S

NAME ABELE: PHILIP Jos. REGIMENTAL DOCUMENTS REGT. NO. 2245761 UNIT Can Fors Corps H. Q. FILE NO. 359

H

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2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
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4	Counter.					
	~~M.F.W. 67.~~					
	Paysheets					

M

H

W. 2589
100M-11-19
1772-39-1377

ORIGINAL

ATTESTATION PAPER.

FORESTRY DEPOT M.D. 5.

No. 2245661

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS.)
1. What is your surname?	Abele
1a. What are your Christian names?	Philip J~~oseph~~
1b. What is your present address?	18 Camden Place. Boston, Mass. ~~XXXXX~~. U.S.A.
2. In what Town, Township or Parish, and in what Country were you born?	Boston, Mass. U.S.A.
3. What is the name of your next-of kin?	Catherine Abele
4. What is the address of your next-of-kin?	18 Camden Place Boston, Mass. U.S.A.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	May 4th. 1882
6. What is your Trade or Calling?	Teamster
7. Are you married?	No.
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes.
9. Do you now belong to the Active Militia?	No.
10. Have you ever served in any Military Force? If so, state particulars of former Service.	Yes. U.S. Army Infantry
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?	No.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Philip J. Abele, 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.

Philip J. Abele (Signature of Recruit)

Date Sept 22, 191 7. John. J. Powers (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Philip J. Abele, 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.

Philip J. Abele (Signature of Recruit)

Date Sept 22, 191 7. John. J. Powers (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 Richmond, P.Q. this 22nd. day of September 191 7.

Edward Remnant (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.

Abele. Philip. Joseph.

Apparent Age 35 years 7 months.

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

Height	5 ft. 5 ins.	
Chest measurement. Girth when fully expanded	34 ins.	
Chest measurement. Range of expansion	40 ins.	
Complexion	Dark	
Eyes	Grey	
Hair	Brown	
Religious denominations. Church of England		
Presbyterian		
Methodist		
Baptist or Congregationalist		
Roman Catholic	X	
Jewish		
Other denominations (Denomination to be stated.)		

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

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

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

Date September 23 191 .

Place Valcartier Camp

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.

Philip Joseph Abele having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

(Signature of Officer)

Date 1-10-17 191 .

Form R. & O 6064.
26008—36 Books.

REFER TO FILE.

In reply please quote No. 110398
and date of letter

THE CANADIAN DISCHARGE DEPOT,

BUXTON.

(5)

STATEMENT ON DISCHARGE.

STATEMENT OF...Name Adele. P. J.

Reg. No. 2245661 Rank Pte

Unit 2nd R. D.

Place BUXTON Date 10-8-18

To OFFICER i/c, EMBARKATION at BUXTON

I hereby request my Discharge in Canada

I desire to make the following remarks, on the understanding that this statement may be produced as evidence in any subsequent inquiry, in regard to the following matters:—

CLOTHING—

FOOD, AND TREATMENT AT DISCHARGE DEPOT—

PAY—

Complaints, if any, will be noted hereon, opposite the corresponding headings.

I understand that it is my privilege to make these remarks, and with the exception of the points raised, I hereby affirm that I have no complaints to make regarding my treatment at the Canadian Discharge Depot, Buxton.

I also certify that any delay in the carrying out of my Discharge has been explained to my satisfaction.

Signature Philip Adele

Rank Pte

Witnesses { Lt. Cockburn
(*Adjutant, C.D.D., Buxton*).
R. C. Sharpe Capt
(*O.C., C.D.D. Buxton*).

N.B.—This statement will be prepared in duplicate, and disposed of as follows:—
ORIGINAL—To be forwarded with Discharge Documents.
DUPLICATE—To be filed, for reference, by the O.C. Canadian Discharge Depot, BUXTON.

ORIGINAL

2245661

MEDICAL HISTORY SHEET

FORESTRY DEPOT. U.D. 5.

Surname Abole Christian Name Phillip Joseph

Examined { on 25 day of Sept 1917
at Oalcarton camp.

Birthplace { City or Town Boston
County Mass.

Apparent age 23

Trade or occupation Teamster

Height 5 feet 5 Inches

Weight 145 lbs.

Chest measurement { Minimum 38 inches
Maximum expansion 40 inches

Physical development Fit

Small-pox Marks Nil

Vaccination Marks { Arm ~~Right~~ Left
Number 2.

When Vaccinated last 24 years.

(a) Marks indicating congential peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by

Rank M.O.

No. 5 Casualty Unit
APR 6 1918
Quebec, P.Q.

Date	Fit or Unfit	Examined for Re-Engagement	
28/8/17	B II	W Rees Capt AMC	M.O.
18-12-17	B II	Tohn Fraser Capt. AMC.	M.O.
		F.T. Haygarth Lieut AMC	M.O.
19.2.18	B II	T.M. Creighton Capt AMC	M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
14/9/17	0	J Babbin	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
25/9/17		1 c.c.	M.O.
16/10/17		J Babbin	M.O.
24/10/17		J Babbin	M.O.

Enlisted on 22 day of September 1917 at Richmond P.Q.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	Etg Depot M.D.5	2245661		22-9-17
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Summerside.	21-12-17	Defective Hearing & Frequency	B.T. Unfit for Service

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

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Adole Christian Name Phillip

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				
Talcarhuis C.H.		25	9	17	28	9	17	Scabies	14		W. Ross Capt. Act. Adjt. A.M.C. Training Depot, No. 4
M.H. Quebec		23	3	18	3	4	18	Incontinence of Urine	11	Boarded for Discharge	E.H. Roberts

Pte. Abele. B.J.

2245461.

Albumin Nil

Sug. or Positive. X.

Sp. G. 10-14.

