

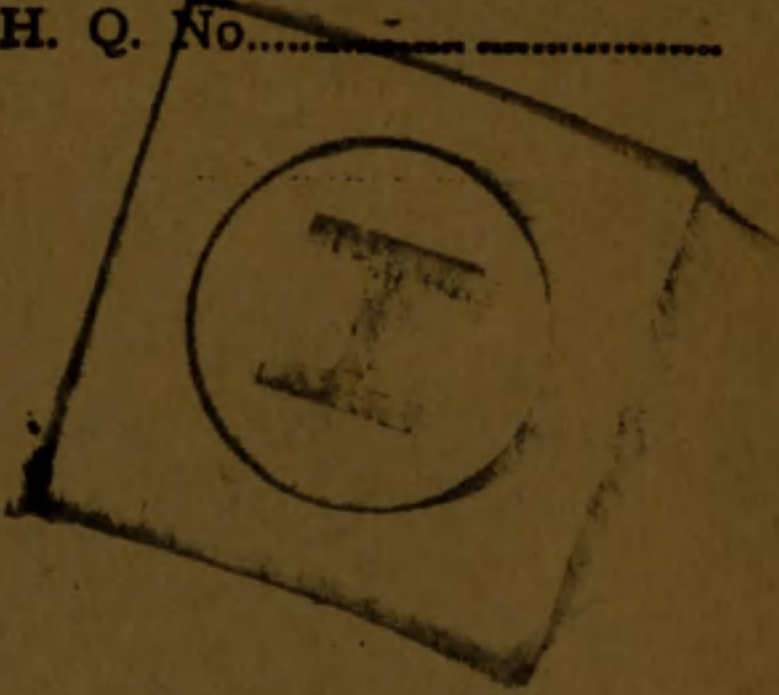
43  
1919 18

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

H



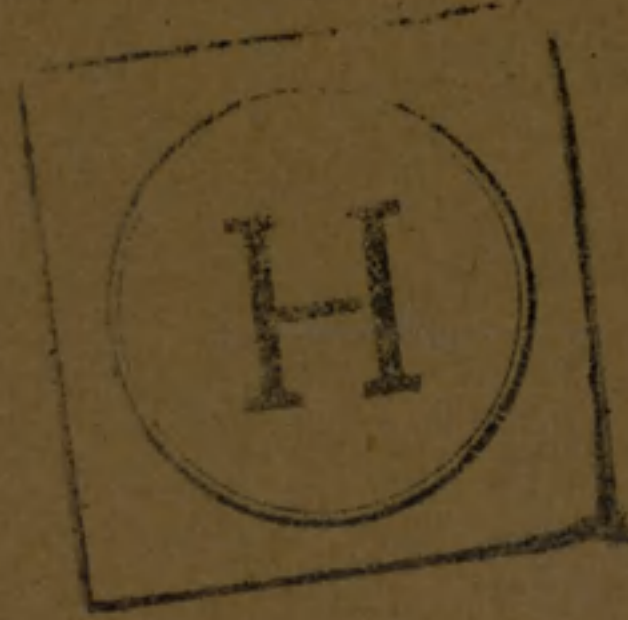
- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers.....
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms.....
- 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.....
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

Name Chapman Ernest Albert

Regt. No. 439854 Rank Pte.

Corps 52nd Bn.

