

13314

132556

CHAFE

Edward BARTLETT

**I.D. number**  
**No. d'identification**

**Surname**  
**Nom de famille**

**Given names**  
**Prénoms**

R.I.A. 22/11/16

**PERSONNEL RECORDS CENTRE**  
**CENTRE DES DOCUMENTS DU**  
**PERSONNEL**

**Location**  
**Lieu**

1596

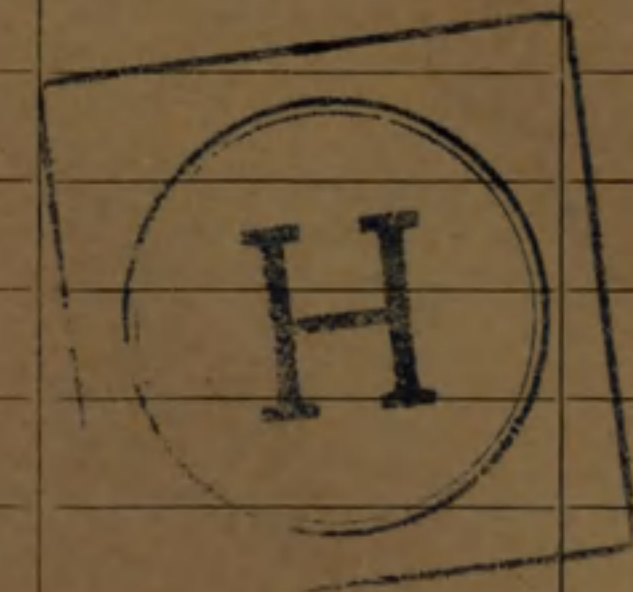
Box # 1595

C.E.F. REGIMENTAL DOCUMENTS

NAME **CHAFE, EDWARD BARTLETT** REGT. No. **132556** UNIT **73 BN** H. Q. FILE No. **13314**



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)					<b>K.A.</b>
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					<b>13-11-16</b>
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					



*4035-18*

*Box 1596*

PUBLIC ARCHIVES  
RECORDS CENTER

*Tuplicate*

ATTESTATION PAPER.

No. 132556

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your name? *Chape, Edward Bartlett*
- 2. In what Town, Township or Parish, and in what Country were you born? *Burgis, Nfld*
- 3. What is the name of your next-of kin? *Blanche Chape (wife)*
- 4. What is the address of your next-of-kin? *107 Westmount Road, Montreal*
- 5. What is the date of your birth? *May 10 1902* *Canada*
- 6. What is your Trade or Calling? *Chaffin Mechanic*
- 7. Are you married? *yes*
- 8. Are you willing to be vaccinated or re-vaccinated? *yes*
- 9. Do you now belong to the Active Militia? *no*
- 10. Have you ever served in any Military Force? *yes Victoria Rifles*  
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*

*E. B. Chape* (Signature of Man.)

*E. B. Chape* (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Edw. Chape*, do solemnly declare that the above answers made by me to the above questions 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.

*E. B. Chape* (Signature of Recruit)

Date *Sept 16* 191*5*. *E. B. Chape* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Edw. Chape*, 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.

*E. B. Chape* (Signature of Recruit)

Date *Sept 16* 191*5*. *E. B. Chape* (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 *20th* day of *Sept* 191*5*

*[Signature]* (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

*[Signature]* (Approving Officer)

O.C. 73rd Bn. Royal Highlanders of Canada, C.E.F.

# Description of Chafe, Edw B. on Enlistment.

Apparent Age 33 years 4 months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

Height 5 ft. 10 ins.

Chest measurement { Girth when fully expanded 38 ins.  
 Range of expansion 3 1/2 ins.

Complexion Fair  
 Eyes Grey  
 Hair Str Brown

Religious denominations.  
 Church of England.....  
 Presbyterian.....  
~~Wesleyan~~ Methodist.....  
 Baptist or Congregationalist.....  
 Other Protestants.....  
(Denomination to be stated.)  
 Roman Catholic..... X  
 Jewish.....

## 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 Sept 16 1915 Sachabote Captaine

Place MONTREAL 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.

E. Chafe 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] 1st Lt. (Signature of Officer)  
 O.C. 73rd Bn. Royal Highlanders of Canada, C.E.F.

Date SEP 20 1915 1915

Всиполъщива

Всиполъщива

Дат

м. г.

13-2-20.

А. Г.

# 132556

Sgt. Edward B. Chape

649-C-7129

M 73rd Bn

Name & Address of Legatee

Mrs. Blanche L. Chape (W)  
597 Montana St.  
Montreal, Que.

Medals & Decorations

Name & Address of Next of Kin

As above

P & A

(Serial no. 765390) Scroll Desp. JAN 13 1921 Reqn. No. 79883

Plague Desp. DEC 24 Reqn. No. P 22245

Name & Address of Female Next of Kin

As above

Memorial

Resp. 16 2/20 C 15 68

W. C. 742

P.T.O.