Urine of a good color,
faintly acid to litmus,
no deposits.

QUEBEC NOV 24/17

EMBARKED FROM CANADA R.M.S. Metagama

~~Fill in Only. Unit, Number, Rank and Name.~~

FORESTRY DEPOT M.D. 5.

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps Forestry Depot M.D. No. 5 Disembarked Liverpool

Regimental No. 2245661 Rank Pte Name Philip Joseph Steele 14-12-17

Enlisted (a) 22-9-17 Terms of Service (a) ~~D.C.E.~~ C.E.F. ~~D of W~~ Service reckons from (a) 22-9-17

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) Teamster

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 Quebec 24-11-17 Disembarked Liverpool 14-12-17			
		18/12/17 O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale		14/12/17	Pt.11 D.O. 201
5-1-18	O.C.C.F.C.	BASE DEPOT C,F.C. SUNNINGDALE 4-1-18 PT. II. DO. NO. 5 S.O.S. on posting to A. Langer Capt. for O.C. C.F.C. District 52, Coy 131.			
9-1-18	O.C. No. 52 Dist. C.F.C.	T.O.S. No. 52 Dist, C.F.C. at No. 131 Coy on posting from Base Depot.	Carlisle	4-1-18	Part II D.O. No. 1
19-2-18	OC No 52 Dist C/C	SOS 52 Dist C/C at 131 Coy on posting to Base Depot	Carlisle Lieut. M. Columbe	19-2-18	B II D.O No 7 Capt. Adjt. for O.C. No 52 Dist C.F.C.
19-2-18		O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale		19-2-18	Pt.11.D.O. 43

(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				
27.2.18		TAKEN ON STRENGTH C.D.D, BUXTON Pt. 11 ORDER No. 48			F. Lock Lt-Col. Commanding Canadian Discharge Depôt. Lieut,-Col.
12 MAR 1918		EMBARKED FOR CANADA FROM LIVERPOOL			F. Lock Lt-Col. Commanding Canadian Discharge Depôt. Lieut,-Col.

DUPLICATE

To be made out in duplicate.

H.Q. 54-21-23-53

FORESTRY DEPOT M. D. 5.

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... Forestry Depot M.D.5.

(2) Regimental Number ... 3241561

(3) Full Name of Soldier... Philip Joseph Abele

(4) Place of Birth... Boston Mass. U.S.A.

(5) Are you married, or not ? ... Yes

(6) If married, state,
(a) Full name of your wife... Marie Veronica Abele.

(b) [redacted]stal Address... Deceased.

(7) Are you a widower ? ... Yes

(8) Have you any children ? ... No

If so, give number of boys and girls... Nil

Also their names and ages... Nil

M. F. W. 67.

500M.—9-16.
1772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ?..... No .....

If so, state name and address ..... Nil .....

(10) Is your Mother alive ?..... Yes .....

If so, state name and address..... Catherine Abele .....

..... 18 Camden Place. Boston. Mass. U.S.A.

(11) If your Mother is a widow..... Yes .....

Are you her sole support, or not ?..... No .....

(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.

..... Nil .....

.....

(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.

..... Nil .....

.....

.....

(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.

..... No .....

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

If so, in what Company ?.... Prudential Life Ins Co. .....

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.

Rodolphe Ouay LT. COL.
O/C. QUEBEC RECRUITING DEPOT.

..... *Officer Commanding.*

Date..... 4-10-17 .....

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

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

Regimental No. 224566I Rank Pte. Name Abele Phillip

Corps C.F.C. who was* Discharged

On 6-4-18 191...., to Med. unfit

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-4-18 191...., to 6-4-18 191...., the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month	30	94
Advances by Cheques No.			Regt'l Pay 6 days at $ 1 00	6	00
Advances by Cheques No.			Field Allow. 6 days at $ 0 10		60
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances*		
Payment on transfer or discharge No. 16	36	54	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	37	54	Total	36	54

*Give particulars.

A monthly stoppage of $ Nil (†) has (‡) been paid on account of Assigned {Pay for the month of 191.... / and Sep'n 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

(2) if married and if a Separation Allowance Card has been submitted Nil

(3) cause of discharge Med. unfit authority H.Q. 54-21-43-4-of 22-2-18

(4) authority for transfer

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

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

Date 6-4-18

Place Quebec.

J. L. Gagnon Capt.
Paymaster Casualities M.D. No.5
Paymaster.

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

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

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

M. F. W. 44.

10M.—1-18.
H. Q. 1772-39-903.

Form D.M.S. 1394
50M-A1478-17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at December 21st, 1917.

No. 2245661 Rank Pte. Name Abele, P. J.

Local Unit CFC. Overseas Unit ..... Age 35

Examination held at Sunningdale.

DISABILITY.

~~Overseas~~-Local (SCRATCH ONE OUT). Defective hearing. Frequency urination.

PRESENT CONDITION.

Hearing is dull but not sufficiently defective to interfere with full duty. Has had Penal symptoms since age of 19. Has frequency; looks slightly pasty and has slight puffiness beneath eye. Slight arterial thickening. Able to do manual labor. ~~xxxk~~

BOARD RECOMMENDS :-

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

Signatures :-

Members (J. D. Adamson, Capt. CAMC. ..... President.
(A. W. Park, Capt. CAMC. .....
(.....

APPROVED

Dated ..... 1917. .....For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Form D.M.S. 1504

CLINICAL CHART.

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

Corps Forestry Bat Hospital Station Cuerden P.O.

