REGIMENTAL DOCUMENTS

NAME Bourdeau Rene REGT. NO. 63084 UNIT 3rd Can Inf H. Q. FILE NO.

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
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FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
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DENTAL HISTORY SHEET (M.F.B. 465)					Category Deceased
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NIL					

Deceased - 1-11-19 39024 64-B-3

2

W. 2589

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge
Class "A" No. .....

THIS IS TO CERTIFY that No. 63084 (Rank) Private

Name (in full) Bourdeau Rene enlisted in

the 23rd Over Seas Battalion

CANADIAN EXPEDITIONARY FORCE at Montreal P.Q. on the 5th

day of January 19 15

HE served in England and France.

and is now discharged from the service by reason of Demobilization. Medical Unfitness.

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

Age	32	Marks or Scars	Scar over left eye.
Height	5'6"		
Complexion	Fair		
Eyes	Blue		
Hair	Light Brown		

R Bourdeau
Signature of Soldier

L. Farrow
Issuing Officer

Date of Discharge

Dispersal Station "F"
APR 20 1919
Military District No. 4

Major
Commanding Dispersal Station "F"
Rank

Date April 20 1919

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

Description of Bordeau* Rene on Enlistment.

Apparent Age 28 years 5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 5¼ ins.

Chest measurement: Girth when fully expanded 35 ins.
Range of expansion 3 ins.

Complexion fair

Eyes blue

Hair Lt. Brown

Religious denominations:
- Church of England
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.)
- Roman Catholic ✓
- Jewish

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).

Small scar over left eye
2 Vac. left arm

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 Jany 5 1915.

Place Montreal

H. L. Davis 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.

Rene Bordeau 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.

F. W. Fisher. (Signature of Officer)

Date Jan 6 1915.

63084

ATTESTATION PAPER.

No. ~~1509~~

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? ..... Bordeau Rene
2. In what Town, Township or Parish, and in what Country were you born? ..... Montreal.
3. What is the name of your next-of-kin? ..... Wm Rose (Friend
4. What is the address of your next-of-kin? ..... 1032 St. Dominique St. Montreal.
5. What is the date of your birth? ..... July 23, 1886.
6. What is your Trade or Calling? ..... Loco Fireman
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? ..... No
10. Have you ever served in any Military Force? .. If so, state particulars of former Service. ..... 65th Regiment 2 yrs
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.

R Bordeau (Signature of Man).

D MacKitchie (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, R. Bordeau, 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.

R Bordeau (Signature of Recruit)

Date JAN 5 1915 191 . D MacKitchie (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, R. Bordeau, 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.

R Bordeau (Signature of Recruit)

Date JAN 5 1915 191 . D MacKitchie (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 Quebec this 6th day of January 1915.

F W Fisher (Signature of Justice)

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

F W Fisher (Approving Officer)

M. F. W. 23.
150 M.—12-14.
H.Q. 1772-39-841

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			☆CARMANIA-Sailing No. 45☆			Part 2 O # 12
			Embarked 10 4 19 S.O.S from O.M.F.C			D/ 14-19
			Disembarked 18 4 19 on proceeding to			
			☆No.9 Conducting Staff.☆ Canada			
25-4-19		O-S	T.O.S. D.D.#4	Montreal	10-4-19	D.O. Pt. II 115
25-4-19			S.O.S. D.D.#4	Montreal.	20-4-19	D.O. Pt II=115 R.O. 1420

Chas W. Illsley
Lieutenant,
Assistant Adjutant,
District Depot No. 4

Nothing to be written in this margin.

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

(1)*Substantative rank / *Acting rank *[To be entered in pencil to facilitate alteration.]	(2) Regiment or Corps	(3) Regtl. No.
(1)*Substantative rank: Private	3rd Bn	63084

(4) Surname: Bourdeau

(5) Christian Names: Rene

(6) Army Form, number of, Attestation Form or Record of Service paper

(7) Whether of British or of Alien origin [*vide* A.C.I. 578 of 1918]

(8) Date of birth as stated on enlistment

(9) (*a*)

(10) Enlistment (*b*) (11) Engagement (*c*)

(12) Service reckons from (*date*) (13) Special conditions (if any) of enlistment (*d*)

(14) Any subsequent variations (if any) of conditions of service

(Authority) (*date*)

Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer

(16) (Record of Occupation in Civil life (*vide* Army Order 93 of 1917)

Industrial Group No.

