

card
D.S.
2/16

832691
"a" 60

ATTESTATION PAPER.

No.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

DUPLICATE

QUESTIONS TO BE PUT BEFORE ATTESTATION

(ANSWERS)

145TH BN

1. What is your surname?..... Soucy.....
- 1a. What are your Christian names?..... Dennis.....
- 1b. What is your present address?..... St. Leonards, Madawaska Co., N.B.....
2. In what Town, Township or Parish, and in what Country were you born?..... Edmundston, Madawaska Co., N.B. Canada.....
3. What is the name of your next-of-kin?..... O. O. Soucy.....
4. What is the address of your next-of-kin?..... St. Leonards, Mad. Co., N.B.....
- 4a. What is the relationship of your next-of-kin?..... Father.....
5. What is the date of your birth?..... August 24th, 1898.....
6. What is your Trade or Calling?..... Laborer.....
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?..... Yes. 5mos 67th Regt. St. Leonards.....
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.....

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Soucy, Dennis, 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.

Dennis Soucy (Signature of Recruit)

Date... June 8th 1916 A. O. Atkinson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Soucy, Dennis, 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.

Dennis Soucy (Signature of Recruit)

Date... June 8th 1916 A. O. Atkinson (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... Moncton, N.B. this 8th day of June 1916.

Ernest E. Wood JP (Signature of Justice)

Description of Dennis Soucy on Enlistment.

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

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.)

Height..... 5 ft.... 4 ins.

Chest measurement. { Girth when fully expanded..... 37 ins.
Range of expansion..... 3 ins.

Complexion..... medium

Eyes..... Brown

Hair..... Brown

Religious denominations { Church of England.....
Presbyterian.....
Methodist.....
Baptist or Congregationalist.....
Roman Catholic..... yes
Jewish.....
Other Denominations.....
(Denomination to be stated)

None

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..... June 8 1916

Place..... Moncton, N.B. Macmillan Capt. med
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.

Dennis Soucy..... 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.

W. E. Forbes LT. COL.
145th "Overseas" Batt. C. E. F. (Signature of Officer)

Date..... June 8th 1916

REGIMENTAL DOCUMENTS

NAME

Sowcy Denis

REGT. NO.

832691

UNIT

145th Reg

H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

34022

23 — 8

23 — 8

7 9

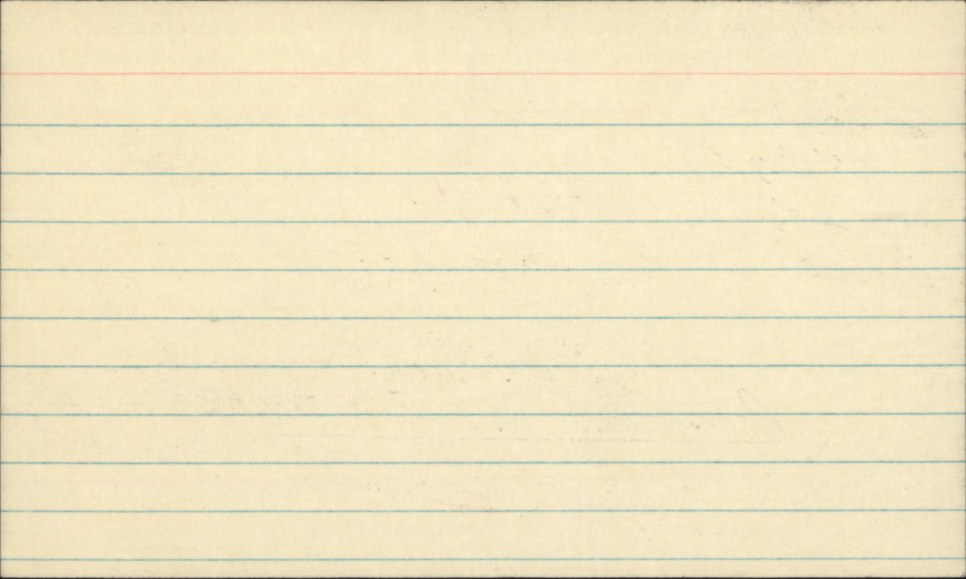
Bot
9158

Orig. card mislaid

832691 SOUCY, Denis, Pte.

UNIT: C.F.C.

{ British War Medal
Replacement on Prepayment
3422 St Antoine, Montreal (Que.)
→ DESP. MAY 13 1964
REGN No. engravers List 545



No. 8 32691 RANK

Pte.

NAME

Soucy Dennis

T. O. S. 6-6-16

UNIT

145th Battalion

D.O. 133 of 8-6-16

M. D.

6

PAID
FROMPAID
TOSIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

1916

1916

June 6 June 30

July

Aug.

Sep.