No. 2245661 Rank and Name Pte Abela P.J. Age 35 Service 9 Months

Disease Date of Admission 20-3-18 Date of Discharge 3/4/18 Result Fit Case Book Folio 13

Dates of Observation	23	24	25	26	27	28	29	30	31	April 1	2	3	4	5
Days of Disease	Nervous													
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.
107°														
106°														
105°														
104°														
103°														
102°														
101°														
100°														
99°														
98°														
97°														
Pulse per Minute	80	94	84	90	84	80	88	88	80	90	84			
Respirations per Minute	20	20	20	20	20	20	20	20	20	20	20			
Motions		1		1	1	1	1		1	1				

Dates of Observation	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Days of Disease																										
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.
107°																										
106°																										
105°																										
104°																										
103°																										
102°																										
101°																										
100°																										
99°																										
98°																										
97°																										
Pulse per Minute																										
Respirations per Minute																										
Motions																										

M. F. B. 288.

50m.—7-16.
H. Q. 1772-39-513.

Signature E A Roberts Capt In charge of case.

CHEMICAL CHART.

CASE HISTORY SHEET.

No. 2245661 Rank Pte Name Abele, Philip Age 35

Unit Forestry Completed years of service { Where and how long } .....

Date of admission 23-3-18 Date of discharge 3/4/18

Diagnosis Incontinence of Urine Place of origin .....

CONDITION ON ADMISSION AND PROGRESS OF CASE Returned soldier quite deaf - complains of incontinence of urine since childhood following an accident & was treated for 2 years in a ~~New York~~ Boston hospital had plastik casts and iron brace afterwards to support back Has suffered with incontinence ever since. Found difficulty in walking when back was injured at 14 yrs of age Hearing much impaired

27th Sent to Eye Specialist for report on Ear condition and hearing. - Incontinence continues -

FAMILY HISTORY .....

(Tuberculosis, mental or nervous diseases.) .....

TREATMENT Tr Belladonna ℥ii

(Especially any specific or special form.) Glyt Lactopeps ad ℥i -

Sig ℥ss ex aqua ott. v

GAB

CONDITION ON DISCHARGE, Boarded for Discharge 2/3/18

(and disposal made of case.) .....

Date 3/4/18 E A Robertson Capt

Medical Officer i/c case.

M. F. B. 313a.
50M.-11-17.
1772—39-439.

C/31701

FORESTRY DEPOT M.D. 5.

DUPLICATE

2245661

MEDICAL HISTORY SHEET

Surname Abale Christian Name Phillip Joseph

Examined { on 25 day of Sept 1917
at Valcartier camp.

Birthplace { City or Town Boston
County Mass.

Apparent age 35

Trade or occupation Teamster

Height 5 feet 5 Inches

Weight 145 lbs.

Chest measurement { Minimum 38 inches
Maximum expansion 40 inches

Physical development Nil

Small-pox Marks Nil

Vaccination Marks { Arm ~~Right~~ Left
Number 2.

When Vaccinated last 24 years.

(*a*) Marks indicating congential peculiarities or previous disease

(*b*) Slight defects but not sufficient to cause rejection

Approved by

Rank M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
28/8/17	Bii	W Rees Capt A.M.S.	M.O.
		Robert Fraser Capt. C.A.M.C.	M.O.
		J. Maxwell Lieut C.A.M.C.	M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
16/10/17		J Dubbin Capt	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
25/9/17		1 c.c. 2 c.c.	M.O.
16/10/17		J Dubbin Capt.	M.O.
24/10/17		J Dubbin Co.	M.O.

Enlisted on 22 day of September 1917 at Richmond Q.

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	Fty Depot M.D.5	2245661		22-9-17
Transferred to				

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 Servcie, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Abbott Christian Name Phillip Josephus

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				
Halcartier C.H.		25	9	17	28	9	17	Scabies	4		W Rees Capt., Act. Adjt. A.M.C. Training Depot, No. 4

DEP'T
MILITIA & DEFENCE
APR 10 1918
H.Q.
CANADA

2245661, Pte. Abele, F.J. Category B ii, appeared
before a Combatant Board of Officers composed of :

President..F.C. Grassick, Capt., C.F.C.

Members .) J.R.H. Beaton, Capt. C.F.C.
) M.J. O'Leary, Capt. C.F.C.

held at Smith's Lawn the 19th day of February 1918

Authority A.G.5-1-33.

The Board having heard and considered the evidence in the case of this man, with special reference to :-

(a) The man's usefulness from a Military point of view .

(b) The cost of his maintenance , including pay.

(c) His occupation in civil life, and his physical fitness for this occupation,

is of the opinion that this man should be returned to Canada, for disposal by the A.G., Ottawa.

J.E.B. Bradley Capt ..... A.C.C.
Major.

Canadian Forestry Corps. ..... Regtl. Depot.

Form D.M.S. 1394
50M-11478-17-4-17.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at December 21st. 1917.

No. 2245661 Rank Pte. Name Abele, P. J.

Local Unit CEO. Overseas Unit Age 35

Examination held at Sunningdale.

DISABILITY.
Overseas-Local
(XXXXXXX SCRATCH ONE OUT). Defective hearing. Frequency urination.

PRESENT CONDITION.

Hearing is dull but not sufficiently defective to interfere with full duty. Has had renal symptoms since age of 19. Has frequency; looks slightly pasty and has slight puffiness beneath eye. Slight arterial thickening. Able to do manual labor. XXXX

BOARD RECOMMENDS :-

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

Signatures :-

(J. D. Adamson, Capt. C.M.C. President.
(
(
Members (A. W. Park, Capt. CAMC.
(
(
(.....

APPROVED

Dated 12 JAN 1918 1917. For A.D.M.S.

Major
A.D.M.S., Canadian Troops, M.D.

PROCEEDINGS OF A MEDICAL BOARD.

PRESENT CONDITION.

DISABILITY.