Water Recd

W



REGT'L NO 132556

H.Q. FILE NO. 649-

NAME *Lochafe, Edward Bartlett.*  
RANK AND CORPS *Sgt. 73<sup>rd</sup> " Bn.*

FOLLOWS

No.

FOLLOWS

CABLE

NATURE OF CASUALTY

No.

DATE

*C.*

No.	DATE	NATURE OF CASUALTY
05170.	21-11-16	Killed in action Nov. 13 <sup>th</sup> / 16.
B2090	18-11-16	" " "
	<i>Rouen</i>	

LIST No

HOSPITAL

DATE OF  
ADMISSION

REMARKS

467.

Rep from Base

13-11-16

Filled in action

SURNAME.

*Lehane*

*(649-C-7129)*

CARD NO.

CHRISTIAN NAMES

*Edward, Bartlett.*

FOLL.

**D**

REGL. NO.

*132556.*

RANK

*Cpl.*

UNIT

*73<sup>rd</sup>*

*Batt*

FORMER CORPS

*Victoria Rifles (5 yrs)*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Lehane, Mrs. Blanche*

RELATIONSHIP TO SOLDIER

*Wife*

ADDRESS

*297 Rivard St.,*

~~*109 Westmount Blvd. Montreal*~~

*E.H.W. 197  
29-11-16*

*Also notify: - S. C. Lehane, P. Q.  
South-Telegram N. O. 649-C-7129 Brigus, Newfoundland.*

COUNTRY OF BIRTH

*Newfoundland, Brigus*

DATE

*May 10<sup>th</sup> 1882*

PLACE OF ATTESTATION

*Montreal, P. Q.*

DATE

*Sept. 20<sup>th</sup> 1915*

*Sailed 31-3-16 "Adriatic" Halifax<sup>362</sup>*

MARRIED

Yes.

SINGLE

WIDOWER

TRADE OR CALLING

Chauffeur, Mechanic

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

33

YEARS

4

MONTHS

HEIGHT

5

FEET

10

INCHES

CHEST MEASUREMENT

38

INCHES

EXPANSION

3 1/2

INCHES

COMPLEXION

Fair

EYES

Grey

HAIR

ht. Brown

DISTINGUISHING MARKS

nil.

MEDICAL EXAMINATION.

PLACE

Montreal, P.Q.

DATE

Sept. 16<sup>th</sup> 1918

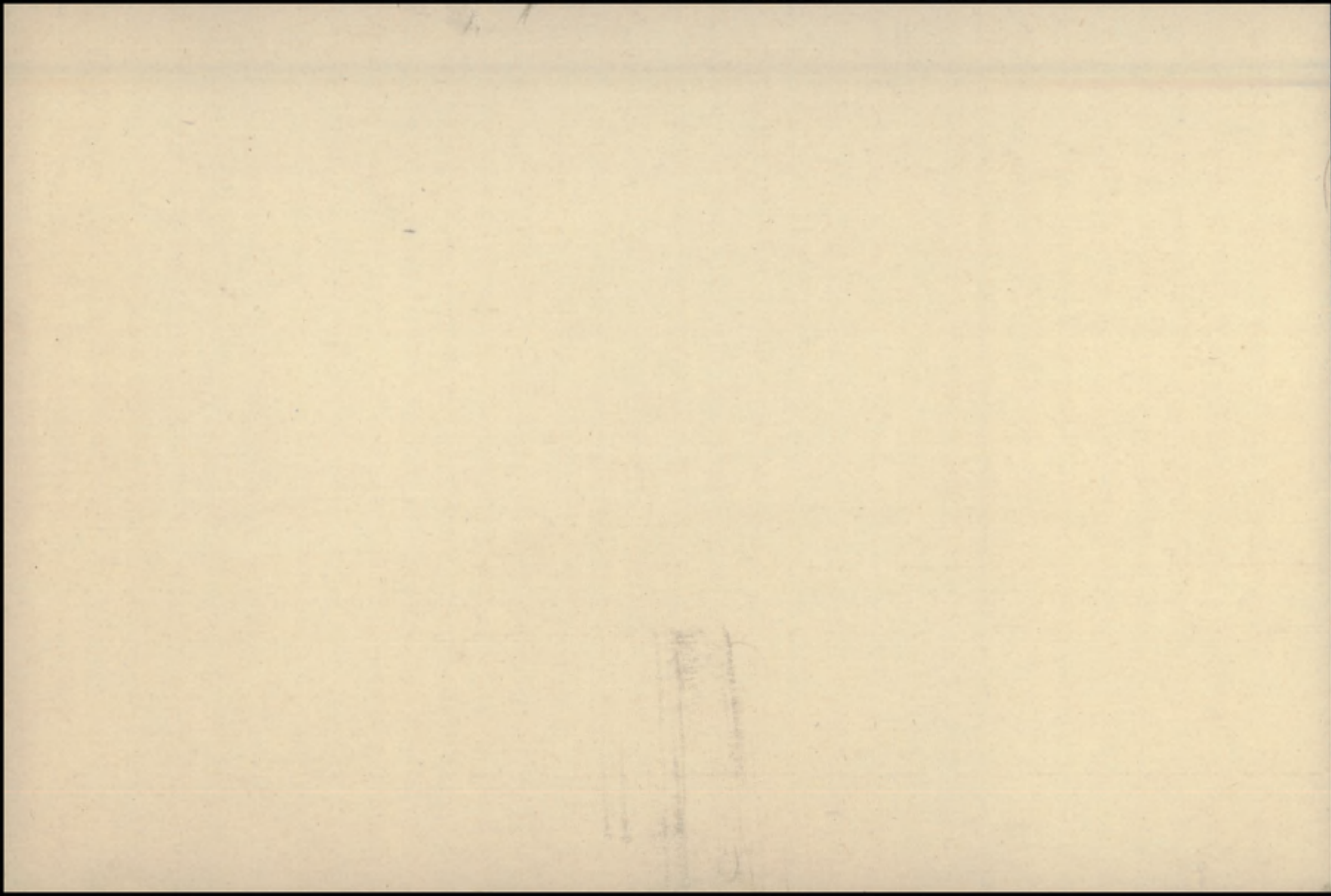
No. 132556 RANK *Pte. Sgt. bpl.* NAME *Chafe E. B.*