*Killed in action 16-9-16.*



2

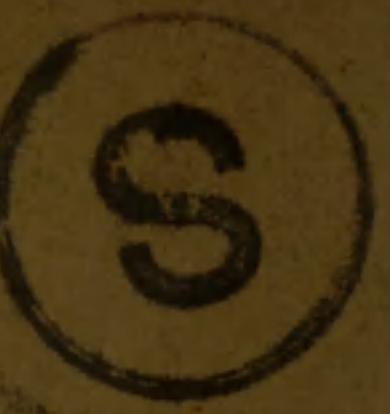
23-2

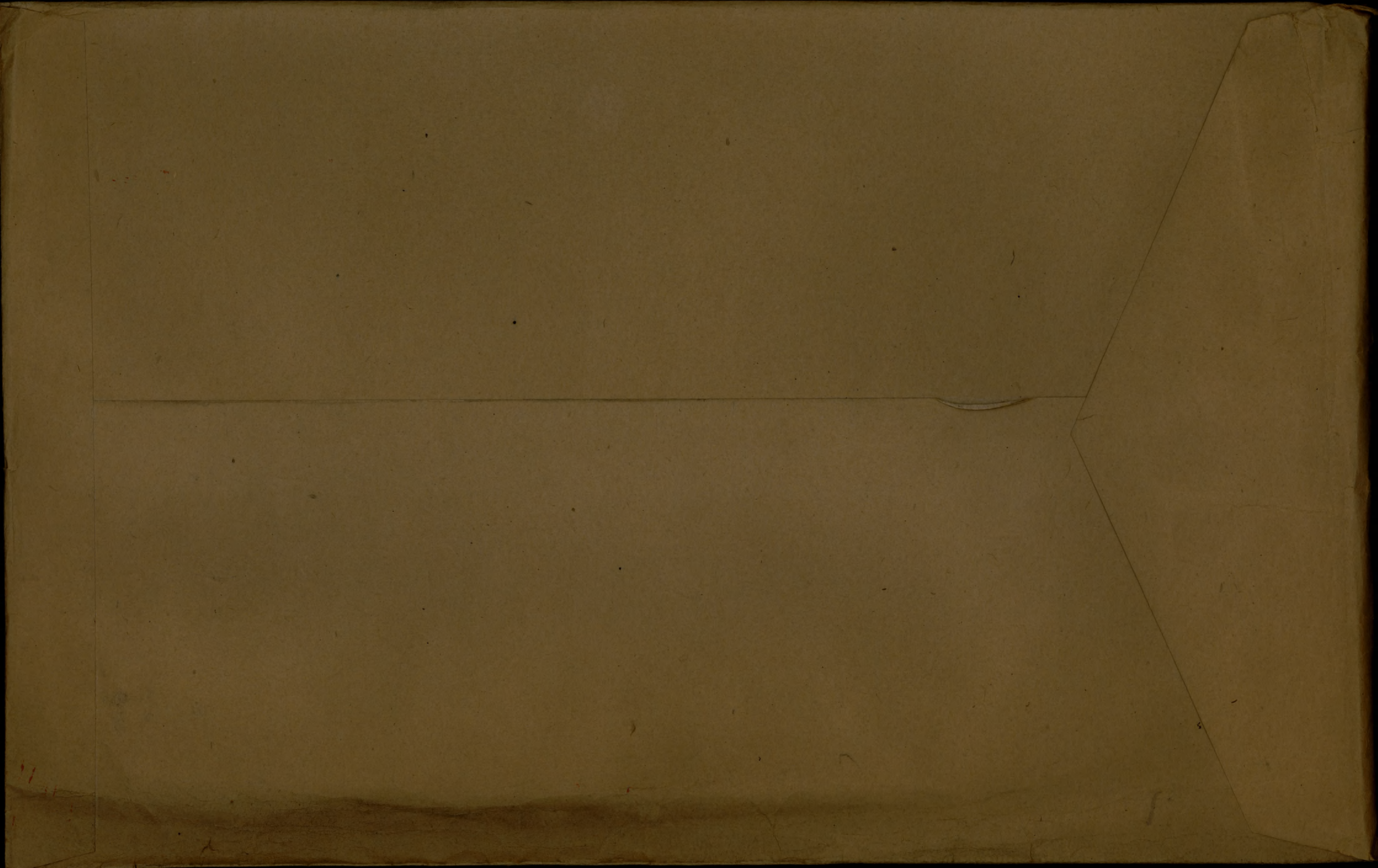
15-2

11-2

A.F.B. 122-1  
A.F.B. 178-1

*M.X.  
19-3-20-19*





# ATTESTATION PAPER.

No. ORIGINAL

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION. 439854 (ANSWERS.)

1. What is your name?..... *Chapman, Ernest, Albert.*
2. In what Town, Township or Parish, and in what Country were you born?..... *Croydon, England.*
3. What is the name of your next-of-kin?..... *Mr. S. Chapman,*
4. What is the address of your next-of-kin?..... *218, Dease, St. J. William*
5. What is the date of your birth?..... *Sept. 17. - 1877. Ont.*
6. What is your Trade or Calling?..... *Street-Car Conductor.*
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?..... *3 yrs. R.C.M.*  
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.*

*Ernest A. Chapman* (Signature of Man.)  
*R. B. Meuzie* (Signature of Witness.)

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

I, *Ernest A. Chapman*, 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.

Date *Oct. 2nd* 191*5* *Ernest A. Chapman* (Signature of Recruit)  
*R. B. Meuzie* (Signature of Witness)

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

I, *Ernest A. Chapman*, 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.

Date *Oct. 2nd* 191*5* *Ernest A. Chapman* (Signature of Recruit)  
*R. B. Meuzie* (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 *St. Albert* this *2nd* day of *Oct.* 191*5*

*A. W. Kaye* (Signature of Justice)

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

*A. W. Kaye* (Approving Officer)

Description of Ernest Albert Chapman on Enlistment.

Apparent Age 38 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 3/4 ins.

Chest measurement { Girth when fully expanded ..... 35 1/2 ins.  
 Range of expansion ..... 31 1/2 ins.

Complexion ..... Fair

Eyes ..... Blue

Hair ..... Fair

Religious denominations.  
 Church of England .....  
 Presbyterian .....  
 Wesleyan Methodist Yes .....  
 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 Sept. 21. 1915  
 Place St. William, Ont. R. Johnson  
 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.

Ernest Albert Chapman 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.

Date Oct. 2<sup>nd</sup> 1915 A. W. Lloyd (Signature of Officer)

E. 2343

439854 Pt

Chapman E. A.

