

4/12/18 and

OFFICER'S

DISCHARGE DOCUMENTS

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

Attestation Papers..... 2

Authority of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge.....

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 2

Proceedings of Regt. Court Martial.....

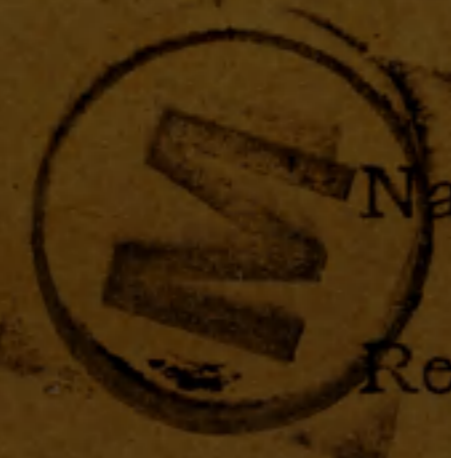
Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....



Name CHAUVIN EDWARD, Henry

Regt. No. \_\_\_\_\_ Rank Lieut

Corps 5th S. M. R.

*Presumed to have died  
on or since 1/10/16*

17269

R. O. No.....
H. Q. No.....

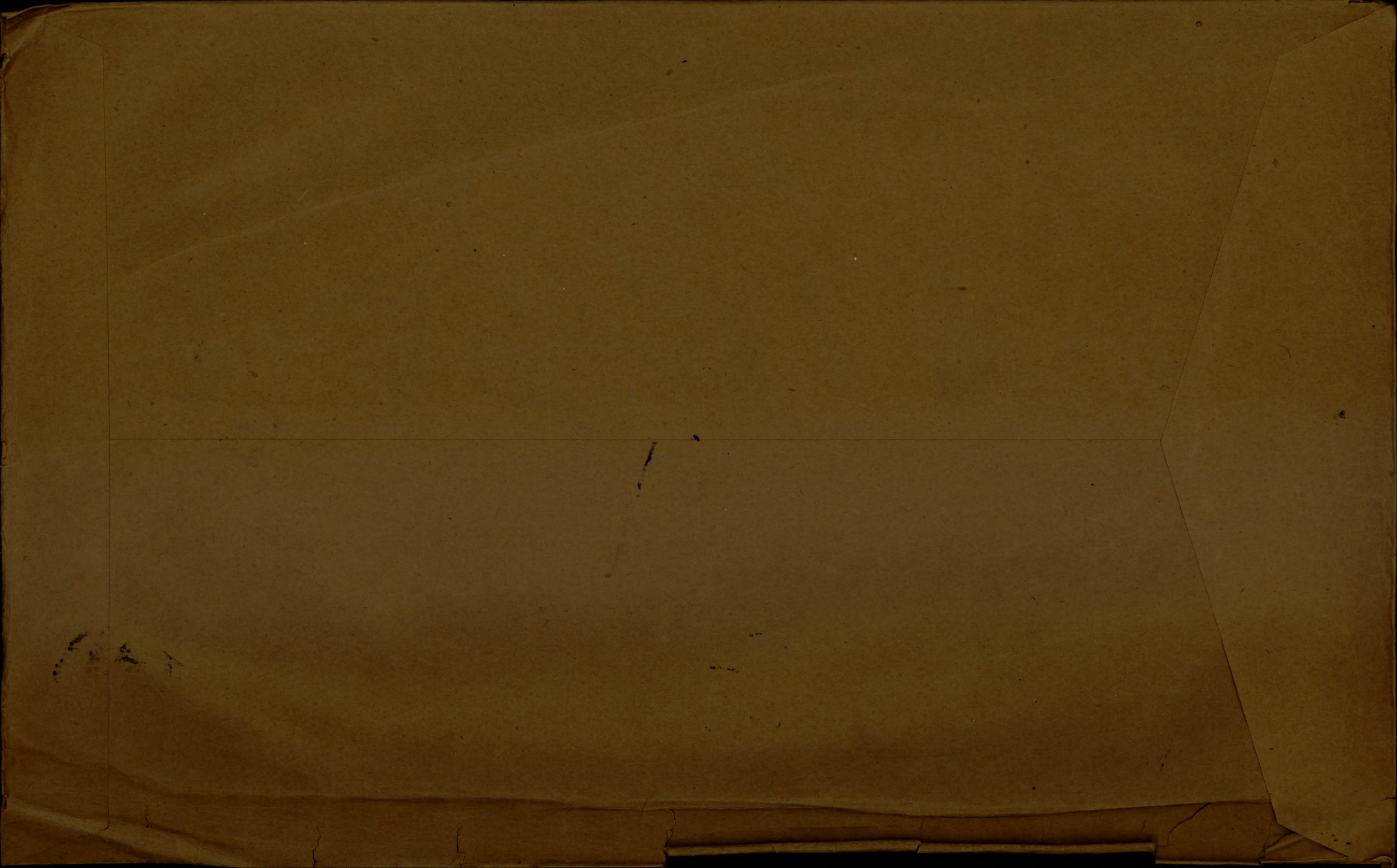


*1 copy sent  
1 B 149*

*Had all sent to 900*

*4  
1-26  
1-26*

*Mt.  
1/3/20*



*Leitch*

# ATTESTATION PAPER.

No. *1111*

Folio. *1*

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Edward Henry Chauvin*
2. In what Town, Township or Parish, and in what Country were you born?..... *City of Montreal, Canada*
3. What is the name of your next-of-kin?..... *Mr. H. H. Chauvin*
4. What is the address of your next-of-kin?..... *720 Maplewood Ave Montreal*
5. What is the date of your birth?..... *July 15<sup>th</sup> 1894*
6. What is your Trade or Calling?..... *Student*
7. Are you married?..... *No*
8. Are you willing to be vaccinated or re-vaccinated?..... *yes*
9. Do you now belong to the Active Militia?..... *yes 15<sup>th</sup> L.S. Dragons*
10. Have you ever served in any Military Force?.. *yes 1 yr. 1st Yr B.C.T.C.*  
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.*

..... *Edward H. Chauvin* (Signature of Man) *officer*  
 ..... *S. L. Craft* (Signature of Witness).

### DECLARATION TO BE MADE BY <sup>Man</sup> MAN ON ATTESTATION.

I, *Edward Henry Chauvin*, 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.