Examination held at ..... on the ..... day of ..... 19..

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

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

(SCRATCH ONE OUT)

Overseas-Local

BOARD RECOMMENDS:-

1. Fit for Duty .....

2. Fit for Duty ..... weeks, physical training.

3. Fit for Temporary Base Duty ..... weeks

4. Fit for Permanent Base Duty .....

5. .....

Signatures:-

.....

.....

.....

.....

.....

Form D.M.S. 1564

Form R 122.
8[illegible]—15M—25-4-17.

LTR

DFT. FOR DEPOT M.D.No.[illegible]

TO BASE DEPOT

Rank — Name ABELE, Philip Joseph — Reg'l No. 2245661

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

Place and Date of Enlistment Richmond, Sept, 22nd, 1917. Place of Birth Boston, Mass. USA.

Name and Address, Next-of-Kin Catherine Abele

18 Camden Place, Boston, Mass. USA. Relationship Mother.

Assigned Pay Monthly $ — Payable to — Relationship

Separation Allowance $ — Payable to — Relationship

Discharge, Date and Place — Reason — Character

N/E. R.B. No 1525
File R.L.
Category Can. R.

H. W. V., Ld.—11319-1".

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.
			Rec. 24/1/17		
		Arrived in England			I4-I2-17 S/S Metagama
18.12.17	B.D.C.F.C.	T.O.S. from Canada	Ptc	Stale — " —	Pte 1201
5.1.18	"	S.O.S. to 52 Dist.	"	" 4.1.18	" 5. (T.O.S. 52 Dist. C.F.C. Pte 1201 9.1.18.
19.2.18	"	T.O.S. from 52 Dist.	"	" 17.2.18	" 43. (52 Dist. C.F.C. Pte 1201 22.2.18)
25.2.18	"	On Com Buxton	"	" 25.2.18	" 48.
26.3.18	"	Ceased on com Buxton & S.O.S. on entrk. to Canada for Disposal by A.G.	"	" 12.3.18	" 73.

S.O.S. 6.4.18

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.					

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No. A 2

Name Abele E. J.

Regt'l No. 2245661 Rank Pte File Numbers

Former Units C. F. C. Original Unit C. F. C.

Date of arrival in Canada 20.3.18 Boat Olympic Port of Disembarkation Halifax N.S.

Rates of Pay:—Regt'l. 1.00 Field .10 Date of arrival in M.D.

Separation Allowance. Date paid to ✓ Rate ✓ If continued by Chief Paymaster, England ✓

Assigned Pay. Date paid to ✓ Rate ✓ If continued by Chief Paymaster, England ✓

Name and address of Beneficiary ✓

Pay claimed on English L.P.C. to 22.2.18 to be paid by new Unit from 23.2.18

Name of new Unit Casualties Nº 25 Date L.P.C. forwarded to new Unit 25.3.18

L.L. 34682—M. & D. 8645.

Credit Balance shown on English L.P.C.	OTHER CREDITS DUE	TOTAL CREDITS	Charges to be made on account of advances since English L.P.C. made out		OTHER CHARGES	TOTAL DEBITS	BALANCE TO NEW UNIT		REMARKS
			On Boat	At Cl. Depot &c.			Credit	Debit	Str. 23-3-18
$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	
4 4 70			① 4 73	③ 30 00					① AR 21412 2 3/18
Dr Balce	9 76	5 4 46	② 4 73	④ 5 00		5 4 46		9 76	② TS 2910 14-3-18
									③ C.D. Halifax
									④ " " "

Discharged.

6-4-18

M. F. W. 41a
120m. 1-18
1772-39-1213

English L.P.C. No.....

Name.....

Regt'l No.....Rank.....File Numbers {.....
.....

Former Units.....Original Unit.....

Date of arrival in Canada.....Boat.....Port of Disembarkation.....

Rates of Pay:—Regt'l.....Field..... Date of arrival in M.D.....

Separation Allowance. Date paid to.....Rate.....If continued by Chief Paymaster, England
.....

Assigned Pay. Date paid to.....Rate.....If continued by Chief Paymaster, England
.....

Name and address of Beneficiary {.....
.....

Pay claimed on English L.P.C. to.....to be paid by new Unit from.....

Name of new Unit.....Date L.P.C. forwarded to new Unit.....

.....

.....

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out				OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT				REMARKS
						On Boat		At Cl. Depot &c.						Credit		Debit		
$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	

M. F. W. 41
100m-1-18.
1772-39-889.

Name Pte Abele P.

Regimental No. 2245661

Unit C. F. C.

Date of enlistment Nil.

Place of " Nil.

Married (yes or no) Not Mentioned

Amount of pay assigned monthly $ Nil

To whom payable Nil.

Name and address of next-of-kin Nil. Nil.

Date and place discharged 6-4-18 Quebec.

Reason for discharge Med. Unfit.

Character on discharge H.Q. 54-21-48-4 of 22-2-18.

A.* A.2

1918	Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
																	St. 23-3-18. No. 83
March.	23-2-18	31-3-18	37	1.00	37.00	37	10	3.70		40.70					9.76	9.76	C.F. 30.94
April.	1-4-18	6	6	1.00	6.00	6	10	0.60	30.94	37.54		16	37.54			37.54	Disch. 6-4-18
					43.00			4.30	30.94	78.24 →			37.54		9.76	47.30 →	
															C.F.	30.94	
																78.24 →	

P. T. P.

P. T. P.

91 1.10 100.10

1st Payment 8/4/18 33.00
2nd " 8/6/18 33.00
3rd " 8/6/18 34.10

£ 100.10 £ 100.10

"Discharged" (6-4-18)

£ 37.64

7443

M. F. W. 41
100M-1-18.
1772-39-889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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

File No. 28-P-2

WAR SERVICE GRATUITY.