52<sup>nd</sup> Bn

King A.

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 439854

Name Pte E. Chapman

Unit 52<sup>nd</sup> Battalion Canadians

Military Will.

In the event of my death I  
give the whole of my property  
and effects to my wife  
Mrs Sarah Chapman 126  
Cameron St. Fort William  
Ontario, Canada

July 15-1916

Prok living at 220  
Finlayson St. Fort William  
Ontario Canada C.C.

Signature Pte E. Chapman

Rank and Regt. 52<sup>nd</sup> Battalion C.C.F.

Date February 18<sup>th</sup> 1916

M. X

18. 3. 20  
D

# MEDICAL HISTORY SHEET.

639854

ORIGINAL

Surname L Chapman Christian Name Ed.

Examined { on 2 day of Oct. 1915  
 at Port Arthur

Birthplace { City or Town Broydon  
 County Eng.

Apparent age 38

Trade or occupation Street car conductor

Height 5 Feet 8 <sup>3</sup>/<sub>4</sub> Inches.

Weight 154 Lbs.

Chest measurement { Minimum 31 <sup>1</sup>/<sub>2</sub> inches.  
 Maximum expansion 35 <sup>1</sup>/<sub>2</sub> inches.

Physical development Good

Small-Pox Marks -

Approved by Wm Cullough  
 Rank Capt USMC. M.O.

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

Vaccination Marks { Arm Right Left  
 Number 2

When Vaccinated last 1915

(a) Marks indicating congenital peculiarities or previous disease /

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

Date	Result	VACCINATIONS.
<u>1915</u>	<u>Good</u>	<u>Wm Cullough</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>27</u>	<u>Good</u>	<u>Wm Cullough</u> M.O.
<u>12</u>		M.O.
<u>10</u>		M.O.
<u>22</u>		M.O.
<u>10</u>		M.O.

Enlisted on 2 day of Oct. 1915 at Port Arthur

	CORPS.	REG'T NUMBER.	HEAT.	DATE.
Joined on enlistment	<u>52nd O.B.</u>	<u>439854</u>		<u>2 Oct. '15</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.

Surname.....

Christian Name.....

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				

4



CERTIFIED CORRECT  
Canadian Record Office  
Westminster  
7, William Street

Casualty Form—Active Service.

Regiment or Corps 52nd Canadian Bn

Regimental No. 439854 Rank Pte Name Chapman Ernest Albert

Enlisted (a) 2-10-15 Terms of Service (a) Mobilization Service reckons from (a) 2-10-15

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				
			<u>handed in France</u>	<u>21/2/16</u>	
		<u>EMBARKED FOR FRANCE.</u>		<u>20 2 16</u>	<u>13144 G.Y. 1844 9 m. 9 2</u>
<u>5/6/16</u>	<u>22 Gen</u>	<u>after III (1) set ad</u>	<u>22 Gen</u>	<u>2/6/16</u>	<u>W 3034</u>
<u>10/6/16</u>	<u>"</u>	<u>" " neck of</u>	<u>6 conv. Dep.</u>	<u>10/6/16</u>	<u>"</u>
<u>17/6/16</u>	<u>6 B.D.</u>	<u>Left for unit</u>	<u>3rd.</u>	<u>17/6/16</u>	<u>WR #81 25/6/16</u>
<u>15/6/16</u>	<u>"</u>	<u>Taken on stgh</u>	<u>6 B.D.</u>	<u>15/6/16</u>	<u>WR.</u>
<u>24/6/16</u>	<u>O.S. Bn</u>	<u>Rejoined unit</u>	<u>3rd.</u>	<u>19/6/16</u>	<u>B213</u>
<u>10/6/16</u>	<u>17 CES.</u>	<u>G.S.W. neck</u>	<u>ad. 17 CES.</u>	<u>4/6/16</u>	<u>a 36 H101 17/7/16</u>
<u>23.9.16</u>	<u>O.S. 52nd C.Bn.</u>	<u>Wounded.</u>	<u>of a 1 Field.</u>	<u>16.9.16.</u>	<u>B213. D.C.S. 147 d. 8 10.16.</u>
<u>19.10.16.</u>	<u>"</u>	<u>Now Reported " Killed in Action "</u>		<u>16.9.16</u>	<u>25/27. 1 and 4/10/16</u>

P.T.O.

*[Signature]*

Lieut. for Lt.-Col., A. A. G.  
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

(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				
28/10/16	52nd	Killed in action	Field	16.9.16	PT II O.49.  <i>[Signature]</i> .....LIEUT. FOR LT: COL: I/G RECORDS. C.O.M.F.

Rank Pte Name CHAPMAN, Ernest Albert

Reg'l No. 439854

Unit 52nd BN.

If in perm. Corps,  
What Unit?

Married or Single Married

Place and Date of Enlistment Pt. Arthur, 2nd Oct. 1915.

Place of Birth Croydon, ENG.