..... *Edward H. Chauvin* (Signature of Recruit) *officer*

Date..... *June 1* 1915..... *S. L. Craft* (Signature of Witness)

### OATH TO BE TAKEN BY <sup>Man</sup> MAN ON ATTESTATION.

I,..... 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.

..... *Edward H. Chauvin* (Signature of Recruit) *officer*

Date..... *June 1<sup>st</sup>* 1915..... *S. L. Craft* (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..... *Shedbrooke* this *1<sup>st</sup>* day of *June* 1915

..... *J. R. Ryan-Lake* (Signature of Justice)

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

..... *J. R. Ryan-Lake* (Approving Officer)

Description of Chauvin (Lieut) E. H. on Enlistment

Apparent Age 21 years.....months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height.....5 ft. 8-1/2 ins.

Chest measurement { Girth when fully expanded.....32-1/2 ins.  
 Range of expansion.....2-1/2 ins.

Complexion.....Dark

Eyes.....Dark Brown Eyes

Hair.....Black

Religious denominations. { Church of England.....Yes.  
 Presbyterian.....  
 Wesleyan.....  
 Baptist or Congregationalist.....  
 Other Protestants.....  
 (Denomination to be stated.)  
 Roman Catholic.....  
 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.....May 25th 1915.....1915.

Place.....Sherbrooke, P.Q.

J.R. Goodale  
 Capt  
 Medical Officer.

\*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

E. H. Chauvin.....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.

G.H. Baker.....(Signature of Officer)

Date.....5 June.....1915

Lt. Colonel  
 O. C., 5th CANADIAN MOUNTED RIFLES

Rank and Name Lieut. CHAUVIN Edward Henry

Regimental No.