Trade or Calling

Married or Single

Particulars of Trade Test

Occupation Cards despatched on (*date*)

Second Occupation Card despatched on (*date*)

(17) Next of Kin

(18) Demobilizer (*f*) (Place) (Signature of Posting Officer)

(19) Pivotal-man (*f*) (Date)

(20) Qualifications (*g*) *or* (21) Corps trade and rate

(22) Extended

(23) Re-engaged

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoeing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—P2 1150 1M 5/18 G.W.P.Co.(3490)

W. S. B. CLASS. A. 63084 Pte. Bourdeau E.

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				
13-2-16	D.A.A.G. Cav. Sect. 3rd Echelon	Transferred to 3rd Cav. Batt'n		10-2-16	No 2578 Pt 2 Orders No 11
7.3.16.	2nd Bn.	Taken on strength 2nd. Bn.			
	R.C.M. Mid	Tubercle of Lungs.	Admitted	11.2.16.	Part II Orders No. 11.
1-4-16.	Lev. C.C.S.			30-3-16.	A.F.B. No. 828.
8-4-16.	Lev.	Tubercle of Lung	To duty	8-4-16.	A.F.B. No. 8521
30/5/16	1st Bn.	Attached st. C.I.B.	Transport	not stated 11-2-16.	F.G. 115-Inf-2-4.
25.8.16.	" "	Rtd. to pt. C.I.B. from Hospital.	Transport		
6.9.16.	Regd's London.	Correct spelling of this man's name is:- "BOURDEAU"		24.16.	F.G. 115 p 353. D.C.S. 419 Can. Corps. A. 100 A-2-1. 29.8.16 4.6.18. K.1.18/5209. F.G. 101-Inf-3-5.- 13.9.16.
21.2.17.	O.C. 2nd Bn.	To Hospital.		24.6.16.	Letter 21-180. F.G. 25-4738.
17.3.17.	do.	Entry "To Hospital 24.6.16" is hereby cancelled. Att'd st. C.I.B. H.Q's			Letter F.G. 25-4738
14-7-17	G.O.C. 1st C.I.B. H.Q.	Granted leave of absence from		27-6-17	B. 213
do	do	Returned from leave	to	7-7-17	
				8-7-17	B 213.
20.7.18.	do.	Granted 10 days leave	Paris	16.7.18.	B.213. Pt. II O. 61. d/- 30.7.18.
3.8.18.	do.	Rejoined from leave. 1st C.I.B. HQ.		28.7.18.	B.213.
7.9.18.	do.	Granted 14 days leave	to U.K.	3.9.18.	" Pt. II No 90. d/ 17.9.18.
28.9.18.	do.	Returned from leave		20.9.18.	"
1.3.19.	"	JOINED UNIT		28.2.19.	"
	Emb. Camp.	Proceeded to England.	MAR 16 1919		MAR 16 1919
					N.R.
					Pt.2 O.No. d/.....
		S.O.S from O.M.F.C. on proceeding to Canada			Part II Orders D- 5-4-19

G. H. Skelton
LIEUT.
FOR A.C.O.I.
A.A.G.

(1001)—Wt. W8203—1273.—800,000.—11-14.—K. & K. Forms B. 103/1.

Army Form B. 103.

W. S. B. CLASS. A.

Certified correct
101-Inf-3-5.

Casualty Form—Active Service.

Regiment or Corps 23rd Reserve Battalion

Regimental No. 63084 Rank Private Name ~~Bourdeau~~ B. Bourdeau. Rene

Enlisted (a) 1/5/15 Terms of Service (a) _____ Service reckons from (a) 1/5/15

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				
	O.C. 3rd Battn	Strength.	Field	3/5/15	A.F. B213 - 10/5/15.
30.5.15.	O.C. No. 1 Can. Fld. Amb.	N. Y. D.	No. 4. G.C.	26/5/15	A. 36.
8.6.15.	O.C. No. 8 General.	N. Y. D.	No. 8 General	7.6.15.	No. 86. W 3034.
12.6.15.	do	Shock.	To Con Camp.	11.6.15.	W. 3034 G 90.
5.6.15	O.C. 3 C.F.O.	N. Y. D	Duty	31.5.15	a 36
14.6.15	O.C. 3 Q.B.D	From Rouen	3 Q.B.D.	14.6.15	S.M. 2410
24/6/15.	O.C. 3rd Bn	Ret to Duty	3rd Bn.	25/6/15	B. 213.
17.7.15.	D.A.A.G. 1st Can Division	Trans. to Sub Staff.	1st Inf. Bde. H.Q.	17.7.15.	A.Q. 1001.
31-10-15	1st Bde	One weeks leave	England	25-10-15	B213.
7-11-15	"	Rejoined	Unit	4-11-15	B213.
9-12-15	"	2 days no 2. F.P. 29-11-15 Galloping a horse across a rough road	Unit	29-11-15	B2069.