✓

✓

✓

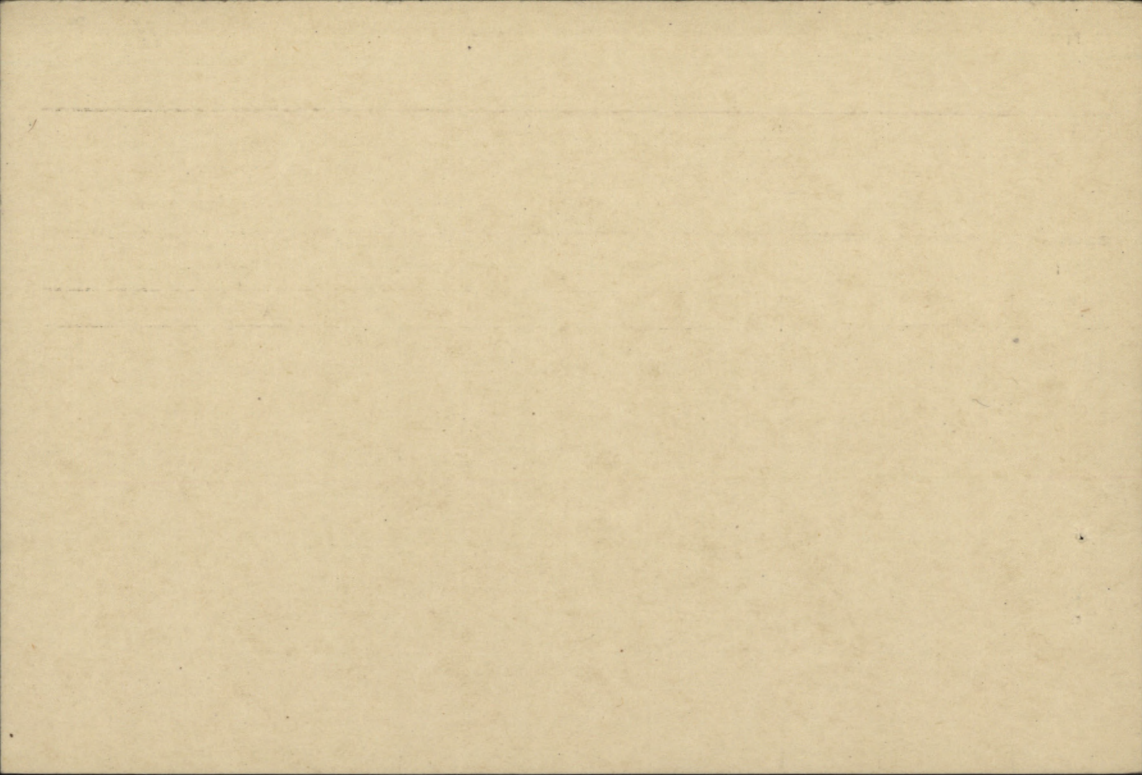
✓

a. w. l. 120 hrs. det.

D. O. 202 of 28-8-16.

UNIT SAILED

SEP 25 1916



NAME

RANK AND CORPS

CABLE

NO.

DATE

NATURE OF CASUALTY

REGT'L No.

H. Q. FILE No. 649.

FOLLOWS
No.

FOLLOWS

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
C 251 ¹	mit Lewisham	25-6-18	Influenza
C 254-1	Discharged	2-7-18	" "
C. 256 ¹	E? mit Lewisham	2-7-18	" (Ulcer)

SURNAME.

Soucy.

E. 5

CARD NO.

✓

CHRISTIAN NAMES

Dennis.

FOLL.

REGL. NO.

8.32691.

RANK

Pte.

UNIT

145 th.

Bn

FORMER CORPS

67 Regt (3 mos.)

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Soucy. C. O.

RELATIONSHIP TO SOLDIER

Father.

ADDRESS

St. Leonards. Mad. Co. N.B.

COUNTRY OF BIRTH

Canada, Edmundston, N.B.

DATE

Aug. 24th. 1898.

PLACE OF ATTESTATION

Moncton N. B.

DATE

June. 8th. 1916

Sailed from Halifax per S.S. "Iuscarma" 25-9-16

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

M. F. W. 22. 250M.-2-16. H. Q. 1773-39-332. 533-
R/6. 10-9-19. 408-25. (plc) 28

MARRIED

SINGLE

yes.

WIDOWER

TRADE OR CALLING

Labourer.

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

18.

YEARS

not stated

MONTHS

HEIGHT

5.

FEET

4.

INCHES

CHEST MEASUREMENT

37.

INCHES

EXPANSION

3. INCHES

COMPLEXION

Medium.

EYES

Brown.

HAIR

Brown

DISTINGUISHING MARKS

nil.

MEDICAL EXAMINATION.

PLACE

Moncton, N.B.

DATE

June. 8th 1916

Present Address.

St Leonards, Mad. Co. N.B.

