1st DEPOT BN. 1st QUEBEC REGT. ORIGINAL

E Coy

ATTESTATION PAPER.

No. 3081480

Folio.

BCMR# P200
N H

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ... Tremblay
1a. What are your Christian names? ... Paul
1b. What is your present address? ... 58 Detroit St., Fall River, Mass., USA
2. In what Town, Township or Parish, and in what Country were you born? ... Matane, QUe.
3. What is the name of your next-of kin? ... ~~Na~~ Henry Tremblay
4. What is the address of your next-of-kin? ... St. Felicite, P.Q SUFFICIENT ADDRESS Quick
4a. What is the relationship of your next-of-kin? ... Father
5. What is the date of your birth? ... 21st May 1885
6. What is your Trade or Calling? ... Section hand
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 P.J
10. Have you ever served in any Military Force or naval 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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? ... No
14. If so, what was the nature of the disability? ... Nil
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? ... No
16. If so, what was the reason? ... Nil

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Paul Tremblay, 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.

Paul Tremblay (Signature of Recruit)

Date Jan 9th 1918 (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Paul TREMBLAY, 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.

Paul Tremblay (Signature of Recruit)

Date Jan 9th 1918 (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 Montreal this 10th day of Jan 1918.

(Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

Description of Paul TREMBLAY on Enlistment.

Apparent Age 32 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft 6 ins.

Chest measurement.
- Girth when fully expanded 36 ins.
- Range of expansion 2½ ins.

Complexion Medium

Eyes Black

Hair Black

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

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

R 20
L 20
Ears Cl

CERTIFICATE OF MEDICAL EXAMINATION.

Category - A 2

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 Jan 10th 1918.

Place Montreal

A. E. Lyons Capt
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.

Paul TREMBLAY 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.

Chas. W. McGregor Major. (Signature of Officer)
for O.C. 1st Depot Bn. 1st Quebec Regiment.

Date JAN 14 1918 191 .

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

Attestation Papers.....1.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....2.....

Proceedings on discharge.....1.....

Corps History Sheet.....

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

Parchment Certificate.....1.....

Medical Report for Invalids.....

Medical History Sheet.....2.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

1 Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....2.....

a7.B 122 — 1 Lapsed, 1 R 122

DMS 1375 — 1

M7W 129 — 1

CAOC 5009 — 1

M7W 2571 — 1

M.F.W. 62
100m.—6-17.
H.Q. 1773—39—935.

M7W 192 — 1

Misc — 1 Med cert sheet

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name TREMBLAY PAUL

Regt. No. 308480 Rank PTE

Corps 1st Depot Bn 1st D R

DEMOBN

B.B.C.O.

K8/11/18

17309

42 - 12

4 - 12

6 - 12

1.

4 CARD NO. 4 Demob

SURNAME. Tremblay, Paul

CHRISTIAN NAMES

REGL. No. 308480 RANK Pte.

UNIT 1st Que. Regt. 1st Dpo. Bn (5th R.D.)

FORMER CORPS Nil.

SOS 6/2/19. FOLL. 8639 d. 8/2/19. 8D.4

NEXT OF KIN.

NAMES IN FULL Tremblay, Henry

RELATIONSHIP TO SOLDIER Father

ADDRESS Ste. Félicité, P.Q.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Matane, P.Q. DATE May 21st 1883

PLACE OF ATTESTATION Montreal, P.Q. DATE Jan. 10th 1918

SS. Saxonia fr. Halifax 21 2-18. 1088/11

R/C. 17/1/19. 25-14 103

L. L. 6045. M. & D. 6994. M. F. W. ~~22.~~ 100m.—8-16. H. W. 1774-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

Form R. 149.

Name TREMBLAY Paul Rank Pte Reg. No. 3081480

Unit 87 Bn

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
4-9-18	To G H Etaples	Etaples	Gas Sick	43/6	11-10-18	387/18
11-9-18	Brook War Hosp	Woolwich	do	13320		26535
26-9-18	16 C F A Depot Lox		do	13330		27396
15-11-18	Discharged			13777		95455
	23 Feb 19 15-11-18					

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

Em

Number 3081480 Rank Pte

Surname TREMBLAY

Christian Name Paul

Units 87 Bn Can Inf Theatre of War France

Date of Service 22/6/18

Remarks

Latest Address 31 Webster St
Fall River Mass USA.

Roll No. B. Pay 12009

200m.—2—21.M.

DESP. APR 7 1922
REGN. NO. 35080

No. 3081480 RANK Pte NAME Tremblay Paul

T.O.S. 11-1-18 UNIT 1st Depot Bn 1st Q ue Regt.
(D.O. 12 of 12-1-18)

M.D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918	1918			
Jan 11	Jan 31	M		
Feb		M	Proc O/S 15-2-18	D.O. 46 of 15-2-18.