T. O. S. 20-9-15 (CO 45-20-9-15) UNIT *93rd. Battalion C. I. F.*

M. D. 4.

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Sept. 20.	1915 Sept. 30.	✓		
	Oct.	D.S.		
	Nov.	✓	Re-writing L. i. l. pl.	(CO. 32.)
	Dec.	✓		Prom. from. L. i. l. pl. to bpl. (prom.)
1916 Jan.	1916 Feb.	✓		
	Mar.	✓		
	Apr.	✓	Prom. Sgt 26-4-16.	(CO. 98 of 26-4-16.)

**UNIT SAILED**  
**MAR 31 1916**









*1321556*  
Number *1321556* Rank *Sgt*

Surname *CHAFE*

Christian name *Edward Bartlett R*

Units *73<sup>rd</sup> Coy. Can. Inf.* Theatre of War *France*

Date of Service *12-8-16*

Remarks *(W) Mrs. Blanche Chafe*

Latest Address *597 Mettana St.*

*Montreal, Que*  
*B Page 21167*

Roll No.

(This form to be filled in by all ranks on voyage to Canada)

M.D. No.....

NUMBER

RANK

SURNAM.

INITIALS

UNIT

Full postal address.....  
(Street) (City or Town) (Province)

Name of one person to be notified of arrival.....

Address .....

Railway Station in Military District to which a furlough warrant is required.....  
..... Railway.....

If married, is your wife on board.....

Number of children on board.....

Their destination.....

(Egd.).....

M. F. W. 2502

DEPT. REC. JAN 20 1923  
13734883  
12.2.23

Surname **Chafe** Christian Name or Names **E.B.** Reg. No. **132556**  
 Rank **Sgt.** Unit **73rd Bn.** Co. Troop Batty.  
 Hospital Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

**Killed in Action 12.11.16**

DISPOSITION

Date

**C.L. 22.11.16 A67**

REMARKS

**Reported from Base**

*A.M.D. 2 DEPT.  
 Beh. of D.G.M.S. O.M.F.C. London.*

8

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

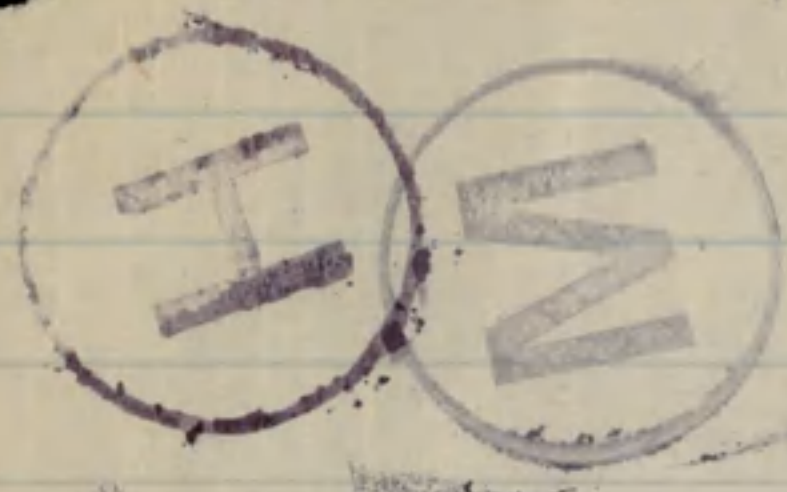
5.