Reg. No. ~~823961~~

CFC *BD*

Next of Kin **Canada**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
25 6	Mil. Hosp. Lewisham		Influenza	251		20302
NOTE. Corresponding No. should read as stated C 258						
2. 7	Dise d.		do	C 254		6204
	Ampt					

6

com.

Number 832691 Rank PL

Surname SOUCY

Christian Name Denis

Units 745 G. Bn Can Enl Theatre of War ENG

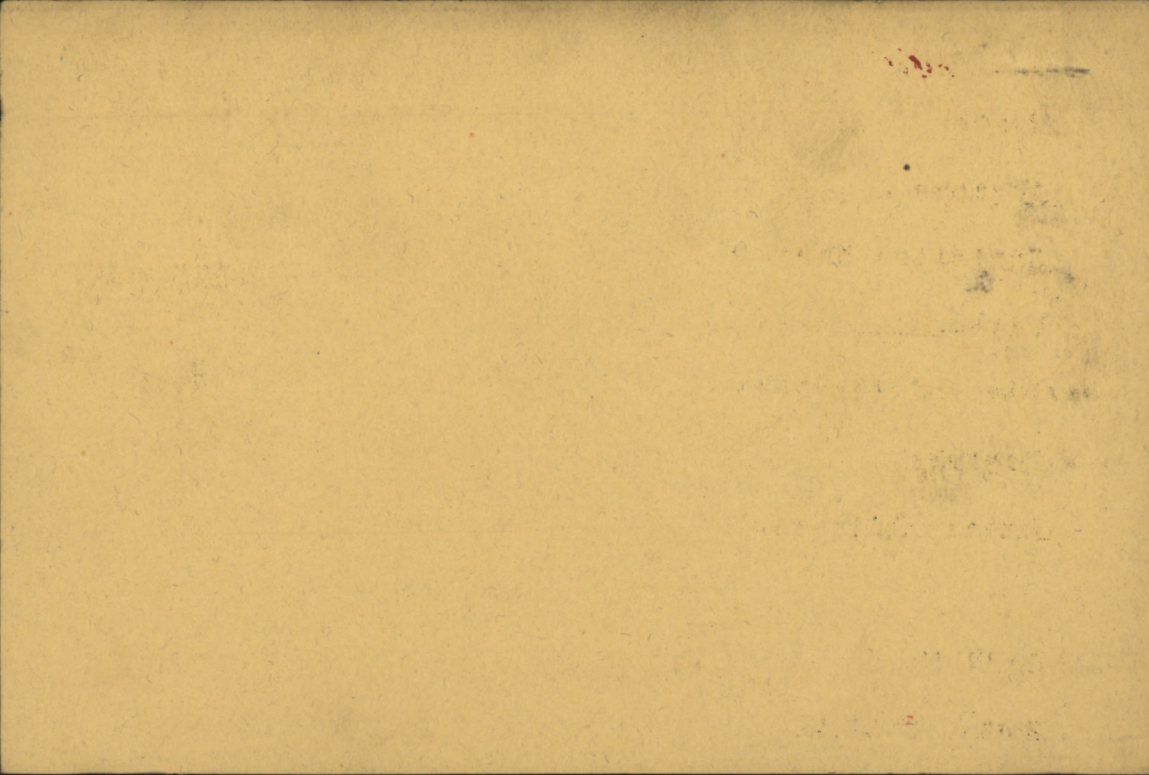
Date of Service 6.10.16

Remarks

Latest Address Vanbuxen, Maine
U.S.A

Roll No. A Page 2227

200m.-2-21.M.



SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.
832691
~~832691~~

SOU CY

D

RANK Pte.

UNIT

Co.

TROOP

BATTY

C.F.C. Depot.

HOSPITAL

DATE OF ADMISSION

Lewisham Military.

25-6-18.

1. HOSP.

2. HOSP.

3. HOSP.

4. HOSP.

DIAGNOSIS

1. Influenza. *JO*

2.

3.

DISPOSITION

Dis. 2.7.18

DATE

CL. 2-7-18. C251

REMARKS

*5.7.18 C254.1**8-7-18 C/256.1 Same Disch: entry as C/254-1.**9-7-18 C257.0 Note Correct-Reg. No 832691*

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

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

Casualty Form—Active Service.

Unit, Regiment or Corps.

Regimental No. 832691 Rank Pte. Name Soucy Denis
C. E. F.

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

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

Extended..... Re-engaged..... Qualification (b).....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
18.8.19.	C.C.C.	S.O.s. of "H" Wing to No. 1. C. H. Buxton	Witley	19-8-19	Pt. # 100. 78-d. 18.8.19. Capt. for Wof R.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

[illegible]

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 832691 (Rank) Pte

Name (in full) Dennis Sancy enlisted in
the 145th Battr

CANADIAN EXPEDITIONARY FORCE at Moncton, N.B. on the 8th
day of June 1916.

HE served in England - C.E.C.