REGT'L. No. 3081480

NAME Tremblay Paul

H. Q. FILE No. 649

RANK AND CORPS Pte 87th Bn form 1st Q R 1st

FOLLOWS No. Dep Bn

FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY
D of H		Henry Tremblay (Father)
		St Felicite P Q
136-1 H 307	149-18	adm 56 Gen H Etaples Sept 2-4th 1918 G S W L arm

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 316-6	no 56. Gen. E Taples	4-9-18.	Gsw. L. arm
B 320-1	Brook War W Woolwich	11-9-18	" " "
B 330-2	no 16. Can Gen. Orpington	26-9-18	" " "
B 374-2.	" " Lisch	25-11-18	" " "

Surname	Christian Name or Names	Reg. No.
TREMBLAY.	P.	3081480.
Rank	Unit	
Pte.	Que. 87.	

Cas. List.

11-9-18. A316/6.	56. G.H. Etaples. 4-9-18. G.S.W. L. Arm.
16.9.18 B370	Brook W. Woewich 11.9.18.
27-9-18 B330 (2)	16 C G.H. Orpington. — 26-9-18
21.11.18 B377	Dis. 15.11.18

A.M.D. 2 DEPT.

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

D.M.S.1300. 50M-30-8-18.

Cas. List.

*Name TREMBLAY Paul Rank Pte. Regtl. No. 3081480

Fyle Depot 19-T-216

Original unit 1st Q.R. Present unit DD 4 M. or S. S Age 33 Religion R.C. Ref. H.Q.

Port, ship and date of arrival Halifax. N.S. S.S. Olympic 17-1-19

Next of kin Henry Tremblay St Felicite Que. (F)

Address on leave Fall River, 31 Webster St. Mass.

Address on discharge

Transportation issued Yes / No Date Character on discharge

Previous occupation Section hand Date and place of enlistment Jan 10-18 Montreal

Diagnosis Date of Medical Boards

Date	Remarks	Pt. 2 Order No.
23-1-19	T.O.S. from O/S 10-1-19 posted to Cas. Coy. 17-1-19	
	Fur. W/S to 3-2-19	23

*—Name will be given in full; surname first.

(over)

Date	Remarks	Pt. 2 Order No.
8-2-19	SOS. Discharged, 1420 Para C. Demob.	#39.
	Eff. 6-2-19 Cat. "A".	

M. F. W. 192
5m.—12-18
1772-39-1243

D.M.S. 1375.

Medical Examination upon leaving the Service

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

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

Rank Pte Name Paul Surname Tremblay

Unit or Corps 1st Q R D (If a soldier) Regtl. No. 3081480

Born at Matane P Q on, date May 21 1885

Signature (for identification) P. Tremblay

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. no

Weight 150 lbs.

Height 5 ft. 7 ins.

2. **NUTRITION AND DIATHESIS?** Good

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

3. **NERVOUS SYSTEM?** no

4. **RESPIRATORY SYSTEM.** no

5. **HEART?**

Abnormal Sounds? no

Abnormal Size? no

Pulse Rate? 68 Intermittence or irregularity? no

6. **ARTERIES.**—Any hardening? no

7. **DIGESTIVE SYSTEM?** no

8. **GENITO-URINARY SYSTEM?** no

Urinalysis—s.g.? N'ad Reaction? acid Albumen? no Sugar? no

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

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no

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

Examined at Kinmel Park Signed [illegible] Capt. M.O.

Date 11-12-18 Signed [illegible] M.O.

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

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. 20.814.80 Rank P6 Surname Tremblay Paul
(Given name in full)

31 Webster St. Fall River Mass U.S.A.

Unit or Corps D.S. 4 Birthplace Matane Que. P.Q.

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

1. **GENERAL DESCRIPTION:**

Physique Good Weight 151 lbs. Height 5 ft. 6 in. Colour of Eyes Black

Nutrition Good

Pulse 72

Condition of arteries Good

Vision Rt. O.K. Left O.K.

Hearing (conversational voice) Rt. O.K. ft.

Left O.K. ft.

Identification marks, scars, or deformities. (Give cause and date of origin.)

G.S.W scar rt. thigh & left arm - Sept. 2 - 1918

Tattoo - rt hand and fore arm left fore arm.

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.

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

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

Date ..... Signed .....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

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

THIS SECTION FOR USE IN CANADA—

Examined at Montreal (Canada)

Date 4 - 2 - 19 Signed E. Labarre 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 P. Tremblay

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

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

[OVER]

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

M.S.A. 15.

ORIGINAL

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname TREMBLEY Christian name Paul

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).....

16 SEP 1918

4. Address (including street and number, if any)... 58 Detroit St, Fall River, Mass. U.S.A.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 10th. day of Jany. 1918. 1917, by the undersigned medical board sitting at Montreal P.Q.