6.

7.

RL 25 C 2293

A.G.R. Rank *Sergt* Name **CHAFE, Edward Bartlett.** Reg'l No. **132556.**   
 Unit **73rd Bn.** If in perm. Corps, }  
 - What Unit? } Married or Single **Married.**  
 Place and Date of Enlistment **Montreal, 16th September, 1915.** Place of Birth **Brigns, Newfoundland.**  
 Name and Address, Next-of-Kin **Blanche Chafe,**  
**109 Westmount ~~Bold~~<sup>Boulevards</sup>, Montreal, Canada.** Relationship **Wife.**  
 Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship



Discharge, Date and Place Reason Character

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
<i>Auth. S-12-O-594</i>	<i>10/4/16</i>	<i>Arrived in England</i>	<i>10 APR 1916</i>		<i>S.S. Adriatic</i>
<i>26.4.16</i>	<i>73rd Bn.</i>	<i>App. Prov. Sergeant</i>	<i>E. Sandling</i>	<i>26.4.16</i>	<i>P. II. D.O. 98/16.</i>
<i>27-5-16</i>	<i>" "</i>	<i>Arrived in Eng. with Prov. rank of Corp.</i>	<i>Bramshott</i>	<i>9.4.16</i>	<i>P. II. D.O. #126</i>
<i>13-6-16</i>	<i>" "</i>	<i>Confirmed in rank of Sergt.</i>	<i>"</i>	<i>26-4-16</i>	<i>P. II. D.O. 143. (12 B.-6-41) A.F.B. 103, chd. 16.8.16</i>
<i>11 8-16</i>	<i>73rd.</i>	<i>Embarked For France</i>	<i>Bramshott</i>	<i>12-8-16</i>	<i>Part 2 D. O. 201</i>
<i>18.11.16</i>	<i>✓</i>	<i>Killed in Action</i>	<i>Field</i>	<i>13.11.16</i>	<i>P. II. D.O. #257</i>
<i>22.11.16</i>	<i>✓</i>	<i>Killed in Action</i>	<i>✓</i>	<i>13.11.16</i>	<i>Co's No. 67</i>



CERTIFIED CORRECT.

28 AUG. 1916

CAN. RECORDS LONDON.

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

M. F. W. 54.

150M. 10-15.  
H.Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 73rd (Overseas) Bn. Royal Highlanders of Canada, C.E.F.

Regimental No. 132556 Rank Private Name Chafe, Edward Bartlett

Enlisted (a) 16.9.15 Terms of Service (a) Duration of War Service reckons from (a) 16.9.15

Date of promotion to present rank } 26.4.16 Date of appointment to lance rank } Numerical position on roll of N. C. Os. }

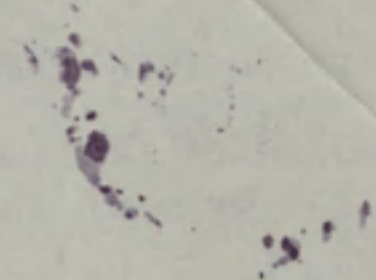
Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) Chauffeur Mechanic

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
Date	From whom received			taken from Army Form B. 213, Army Form A. 36, or other official documents.
Embarked at Halifax on R.M.S. "Adriatic", March 31st, 1916.				
Arrived at Liverpool, April 9th, 1916.				
	appointed Provisional Corp. from		9/4/16	(B.O. 126/16 24/5/16) ✓
	do do Sgt.			(B.O. 98/16 26/4/16) ✓
	Proceeded overseas for service		12/8/16	H. Murya Capt. Adj. 73rd Bn. Can Inf.
13.6.16	73. Bn Conf in Rk of Sergt.	Bramshott	26.4.16	At 11 00143. (Auth 12B-6-41 for Officer i/c Records, C.E.F.) W. H. Northcote Lieut
29/76	Disembarked	Stave	13/76	
1/76	Bnade Instr. 4th Divn School	Field	27/76	B213, B.S. 9 d/- 9/76
14/76	Rejoined Unit	Field	2/76	Letter KI 108/478, B.S. 35, d/- 6/76
	Killed in Action	Field	13/76	Letter K. 137/263, P. II Orders 257 d/- 18/76 B.S. 43, d/- 18-11-16

*Jenneth D. M. J. J.*  
Lieutenant  
for Lieut-Colonel, A.C.S.

(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. I.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				



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all

01/28/01

01/28/01



# FORM OF WILL

I, Edward Bartlett Chafe (Name in full)

Regimental Number 132556 serving in 73rd R. H. C.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto my wife

Blanche Chafe,  
258 St. Antoine St.  
Montreal. Canada.

Name and Address  
of person or  
persons to whom  
it is to go.

absolutely, and my personal estate I bequeath to my wife

Blanche Chafe  
258 St. Antoine St.  
Montreal. Canada.