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

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

Age 21

Height 5'-4"

Complexion Medium

Eyes Brown

Hair Brown

D S Sancy
Signature of Soldier

Marks or Scars

None

Date of Discharge

12/9/19

Issuing Officer

J. Currie

Rank

Major

Date 12/9/19 1919

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.

DISCHARGE CERTIFICATE CANADIAN EXPEDITIONARY FORCE

THIS IS TO CERTIFY that No. 85461 (Rank) Pvt

Name (in full) George Henry

enlisted in the

CANADIAN EXPEDITIONARY FORCE at Montreal, N.B. on the 14 day of June 1916

HE served in the

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

Demobilization.

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

Age	<u>24</u>
Height	<u>5' 8"</u>
Complexion	<u>Ruddy</u>
Eyes	<u>Blue</u>
Hair	<u>Dark</u>
Signature of Soldier	<u>George Henry</u>
Date of Discharge	<u>14 June 1916</u>
Rank	<u>Pvt</u>
Issuing Officer	<u>[Signature]</u>
Place	<u>Montreal, N.B.</u>
Year	<u>1916</u>

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

(SERVICE AND CASUALTY FORM Part II):

Regiment or Corps

143rd Bn

Regimental Number

832691

*Substantive Rank

Pte.

Surname

Soucy

Christian Names

Dennis

*Acting Rank

Nil.

(*To be entered in pencil to facilitate alteration.)

Nothing to be written in this margin.

Wt. W. 9833-P. 2068. 500,000, 3/19. S. & S., Ltd. E. 4602.

(A) Report.		(B) Authority of Part II. of Orders.	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty.	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer.
Date.	From whom received.					
	Arrived in England		S.S. Luscania		6-10-16	
7-10-16.	145 th Bn	DU 231	Transf to 9 th Res Bn.	S Cliff	7-10-16	
7-10-16	9 th Bn	281	T.O.S.	"	7-10-16	
9-11-16	"	314	SOS to C.B.A.B. & att to 9 Res Bn.	"	25-10-16	
31-10-16	C.B.A.B.	477	TOS from Com 9 Res Bn.	Shoreham.	25-10-16	
28-11-16.	9 Bn.	333.	Leaves att on return to Shoreham	S Cliff	28-11-16	
29-11-16	34 Bn.	199	Att from C.B.A.B.	Shoreham.	27-11-16	
19-3-17	A.A.D.	10	TOS from C.B.A.B.	"	10-3-17	
16-4-17	"	106	Leaves att from C.B.A.B. improv. C.F.B.	"	16-4-17	
7-5-17.	"	59	SOS to C.F.B.	B Stott	16-4-17	
20-4-17	C.F.B.	93	TOS from 34 th Bn.	London.	16-4-17	
12-5-17	" H.Q.	1	On strength H.Q. staff	"	1-5-17	
4-10-17	"	114	SOS to B.D. C.F.B.	"	3-10-17	
29-1-18	"	14	On Com from B.D. C.F.B.	"	9-1-18	
16-10-18	B.D. C.F.B.	147	On Com to H.Q. C.F.B.	D Dale	15-10-17	
15-3-18.	"	64	Leaves on Com H.Q. & att 53 Dist	"	1-12-17	
15-3-18.	"	64	Leaves on Com 53 Dist & att to H.Q. C.F.B.	"	19-1-18	

To be folded on this line.

(A) Report.		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders.	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty.	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer.
4-6-18	Hq. C.F.L.	Do-62	Granted Rem to Navy.	London.	4-6-18	
10-2-19	" "	6	Leaves to be attached.	"	7-2-19.	
8-2-19.	B.D. C.F.L.	39.	Leaves on loan Hq. C.F.L.	Wale.	7-2-19.	
18-3-19.	" " "	77.	Lt to Hq. T.W. Latford	"	17-3-19.	
20-3-19	Hq. C.F.L.	12	TOS from B.D. C.F.L.	London.	17-3-19	
Certified true copy. <i>C. D. Buxton</i> for <i>Lt. Col. C. D. Buxton</i> i/o Records, C.F.L. 18 AUG 1919 Hq. C.F.L. S.O.S. Lt. Col. Buxton written a J. D. Buxton Lt. Col. C.O., RECORDS, "H" WING, C.O.C. 20-8-19 S.O.S. 2-9-19 S.O.S. C.D.D. Buxton for return to Canada, Part II Order No. C.D.D. Buxton on proceeding to Canada, Part II Order No. EMBARKED SOUTHAMPTON 3-9-19 SS ADRIATIC. DISSEMBARKED HALIFAX 10-9-19. Capt. O.C. Troops, SS ADRIATIC. 204 <i>C. D. Buxton</i>						

Nothing to be written in this margin

CAPT.
For OFFICER COMMANDING
CANADIAN DISCHARGE BOOK

Signature of Dental Officer.