5. Age as stated 32 Years 8 Months. 6. Apparent age 32 Years 8 Months

7. Height 5 Feet 6 Inches. 8. Weight 127 Pounds.

9. Chest measurement { Minimum 33½ Ins. / Maximum 36½ Ins. } 10. Complexion Medium { Eyes Black / Hair Black }

11. Physical development. Good { Good / Fair / Poor } 12. Smallpox marks None

13. Number of vaccination marks { Right arm 0 / Left arm 0 } 14. When vaccinated last None

15. Distinctive marks and marks indicating congenital peculiarities or previous disease None
Tattoo mks. left arm Right foot inclined to be flat

16. Slight defects but not sufficient to cause rejection None

The man denies having had { Rheumatism / Tuberculosis / Syphilis } We find no evidence of past { Rheumatism / Tuberculosis / Syphilis }

(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 A2

RV 20
LV 20
EARS OK

Signature of Man

.....President.

.....Member. .....Member.

Date	Result	INOCULATION VACCINATIONS	Date	Result	VACCINATION ANTI-TYPHOID INOCULATIONS, ETC.
11.1.18		J.A. Fairie Capt. M.O.	10/1/18		A.E. Tipond Capt M.O.
23.1.18		J.A. Fairie Capt. M.O.			M.O.
27.1.18		J.A. Fairie Capt. M.O.			M.O.
					M.O.

Joined 9th. day of January 191 8 at Montreal P.Q.

	Corps	Reg'tl Number	Habits	Date
Joined on enlistment	1st DEPOT BN. 1st QUEBEC REG'T.			
Transferred to.....	23RD RESERVE BATT - C.E.F.	3081480		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station	Date	Disease	Result
montreal	30.1.18	None	A2
11	6-2-18		A.E. Tipond Capt

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.

Montreal 4-2-19 Civil. A.E. Talon Lt.

CANADIAN

Surname TREMBLEY Christian Name

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.
BROOK WAR HOSPITAL WOOLWICH, S.E. 18.	~~Sept 11~~	11	9	18	25	9	18	Shell wd Calf & r. buttock	15	Shell wd? Transf to Orpington	H Irwin Capt & Adjt
Pte 1 No 16 Co Gen	26	9	18	15	11	18	Do	50	all wounds healed - No Complications Daily	SH Campbell Capt

E.

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

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

Casualty Form—Active Service.

Unit, Regiment or Corps #5 Draft 1st DEPOT BN. 1st QUEBEC REG'T.

Regimental No. 3081480 Rank Private Name TREMBLAY Paul

C. E. F.

Enlisted (a) 9-1-18 Terms of Service (a) Dur. of War Service reckons from (a) 9-1-18

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) .....

Report Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked	Canada	18/2/18	Saxonia
		DISEMBARKED	England	4-3-18	
15-3-18	23rd Res. Batt'n.	Taken on strength from Canada	Bramshott.	5.3.18.	D.P.11 I.74
23-6-18	23rd Can. Res. Bn.	Posted to 87th Bn.	Bramshott	20-6-18	Pt II DO. 172. W. H. Kalmer Captain & Adjutant. 23rd Canadian Reserve Battalion.
					DO. No. 57 dated 14.7.18
22-6-18	C. I. B. D.	T. O. S. 87 TH BN ON ARRIVAL	FRANCE	22.6.18	N. R. A693
22.6.18	C. I. B. D.	S. O. S. TO C. C. R. C.	FIELD	14.7.18	N. R. D7306
14.7.18	C. C. R. C.	T. O. S.	"	14.7.18	N. R. A 1083
"	C. C. R. C.	S. O. S. TO UNIT	"	6.8.18	N. R. D13405
19.8.18	UNIT	JOINED UNIT	"	12.8.18	B. 213

CERTIFIED CORRECT. 27 JUN 1918 CAN. RES. BDS. LONDON

(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.

12/12/18. Attached No. 8. Wing C.C.C. Kinmel Park.
2-1-19 Embarked for Canada. Lt for O.C. M-D 4 R.H. Groves.
~~21/1/19~~

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
4.9.18	56 Genl	Gp. Wg. Arms	adm.	4.9.18	H.7858.
11.9.18	do.	" "	To England	11.9.18	H 8707.
8.9.18	H.C.C.S	" " adm.	3.9.18 to 37	3.9.18	K.133 S/R
3.9.18	12 C.F.A.	do	adm to C.C.S	3.9.18	K 386
29.10.18	56 Genl	Invalided to Eng and posted to Q K D Bramshott.	Wounded	11.9.18	K.I. 17.447 Do 109.1918

J. Mackenzie
Lieut. for Lt Col. A. A. G.
Canadian Section, G.H.Q. 3rd, Ech.

1-11-18 D.R.D. T.O.S. Bramshott 11.9.18 Do 109

Canadian

LIEUT.
FOR LT: COL: I/C RECORDS, C.O.M.F.

17.11.18.	23rd. CAN. RES. BN.	TAKEN ON STRENGTH	Bshott	16/11/18	D.R.O. No. 321
10-12-18	23rd Can. Res. Bn.	On Command to Segregation Camp, Rhyl	Bramshott	10-12-18	DP.II O.344
10-12-18	do	On Command to segregation Camp, Rhyl, ceases	Rhyl		
	do	S.O.S. on Transfer from O.M.F. of C. to The OEF. Canada.	Rhyl		

R. Jackman Lieutenant

M. F. W. 54. (A. F. B. 103:
500M.—9-16
H. Q. 1772-39-9-20.

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

Casualty Form—Active Service.