1 N-V-6-10-19 W48

Register No. A 991

Reg. No. 2245661 Pte

Name Abele Phillip L.

Address 353 Boardman St.

Dorchester Mass

U S A

Dependent

Address

Gpr

Doc'l No. File No.
Award
Adv. at $ per day
S. A. months at $ per mo. $
Less P. D. P. Credited
Less further debit balance
Net due paid as below

TRANSFER TO DEPENDENT

O	Ag. No.	Ch No	Amount	Ag. No	Ch. No	Amount
1						
2						
3						
4						
5						
6						
	Total			Total		

Pay Soldier $ 109 90

Pay Dependent $

Days 92 Rate 70 Due 210 00

Less P.D.P. credited 100 10

Less further Dr. Bal. or overpayment.

Net 109 90

R W109 16-10-19

L Bullett H G Davidson

Clerk J K Wade

Date	Ck. Order	Ck. No.	Amount		Remarks.	Date	Ck. Order	Ck. No.	Amount.	
1	8/10/19	34621	530871	109.	90		1				
2							2				
3							3				
4							4				
5							5				
6							6				

495-D.P.-100M-6-19 (10248).

GEN'L AUDITOR
Posting checked by
[illegible]
Date 8/10/19

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

38-P-1.

Name Abele, Phillip J.
Surname Christian Name

Regimental Number 2245661 Rank Pte.

Unit C. F. C.

Original Unit

District where paid M.D.5.

Date of Discharge 6-4-18.

P. D. P. Filing Number 11-18-5.

Address (in full) 13 Campden Place,
Boston, Mass. U. S. A.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $.10 per diem. Separation Allowance $ per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		
100 10	251	8-4-18	33 00	251	8-5-18	33 00	245	8-6-18	34 10		100 10

M. F. W. 127.
50M—6 17.
1772 39-1140.

Remarks:

The undermentioned "Medicaly Documents" have been detached from Discharge Documents, and forwarded to B. P. C.

Medical History Sheet, M. F. B. 313,.....

" " or A. F. B. 178n,.....

Proceedings of Med, Board, A.F.B. 179,.....

Dental History Sheet, M. F. B. 465,.....

Medical Report D. M. S. 1375,.....

Miscellaneous Reports,.....

Confidential Information 4.

.....
R. O.

Date, 6/5/18.....

Doc, S. F. #6,

Pte Philippe J. Abelle,
2245661

C.A.D.C.5009.
20M-19-2-18.

2245661
Pte Abele R.J.
Q.R.D.

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
6-3-18	9 R x - 1 filling			At public expense F.A. Gleason Capt. CADC

No 2245661

Pte Able. P.J.

Forestry Bde.

Ward 2

DISTRICT
MAR
27
MIL. DIST. NO. 5, QUE

Amount in 24 hrs. .....

Appearance ..... Clear

Color ..... Amber

Reaction ..... Acid

Specific Gravity 1012

Albumen ..... Nil

Glucose ..... Nil

Diazo ~~Diazo~~ Microscopical No Blood cells

No Casts

No Pus.

H Braymore Capt. A.M.C.

O/C LABORATORY

No 22455 III

Pt. Abele.

Shaw

Ward 5

Mil. Dist. No. 5, G

Amount in 24 hrs.....

Appearance..... Clear

Color..... Lt. Amber

Reaction..... Acid

Specific Gravity..... 1010

Albumen..... Trace

Glucose..... Trace

Diazo.....

Harry Morey Lagrue

..... M. D.

O. ½ LABORATORY

No. 2245661 RANK Pte NAME Abele. Philippe.

T. O. S. 22-9-17, UNIT Quebec Recruiting Depot
D0223 of 26-9-17,

M. D. 5,

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917	1917			
Sept 22	Sept 30	C		
Oct- 1	Oct 4	R	Trans to Levis	D0232 of 6-10-17.

No 2245661 RANK Pte. NAME Abele Philip

T. O. S. UNIT Forestry Depot.

Tnsfd. from (Valcartier Camp) Quc. Rec. Depot. 5-10-17.
D.O. 2 of 8-10-17.

M. D. 5

PAID FROM 1917	PAID TO 1917	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
Oct. 1	Oct. 4	M		
Oct. 5	Oct. 31	M.		
Nov. 1	Nov. 21	M.	Tnsfd. C/3. 21-11-17.	D.O. 2 of 6-11-17.

31701.

REG. NO. 224566 1. NAME Abele, Philip
(SURNAME FIRST)

RANK Pte. CORPS Forestry.

AGE 35. SERVICE C

NAME OF HOSPITAL Military PLACE Quebec

DATE OF ADMISSION 23. 3. 18.

DISEASE Incontinence of Urine.

DISCHARGE 3. 4. 18.

OPERATION

DISCHARGED TO DUTY Yes.

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS .....

S.O.S. Div 6/4/18
94th
H 5

SURNAME. Abele,

CHRISTIAN NAMES Philip I.

REGL. No. 2245661 RANK Pte.

UNIT Que. Recr. Depot (Forestry M.D. 5.) (Offr.)

FORMER CORPS U.S. army (Inf.)

NEXT OF KIN

NAMES IN FULL Abele, Mrs. Catherine

RELATIONSHIP TO SOLDIER Mother

ADDRESS 18 Camden Place, Boston, Mass., U.S.A.

CHANGE OF ADDRESS

COUNTRY OF BIRTH U.S.A. Boston, Mass. DATE May 4, 1882

PLACE OF ATTESTATION Richmond, P.Q. DATE Sep. 22, 1917

O/S 4-12-17.

R/C. 20/3/18 7/38 H 5

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

M.O.