Name and Address, Next-of-Kin Mrs S. Chapman,

218, Dease St, Fort William, Ontario. CAN, Relationship

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason 25 C 2175 Character

N/E R B No	9
File No	
Category	Kia



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>Arrived in England</i>		<i>3 DEC 1915</i>	
<i>15.6.16</i>	<i>OC 52nd</i>	<i>Embarked for France. DANVES</i>	<i>Camiers</i>	<i>20.2.16</i>	<i>N.R.</i>
		<i>Adm #22 General Hospital</i>		<i>5.6.16</i>	<i>Ed A 81 ON. GSW Neck 377.</i>
<i>19.6.16</i>	<i>"</i>	<i>T No 6 bomb Depot</i>	<i>Etaples</i>	<i>10.6.16</i>	<i>" 84 29 "</i>
<i>29.6.16</i>	<i>"</i>	<i>Disch ~ ~ ~</i>	<i>"</i>	<i>15.6.16.</i>	<i>" 93. "</i>
<i>13.10.16</i>	<i>"</i>	<i>Wounded.</i>	<i>Field</i>	<i>16.9.16</i>	<i>" 170. Not Stated Q</i>
<i>2.11.16</i>	<i>"</i>	<i>Killed in Action</i>	<i>"</i>	<i>16.9.16</i>	<i>" 187 17 KA</i>
<i>28.10.16</i>	<i>"</i>	<i>" " "</i>	<i>"</i>	<i>16.9.16</i>	<i>P II 049.</i>



Register No. D 6261

WAR SERVICE GRATUITY

A.P. File No. 030 73-E44

TO  
DEPENDENTS OF DECEASED SOLDIERS

Regt'l No. 439854 Name Ernest Albert Chapman  
(Christian Name) (Surname)  
Unit 52nd Bn. Rank Pte Date of enlistment.....  
Date of casualty 16. 9. 16 B.P.C. File No. 6619  
Was service performed overseas? yes

DEPENDENT

Name Mrs. Sarah McVey (nee Chapman) Relationship Widow  
Address Co B.P.C. District Office,  
59 Yonge St.,  
Toronto, Ont.

Amount of Special Pension Bonus \$ 64 Abstracted by M. Knox

Eligible for Gratuity ..... \$ 180.00  
Less amount of Special Pension Bonus paid..... \$ 64.00  
Less Debit Balance of S. A. or A.P..... \$ .....

Total deductions \$ 64.00  
Balance due \$ 116.00

Cheque No. G 1893197 Date issued 21. 7. 20

REMARKS: Remarried  
Hold payment until address  
is verified.  
Co. G 1893197 retd - cancelled 17821  
Left. Larose 14-8-20

Clerk A.H. Moore

Audited by  
Errol Howard  
Date 16. 7. 20

TRANSFERRED TO  
CDT. SUSP LDGR. Volio 182.  
22/8/23 LRB

M.F.W. 2652  
25M-6-20.  
H.Q. 1772-89-1473

# 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.

EL 53361—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: \_\_\_\_\_

627

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

2nd Contingent

*lg*

*Wife*

To Whom *Mrs Sarah Chapman*

By Whom Assigned *Chapman, E. A.*

Address *218 ~~Dease~~ St.*

Regtl. No. *439854*

~~126 ~~Cameroon~~ St. Fort William~~

Rank *Plt*

*220 ~~Fort W~~ Finlayson St. Ont.*

Corps *52<sup>nd</sup> Overl Batt<sup>22</sup>*

Rate *\$ 20<sup>00</sup>/<sub>100</sub>*

NOV 1 1915  
~~DEC 1 1915~~

PAYMENTS

*Casualties*  
REMARKS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Stop payments Dec 1/16 "killed in action" 3m 7"/16 11/4/16</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		<i>Y6287</i>	<i>40</i>	
Jan.	1916	<i>L9909</i>	<i>20</i>	
Feb.		<i>M14762</i>	<i>20</i>	
March		<i>S 14243</i>	<i>20</i>	

*Killed in action Oct. 14/16 6.1. (7) 1/16  
E.A.B.*

15

Handwritten notes in red ink, including a horizontal line and some illegible characters.

Handwritten notes in red ink, including a small symbol resembling a bird or a stylized character.





MILITIA AND DEFENCE  
**ASSIGNED PAY**

M. F. W. 12a.  
 60m.—12-15.  
 1772—39—819.

625

Sheet No. 2. *Sarah Chapman*

OVERSEAS CONTINGENTS

*(Wife)*  
 PAYMENTS.

Name of Soldier *Chapman E A*

# *439854*

*52 Batt*

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	<i>7</i> 1068	20	<div data-bbox="1961 510 2565 793" style="border: 1px solid red; padding: 5px; display: inline-block;"> <i>Casualties</i> </div> <p><i>account closed by Pension Granted, 17/9/16</i></p> <p><i>sect. adjusted by Pension Pt. 240<sup>rs</sup> E 5X 19/4/17</i></p>
May		<i>0</i> 3571	20	
June		P 7011	20	
July		E 6461	20	
Aug.		G 10979	20	
Sept.		G 15730	20	
Oct.		G 20286	20	
Nov.		<del>G 25462</del>	<del>20</del>	
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*20<sup>00</sup>*

*9*

*Cancelled*

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 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.				