(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.

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

DIRECTIONS TO DENTAL OFFICERS

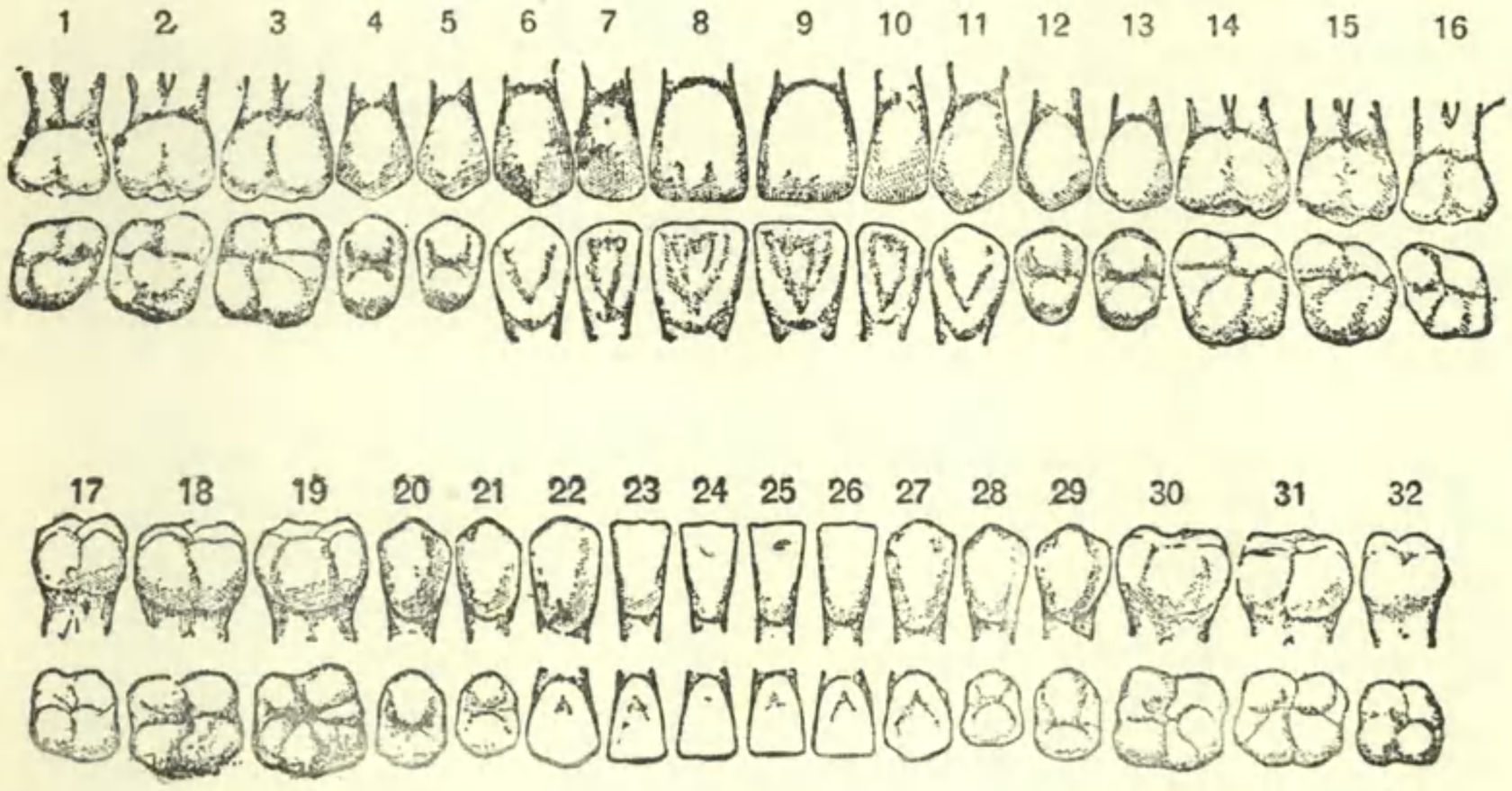
1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

7-F.