FROM HALIFAX PER S.S. METAGAMA 4/12/17

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Seamster RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 35 YEARS 7 MONTHS

HEIGHT 5 FEET 5 INCHES

CHEST MEASUREMENT 38 INCHES EXPANSION 2 INCHES

COMPLEXION Dark EYES Grey HAIR Brown

DISTINGUISHING MARKS Not Stated

MEDICAL EXAMINATION. PLACE Valcartier, P.Q. DATE Sept 25, 1917

Present Address 18 Camden Place
Boston, Mass., U.S.A.

CONFIDENTIAL INFORMATION

Rep[illegible] No. 6064	Category E [illegible]	No. of M. H. C. File	No. of Local File	No. of H. Q. File
M.D. #5	Abele, Philip J. 18 Camden Place, Boston, Mass, USA			

No. 2245661 Rank Pte Original Unit CFC Present Unit CFC

Age 35 Height 5 ft. 3 ins. Complexion Dark Eyes Grey Hair Brown Character Good

Date of enlistment 25.9.17 Where enlisted Valcartier Where seen service England

Ship returned by T.S.#2810 Date of arrival 20.3.18 Port of arrival Halifax

Birthplace USA Religion R.C.

Name and address next of kin Mother, Mrs.C.Abele, above address.

Notification of return to be sent to -do-

Cause of disability Incontinence of Urine. Canadian Board, 2.3.18.

Condition in detail which prevents the soldier from earning a full livelihood

E. 1. Discharge, no pensionable disability.
E. 2. Waiting Reclassification.
E. 3. Discharge with claim for pension.

Degree of incapacity (Please state in fractions) Eng. Board Canadian Board

Probable duration of incapacity

Does it render him permanently unfit for Military Service? Yes

Would operation, Special treatment, or use of appliances etc., lessen incapacity? No

Destination to which transportation issued Quebec

Members of Board E.A/Robertson,Capt. R.M.Neilson,Capt. J.R.Cobeil,Lieut. E.A.Winters,Lt-Col

INFORMATION TO BE FURNISHED BY SOLDIER

DEPENDENTS	NAME	AGE	WHERE—IF EMPLOYED	WAGES	STATE OF HEALTH
Wife					
Children 1	Mother	51			Delicate
2					
3					
4					
5					

C. Service in Canada.
D. Treatment.

Occupation prior to enlistment Teamster

Regular trade or profession -do-

Average earnings previous to enlistment $16.00 per wk. Any other income?

Name and address of last employer Blue Ribbon Laundry,Boston.

Rent per month - If purchasing property amount due and annual payment, $ - $ -

Taxes - If Homestead, when is patent due?

If carrying life or accident insurance, annual premium -

If in receipt of sick benefits or other insurance—name of society Mother Pays John Hancock Amt. per mo. $

If unable to follow previous occupation, name preference

At what age soldier left school? 222 What grade, standard, &c., was he in? XXXXXX

Has he taken any Technical or Continuation Classes, if so what?

Whether given Vocational Training while in Hospital in England. If so, what subjects?

References Last empl.

Witness W.T.Byrne.

I declare that the above statement is correct.

Date Quebec 23.3.18 Signature Philip J.Abele.

A. General Service.
B. Service abroad, not general.

Recommendation by Interviewer as to classes likely to be of use, and general remarks:

Last Pay Cert. Cr., $ Dr., $ Amount paid at Depot H.Q., $ L. P. C. leaving Depot, $

Amount forwarded to H. Q. Unit, $ Credit Clothing allowances, $

Transf'd to Unit—Date Transf'd Class 1—Date Transf'd Class 3—Date

PENSION—Class.....Amount per year, $.....Period granted for.....Dating from.....

First payment date.....

Form No. 5.

MILITARY DISTRICT No. 5 APR 18 1918 QUEBEC.

CONFIDENTIAL INFORMATION

P. 559
MARRIED OR SINGLE Single

PLACE OF BIRTH Boston, Mass. U.S.A

NAME AND ADDRESS OF NEXT OF KIN Catherine Abele

18 Camden Place, Boston, Mass U.S.A

RELATIONSHIP OF NEXT OF KIN Mother

NAME AND ADDRESS OF NEXT OF KIN

1. L.P.C.Issued, date 22/2/18
2. Authority A.C.3A.1807
3. Discharged to Canada
4. Pay Book verified 22/2/18
5. Balance shown on L.P.C.$ XX.XX 44.70
6. Balance shown in Ledger Sheet $ XX.XX 76.33
7. Full particulars of entries making difference between 5 and 6 if any.

No.	Date.	Unit & particulars of entries.	Amount. Debit	Amount. Credit
~~B469~~	~~20-1-18~~	~~Back Pay~~	~~17.03~~	
B1283	20-2-18		14.60	

Net Difference $ 31.63

8. Assigned Pay cancelled. A.F.M.Forms rendered Nil

or9. Separation Allowance and Assigned Pay continued to dependent in England and transferred to Accounts Branch for payment

Certified correct
Officer i/c Group.

N.W.Rail to Can

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. 2245661 RANK Pte. NAME Abele, Philip Joseph

IF IN PERMT. CORPS WHAT UNIT UNIT Forestry Draft No 5 TRANSFERRED TO C.A.C. Nor Cliff. DATE 1/3/18. AUTHORITY A.C.3A.1807 22/2/18

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION Richmond, P.Q. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION 22nd Sept. 1917 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ Nil DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) — EFFECTIVE — REASON Discharged to Canada

DISCHARGE DATE AND PLACE Canada REASON AND AUTHORITY A.C.3a 1807, 22-2-18 for disposal

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

PAY OFFICE BRANCH SEP 11 1918 CANADIAN

OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No. / Date	2 No. / Date	3 No. / Date	4 No. / Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
																	61
		DR.1	DR.2	DR.3	DR.4	BALANCE	DEBIT SEE FOR ALLOWANCE P.P. BOOK										
						18 10							~~18 10~~				
		487															
		2920				62 13											
		3407															
		3407				76 33											
			10 00			~~66 33~~											
		1703				59 30				6213							
		1703	1000							24 20							
										8633							
		1460				59 30				2703							
										5930							
		973				3497						DR 3497					
		2433															
		3497															
		3497				0											

Checked, D. King.