Name and Address of Next-of-kin Mr. H. N. Chauvin,

Unit 5th C.M.R.

720, Maplewood Ave, Montreal. P.Q.

Date of enlistment Sherbrooke. P.Q. 1st June. 1915

Place of birth City of Montreal.

Married (Yes or No) Single.

Date and place of discharge

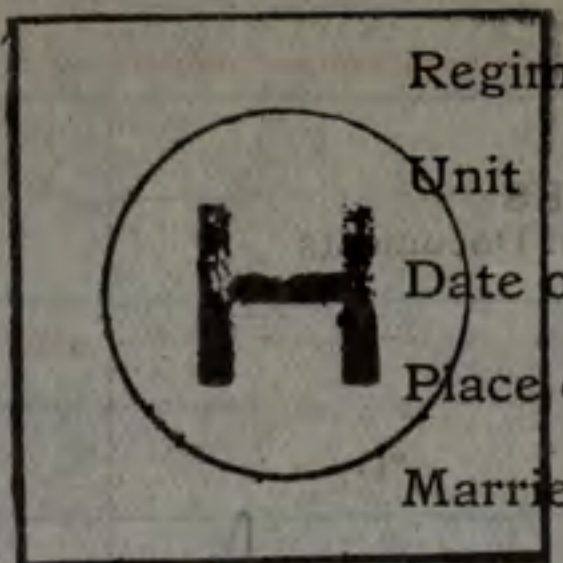
If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

18/7/15



A.F.B. 150  
-1 JAN 1916

A.F.B. 158

1 NOV 1915

DEC 1 1915

JAN 1 1916

1 MAR 1916

APR 1 1916

MAY 1916

C  
1-8-16  
5th C.M.R.

M

Que

REMARKS  
Taken from Official Documents

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS
Date	From whom received				
7-5-16	5th C.M.R.	granted 8 days leave		27-4-16	Pt Ord 19-21
7/6/16	Tele	Reported from Base - at duty		12-6-16	Shell shock hearing affected
2/7/16	Tele	Reported from Base as wounded		3-6-16	BL 384-390
		discharged by duty		6-9-16	
27/9/16	S.C.S.	Adm. North Midland C.C.S.		2-9-16	BL 480 debility
7/10/16	Tele	Reported from Base as Missing		1-10-16	BL 489 P.O. 154 5th C.M.R. 24-10-16
		Mentioned in Despatches			A.F.B. 103 20 NOV. 1916
25-4-17	C.O.	Unofficially reported Missing for official purposes presumed to have died on or since		1-10-16	C.L. 934 (A.F. 104-93 Estates 27.7.17)

A.F.B. 103

24 NOV. 1916



M. X.

18.3.20.