2-10-15

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name *Ms Sarah Chapman*

Name of Soldier *Chapman Ernest A.*

Address ~~*218 Dease St -*~~  
*Fort William.*

Regtl. No. *439854.*

Rank *Pte.*

~~*126 Cameron St. 220 Sunlayson (Art St.)*~~

Corps *52. Baltn.*

Relation to Soldier

To what Corps belonging

wife, child or mother

} *Wife*

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>D 7626</i>	<i>19</i>	<i>19</i>
Nov.		<i>E 21017</i>	<i>20</i>	<i>20</i>
Dec.		<i>J 18001</i>	<i>20</i>	<i>20</i>
Jan.	1916	<i>M 17219</i>	<i>20</i>	<i>20</i>
Feb.		<i>K 28076</i>	<i>20</i>	<i>20</i>
March		<i>J 30936</i>	<i>20</i>	<i>20</i>

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

18108 50

ACCOUNTS RECEIVABLE  
1/15/74

# SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

*Sarah Chapman*

PAYMENTS.

*Wife*

Name of Soldier

*Chapman, Ernest, A.*  
*pte*

# *439854*

L. L. Job 89002.-Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	<i>0632</i>	<i>20 -</i>	<i>20</i>
May		<i>K 5234</i>	<i>20</i>	<i>20</i>
June		<i>Q 6731</i>	<i>20</i>	<i>20</i>
July		<i>R 10549</i>	<i>20</i>	<i>20</i>
Aug.		<i>J 12694</i>	<i>20</i>	<i>20</i>
Sept.		<i>F 15376</i>	<i>20</i>	<i>20</i>
Oct.		<i>U 18509</i>	<i>20</i>	<i>20</i>
Nov.		<i>V 22177</i>	<i>20</i>	<i>20</i>
Dec.		<del><i>W 25132</i></del>	<del><i>20</i></del>	<del><i>20</i></del> <i>Cancelled.</i>
Jan.	1917			
Feb.				<i>acct closed.</i>
March				
April				<i>Pension granted 17/9/16.</i>
May				
June				<i>20.</i>
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

**ACCOUNT CLOSED**

DATE.....PER.....*W*.....

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.				

Rank **Pte** Name **CHAPMAN, Ernest Albert** ✓ Reg'l No. **439854** P-56  
 Unit **52nd BN.** If in perm. Corps, }  
 What Unit? } Married or Single **Married**  
 Place and Date of Enlistment **Pt. Arthur, 2nd Oct. 1915.** Place of Birth **Croydon, ENG.**  
 Name and Address, Next-of-Kin **Mrs S. Chapman,**  
**218, Dease St, Fort William, Ontario. CAN.** Relationship

Assigned Pay Monthly \$ **20<sup>00</sup>** Payable to **Above address**  
 Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place **Killed in action 16/9/16** Reason  
**Bk 147 2/11/16**

Entered on **N.E. Card Index**  
 Character **Widow**  
 Checked by **S. J. McKeel**



Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount						
Dec 1	Dec 31	31	1 <sup>00</sup>	31 00	31	10	3 10	10 00	44 10	8 55	7 30	20 00	32 17	11 93	Clothing Credit
Jan 1	Jan 31	31	1 <sup>00</sup>	31 00	31	10	3 10		34 10	102 150	4 87	20 00	29 74	16 29	
Feb 1	Feb 29	29	1 <sup>00</sup>	29 00	29	10	2 90		31 90	196 17	4 87	20 00	27 49	20 70	
Mar 1	Mar 31	31		31 -	31		3 10		34 10	71 190	7 62	-	25 73	29 57	
				122 <sup>00</sup>			12 <sup>20</sup>	10 <sup>00</sup>	144 <sup>20</sup>		34 <sup>63</sup>	80 <sup>00</sup>	114 <sup>63</sup>	29 <sup>57</sup>	

Statement of  
 FEB 22 1917  
 Account rendered

Cash found in effects **WR**

BALANCE TRANSFERRED TO NEW LEDGER.

Checked **WR**

Settled





MAR 8 1921

Docs.

CHANGE OF ADDRESS

No. 439854 Rank Pte. Surname \_\_\_\_\_ Christian Names \_\_\_\_\_

Chapman. Ernest. (D.)

Address

Mrs. Geo. McVey. (W)  
49 Grant Street.  
Toronto. Ont.

Auth: Letters of 1<sup>3</sup>/<sub>21</sub>  
LR Hat.

Hb.

Section  
Awards

2-19.  
SHP.



Surname

Christian Name or Names

Reg. No.

Chapman

E.

A.

439854.

Rank

Unit

Co.

Troop

Batty.

Pte.