Unit, Regiment or Corps ....

Regimental No. .... Rank .... Name Trembly, F. C. E. F.

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

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*) ....

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				
6-2-19	A.A.	C.D.A. Demob. Discharged			D D 4/20/19.

Lieutenant,
Officer i/c Discharge Section, District Depot No. 4.

(*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

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				

Form R 122.
2353—100M—9-1-16

5th Inft. Bn. 1st Quebec

E.E. Rank Name TREMBLAY, Paul ✓ Reg'l No. 3081480 ✓

Unit If in perm. Corps, What Unit? Married or Single Single. ✓

Place and Date of Enlistment Montreal. Jan. 9th 1918 ✓ Place of Birth Matane, Quebec.

Name and Address, Next-of-Kin Henry Tremblay, ✓

St Felicite, 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.

N/E. R.B. No. 18615
No R.L.
O R CANADA

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.
	C	Arrived in England		4-3-18	S/S SAXONIA
15-3-18	23 Res	T.O.S.	13 Bn Shorn	5-3-18	D.C.74.
21-6-18	[illegible]	T.O.S. to 87 Can Inf	— " —	20-6-18	" 172. D.C.7. 4-7-18, 87 Can Inf
19-9-18	CRD	T.O.S. from 87 Bn	— " —	" 11-9-18	D.C. 228. 109. 11/18 87th
11-9-18	CR	Wounded	Field.	4-9-18	C.F.R. 316
18-11-18	CRD	T.O.S. to 23 Res Bn	13 Bn Shorn	15-11-18	D.C. 279 & 4/17-11-18. 23 PT II 921
20-1-19	23 Res	T.O.S. to C.E.F. Canada M.D. 4	"	9-1-19	" 20.

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.					

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 3081480 (Rank) Private

Name (in full) TREMBLAY, Paul enlisted in

the 1st Depot Battalion, 1st Quebec Regiment.

CANADIAN EXPEDITIONARY FORCE at MONTREAL, Quebec on the 9th.

day of January 1919.

HE served in FRANCE.

and is now discharged from the service by reason of DEMOBILIZATION.

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

Age 33 years 9 months.

Height 5 feet 6 inches.

Complexion Medium

Eyes Black

Hair Balck.

Marks or Scars G.S.W. Scar right thigh and left arm. Tattoo right hand and forearm, left forearm.

P Tremblay

Signature of Soldier

Issuing Officer

Lieutenant,

Officer i/c Discharge Section, District Depot No. 4,

Rank

February 6th., 1919.

Date of Discharge

Appointment

Signed at MONTREAL, Quebec this 6th. day of February 19

in Military District No. 4.

File Reference No. DD4 19-T-216.

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. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

On demobilization the particulars called for on this certificate will not be completed.

C.A.D.C. 5009 A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

M.D. 4

NAME OF SOLDIER (Block Letters) TREMBLAY R.

REGIMENT 87th Bn RANK Pte No. 3081480

Date of Examination in England 12/12/18 Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 19.
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ?

HAS HE EVER RECEIVED DENTAL TREATMENT ? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (*a*) ~~In Canada~~
- (*b*) In England Yes.
- (*c*) ~~In France~~

Kinmel Park
N Wales

Signature of Dental Officer H. E. Goodhand
Capt

(YM)

M.F.W. 44.
1133 (D.P. 250M-12-18.
1772-39-903.

CANADIAN EXPEDITIONARY FORCE.

LAST PAY CERTIFICATE

Regimental No. 3081480 Rank Pte Name TREMBLAY Paul
(Surname first)

Unit 1st. Q.R. who was* Discharged

On 6-2-19 191..., to...

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-2-19 to 6-2-19 191... the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		196 52
Regimental Pay 6 days at $ 1.c. 00		6 00
Field Allowance 6 days at $ c. 10		60
Separation Allowance		
Clothing Allowance		35 00
Post Discharge Pay		70 00
*Other Credits Subs. D.O. 23		2 40
Advances		
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges		
Balance on transfer or on discharge, cheque No. 20326	310 52	
Total	310 52	310 52

*Give particulars.

A monthly stoppage of $ Nil (†) has (‡) been paid on account of

Assigned Pay for the month of 191...
and Separation Allce. for month of 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 9-1-18 married or single

(2) Separation Allowance, entitled or not Nil (3) Reason for discharge

(4) Authority for discharge or transfer D.D.#4 19-T-216

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

MILITARY DIST. No. 4 FEB 5 1919 DEMOBILIZATION PAY DIVISION

Date

Place

CAPTAIN-PAYMASTER
O-i-C—Demobilization Pay Division-Military Dist. 4

Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT				Signature of Officer Making Payment.
			Dr.		Cr.		
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....
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.....	.....	.....	.....	....	.....	....	.....
.....	.....	.....	.....	....	.....	....	.....