Name Chauvin  
&

Despatches

Rank. Lieutenant

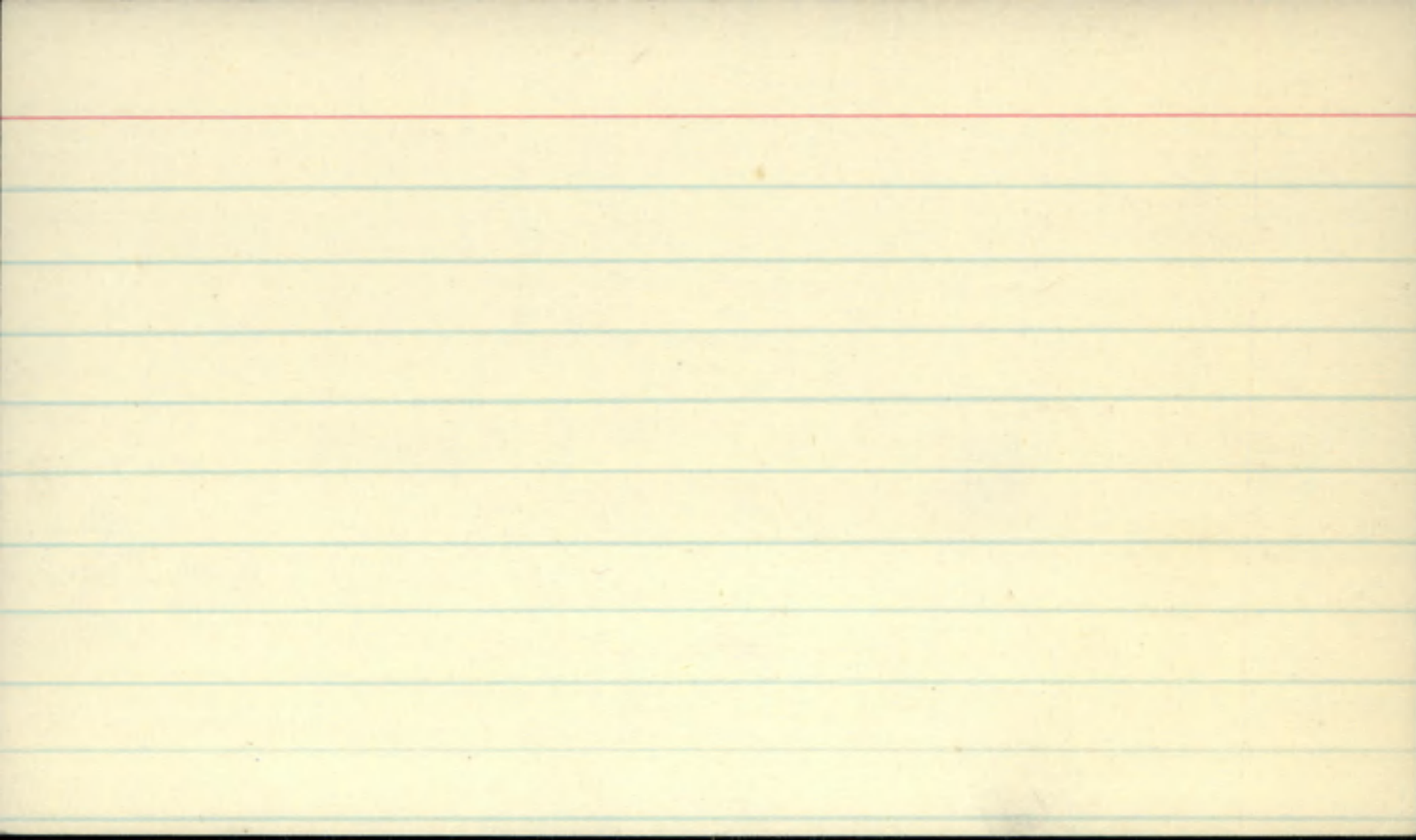
Date:

Gen. Sir Douglas Haig GCB  
Despatch 13-11-16.

Unit Cavalry

Auth. L. G. # 29890 - 2-1-17.





NAME *Lehavin Edward Henry* REGT'L. No.RANK AND CORPS *Lieut. 5th. Co. M. P.*

## CABLE

NO.

DATE

## NATURE OF CASUALTY

NO.	DATE	NATURE OF CASUALTY
<i>M. 7488.</i>	<i>6-6-16.</i>	<i>Reported wounded on June 3rd ✓</i>
<i>M 7990</i>	<i>13-6-16</i>	<i>Referring to my M 7488 reports June 12<sup>th</sup> returned to regimental duty.</i>
<i>M 8005</i> <i>W. S. M.</i>	<i>13-6-16</i>	<i>Reported from base on duty suffering from shellshock hearing affected.</i>
<i>O 2352.</i>	<i>6-10-16.</i>	<i>Reported missing Oct. 1<sup>st</sup> / 16. ✓</i>
<i>Cas Rep 16.</i>	<i>5-17</i>	<i>Per. rep. missing Nov. for offic purposes presumed</i>
<i>B 2090 C.</i>	<i>3-8-17.</i>	<i>to have died or since 1-10-16.</i>
<i>Rec'd.</i>	<i>14-9-17.</i>	

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
384. <sup>11</sup>	Reported from Base	3-6-16.	Wounded
390 <sup>11</sup>	Rept " "	12-6-16	Shell Shock hearing affected. At Duty
N0480.	North Midl. Cas. l. State.	2-9-16.	Debility
N0480	"Disc" to Duty "	6-9-16	"
489'	Missing	1-10-16	Rep. from the Base
734.	Pres. rept missing now for did or since -	Official 1-10-16	purpose presumed to have

CHAUVIN, Edward Henry--Lieut--5th C.M.R.