Name and Address  
of person or  
persons to receive  
personal estate\*  
(See note).

## NOTE

This space for the  
appointment of  
Executor if  
necessary.

## IMPORTANT NOTE

this 4th day of July A.D. 191 6

This must be signed  
and Dated by  
THE SOLDIER  
HIMSELF.

E. B. Chafe Signature of Soldier.

\*N.B. Personal estate includes pay, effects, money in bank, insurance policy in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness J. T. Ingham, Sergt.

Address of Witness 73rd Bn. C.I. R.H.C.

THE TWO  
WITNESSES

Occupation of Witness.....

MUST  
SIGN HERE

Signature of Second Witness Jas. Cassidy C.O.M.S.

Address of Witness 73rd Bn. R H C

Occupation of Witness.....

*A true copy*  
*Edward Bartlett Chafe*  
*Blanche Chafe*



# FORM OF WILL.

**I,** Edward Bartlett Chafe (Name in full)

Regimental Number 132556 serving in 73<sup>rd</sup> R.H.C.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

my wife

Blanche Chafe  
258 St. Antoine St.  
Montreal, Canada

Name & Address of person or persons to whom it is to go.

absolutely, and my personal estate I bequeath to

Blanche Chafe  
258 St. Antoine St.  
Montreal, Canada

Name & Address of person or persons to receive personal estate\* (see note).

In Witness whereof I have hereunto set my hand

this 4<sup>th</sup> day of July A.D. 1916

E.B. Chafe Signature.

\*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Name of Witness J. J. Wigham, Sergt.

Address of Witness 73<sup>rd</sup> Bn. C.I. R.H.C.

Occupation of Witness

Name of Witness Jas Cassidy C.C.M.S.

Address of Witness 73<sup>rd</sup> Bn R H C

Occupation of Witness

# FORM OF WILL.

3. (Name in full) \_\_\_\_\_

\_\_\_\_\_ setting in \_\_\_\_\_

of the Canadian Expedition, I do hereby revoke all former Wills

by me made and declare this to be my last Will.

I bequeath at my death unto

Name of legatee

of person or

estate to whom

it is to go

absolutely, and my personal estate I bequeath to

Name of legatee

of person or

estate to whom

it is to go

In Witness whereof I have hereunto set my hand

at \_\_\_\_\_

Signature

I do hereby certify that the above is a true and correct copy of the

signed and acknowledged by the testator as the last Will and

the presence of us both present at the time that he in the presence of

the witnesses in the presence of each other have hereunto signed

our names as Witnesses

Name of Witness \_\_\_\_\_

Signature of Witness \_\_\_\_\_

Signature of Witness \_\_\_\_\_

Name of Witness \_\_\_\_\_

Signature of Witness \_\_\_\_\_

Signature of Witness \_\_\_\_\_

Signature of Witness \_\_\_\_\_

# FORM OF WILL.

I, Edward Bartlett Chaff (Name in full)  
 Regimental Number 132556 serving in 73<sup>rd</sup> R.A.C.  
 of the Canadian Expeditionary Force, do hereby revoke all former Wills  
 by me made and declare this to be my last Will.

I bequeath all my real estate unto my wife

<u>Blanche Chaff</u>	} Name & Address of person or persons to whom it is to go.
<u>258 St. Antoine St.</u>	
<u>Montreal. Canada.</u>	

absolutely, and my personal estate I bequeath to my wife

<u>Blanche Chaff.</u>	} Name & Address of person or persons to receive personal estate* (see note).
<u>258 St. Antoine St.</u>	
<u>Montreal. Canada</u>	

In Witness whereof I have hereunto set my hand

this 4<sup>th</sup> day of July A.D. 1916.

E. B. Chaff Signature.

\* N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in  
 the presence of us both present at the same time, who in his presence, at  
 his request, and in the presence of each other have hereunto subscribed  
 our names as Witnesses.

Name of Witness J. T. McPham, Serf.

Address of Witness 73<sup>rd</sup> Bn. C.I. R.A.C.

Occupation of Witness \_\_\_\_\_

Name of Witness Jas Cassidy C.I. M.S.

Address of Witness 73<sup>rd</sup> Bn. R.A.C.

Occupation of Witness \_\_\_\_\_

27564

FORM OF WILL.

J. Edward [unclear] (Name in full)

Regimental Number 152886 serving in 73rd R.H.C.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto [unclear]

Name & Address of person or persons to whom it is to go. [unclear]

absolutely and my personal estate I bequeath to my wife

Name & Address of person or persons to receive personal estate\* (see note). [unclear]

In Witness whereof I have hereunto set my hand

this 7th day of July A.D. 1914

J. E. [unclear] Signature

\*N.B.—Personal estate includes my effect, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request and in the presence of each other have hereunto subscribed our names as Witnesses.