Certificat de Naissance
et Baptême



Certificate of Birth
and Baptism

PAROISSE DE - PARISH OF

Saint Hilaire NB

Ceci est pour certifier

— This is to certify

Que
That

J. Denis Dancy

enfant de
child of

Célestin Dancy

et
and

Cléodore Lebert

né (e) le
born on

24 août 1899

fut baptisé (e) le
was baptized on

25 août 1899

Parrains
Sponsors

Xavier Picard

et
and

Julie Corneau

par
by

Rev.

A. Corneau p^{re}

Confirmé (e)
Confirmed

19

par
by

tel que le démontre le Régistre
de cette paroisse.

as appears from the Register
of this parish.

Datē
Dated

Le 8 décembre

19*66*

Signature

Etienne Lebert p^{re}

(Voir au verso)

Certified true copy
W. Hogan
PARC

Certificate of Birth
and Baptism



Certificat de Naissance
et Baptême

PARISH OF - PAROISSE DE -

St. Michael's P.S.

Ceci est pour certifier - This is to certify

One
That

child of
enfant de

born on
né (s) le

Sponsors
Paroissiens

Confirmed (s)
Confirmé

tel que le démontre le Régistre
de cette paroisse.

as appears from the Register
of this parish.

Date
Dated

(When not used)

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12
 50m.—7-16
 H. Q. 1772-39-819

To Whom *Mrs. Cellistin Soucy*
 Address *Keegan*
Maine, U.S.A.

By Whom Assigned *Soucy, Dennis*
 Regtl. No. *832691*
 Rank *Pte.*
 Corps *145th Bu.*

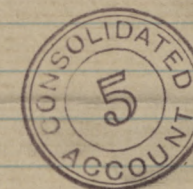
Rate *\$2.41*

OCT 1 - 1916

1500 Oct 1st 1917

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>12m 30¹⁰/₁₇ 8¹¹/₁₇</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



1/10/1914

1000
1000
1000
1000
1000

1000
1000
1000

MILITIA AND DEFENCE ASSIGNED PAY

M. F. W. 12a.
50m.—7-16
1772—39—819.

Sheet No. 2. Mr. Bellistia Soucy
(Assignee)

OVERSEAS CONTINGENTS

Name of Soldier Soucy, Dennis

L. L. Job 5470—Req. 6888.

PAYMENTS.

832691. Pte. 145 Bu.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>20.00</i>
				<i>15 Oct 1st 1917</i>
				OCT 1 - 1916
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>X 25983</i>	<i>20</i>	
Nov.		<i>A 32713</i>	<i>20</i>	
Dec.		<i>Y 35009</i>	<i>20</i>	
Jan.	1917	<i>H 40490</i>	<i>20</i>	
Feb.		<i>G 47210</i>	<i>20</i>	
March		<i>S 53765</i>	<i>20</i>	<i>20 B.</i>
April		<i>P 5008</i>	<i>20</i>	<i>20 Cu</i>
May		<i>Q 11459</i>	<i>20</i>	
June		<i>P 18692</i>	<i>20</i>	<i>20 T.</i>
July		<i>S 25636</i>	<i>20</i>	<i>6</i>
Aug.	<i>338105</i>	<i>I 32383</i>	<i>20</i>	<i>in I 32383 Canceled</i>
Sept.	<i>439903</i>	<i>F 40707</i>	<i>20</i>	<i>85 F 40707 Canceled</i>
Oct.		<i>T 46823</i>	<i>20</i>	<i>10 M</i>
Nov.		<i>T 56719</i>	<i>10</i>	<i>10 1000 bk to ady</i>
Dec.		<i>T 58474</i>	<i>15</i>	<i>15 Future</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.		Remarks.	
Aug.	1913					
Sept.						
Oct.						
Nov.						
Dec.						
Jan.	1919					
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						
Dec.						
Jan.	1920					
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						

Relationship

Separation Allowance \$ N/A. R.E. No. 22624 Payable to

Relationship

Discharge, Date and Place	Reason	Character
---------------------------	--------	-----------

H. W. V., Ld.—9546-16.

Place	Reason
1 st sheet	File in Envelope

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.				
9.8.19	C.FVC	S.OS. to H.Wing	Pte Witley	8.8.19	D.O. 221
7.8.19	"	TD S. from T.W. Catford	"	6.8.19	" 219
		D44-E-24. 3.9.19.			
		102-E-74 Error 16.8.19			
39.9.19 <i>Call</i> L.O.S. to Canada <i>Burton</i> 39.9.19 <i>Call</i>					

[illegible]

1st Sheet of Record

R-122
8,401-50,000-21-10-16.

LTR

Rank

Name

SOUZY, Dennis

Reg'l No.

832691

Unit 145th, Bn.

If in perm. Corps, }
What Unit? }

Married or Single

Single.

Place and Date of Enlistment Moncton, N.B. June 8th, 1916.