Has.

*Comd for 1914 is star Lieut. 5th C.M.R.*

MEDALS &  
DECORATIONS

Henry N. Chauvin (Father)  
720 Maplewood Ave.,  
Montreal. P.Q.

5479

PLAQUE &  
SCROLL

Father as above

*(Serial no. 781992.)*

CROSS OF  
SACRIFICE

Mrs. Elizabeth Chauvin (Mother)  
720 Maplewood Ave.,  
MONTREAL. P.Q.

*has  
19.3.207*

*Desp* MAY 7 1920 *66843*  
Scroll Desp. FEB 18 1921 Reqn. No 221116  
Plaque Desp. DEC 29 1921 Reqn. No 122808

M

No.

RANK *Lieut*

NAME *Chauvin Edward H.*

T. O. S. 28-8-15  
*april payroll.*

UNIT *5th Canadian Mounted Rifles*

M. D. *4.*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1915</i>	<i>1915</i>			
<i>mar 28</i>	<i>mar 31</i>	<i>✓</i>		
<i>april</i>		<i>✓</i>		
<i>may</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July</i>		<i>✓</i>		

**UNIT SAILED**  
**JUL 18 1915**



(338-14-18.)

GRAND No.

SURNAME.

*Chauvin*

CHRISTIAN NAMES

*Edward Henry*

REGL. No.

RANK

*Lieut.*

UNIT

*5<sup>th</sup> C. M. R.*

*Batt*

FORMER CORPS

*15<sup>th</sup> L. S. Dragoons 1-2-15 Duth. D. G. 4. Nov 1st 1915*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Chauvin Mr. H. N.*

RELATIONSHIP TO SOLDIER

ADDRESS

*720 Maplewood Ave.  
Montreal. P. Q.*

COUNTRY OF BIRTH

*Canada Montreal P. Que.*

DATE

PLACE OF ATTESTATION

*Sherbrooke Que*

DATE

*June 1/15.*



MARRIED

SINGLE

*Yes.*

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

*Date of sailing 14-7-15 Date of Ass't. 28-3-15 Auth. D. G. H. Nov 1st 1915-*

Name Chauvin, Edward <sup>Henry</sup> Rank Lieut

Reg No. 9-6-315

Unit 5th. C.M.R.

Next of Kin Canada

A 7 B 104-93

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
3-6-16	<u>REPORTED FROM BASE</u> WOUNDED			384	M7488	7/6
12-6-16	<u>Reported from Base</u> At Duty		Shell shock hearing affected	390	M7990	14-6-16
2	North West Gas blg. Str		Debility	480		
6	Discharged to Duty			480.		
1.10	Rtn. Base:-		<u>Missing</u>	489	O2352	7/10
	Now for off purposes presumed to have died on or since 1-10-16			734		



Number ..... Rank LIEUT ..... B  
Surname CHAUVIN ..... F  
Christian Names EDWARD HENRY ..... V  
Unit ..... Theatre of War FRANCE .....  
Dates of Service ..... D .....  
Remarks ..... D .....

Latest Address Henry N. Chauvin (Sr) .....  
5720 Maplewood Ave .....  
Montreal .....

Roll No. B.  
Page 1728

PQ

4. 10 '16.

Resp.

APR 9 - 1921

452147 Resp.

SEP 15 1921

Chauvin. E. H.

Lieut. 5th. C.M.R.

North Midland Cas. Clg.Sta. 2-9-16.

Reported from base. Wounded. 3-6-16.

Reported from Base (At duty:-. 12-6-16.