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 1st DEPOT BN. 1st QUEBEC REG'T.

(2) Regimental Number 3081480

(3) Full Name of Soldier TREMBLEY Paul

(4) Place of Birt Matane P.Q.

(5) Are you married, or not ? No.

(6) If married, state,
(a) Full name of your wife Not Applicable.

(b) Present Postal Address Not Applicable.

(7) Are you a widower ? No.

(8) Have you any children ? No.

If so, give number of boys and girls Not Applicable.

Also their names and ages Not Applicable.

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

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

If so, state name and address ...Henry Trembley, St Felicite, P.Q.

(10) Is your Mother alive ?..... No.

If so, state name and address..... Not Applicable.

(11) If your Mother is a widow..... No.

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

(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.

..... Not Applicable.

(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.

..... Not Applicable.

(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.

..... Not Applicable.

(15) Are you insured ?..... Yes.

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

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

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

Chas. W. Buckingham ..... Major.

Officer Commanding.

for O.C. 1st Depot Bn. 1st Quebec Regiment.

Date..... 10th. Jany. 1918.

FORM P. 539
8245-150M.-7/5/17

MARRIED OR SINGLE: Single.

PLACE OF BIRTH: Matane, Quebec.

NAME OF NEXT OF KIN: Henry Tremblay, RELATIONSHIP: Father,

ADDRESS: St. Felicite, P.Q.

NAME OF NEXT OF KIN: RELATIONSHIP:

ADDRESS:

APPOINTMENTS.
PROMOTIONS AND REVERSIONS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

DATE ADMITTED	ADMISSIONS DATE DISCH'D	V. OR A.	TO HOSPITAL, &C. NAME OF HOSPITAL

SEPARATION ALLOWANCE

SEPARATION ALLOWANCE MONTHLY $ — EFFECTIVE (DATE) — STOPPED EFFECTIVE (DATE

PAYABLE TO — REASON

RELATIONSHIP — AUTHORITY

AUTHORITY FOR ISSUE — REMARKS

SEPARATION ALLOWANCE MONTHLY $ — EFFECTIVE (DATE) — STOPPED EFFECTIVE (DATE)

PAYABLE TO — REASON

RELATIONSHIP — AUTHORITY

AUTHORITY FOR ISSUE — REMARKS

NEW PAYBOOK ISSUED — NEW PAYBOOK ISSUED

REG'L NO. 30811480 RANK Pte. NAME Tremblay, Paul.

PLACE OF ATTESTATION Montreal, DATE OF ATTESTATION 9/1/18. ORIGINAL UNIT 1st Depot Btn. 1st Que. Reg.

PRESENT UNIT 23rd Can. Res.

ASSIGNED PAY

Nil

	(1)	(2)	(3)	(4)
PER MONTH $				
DATE EFFECTIVE				
AUTHY.				
PAYABLE TO				
RELATIONSHIP				

DISCHARGE DATE AND PLACE to Canada.

REASON AND AUTHORITY Rhyl - NRH-5-17-18 Disposal

	(1)	(2)	(3)	(4)
STOPPED EFFECTIVE				
CAUSE				
DATE A3M FORMS REND.				

ACCOUNT TRANSFERRED TO N.E. BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

PARTICULARS OF TRANSFERS

TO UNIT	EFFECTIVE DATE	AUTHORITY

PERIOD FROM	PERIOD TO	PAY AND FIELD ALLOWANCE No. OF DAYS	PAY AND FIELD ALLOWANCE RATE	PAY AND FIELD ALLOWANCE $ C.	WORKING PAY No. OF DAYS	WORKING PAY RATE	WORKING PAY $ C.	SEPARATION ALLOWANCE $ C.	ASSIGNED PAY CREDITS $ C.	ANY OTHER CREDITS $ C.	TOTAL CREDITS $ C.	SEPARATION ALLOWANCE $ C.	CASH PAYMENTS DURING THE MONTH 1 $ C.	2 $ C.	3 $ C.	4 $ C.	ASSIGNED PAY $ C.	OTHER CHARGES $ C.	TOTAL DEBITS $ C.	BALANCE CARRIED FORWARD CREDIT $ C.	BALANCE CARRIED FORWARD DEBIT $ C.	NUMBER OF ACQUITTANCE ROLLS 1	NUMBER OF ACQUITTANCE ROLLS 2	NUMBER OF S.A. AND A.P. CHEQUE
MONTH		PARTICULARS	DR.1		DR.2			PARTICULARS		DR.1	DR.2	DR.3	DR.4	BALANCE											
28 FEB 1918.		BALANCE FROM CANADA.																							
Mar		R.P.	31	10				CA Rhyl Asylum P/18-487						30	80										
			31	10				~2100-23 Res. 25/3		29	20			30	83	15									
										31	07														