P. 559

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Boston, Mass. U.S.A

NAME AND ADDRESS OF NEXT OF KIN: Catherine Abele

18 Camden Place, Boston, Mass U.S.A

RELATIONSHIP OF NEXT OF KIN: Mother

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

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

6

REG'L NO. 224561 RANK Pte. NAME Abele, Philip Joseph

IF IN PERMT. CORPS WHAT UNIT

UNIT 5 Forestry Draft No 5 TRANSFERRED TO C.F.C. Nor Cft. DATE 1/2/18 AUTHORITY A.G.3rd 1807 22/2/18

PERMANENT FORCE ALLOWANCES — TRANSFERRED TO — DATE — AUTHORITY

PLACE OF ATTESTATION Richmond, P.Q. — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 22nd Sept. 1917 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY MONTHLY $ Nil — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP

ASSIGNED PAY MONTHLY $ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) — EFFECTIVE — REASON Discharged to Canada

DISCHARGE DATE AND PLACE Canada — REASON AND AUTHORITY A.G.3a 1807, 22-2-18 for disposal

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

PAY OFFICE CANADA SEP 11 1918 CANADIAN CORPS

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
MONTH	PARTICULARS				CR. 1	CR. 2			PARTICULARS							DR. 1	DR. 2	CR. 1	CR. 2	BALANCE																	
NOV. 21 1917	BALANCE FROM CANADA																																		
22/1/17																																			
31 Jan 1918.	R.P.		78 10.																																
			79 20													aR.B560 23/1/17 67CBD		4 87																	
			79 20													aR.B589. 29/1/17 87CBD		29 20																	
			78 10															34 07																	
			78 10															34 07																	
			4 20																																
Feb 1-22	R.P.		25 10													Clothing under Govt service																			
			24 20													aRC469, 131 Co 20/1/18		17 03																	
																		17 03																	
Mar																DraR B1283. B'tl 6 Bd. 22/2/18		14 60																	
																DraR 2nd Lr. Gds Boston 2/3/18		9 73.																	
																		24 33																	
June																Dr Bal to Can		34 97																	
																		34 97																	

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5930

DR 3497

Checked D. King.

LIST OF DISCHARGE DOCUMENTS.

1. Proceedings on discharge. (Army Form B. 268.)
2. Proceedings on transfer to reserve (if any). (Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any). Army Form B. 136).
7. Authority for continuance, or extension, of service (if any). Army Form B. 221.)
8. Court of Inquiry on an injury (if any) (Army Form A 2.)
9. Regimental conduct sheet. (Army Form B. 120).
10. Company conduct sheet. (Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet. (Army Form B. 178).
13. Medical report on invalid (if any). (Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required. See section 11 on second page.
19. Active service casualty form. (Army Form B. 103).
20. Employment sheet. (Army Form B. 2066).

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

1. Duplicate attestation. (On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any). (Army Form B. 178).

Instructions as to the preparation, dispatch, and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery,

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms :—

(a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
(b) Character Certificate (Army Form B. 2067) if entitled.
(c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.

This space to be left blank for the Chelsea Number.

Army Form B. 268.

Proceedings on Discharge.

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 22 45 661 Army Rank Pte

Name Abele Philip Jos.
(The name must agree strictly with that on enlistment, unless changed subsequently by authority.)

Corps C F C

Battalion, Battery, Company, Depôt, &c. 8 7 C
(If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)

Date of discharge

Place of discharge

1. *Description at the time of discharge.*

Age 35 years 10 months
Height 5 feet 3 inches
Chest measurement { girth when fully expanded ins. / range of expansion ins.
Complexion
Eyes
Hair
Trade Teamster
Intended place of residence (To be given as fully as practicable) Barton Quebec. 5

Descriptive marks.

Mil

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of Combatant B/1 Mustr Lawns. 19.2.18 BV

(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

To be filled in on the soldier quitting the Colours.

3. Military character :—

4. Character awarded in accordance with King's Regulations :—

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to*

* Strike out if not applicable.

D. D. & L., London, E.C.
A4502 Wt. W17176 M291 500,000 2/16 Sch. 33 Forms B. 268 40

[OVER.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... ... ... Class _____

6. Campaigns, Medals and Decorations — Local Casualty

Certificate of education .....

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) _____ _____

(Date) _____ *Commanding* _____ *Battn.* _____ *Regiment.*

8. *Certificate to be signed by the soldier on discharge.*

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(*Place*) _____ _____ _____ (*Signature of Soldier.*)

(*Date*) _____ _____ (*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 at 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 towards engagement to _____ (the date to which the record of service is completed) _____ years _____ days.

Further service „ „ _____ (the date of confirmation of discharge) ... ... _____ „ _____ „

Total ... _____ „ _____ „

11. *Confirmation of discharge.*

The discharge of the above-named man is hereby confirmed for (date)

(Place) _____

Signature _____

(Date) _____

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

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.)

_____

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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 (in the event of such having been prepared.)

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.

This space to be for numbers

M

Proceedings on Discharge.

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

No. 224561

Rank Private.

Surname Abele

Christian Name Phillips.

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

Corps (Squadron, Battery or Company) Canadian Forestry Corps.