Shell shock.- hearing affected.

Debility.

MISSING:-. 1-10-16.

Now for Official purposes presumed to have  
Died on or since :-1-10-16. 8

Dis. to duty:-. 6-9-16.

C.L. 7-6-16.	384.
14-6-16.	390.
27-9-16.	480-8.
7-10-16.	489.
25-7-17	734.

A.M.D. 2 DEPT.

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

*[Handwritten signature]*

Surname

Christian Name

Reg. No.

Rank

Unit

**MEDICAL BOARD** held at

Date

Serial No.

(1)

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

**PENSIONS & CLAIMS BOARD** held at

Date .....

Disposition

Remarks

# MISSING MAN.

(Acceptance of Death for Official Purposes.)

War Office Reference No. 9-0-315

THE DEPUTY ADJUTANT-GENERAL,  
G.H.Q., 3RD ECHELON.

Canadian Section

No. \_\_\_\_\_ Rank Lieut. Name CHAUVIN, Edouard, Henri.

Regiment 5th C.M.R. has been missing since 1st Oct. 1916.

Reference has been made to the Unit, the Record Office and the Base, on the printed missing list, but no evidence of material value has been received which would indicate that he is not dead.

In accordance with the decision of the Army Council, this soldier is to be regarded for official purposes as having died on or since the above date.

You are requested to state whether the soldier leaves a will or not—

*Reply.*

(a) In Pay Book ;

(b) In Small Book ;

(c) As a separate document ;

and to forward it, if found, to this Office.

The Pay Book and the duplicate copy of this form should be forwarded to the Regimental Paymaster.

*Not received*

Canadian Section, G. H. Q. 3rd Echelon, B. F.

Records,

3rd Echelon.

WAR OFFICE,

Date 3-8-17



8-17

CERTIFIED CORRECT

14 NOV. 1918

CANADIAN RECORD OFFICE

Casualty Form—Active Service.

*Certified correct.  
KD 10/16 & 4/10/16  
(Edward Henry)*

Regiment or Corps 5th Canadian Mounted Rifles

Regimental No. \_\_\_\_\_ Rank Lieut. Name Chauvin, E. H. <sup>Swain</sup>

Enlisted (a) ~~1-4-15~~ Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_

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

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

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
			LANDED IN FRANCE		
			24.10.15.		
7/5/16	Ob. Unit.	Granted 8 days leave.	France.	27/4/16	Ob. Unit B213. 27/4/16 PFI 19.
6.6.16	A.G., G.H.Q.	Wounded	Yield.	3/6/16	Army G.H.Q., List 641. 4/4/16 DCS 134.
14.6.16	"	Rejoined Unit	"	not stated	DCS Summary 650. 13/6/16.
10.6.16	1. Med Bds.	Shell shock. Adm 4/6/16 To	Duty	8/6/16	DCS 139. A36 Dtd 148.
9/9/16	8 Bys	Castralis Adm 2/9/16 to	Duty	2/9/16	A36 Dtd 164 d 2/9/16
9/10/16	oblit.	Missing after action	Yield	1/10/16	Letter d 3/10/16. Carlee KD. 134/1617. d 6/10/16. Ob 174/2/16/16. PFI 54 d/24-10-16

*[Signature]*  
Lieutenant  
for Lt Col. A. A. G.

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
(b) e.g., Signaller, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [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				
2-1-17	W.O.	Mentioned in Despatches Now for official purposes. presumed to have died on 194 since 1.10.16			Hon Gaz. 2.1.17
25.7.17	C.R.O.				C.L. 734. Merranough CAPT FOR ADJ MIL SEC CM

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF DATE AUTHORITY

DATE AUTHORITY

Beneficiary

5<sup>th</sup> B.M.R.

Lieut

Name *Charrin*

Address

Initials *E.H.*

Amount. \$

*off Pres Dead 6073A 25<sup>th</sup> 17*  
*Missing 1<sup>10</sup>/<sub>16</sub> 6L 489 7<sup>10</sup>/<sub>16</sub>*

Bank *of Montreal.*

Separation Allowance issued. Yes or No.....