Place of Birth Edmundston,

Madawaska Co, N.B. Canada.

Name and Address, Next-of-Kin C.O. Souzy.

St. Leonards, Mad, Co, N.B. Canada.

Relationship Father.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

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.				
CFC					
Arrived in England S.S. Tuscania, 6-10-16.					
7.10.16	I45 Bn Trans.To	9 Res Bn	S'cliffe	7.10.16	353 231
7.10.16	9th Bn	Taken On Strength	S'cliffe	7.10.16	Pt 11 281
9-11-16	9th	SOS to cccw att to 9th Bn for PBP.	"	25-10-16	314
31-10-16	CCAC	LOS. on com at 9th for PBP data	Shoreham	25-10-16	" 477
28-11-16	9th B.	Ceases to be attached & returns to Shoreham (Cat A)	S'cliffe	28-11-16	333
29-11-16	34th	Attw from CCAC	Shoreham	27-11-16	" 199
19.3.17	A.R.D.	T.O.S. from C.C.A.C.	"	10/3/17	" 10. & cccw 119 d 13.3.17
16-4-17	"	ceases to be attached from	"	16-4-17	" 106
7.5.17	"	ccac on prog to C.F.C. SOS to C.F.C.	B'shall	16.4.17	" 59.

to be file in envelope

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.				
20.4.17	C.F.C.	TOS from 34	London	16.4.17	PT 2093.
12.5.17	" HQ	On Strength HQ S. Pte	"	1.5.17	" " PT 10136
4-10-17	"	SOS to BDCFC	"	3-10-17	PT 10114 23-10-17 TOS
29-1-18	"	On Com from BDCFC	" London	19-1-18	" 11
16.10.17	B.D.C.F.C.	On Com HQ.C.F.C.	" Sdale	15.10.17	- 147
15.3.18	"	Ceases on com HQ.C.F.C.	"		
"	"	Attached to 53 Dist.	"	1.12.17	" 64
"	"	Ceases on com 53 Dist.	"		
"	"	Attached to HQ.C.F.C.	"	19.1.18	" 64.
11.6.18	HQ.C.F.C.	Granted perm to M.M.	" London		" 62
10.2.19	"	Ceases to be att'd	"	7.2.19	" 6
8.2.19	B.D.C.F.C.	Ceases on Comd to H.A.T.W. Catford	" Sdale	7-2-19	" 39.
18.3.19	"	S.O.S. to H.A.T.W. Catford	" " "	17-3-19	" 77.
20.3.19	HQ.C.F.C.	TOS from BDCFC.	" London	17-3-19	- 12
12-4-19	H Wing	TOS from N Wing	" Watley	8-8-19	- 73
		102-E-74 Sails		16.8.19	
15-8-19	HQ.B.F.C.	SOS to Base & 1st section Wt.	" London	6.8.19	" 36
9.8.19	B.F.C.	SOS to H Wing	" Watley	PT.19	" 221

Wing CCoy

War Service Badge
Class "A" No. _____

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. 832691 Rank Pte Surname Saucy
(Given name in full)

Unit or Corps Genl Depot Birthplace Madagascar

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

1. GENERAL DESCRIPTION:

Physique good Weight 140 lbs. Height 5 6 1/2 ft. Colour of Eyes blue
Nutrition good
Pulse 78
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)
Scar above rt elbow
and 1 2 3 fingers

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 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.

Flu - 1918 July - O.K.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at W. H. H. H. (Overseas)

Date 16.8.17

Signed J. R. L. F. E. K. 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 R. S. S. S. S.

(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 a Medical Board.)

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

Auth D A L. 14.1.48 - 13.6.17.

DUPLICATE. 832691

MEDICAL HISTORY SHEET.

DUPLICATE

Surname Poucy SOUCY Christian Name Dennis

Examined { on 21 day of September 1916
at _____

Approved by MA. Oulton

Birthplace { City or Town Cammarston
County Mecklenburg N.B.

Rank Capt Adlt. M.O.

Apparent age 18

Trade or occupation Shingle maker

Height 5 Feet 4 1/2 Inches.

Weight 140 Lbs.

Chest measurement { Minimum 32 inches.
Maximum expansion 35 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks { Arm Right Left.
Number 2

When Vaccinated last 1915

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS.
<u>16.9.16</u>	<u>Good</u>	<u>MAO</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>6.7.16</u>	<u>Good</u>	<u>MAO</u> M.O.
<u>11.7.16</u>	<u>"</u>	<u>MAO</u> M.O.
<u>15.7.16</u>	<u>"</u>	<u>MAO</u> M.O.

Enlisted on 6 day of June 1916 at Imperial W.B. Canada

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>145th</u>	<u>832691</u>		
Transferred to.....	<u>9th Res. Bn</u>			<u>7/10/16</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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.

Surname.

[illegible]

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.

145th Overseas Batt. C.E.F.