52<sup>nd</sup> Batt

Hospital

Date of Admission

Transferred

#22 Gen. Camiers  
no 6 Couval depot Etaples

Hosp.

5.6.16.

Hosp.

10.6.16

Hosp.

Hosp.

Diagnosis

E.S.W. Neck. (sl.)

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Killed in Action 16.9.16

DISPOSITION

Date

Ch. 15.6.16 A81

Ch. 19.6.16 #2184

Ch. 29.6.16 #2193

" 13.9.16 A170

2.11.16 #187

Dis 15.6.16

REMARKS

Reported from Base  
wounded 16.9.16  
Pres. rept. wd.

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

R

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

43985-4 Rank Ple-  
Number 43985-4

Surname CHAPMAN

Christian Name Ernest Albert

Units <sup>52<sup>nd</sup></sup> 32<sup>nd</sup> Bn Canadian Theatre of War Lance

Date of Service 20-2-16

Remarks (W) Mrs. Geo. Mc Vey,

Latest Address 49 Grant St.,  
Toronto, Ont.

Roll No.

200m.-6-21.... B. Page 21107

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

RANK

SURNAME

INITIALS

UNIT

Home address.....

(Street)

(City or Town)

(Province)

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

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

Railway.....

Is your wife on board.....

Number of children on board.....

Destination.....

(Sgd.)

REGN  
 NO 87919130  
 DESP.  
 FEB 16 1923

Name **Chapman Ernest Albert** Rank **Pte.**

Reg. No. **439854**

Unit **52nd Battn**

Next of Kin **Canada**

*RL 25-G-2175-*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
6-6-16	22nd Gen Hos	Camiers	GSW Neck slt	A81	M 8119	<sup>15/6/16</sup>
12-6-16	No 6 Gen Depart.	Etaples	do	A84		
15-6-16	Discharged			A93		
16-9-16	Reported from Base	"	" Wounded "	A172	<del>M</del> 2777	<sup>13/10/16</sup>
16-9-16	KILLED IN ACTION			A187	4020	
	Auth letter on file from Base.				4046	<sup>2/11/16</sup>





Serial Desp.

JUL 21 1921

Chapman, J. E.

649-3217

239854

not eligible for

about 5687

Plaque Desp.

Name & Address

No.

Mrs. S. Chapman (w)

1315 1/2 Brown St.

C. B. P. C. District office

Fort William, Ont. 59 Young St.

Medals & Decorations

Name & Address of Next of Kin

As above 49 Grant St

Toronto, Ont.

Toronto Ontario

P. & ✓

(Ser. # 792562)

323

21 July 20

DESPATCHED

11691 23/31

DESPATCHED

P 4515

Name & Address of Female Next of Kin

As above

AUG 29 1921

Removal of

P.T.O.

7/23/21

Mrs. Ellen Chapman (m)

20b Selsdon Road

South Croxall,

Surrey, England.

Page 296

W. Desp MAY 11 1920 ~~11~~ 67015

W. Desp MAY 11 1920 67053

wx ret'd 25 <sup>6</sup>/<sub>20</sub>  
Rem from add

wx ret'd 24.9.20  
B.P. to cannot locate.