Date of Discharge APR - 6 1918

Place of Discharge Quebec.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 34 years 10 months.	Descriptive Marks
Height 5 feet 3 inches.	Nil
Complexion Dark.	
Eyes Grey.	
Hair Brown.	
Trade Teamster.	
Intended place of residence (To be given as fully as practicable.)	13 Camden Place Boston, Mass, U.S.A.

2. The above-named man is discharged in consequence of being medically unfit under HQ. 54-21-43-4 of 22-7-18.

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.

Good. C7.

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.)

Teamster, C7.

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

W.R.S.
H.C. Comp
3.10.1918.

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

Nil.

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

6. Medals and Decorations..... Nil.

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) Quebec ..... Charles Fontaine Capt.

(Date) APR 6-1918 ..... *Commanding* Casualty Unit M. D. No 5

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.

(Place) Quebec ..... Philip J. Abele ..... *(Signature of Soldier.)*

(Date) APR 6-1918 ..... Alex. Dawson ..... *(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) Quebec .....

(Date) April 6th 1918 ..... *(Signature)* Charles Fontaine Capt.

O. C. No. 5 CASUALTY UNIT, M. D. No. 5

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.)

Nil. — Philip J. Abele

Alex. Dawson
Witness

(OVER)

38 P 2

a 991

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

SEP 20 1919
F. R.

P.C. 2110/19 and 3

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Orders-in-Council (P.C. 3165), dated 21st December, 1918, as amended by P.C. 285, dated 8th February 1919, and P.C. 1168, dated 23rd June 1919.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written in.

On completion this Declaration is to be returned to THE ASSISTANT DIRECTOR PAY SERVICES OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Reg. No. 2245661 2. Rank Private 3. Original C.E.F. Unit 5th Bn. Canadian Tonsley

4. Christian Names Phillip Joseph 5. Surname Abele.

6. Address, in full, to which future payments of gratuity are to be forwarded
353 Bowdoin St., Dorchester, Mass.

ACCOUNTS SECTION
SEP 25 1919
PAY BRANCH
TO F. R.

7. Give the following particulars of service with Pay and Allowances for each enlistment which you have had in the Naval or Land Forces of Canada or the British Empire on or since the 4th August, 1914. Answer in the following order in space allotted.

	Regt. No.	Rank on Enlistment.	Unit. (State whether Active Militia, Permanent Force, C.E.F. or Naval. If R.A.F. state Wing.)
		CANADIAN SERVICE.	
1st Enl.	2245661	Private	5 Bn. Canadian Tonsley.
2nd Enl.			
3rd Enl.			
4th Enl.			
		IMPERIAL SERVICE.	
Imp. Enl.			

S. A. & A. F.
SEP 4 1919

	Date of Enlistment.	Date of Discharge.	Rank on Discharge.	Unit from which discharged	Place of Discharge.	Reason for Discharge.
			CANADIAN SERVICE.			
1st Enl.	Sept. 22. '17	April 6 '18	Private	Canadian Tonsley 5 Bn.	Quebec, Canada.	Medically unfit
2nd Enl.						
3rd Enl.						
4th Enl.						
			IMPERIAL SERVICE.			
Imp. Enl.						

M. D. 5
54

M. F. W. 2595 (b)
494-D.P.-100M-6-19.
1772-39-1389.

no budget papers

F.R. 77

P.C. 2110/19.

8. (a) Did you revert overseas to a rank lower than the temporary substantive rank held by you on your arrival in England? No. (b) If so, give date and ranks and state if such reversion was in consequence of misconduct or inefficiency

9. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? No If so, give particulars of one such unit and dates of service overseas with such unit:

10. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? Ninety days overseal pay.

11. Have you been issued with a War Service Badge? No If so, give number and class

12. Are you at present a member of and in receipt of pay and allowances from any Canadian Naval or Land Forces? No If so, give unit

13. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received, from where paid, and on what dates April 10. 1918 received check #33 — and same amount — in May and June, 1918.

14. Are you entitled to receive, or have you received any payment in the nature of Post Discharge Gratuity from the Imperial Forces? No If so, state amount received, or to which you are entitled

15. Were you at the time of enlistment a civil employee of the Dominion or a Provincial Government? If so, state what Government, what Department, and whether civil pay was issued on your account while you were on active service No.

16. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-Establishment? No.
(b) If so, are you in receipt of full pay and allowances from that Department?

17. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge No Separation Allowance made.

18. Relationship of such dependent

19. Present address, in full, of such dependent

20. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? If so, give his regimental number, rank, unit and full name

REMARKS

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and by virtue of the Canada Evidence Act.

Signature of applicant: Philip J Abele

Place of Residence: 353 Bowdoin St- Dorchester, Massachusetts U.S.A

Subscribed ~~Declared~~ Sworn to before me at: Boston, Mass, U.S.A

This 2 day of September 1919

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Adminstration of Oaths. Marie Ramsayer

NOTICE.—If the dependent has not forwarded a Statutory Declaration to Ottawa, in connection with Separation Allowance, it will be necessary to forward one with this application. These are for wife, M.F.W. 148, mother, M.F.W. 147, and guardian, M.F.W. 149, and may be obtained from the Assistant Directors Pay Service, or the Patriotic Fund. Guardian forms must be completed by the present guardian.

Space below this line to be used only by the Assistant Directors Pay Service.

POST DISCHARGE PAY.

Dates paid.	Amounts paid soldier.	Amount paid dependent.
8-4-18	33.00	
8-5-18	33.00	
8-6-18	34.10	
	100.10	

REMARKS

Certified correct. M. R. Wright Capt.

Assistant Director Pay Services, Mil. Dist. No.

Date