(2) Regimental Number

837691

(3) Full Name of Soldier

Wennis Lancy

(4) Place of Birth

Edmeston. Madawaska. Co. N.B. Can.

(5) Are you married, or not?

No.

(6) If married, state,

(a) Full name of your wife

(b) Present Postal Address

(7) Are you a widower?

(8) Have you any children?

If so, give number of boys and girls

Also their names and ages

(9) Is your Father alive? *Yes. C.O. Loney.*
If so, state name and address *St. Leonards. Madawaska Co. N.B.*

(10) Is your Mother alive? Yes.
If so, state name and address. Mrs. C. O. Soucy.
St. Leonards, Madawaska Co. N.B.

(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.

concerning you.

M. C. O. Soucy.
St. Leonards.
Madawaska Co. N.B. Canada.

(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?.....

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.

Date _____

W. E. Forbes L.T. COL.
145th "Overseas" Batt. C. E. F.
Officer Commanding.

P. 559.
MARRIED OR SINGLE *single*
PLACE OF BIRTH *Edmuntston N.B. Can.*
NAME AND ADDRESS OF NEXT OF KIN *C. O. Soucy*
St. Leonards, Madawaska Co. N. B.
RELATIONSHIP OF NEXT OF KIN *father.*
NAME AND ADDRESS OF NEXT OF KIN
RELATIONSHIP OF NEXT OF KIN
SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)
PAYABLE TO
RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &C.			
PARTICULARS	EFFECTIVE DATE	AUTHORITY	
<i>transferred to draw U.C. 4-10-17</i>	<i>4-10-17</i>	<i>20. Par 114</i>	
ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. No. *832691* RANK *Pte.* NAME *Soucy Dennis* 476
IF IN PERM. CORPS } UNIT *145th* TRANSFERRED TO *9th Reserve* DATE *7/10/16* AUTHORITY
WHAT UNIT }
PERMANENT FORCE ALLOWANCES TRANSFERRED TO *3rd Bn.* DATE *16-17-16* AUTHORITY *Bo 335*
PLACE OF ATTESTATION *Moncton, N. B.* TRANSFERRED TO *Can. Training C* DATE *11-5-17* AUTHORITY *Bo 93 507*
DATE OF ATTESTATION *6/6/16* TRANSFERRED TO DATE AUTHORITY
ASSIGNED PAY MONTHLY \$ *20.00* DATE EFFECTIVE *7/10/16*
PAYABLE TO *Cellistia Soucy, Keegan, Maine U.S.A.* RELATIONSHIP *mother*
ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *Oct 1 1917 (arm. gains 12/19)*
PAYABLE TO *Charge 24th march 1918* RELATIONSHIP
ad. Canada
STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *13/2/18* EFFECTIVE *1st April 1918* REASON *no need of the money.*
DISCHARGE DATE AND PLACE REASON AND AUTHORITY
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Checked *W. Edward*

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																											
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To 3rd Bn 16/12/16 Bo 335
94005-52 19 176
Can. Training C 11/5/17 Bo 93
20-4-17
24005 513 19/4/17.
114-17

Chn. A.P. 15-00
A.P. 2803

July 31
Aug 31
Sept 30

NUMBER		RANK		NAME											
MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION				
Nov.	P. P	33	-	CAB 2333 15/11/8 L F G £11.6.0. 829370.	973		15		33 58						
Dec	P. P	34	10	CAB 2687 26/11/8 L F G. £9.4.11 890763 Dec:	487		15				40				
Jan	P. P	34	10	CAB 2904 13/12/8 L F G. £9.4.11 F 35354 Jan	2433		15		50 85		30				
Feb.	"	30	20	ML 3222 7-11-9. Ldn " 3584 13-1-9 Cal	973						100				
				£9-4-11. F84882 Feb			15				30				
Mar	"	34	10	MC 13878 13-2-9 B.D. £9-4-11 G24394 Mar	730		15				30				
				AR 10220 17.3 B.D.	1703										
				" 4329 14.3 London	487				37 09						
Apr	"	64	90		18 66		30				60				
May	"	33	-	A 17537. Apr. £9.4.11			15				30				
	"	34	10	AR 1158. 15.4.19. London	17 03										
				J O P. 122. 15.2.19 B.W.	10 40										
				A 72516. May £9.4.11			15				30				
				AR 1429. 16.5.19. B.D.	17 03				29 73						
June	"	67	10		14 46		30				60				
July	"	33	-	A 80719. £9.4.11			15				30				
	"	34	10	AR 1656. 14.6.19 London	17 03										
				A 87969. £9.4.11			15		49 80		30				
		67	10		17 03		30				60				
				ab 1011 11/7 676	19 47				30 33						
Aug	✓	34	10	AR 1166 6/9/19 L F G (4A)	19 47										
				AR 128067 18.9.10 any letter	973		30		24 70		60				
				AR 4702 22/9 Bux End (D)	973				14 97						
				AR 5480 26/9 " " (D)	14 60				- 37						
		34	10		34 06		30				60				

205 8/4 19/19

205 8/4 31/9/19

N.E. 111161

PROCEEDINGS OF A MEDICAL BOARD.