Name of Witness [unclear]

Address of Witness [unclear]

Occupation of Witness [unclear]

Name of Witness [unclear]

Address of Witness [unclear]

Occupation of Witness [unclear]

**MEDICAL HISTORY SHEET.**

**ORIGINAL**

Surname Chape Christian Name Edward  
William

Examined { on 16 day of Sept 1915  
 at Montreuil  
 Birthplace { City or Town Brighton  
 County Essex  
 Apparent age 23  
 Trade or occupation Chauffeur  
 Height 5 Feet 10 Inches.  
 Weight 135 Lbs.  
 Chest measurement { Minimum 34 1/2 inches.  
 Maximum expansion 38 inches.  
 Physical development Good  
 Small-Pox Marks - - -

Approved by Sachbotcaptain  
 Rank \_\_\_\_\_ M.O.

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

Vaccination Marks { Arm Right Left  
 Number 1  
 When Vaccinated last 12 Years ago  
 (a) Marks indicating congenital peculiarities or previous disease \_\_\_\_\_

Date	Result	VACCINATIONS.
<u>FEB 11 1916</u>		M.O.
		<u>L.S.F</u> M.O.
		<u>Negative</u> M.O.

(b) Slight defects but not sufficient to cause rejection  
Upper plate Dentist

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>FEB 11 1916</u>		<u>Good</u> <u>W.S.F</u> M.O.
<u>FEB 18 1916</u>		M.O.
<u>FEB 25 1916</u>		<u>TAB</u> <u>L*</u> M.O.

Enlisted on 20 day of SEP 20 1915 1915 at Montreuil

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment		<u>132556</u>		
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 Service, on the man becoming non-effective; the date and cause being stated on next page.





A. Roy

card on 28/3/16

# ATTESTATION PAPER.

No. 132556

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? Chape, Edward
2. In what Town, Township or Parish, and in what Country were you born? Brigus Nfld.
3. What is the name of your next-of-kin? Blanch Chape (wife)
4. What is the address of your next-of-kin? 109 Westmount Blvd, Montreal
5. What is the date of your birth? May 10 1882
6. What is your Trade or Calling? Chauffeur Mechanic
7. Are you married? yes
8. Are you willing to be vaccinated or re-vaccinated? and innoculated yes
9. Do you now belong to the Active Militia? no
10. Have you ever served in any Military Force? 5 yrs Victoria Rifles  
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

E. B. Chape (Signature of Man.)

A. M. [unclear] (Signature of Witness.)

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Edw. Chape, do solemnly declare that the above answers made by me to the above questions 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.

E. B. Chape (Signature of Recruit)

Date Sept 16 1915. A. M. [unclear] (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Edw. Chape, 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.

E. B. Chape (Signature of Recruit)

Date Sept 16 1915. A. M. [unclear] (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 20th day of Sept 1915.

[Signature] (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

[Signature] Lieut. Col. (Approving Officer)

O.C. 73rd Bn. Royal Highlanders of Canada, C.E.F.

# Description of Chafe, Edward on Enlistment.

Apparent Age 33 years 4 months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft 10 ins.

Chest measurement { Girth when fully expanded 38 ins.  
 Range of expansion 3 1/2 ins.

Complexion Fair

Eyes Green

Hair Dark Brown

Religious denominations.  
 Church of England.....  
 Presbyterian.....  
~~Wesleyan Methodist~~.....  
 Baptist or Congregationalist.....  
 Other Protestants.....  
(Denomination to be stated.)  
 Roman Catholic X.....  
 Jewish.....

## 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 Sept 16 1915

Place MONTREAL

Jachabotcaptaine  
 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.

E. Chafe 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.

P. Daudon Lieut. Col. (Signature of Officer)

B.C. 73rd Bn. Royal Highlanders of Canada, C.E.F.

Date SEP 20 1915 1915

Register No.

06949

WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No.

3023-E-1

Regt'l No.

132556

Name

Edward Bartlett Chafe  
(Christian Name) (Surname)

Unit

Infantry

Rank

Sgt

Date of enlistment

Date of casualty

13. 11. 16

B.P.C. File No.

7594

Was service performed overseas?

Yes

DEPENDENT

Name

Mrs. Blanche Chafe, Relationship: Widow

Address

13 Boyer St,  
Montreal,  
Quebec.

Amount of Special Pension Bonus \$

68

Abstracted by

M. Knox

Eligible for Gratuity

\$ 180.00

Less amount of Special Pension Bonus paid

\$ 68.00

Less Debit Balance of S. A. or A.P.

\$ ✓

Total deductions

\$ 68.00

Balance due

\$ 112.00

Cheque No.