Date	No. of Days	Regt. Rate	Amount Regimental	F. A.	Messing	Other Credits	Total	Ass. Pay	Charges	Bank	Debit Balance	Credit Balance	Initials
1 8. 16													
31 8. 16	31	<i>2<sup>nd</sup> pay 60<sup>th</sup> 7A 21 Mess</i>	67	18 60	33		113 60			113 60			<i>Mess from 30<sup>th</sup> 16</i>
1 9. 16			60	18	30		108			108			
30 9. 16	30		60	18	30		108			108			
1 10. 16			67	18 60	31		111 60			111 60			
31 10. 16	31		67	18 60	31		111 60			111 60			
1 11. 16			60	18	30		108			108			
30 11. 16	30		60	18	30		108			108			
1 12. 16			67	18 60	31		111 60			111 60			
31 12. 16	31		67	18 60	31		111 60			111 60			
1 1. 16			67	18 60	31		111 60		① 894	99 68			① Ord Issue V. 2893
31 1. 16	31		67	18 60	31		111 60		② 298	99 68			② " " 11 <sup>th</sup> 18 V. 2268
1 2. 16			58	17 40	29		104 40		③ 1777	91 63			③ Ord Issue V. 4131
29 2. 16	29		58	17 40	29		104 40			91 63			
1 3. 16			67	18 60	31		111 60			111 60			
31 3. 16	31		67	18 60	31		111 60			111 60			
1 4. 16			60	18	30		108			108			
30 4. 16	30		60	18	30		108			108			
1 5. 16			67	18 60	31		111 60			111 60			
31 5. 16	31		67	18 60	31		111 60			111 60			
1 6. 16			60	18	30		108			108			
30 6. 16	30		60	18	30		108			108			
1 7. 16			62	18 60	31		111 60			111 60			
31 7. 16	31		62	18 60	31		111 60			111 60			
1 8. 16			67	18 60	31		111 60		④ 64 60	47			④ Ord Issue loan.
31 8. 16	31		67	18 60	31		111 60			47			
1 9. 16			60	18	30		108			108			
30 9. 16	30		60	18	30		108			108			
1 10. 16			67	18 60	31		111 60						
31 10. 16	31		67	18 60	31		111 60						