REMARKS.
ALL CASUALTIES, PROMOTIONS, &C., TO BE NOTED, ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"

PERIOD		PAY AND FIELD ALLOWANCE			WORKING PAY			SEPARATION ALLOWANCE	ASSIGNED PAY CREDITS	ANY OTHER CREDITS	TOTAL CREDITS	SEPARATION ALLOWANCE	CASH PAYMENTS DURING THE MONTH				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CARRIED FORWARD		NUMBER OF ACQUITTANCE ROLLS		NUMBER OF S.A. AND A.F. CHEQUE	REMARKS. ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED, ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"
FROM	TO	No. OF DAYS	RATE	$ c.	No. OF DAYS	RATE	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	1 $ c.	2 $ c.	3 $ c.	4 $ c.	$ c.	$ c.	$ c.	CREDIT $ c.	DEBIT $ c.	1	2		

P 820
12474—375M—13-2-18.

* 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:– TREMBLAY, Paul

NUMBER:– 3081480

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

UNIT AND TRANSFERS

ORIGINAL UNIT:– 1st Depot Bn

DATE ACCOUNT FIRST OPENED:–

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			1st QRD

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
~~5-7-18~~	~~2220~~	~~33rd R. Dep't~~	~~2.00~~ 9 73				
L.P.L. 31 17/18		C. Bal.	200 07 (9-12-18).				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	– 10		

PARTICULARS OF RENDERING NON-EFFECTIVE:– Dis. to Canada 1-1-19. Rhyl. N.R.H. 5-12-18. Disposal.

MONTH 1918	PARTICULARS	CR 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
									30 83	15 –	
March 31	Balance Forward										
April	P. P.	33 –		aR 107. 33rd Reg 15/4/18.	9 73				54 10		
				" 585 – 1 30/4/18.	9 73				44 37	30	
		33		aw. 3 dys CB. Forfeit 1 dy PrA (Reg) awL 7.30 am 5/4 to 8 pm 4/5/18. Granted 6.5.18. BO. 126. 6/5/18. 33rd Reg	19 46	1 10	X				
May	P Day	34 10		aR 396. 33rd Reg Bn 15-5-18	4 87				72 50	45	
				" 585 " 31-5-18	7 30				65 20		
		34 10			12 17	1 10					
JUN	P Day	33 –		aR 017 - 23 Res. 3.6.18.	4 87						
				GR 4005. 85. 10.6.18.	61						
				aR 809 23rd Res Bn 25.6.18	9 73				82 99	60	
		33 –			15 21						
July 1	P Day	34 10							117 09		
				Draft 1188. C2RD. 6-7-18	4 46				112 63	75	
				" 983 4th Wing CCRC 20-7-18	3 57				109 06		
		34 10			8 03						
Aug	P Day	34 10							143 16		
				aR 070 " 4.8.18	3 57				139 59	90	
				" 463 11th C2R. 18.8.18	3 57				136 02		
		34 10			7 14						
									169 02		
Sept	P Day	33 –									
				HR 37260 CRM. 22.9.18	4 87				164 15	105	
		33 –			4 87						
									198 25		
Oct.	P. P.	34 10									
				AR. 6141. #16 C.G. Hospl 9.10.18	4 87				193 35	120	
		34 10			4 87						
			Forward								

1918 NUMBER 3081480 RANK Pte NAME Tremblay R.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
31-10	Bal. Brot Forwd.								193 38	170 -	
Nov.				A.R. 7337 - #166 Gen. Hosp 6-11-18	4 87				188 51		
				" 7961 " 15-11-18	48 67				139 84		
	P. P.	33 -							172 84		
~~Dec.~~				" 7220 - 23rd Res - 5-12-18	9 73				163 11		
Dec.	P. P.	34 10		— — — — — —	— —				197 21		
	Int on Def Pay to 30/11/18.	2 81		— — — — — — —	— —				200 02		
		69 91			63 27						
Febry				A.R. 3rd W. Park 4/2/19	9 73				190 29	L.A.C.	
					9 73						

L. A. C.

P.878 Extract from Sailing List No 3 Unit. 29th Bn

Reg. No.	Rank	Name	Sailed for Canada, Military District No. 4
308140	Pte	TREMBLAY. P.	9/1/19

Acted on 98
Ledger Ck.

Forms
I. 1237
12

BROOK WAR HOSPITAL
WOOLWICH, S.E. 18.

Ward 28

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Can 764	3881400	Pte	Trembley	Paul
Year 1918	Unit. 8th Can		Age. 33	Service. 8 months

Station and Date.

Disease Shell wounds left arm, r. buttock

11.9.18 Small wd under side left arm & right buttock
F. B. removed in Theatre, track cleaned out.

16-9-18 Wd clean & healing

16/9/18 - Dr Dunlop to Orpington VD

Father. Wm Trembley.
St Felicité
Que
Canada.

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sr. (10938). Forms/I. 1237/12. (E239)

[P.T.O.

Station and Date.	

Can. Rhein.