Dated at.....1916.

No. 852691 Rank..... Name. Soucy Dennis

Local Unit.....9..... Overseas Unit..... Age 17

Examination held at.....Whale Plain

DISABILITY.
Overseas—Local.
(scratch one out)

PRESENT CONDITION.

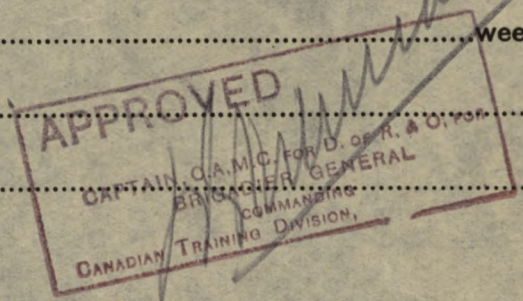
17 weeks.

BOARD RECOMMENDS:—

Boys Bn

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty.....weeks.
4. Fit for Permanent Base Duty.....
5. Discharge.....

Yes



Signatures:—

Members

{ D. J. M. LuptonPresident.
J. J. Thomascaptain

APPROVED 26 OCT 1916

Dated at.....1916.

S. L. Backer

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD

Dated at.....1918.

No.....Rank.....Name.....

Local Unit.....Overseas Unit.....Age.....

Examination held at.....

DISABILITY
Overseas—Local
(enter one only)

PRESENT CONDITION

BOARD RECOMMENDS—

1. Fit for Duty.....
2. Fit for duty after.....weeks' physical training.
3. Fit for Temporary Base Duty.....weeks.
4. Fit for Permanent Base Duty.....
5. Discharge.....

Signatures—

President.....

Members.....

APPROVED

Dated at.....1918.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Oct 1/16

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

26	15		
----	----	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 832691

Rank Pte Promoted

Reverted

Discharge

Soldier's Name

Dennis Soucy
145th Bn

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Mrs Bellister Soucy

Address

Keegan

Change of Address

Keegan USA

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total
Dec 31			285	285
Jan 18	21100		15	15
Feb 18	71099		15	15
Mar 18	71419		15	15
	T 93682		15	15
			xxx	xxx

REMARKS

M. A. 7.

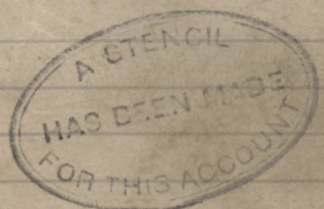
21099 Jan 1891
Original assignment 20. Oct-16
reduced to 15. Oct 1-17
M.R.C. 2nd imp. to dec 20-3-18 2 M. 30-10-17
Stop payments 31-3-18. per 3. M
of 15-2-18. File 17073-D-3.
W. Phillips 12-3-18

A/c Closed

Ret'd per... Adriatic

Date 10.9.19 M.F.W. 187 8.9.19

Clerk... ex Mitchell



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

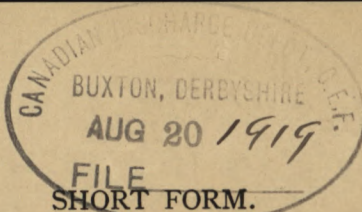
No.				
Rank	Promoted	Reverted	Discharge	
Soldier's Name				
Battalion				
Beneficiary				
Relationship				
Address				

PARTICULARS OF ASSIGNMENT

Name	
Address	
Change of Address	
1	
2	
3	
4	

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
------	---------------	---------------	---------------	-------	---------

NO OF
DEPENDANTS *Two*



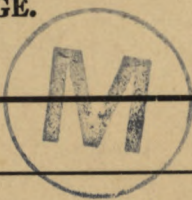
7
L-5
DISPERSAL AREA.....

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

RELIGION *R.e.*

NEXT OF KIN *wife*



1. No. *832691*

2. Rank *Pte*

3. Name *Soucy, Denis*

4. Unit *C.F.C.* *145 R.B.W.*

5. Date of Discharge *2 SEP 12 1919* Place

6. Reason for Discharge

CATEGORY *A*

TRADE *Financier*

OCCUPATIONAL GROUP *13*

SERVICE IN FRANCE *nil*

7. Authority *R.O. 1420 "C"*

8. Proposed Residence after Discharge *Quebec for*

Vanburen; me
U.S.A

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. ? *39*

D.S. Soucy
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

Signature

(O. C. Discharging Unit.)

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 (D.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260 d)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment Statement Q.M.G. Form (D.O.S. 2).
and Clothing)
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group 6
 Checked by No. 4
O.P.M.
 Date 1-9-19

M. F. W. 2596.