29

No. 39854  
439854

RANK *Ota.*

NAME *Chapman, E.*

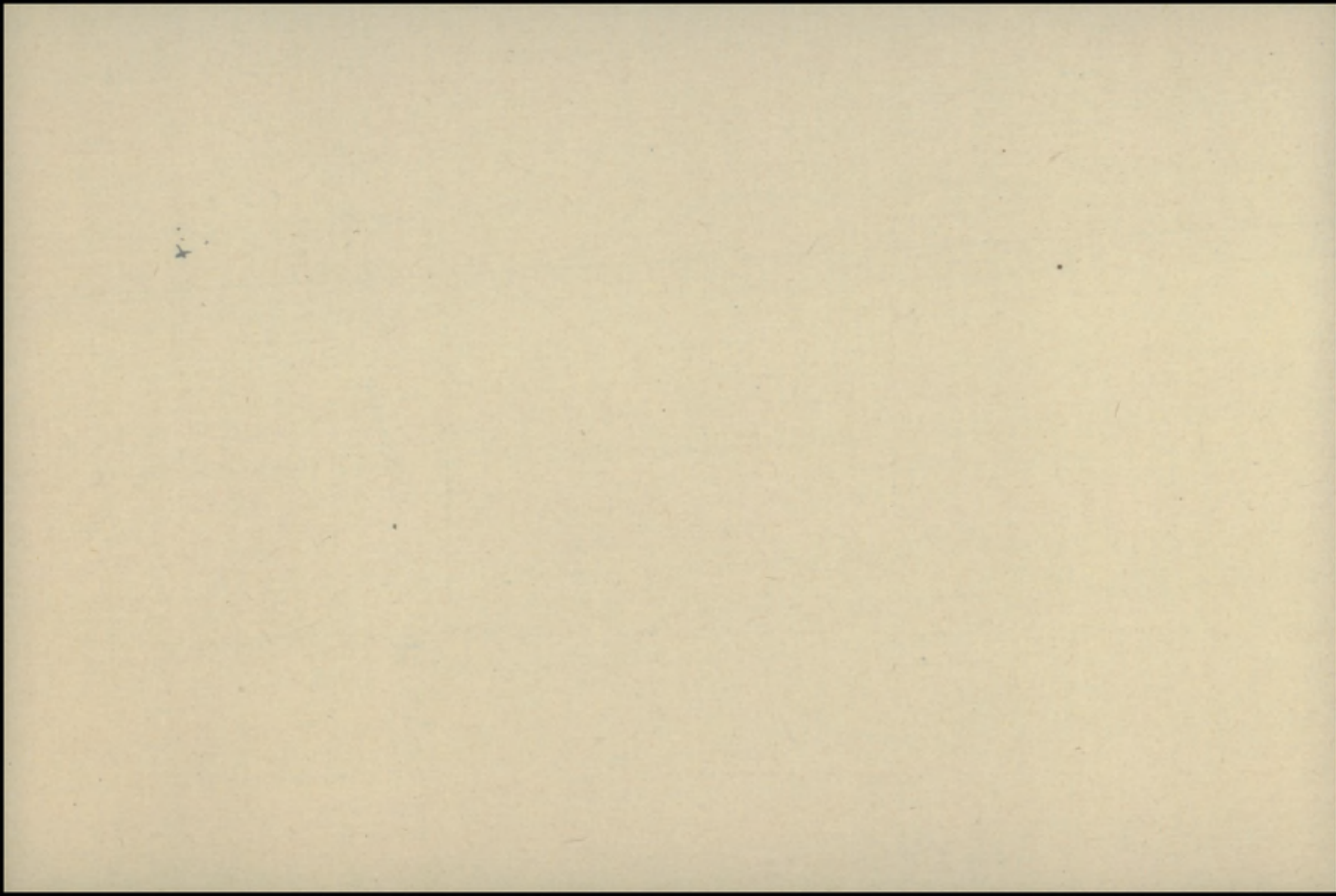
T. O. S. 2-10-15-*D.O. 1640* UNIT  
3-10-15.

*52nd Battalion, C. E. F.*

M. D. 10.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i> <i>Oct. 2</i>	<i>1915</i> <i>Oct. 31</i>	<i>✓</i>		
<i>Nov.</i>		<i>✓</i>		
<i>Dec.</i>		<i>u.</i>		

UNIT SAILED  
NOV 23 1915



REGT'L NO 439854

NA ● Chapman Ernest Albert

H. Q. FILE NO. 649-

RANK AND CORPS

Pte. 52nd Bu

FOLLOWS

No.

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

No.	DATE	NATURE OF CASUALTY
M 8119	14-6-16	Adm. to No. 22 Gen. Hosp. Camiers June 5th. (Y.S.W. neck) ✓
O 2777	13-10-16	Reported wounded Sept. 16 <sup>th</sup> / 16 ✓
O 4020	1-11-16	Prev. rept wounded now killed in action, Sept 16 <sup>th</sup> 1916. ✓
(O 4173	6-11-16)	
B 2090a <sup>Rowen</sup>	28-10-16	Killed in action 16-9-16.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a 81 <sup>#1</sup>	<del>#12</del> Gen Danvers Laminis	5-6-16	G S W. Yeck sgt
a 84	No 6 Comd. Depot Etaples	10-6-16	" " " Neale.
A 93.	Discharged.	15-6-16	" " " " sgt.
A. 184	Prev. rep. wounded now	16-9-16	Killed in action.

MARRIED OR SINGLE *Married*  
 PLACE OF BIRTH *London England*  
 NAME AND ADDRESS OF NEXT OF KIN *Mrs. S. Chapman*  
*218 Dease St. Fort. William. Ontario*  
 RELATIONSHIP OF NEXT OF KIN  
 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>16/9/16</i>	<i>C.L. 187 2/1/16</i>

REG'L NO. *439854* RANK *Pl* NAME *Chapman Ernest Albert*  
 IF IN PERM. CORPS | UNIT *52nd Batta* TRANSFERRED TO *7-E Branch* DATE *17-9-16* AUTHORITY *C.L. 187  
2/1/16*  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY  
 PLACE OF ATTESTATION *Port Arthur, Ontario* TRANSFERRED TO DATE AUTHORITY  
 DATE OF ATTESTATION *Oct 2nd 1915* TRANSFERRED TO DATE AUTHORITY  
 ASSIGNED PAY MONTHLY \$ *20.00* DATE EFFECTIVE *1/12/15*  
 PAYABLE TO *Mrs S. Chapman, 218 Dease St., Fort William* *Out. Canada*  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE *Entered on N.E. Card Index, etc.*  
 PAYABLE TO *Checked by S.J. McNeilland* RELATIONSHIP  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *6/1/16* EFFECTIVE *Dec 1st 1916* REASON *Killed in Action* *16/9/16 C.L. 187  
2/1/16*  
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *17-9-16 C.L. 187 3/1/16*  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ADJUSTMENT OF A.P. FROM OTTAWA  
 Authority *649-C-3217*  
 Amount *20.00* Reason *Credit*  
*has 1/16 left paid*  
*Statement 26*