5-9-18 - T. & W. Regt. Area

——— To Eng. 11-9-18

Name Tremblay Enl. 9-1-18

Date of Embarkation for England 18-2-18

Proceeded to France 20-6-18 Returned to England 11-9-18 Wd

Date returned to Canada 9-1-19

P.R.2855.

Conduct Sheet - No Entries. (over)

Checked 21-3-30.

Forms
I. 1237
12

Dutty 15.11.18

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
2HT7439	3081480	Pte.	Tremblay	P.
Year	Unit.		Age.	Service.
1918	87th. Can.		33	8/12

Station and Date.

Disease G.S.W. - Left arm & Right Buttock.

No. 16 CANADIAN (GENERAL ONTARIO) HOSPITAL
ORPINGTON, KENT.

25.9.18 Gr 2 wound ant & Post surface left arm Middle & lower ⅓ - no bone or Bone lesion. Wounds discharging fairly freely - Result will be good.

5-10-18 Small abscess opened on Post wound - Drainage now good.

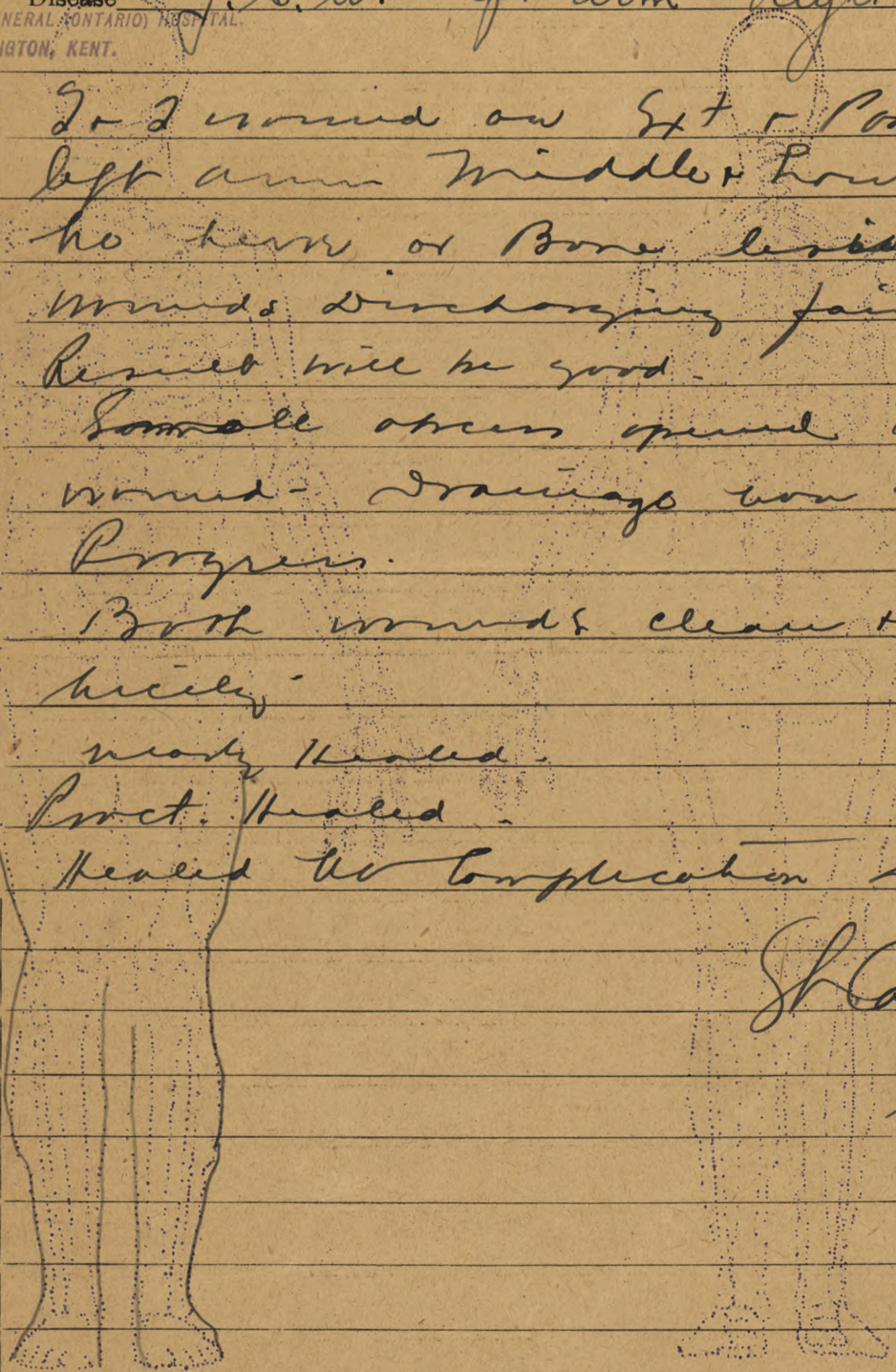
13-10-18 Progress.