G. 19024815

Date issued

2-9-20

Clerk

W Mitchell

REMARKS :

Audited by  
Goldward  
Date 1.9.20

\$112

Di  
23

M.F.W. 2652  
25M-6-30.  
H.Q. 1772-30-1473

# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay \$ \_\_\_\_\_ per diem; Field Allowance \$ \_\_\_\_\_ per diem. Separation Allowance \$ \_\_\_\_\_ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments 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		

M. F. W. 127  
 300M-1-19  
 1772-39-1140

Remarks:

20. 9. 15.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

339

Name *M<sup>rs</sup> Blanche Chape*

Name of Soldier *Chape Edward B*

Address ~~109 Westmount Blvd~~  
~~357 St. Antoine St.~~  
*353 Duquet St.*  
*Montreal que*

Regtl. No. *13 7556*

Rank

*Sgt. 26/4/16 pml 26/9/16*  
*Cpl. 8/12/15 pml 9/12/15*

Corps *73 BN Royal Highlanders of Canada C.E.F*

Relation to Soldier

wife, child or mother

} *Wife*

To what Corps belonging

when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>L 4812</i>	<i>27</i>	<i>27</i>
Nov.		<i>E 20953</i>	<i>20 -</i>	<i>20</i>
Dec.		<i>J 17939</i>	<i>20</i>	<i>20</i>
Jan.	1916	<i>M 17153</i>	<i>20</i>	<i>20</i>
Feb.		<i>O 20484</i>	<i>20</i>	<i>20</i>
March		<i>J 20863</i>	<i>20 -</i>	<i>20</i>

ACCOUNT CLOSED  
DATE.....PER.....  
*W*

0123456789  
1011121314  
1516171819  
2021222324  
2526272829  
3031323334  
3536373839  
4041424344  
4546474849  
5051525354  
5556575859  
6061626364  
6566676869  
7071727374  
7576777879  
8081828384  
8586878889  
9091929394  
9596979899

DEC

1

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

*Ms Blauche, Chafe wife*

Name of Soldier

*Chafe Edward*  
*Sgt* *Pte*

L. L. Job 89002.—Req. 6213.

PAYMENTS.

#132556

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	0527	<sup>127</sup> 20-	20
May		K 5734	20	20
June		R 545	20	20
July		R 10405	20	20
Aug.		J 13510	20 -	20
Sept.		E-15462	20	20
Oct.		V 18323	20	20
Nov.		W 22000	55	55 ad/rank
Dec.		W 24962	25	25
Jan.	1917			25-
Feb.				347. <sup>00</sup> acct closed pension granted 04/11/16 Jm
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

ACCOUNT CLOSED

DATE..... PER.....  
\$39.11 Recovered as per Pension  
List Jan 1916 CDR 27 1/2

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				



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2nd Contingent

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

To Whom *Mrs Blanche Chafe*  
Address *358<sup>a</sup> St. Antoine St.*  
~~*258 St. Antoine St*~~ *Montreal P. Q.*

*Wife*

By Whom Assigned *Chafe, Ed. B.*

Regtl. No. *132556*

Rank ~~*Cpl.*~~ *Sgt. Sep 26 385 26<sup>2</sup>/<sub>15</sub> 12<sup>10</sup>/<sub>11</sub> 46*

Corps *A. Co. 73<sup>rd</sup> Bn*

Rate *\$ 20<sup>00</sup>*

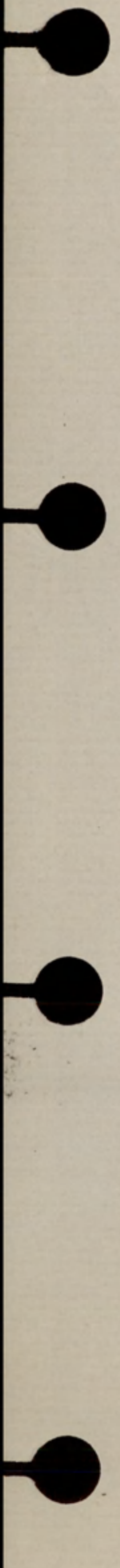
APR 1 1916

*sep*

PAYMENTS

Casualties

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Stop payments Dec 1/16 "Decreased" 3 months 1/16 - 3/19 1916</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			<i>Killed in action 13 Nov 1916 C/L (6) 22-11-16 ENB</i>
Feb.				
March				
April				
May				
June				
July				
Aug.	1916			<i>3<sup>rd</sup> Nov 27/16</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.				
Feb.				
March				



10

11-11-11  
12-12-12

1911 APR 21 1911

MILITIA AND DEFENCE  
**ASSIGNED PAY**

398

M. F. W. 12a.  
 15m.—3-16.  
 H. Q. 1772-39-819.

Sheet No. 2. *Blanche Chafe*

OVERSEAS CONTINGENTS  
**WIFE**  
 PAYMENTS.

