.

(b) Hearing. R. L.

H Laurin Capt President.

A Fortescue Lt Member. Member.

Signature of Man Alfred Lebeau

Date	Result	Vaccinations	Date	Result	Anti-Typhoid Inoculations, Etc.
26-12-18		H Laurin M. O.	26-7-18	THS AUG 4 1918	M. O.
		M. O.			M. O.
		M. O.			M. O.

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

Joined day of 19 at

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment				
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result

N.B.—This sheet is to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.
300M.—4-18.
1772-39-439.

2. No.

3453

Christian Name

Surname

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

3453

3

MEDICAL CASE-HISTORY SHEET.

Hospital Military Station Genève

No. 3283923 Rank Pte Name Lebrun Alfred Age 23

Unit 1 Depot Inf Regt Service 3 days

Date of Admission 14-6-18 Date of Discharge 3/7/18

Diagnosis Scabies

Date of Origin Place of Origin

Cause of Illness or Injury:

History of Present Illness or Injury.
(Is Illness or Injury result of Service?)

Condition on Admission.

Scabies: on trunk, arms & legs.

Treatment.

H & Bath & Ung. Sulfobenzis.

Condition on Discharge from Hospital.

Fit A II

B

23032

H. J. Robillard, Lieut.
Medical Officer i/c Case.

Date 12/7/18

M. F. B. 313a.
30M—9-16.
39-139.

AUDITOR | PAYMASTER

M. & R S.

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

REGT. No. 3283923 RANK Pte. NAME (IN FULL) LEBRUN ALFRED (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN ..... RELATIONSHIP .....

ADDRESS .....

IS SEPARATION ALLOWANCE PAID? ..... DATE EFFECTIVE .....

TO WHOM PAID N.I.L. RELATIONSHIP .....

ADDRESS .....

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 1st D. Br. IF IN P.F. WHAT UNIT? .....

PLACE OF ATTESTATION 2nd Pioneer Regt. TRANSFERRED TO England DATE ..... AUTHORITY .....

DATE OF ATTESTATION 12-6-18 TRANSFERRED TO 10 Res. DATE 23-5-19 AUTHORITY .....

ASSIGNED PAY $ Nil. DATE EFFECTIVE .....

PAYABLE TO ..... RELATIONSHIP .....

ADDRESS .....

ANY CHANGE IN ASSIGNEE OR ADDRESS .....

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE ..... EFFECTIVE .....

DISCHARGED PLACE QUEBEC DATE 4-7-19 REASON Demob AUTHORITY D.O. 185 IF ENTITLED TO POST DISCHARGE PAY .....

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.
BALANCE FROM PREVIOUS ACCOUNT							209	92	209	92																								209	92
JULY	10	1/0	11		35		70		116						19196		4	87	5		316	05						6	60		325	92				
																													6	60		6	60		
									325	92																					332	52				6
			W.S.C.		S.A.		TOTAL		WAR SERVICE GRATUITY								W.S.G.		S.A.												Total Cr.		Total Db.		Sold		Tkp.	
177 days	9 months		280		—		280										70																		
																	70														140					
																	60																		
																	63	40													210		70			
																	70														280		—			
			280				280										280														280					

100M-1-19.—L. L. 53962—M. & D. 9723.
M. F. W. 2596.
1772-89-1390.

T.O.S. D.O. 185

PARTICULARS OR REMARKS

Ex. "CARONIA"
Ca. Quig. L.P.C.
Boot + Train money
Clothing allce
1st Payment W.S.G.
6 days overpaid on L.F.C.
1st Payment W.S.G.
4-8-19 - 1086886
2-9-19 - 1089576
1-10-19 - 1094638

Add

St Bruno
Co Kans
P.O.