20-10-18 Both wounds clean & Healing nicely.

28-10-18 nearly Healed.

7-11-18 Perfect Healed.

14-11-18 Healed no complication Discharged duty



Capt RAMC

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

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

Station and Date.	

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 84 Can — Military Hospital Brook War

No. 308140 — Rank and Name 96 Trembley P — Age 33 — Service 8 Month

Disease Sept — Date of admission 11-9-18 — Date of discharge — Result

Dates of Observation	11	12	13	14	15	16	17	18
Days of Disease								

Temperature Fahrenheit — Time A.M. P.M. (8 6 4 2)

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

Sit a question

Pulse per Minute	84	72	76	64				
Respirations per Minute								
Motions per 24 hours	1	1						

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

Signature _____ In charge of case.

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

Days of Disease

Temperature Fahrenheit

Time A.M.P.M.

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

8 6 4 2

Pulse per Minute

Respirations per Minute

Motions per 24 hours

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

Signature_____ In charge of case.

AUDITOR | PAYMASTER

M. OR S. O

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

REGT. No. 3081480 RANK Pte NAME (IN FULL) TREMBLAY. PAUL. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS Nil

PARTICULARS	EFFECTIVE DATE	AUTHORITY
T.O.S.	10/1/19	Do 23/3

ORIGINAL UNIT C.E.F. 1st R. Q.R. — IF IN P.F. WHAT UNIT? X

PLACE OF ATTESTATION Montreal — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 9-1-18 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY, $ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS Nil 31 Webster St. Fall River Mass U.S.A.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Montreal — DATE 6-2-19 — REASON DDA-19-7-216 — AUTHORITY — 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.	PARTICULARS OR REMARKS
Balance from previous account					1200																															subs 1-1-19 to 3-2-19 Do 23/3
1-1-19	31	1st	34	10			150	42	196	52																							196	52			Trs. R.M.C. 31-12-18
Feb 6	1.10	6	60	35	00				196	52																										
									240	52																									70	00	W. S. G.
									44	00																										
									240	52							310	52													310	52				

War Service Gratuity

Date	Chk. No.	Credit W. S. G.	S. A.	Total	Month Paid March	April	May	June	July	Aug	Debit W. S. G.	S. A.	Total	Balance W. S. G.	S. A.	Particulars
		280 00		280.00							70.00		70.00	210.00		Paid 6.2.19
6.3.19.	B5470				70.00						70.00		70.00	140.00		
5 4 19											70 00		70 00	70 00		238123
5 5 19											70		70			238053
				280 00									280 00			

80m.-11-18. L. L. 51777. M. & D. 9585.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES				TOTAL DEBITS		BALANCE				PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT								COL. NO. 1		COL. NO. 2		COL. NO. 3		COL. NO. 1		COL. NO. 2		COL. NO. 3										DEBIT		CREDIT		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

This space to be for numbers.

Proceedings on Discharge.

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

No.	3081480
Rank	Private
Surname	TREMBLAY,
Christian name	Paul.

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company)	1st Depot Bn. 1st Que.Regt.
Date of discharge	February 6th.,1919.
Place of discharge	MONTREAL, Quebec.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	33 years 9 months.
Height	5 feet 6 inches.
Complexion	Medium
Eyes	Black
Hair	Black.
Trade	Section hand.
Intended place of residence (To be given as fully as practicable.)	31 Rubster St Fall River Mass. U.S.A.

Descriptive marks

G.S.W. Scar right thigh & left arm.

Tattoo right hand and forearm left forearm.

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

R.O.# 1420.Para(c).Category "A".Demobilization,

Authority for discharge.....

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

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

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

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

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

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

.....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

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

(Place) MONTREAL, Quebec. P Tremblay *(Signature of Soldier.)*

(Date) February 6th., 1919. A Whalley, B/master *(Signature of Witness.)*

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

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

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

.....*(Signature of Soldier.)*

10. Statement of Service.

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

Total.....years.....days.

11. Confirmation of Discharge.

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

(Place) MONTREAL, Quebec.

(Date) February 6th., 1919. *(Signature)* R W Lee Lieutenant,

Officer i/c Discharge Section, District Depot No. 4.

Reservations referred to at Para. 8.

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

NO RESERVATIONS.

P Trumbley

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form	B. 263
Squadron / Battery / Company Conduct Sheet,	"	B. 263a
or		
Field Conduct Sheet	"	W. 178
Copies of Convictions, by C. P.		in MS.
Med. Hist. Sheet,	Militia form	B. 313
Casualty Form	"	W. 54
Medical Report for Invalid§	"	B. 227
Dental History Sheet	"	B. 465
Last Pay Certificate	"	W. 44
Duplicate Discharge Certificate	"	W. 39A
‡Form of Will	"	W. 82

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Attestation Paper	Militia Form	W. 23
or		
Particulars of Recruit	"	W. 133
Proceedings on Discharge	"	B. 218

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

(a) Proceedings on Discharge

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable..

Officer Commanding.

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