Name of Soldier *Chafe Ed*  
*132556*

L. L. Job 95618—M. & D. 6555.

*4 coy. 33 Batt. Sgt.*

Month.	Year.	Cheque No.	Amt.
April	1916	<i>U2238</i>	<i>20</i>
May		<del><i>U4959</i></del>	<del><i>20</i></del>
June		<del><i>K8005</i></del>	<del><i>40</i></del>
July		<del><i>E28955</i></del>	<del><i>20</i></del>
Aug.		<i>G.10760</i>	<i>20</i>
Sept.		<i>316768</i>	<i>20</i>
Oct.		<i>721134</i>	<i>20</i>
Nov.		<i>726082</i>	<i>20</i>
Dec.			<i>160</i>
Jan.	1917		
Feb.			
March			
April			
May			
June			
July			
Aug.			
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

*HB*

*2500*

*W 4959 cancelled.*

**Casualties**

*Acct Closed*  
*" " Dec 16 1916*  
*prev noted per 917*

*22 Nov 27/16*  
*Pension granted 14-11-16/16*

F. X. Rend. Date *Total* ... By *160.00*  
 E.F.X. *12/7/17* By *...*

MARRIED OR SINGLE *Married*

PLACE OF BIRTH *Briggs, Newfoundland*

NAME AND ADDRESS OF NEXT OF KIN *Mrs Blanche Chafe*  
*354<sup>e</sup> St. Antoine St.*  
*109 Westmount Blvd. Montreal Canada*

RELATIONSHIP OF NEXT OF KIN *Wife*

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Killed in action</i>	<i>13-11-16</i>	<i>P.O. 257/16</i>
		<i>6 R 2/16</i>
		<i>22/4/16</i>

REG'L. No. *132556*. RANK *Sgt.* NAME *Chafe Edward Bartlett*

IF IN PERM. CORPS | WHAT UNIT *75<sup>th</sup> Bn* | TRANSFERRED TO *N.E. Branch* DATE *14-11-16* AUTHORITY *P.O. 257*

PERMANENT FORCE ALLOWANCES | TRANSFERRED TO | DATE | AUTHORITY

PLACE OF ATTESTATION *Montreal. Canada* | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION *September 16<sup>th</sup> 1915* | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY MONTHLY \$ ~~*20<sup>00</sup>*~~ | DATE EFFECTIVE *4/5/16*

PAYABLE TO ~~*Mrs B. Chafe 354<sup>e</sup> St. Antoine St. Montreal*~~ | RELATIONSHIP ~~*Wife*~~

ASSIGNED PAY MONTHLY \$ | DATE EFFECTIVE

PAYABLE TO

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *23-11-16* | EFFECTIVE *1-12-16* | REASON *Killed in action 13-11-16*

DISCHARGE DATE AND PLACE *Field* | REASON AND AUTHORITY *Killed in action 13-11-16 P.O. 257/16*

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *14/11-16*

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

PAY OFFICE, N.E. BRANCH  
 NOV 30 1916  
 CANADIAN CONTINGENT

P. 38523

Entered on N.E. Card Index *OK*

Checked by *E.J. Martin*

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
			<i>A/C returned from Ottawa - for Exp Settlement: 6/7/16</i>
			<i>50c Ad. received by B.P.B. on Ottawa Return</i>
			<i>Totals: 17.4.18. Sel.</i>

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS					
	NO. OF DAYS	RATE		AMOUNT		NO. OF DAYS	RATE		AMOUNT		NO. OF DAYS	RATE				AMOUNT		1		2		3					4					CREDIT	DEBIT			
		\$	c.	\$	c.		\$	c.	\$	c.		\$				c.	\$	c.	No.	DATE	No.	DATE	No.				DATE	No.						DATE		

Checked *Whiteford*

*N.E.B. July 17<sup>th</sup>*  
*April 18*

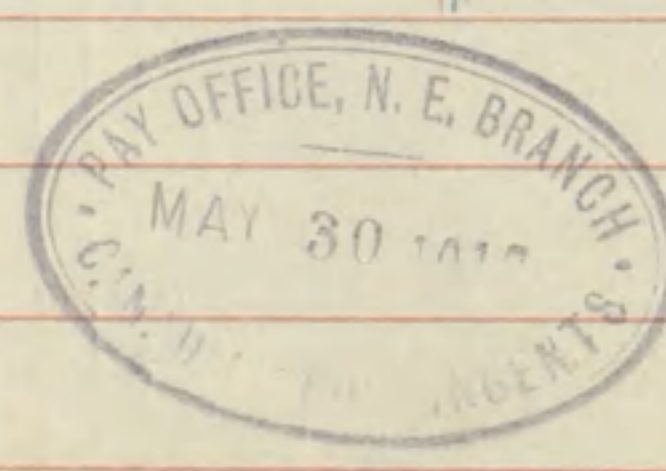
*6727 6727*

Balance transferred to N.E. Branch. *66 77*

*66 77*

*67 27*

*67 27*



*Q.P. starts 4/16*  
*Leav. A-P 16000 in agreement with Ottawa Dep H.Q. 545-1-12 20/12/16*