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	1	2	3	4				CREDIT	DEBIT				
			\$	C.			\$	C.			\$	C.																				NO.
<i>Mar 31</i>															<i>144 20</i>											<i>114 63</i>	<i>29 57</i>					
<i>1/4 30/4</i>	<i>30</i>	<i>1.00</i>	<i>30 00</i>	<i>30</i>	<i>10</i>	<i>3 00</i>									<i>33 00</i>	<i>130</i>	<i>15/4</i>	<i>173</i>	<i>30/4</i>				<i>20 00</i>		<i>26 98</i>	<i>35 59</i>						
<i>1/5 31/5</i>	<i>31</i>	<i>1</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>3 10</i>									<i>34 10</i>	<i>202</i>	<i>15/5</i>					<i>20</i>		<i>22 56</i>	<i>47 13</i>							
<i>1/6 30/6</i>	<i>30</i>	<i>1</i>	<i>30</i>	<i>30</i>		<i>3 00</i>									<i>33 00</i>					<i>18 49</i>		<i>20 00</i>		<i>24 26</i>	<i>55 87</i>							
<i>1/7 31/7</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>3 10</i>									<i>34 10</i>	<i>305</i>	<i>20/6</i>	<i>350</i>	<i>19/6</i>	<i>3696</i>	<i>15/6</i>			<i>20</i>		<i>31 12</i>	<i>58 85</i>					
<i>1/8 31/8</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>3 10</i>									<i>34 10</i>	<i>412</i>	<i>31/7</i>	<i>469</i>	<i>15/8</i>				<i>20</i>		<i>25 23</i>	<i>67 72</i>						
<i>1/9 30/9</i>	<i>30</i>		<i>30</i>	<i>30</i>		<i>3 00</i>									<i>33 00</i>	<i>518</i>	<i>31/8</i>	<i>557</i>	<i>15/9</i>				<i>20</i>		<i>26 11</i>	<i>74 61</i>						
<i>1/10 31/10</i>	<i>31</i>		<i>31</i>	<i>31</i>		<i>3 10</i>									<i>34 10</i>							<i>20</i>	<i>49 50</i>	<i>69 50</i>	<i>39 21</i>							
<i>1/11 31/11</i>															<i>34 10</i>							<i>20</i>		<i>20 00</i>	<i>19 21</i>							
															<i>379 60</i>							<i>20</i>		<i>31 059</i>	<i>19 21</i>							

Checked *McLward*

*A.E. March 1917.*

Statement of  
 FEB 22 1917  
 Account rendered

Cash found in effects *WR*

Small Ledger Sheet

*Debit 45 days @ 1% \$49.50*  
*Killed in Action 16/9/16*  
*Spent 6/11/16 Effe 1/12/16*  
*Trans to N.E. Branch 17-9-16*  
*1921 To Canada for*  
*Statement 26/3/17.*

**Table III.—Boards; Courts of Inquiry, Vaccination, Inoculation, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.**

Date	Brief details, and signature		
1915	Vaccination	Good	W. S. McCullough.
2-10-15	Inoculation	"	" "
12-10-15	"	"	" "
22-10-15	"	"	" "

**Table IV.—Service Table.**

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

I certify the foregoing to be a true copy of an original entry on Medical History Sheet of this man.  
 J.A.M.C.  
 Charge of Records

AH

**DUPLICATE.**

439854  
ARMY FORM B. 178.

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.  
 Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

**MEDICAL HISTORY of**

Surname CHAPMAN Christian Name E. A.

**TABLE I.—GENERAL TABLE.**

Birthplace ... Parish Croydon County England

Examined ... { on 2nd day of October 1915  
 at Port Arthur

Declared Age ... 38 years ... days.

Trade or Occupation ... Street Car Conductor

Height ... 5 feet 8<sup>5</sup>/<sub>4</sub> inches.

Weight ... 154 lbs.

Chest Measurement { Girth when fully Expanded 35<sup>1</sup>/<sub>2</sub> inches.  
 Range of Expansion 4 inches.

Physical Development ... Good

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

When Vaccinated ... 1915

Vision ... { R.E.—V=  
 L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... { I

(b) Slight defects but not sufficient to cause rejection ... {

Approved by (Signature) W. S. McCullough,  
 (Rank) Capt. A.M.C.  
 Medical Officer.

Enlisted ... { at Port Arthur  
 on 2nd day of October 1915

Corps.	Regtl. No.
<u>52nd O.B.</u>	<u>439854</u>

Became non-effective by ...

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.  
 on ... day of ... 1915

(Signature) W. S. McCullough  
 (Rank)