*Credit balance 111.60*

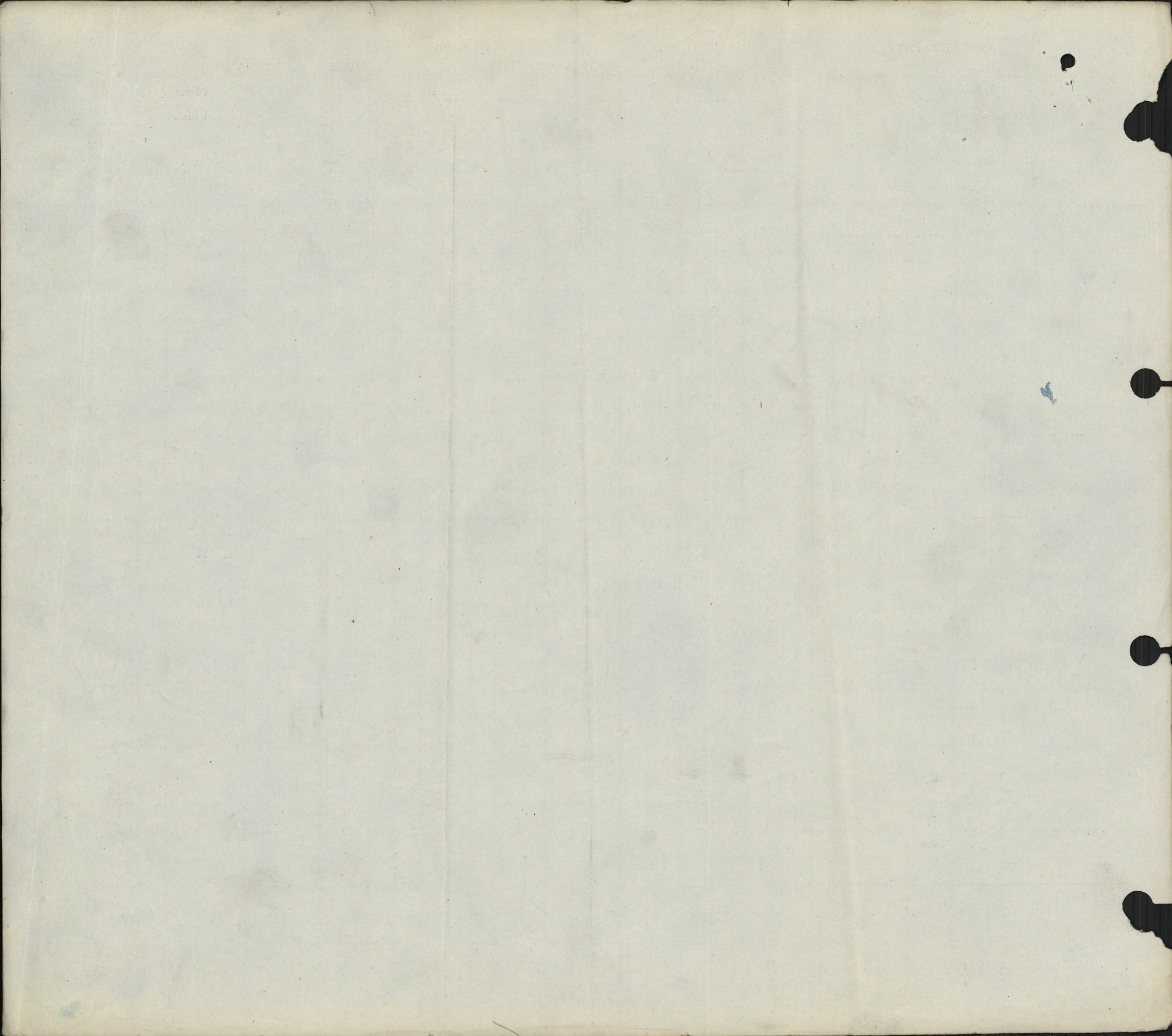
*116 aug 17*  
*" Sept 17*  
*" Nov 17*  
*" Jan 18*

*1082*

*343*  
*10817*  
*1082*

*6L 60V 11913*  
*set off V 158*  
*Beetle to can*  
*for set off 2487 V 180*  
*Trans from Can*  
*10 82 V 23/13*  
*CPM chk 3379*  
*V 26/21*

Statement of  
AUG 2 1917  
Account rendered



ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.

NAME OF DATE AUTHORITY

DATE AUTHORITY

5<sup>th</sup> C.M.R.

Lieut

Name *Chauvin*  
 Initials *E.A.*  
 Bank *of Montreal*

*For Official purposes presumed dead 1<sup>st</sup> 10/16. C.R. 734. 25<sup>th</sup> 11*

*Missing 1<sup>st</sup> 10/16. B.L. 489. 7<sup>th</sup> 10/16*

DATE 1916	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
April	Pay April (C)		108			108		
" 27	Bank	1031		108		0		
May 23	Pay May (C)		111 60					
" 26	Bank	2441		111 60		0		
June 21	Pay June (P)		108					
" 28	Bank	3993		108		0		
July 20	Pay July (C)		111 60					
" 27	Bank	5565		111 60		0		
Aug 18	Aug Pay R.		111 60					
" 24	June in Can (17211) A.R. D. Bank 7400			64 60			<i>To be carried forward until 21<sup>st</sup> 10/16</i>	
Sept 19	Sept. Pay R.		108	47				<i>Tfr to N.E. Ledger.</i>
" 26	Bank 9469			108				
Oct 19	Oct Pay R.		111 60			111 60		
Dec.	Tfr to N.E. Branch.			111 60		0		

*Chauvin*

Trans. fr. L 14 to 13  
17/11/10