NAME OF SOLDIER (Block Letters) BOURDEAU R.

REGIMENT 3RD BATT. RANK PTE. No. 63884.

Date of Examination in England 19/3/19. | Date of Examination in France



PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (a) Full Upper
   - (b) Part Upper
   - (c) Full Lower
   - (d) Part Lower 18, 19, 23, 25 — 26, 30

Signature of Dental Officer ..... Dent. Capt.
for A. D. D. S., M. D. 4

HAS HE EVER REFUSED DENTAL TREATMENT?

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

- (a) In Canada Yes
- (b) In England
- (c) In France

BRAMSHOTT CAMP
HANTS.

Signature of Dental Officer J. Lamontagne Capt.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 63004 (Rank) Private

Name (in full) HOLDEN, Reno enlisted in

the 23rd Infantry Battalion

CANADIAN EXPEDITIONARY FORCE at Montreal, P.Q. on the 8th

day of January 19 15

HE served in CANADA, ENGLAND & FRANCE (with 3rd Inf.Bn.)

and is now discharged from the service by reason of

UNCLASSIFIED

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

Age 32 Years

Height 5'6"

Complexion Fair

Eyes Blue

Hair Lt.Brown

Marks or Scars

Scar over left eye

Signature of Soldier

Issuing Officer

Rank

Appointment

John R.Scott,
Major,
Assistant Director of Records.
April 9th, 1951.

Date of Discharge

Signed at this day of 19

20-4-19

in Military District No. Montreal, P.Q.

File Reference No.

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M. F. W. 39a.
250m —6-18.
H. Q. 1772-39-882.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

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

Unit.....

Address on Discharge.....

Character and Conduct .....

.....

Former Occupation .....

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

.....

Medals and Decorations.....

.....

Remarks .....

.....

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

.....
Name of Officer

.....
Rank

.....
Appointment

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

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 out.

On completion, if soldier discharged in Canada, this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED, or if soldier discharged in England to be returned to Paymaster General O.M.F. of C., 7, Millbank, London, S.W.

1. Christian names Rene 2. Surname Bourdeau

3. Rank Pte 4. Original Unit 23rd Batt 5. Reg. No. 63084

6. Address, in full, to which future payments of gratuity are to be forwarded General Post Office Montreal, Que

7. Date of enlistment in the C.E.F. 5th Jan 1915

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

9. Relationship of such dependent — woman

10. Address, in full, of such dependent — woman

11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? No

12. 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? If so, give particulars of one such unit and dates of service overseas with such unit:—

13. 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?

woman

14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service

15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served 4 Years 85 days
23rd Battn Canada, 23rd Battn England
3rd Can Inf Batt France

16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department No

17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? No

5434. Wt. 30P. 150,0.0(8). 2/19. S.O.,F.Rd.

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. No

19. 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 and by whom paid No

20. Have you been issued with a War Service Badge? If so what class? Not applicable

21. Have you, during the present war, served in the Imperial Forces? No

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled Not applicable

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? No

(b) If so, was such reversion in consequence of misconduct or inefficiency?

24. Are you now serving in the C.E.F.? If not, give:—(a) Date of discharge (b) Reason for discharge

Woman

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit

Woman

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit in which you served at the front, and dates of such service with that unit

Woman

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?

(b) If so, are you in receipt of full pay and allowances from that Department?

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 in virtue of the Canadian Evidence Act.

Signature of Applicant: J Bourdeau

Place of Residence: Montreal, Que

Declared before me at: Brockville, Ont

This 20 day of March 19

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths under P.C. 2767, dated 11th Nov., 1918.

J D Macpherson Maj.

POST DISCHARGE PAY.

Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due

Certified Correct.

District Paymaster

1st Inf. Bde. H.Q. 41199

Rank and Name	BORDEAU, Rene'	Name and Address of Next-of-kin	
Regimental No.	63084	William Rose, (Friend)	
Unit	23rd. Batt.	1032 St. Dominique St.,	
Date of enlistment	Jan. 5th. 1915.	Montreal, P.Q.	
Place of birth	Montreal P.Q%		
Married (Yes or No)	No	Date and place of discharge	
If in Permanent Force		Reason for discharge	
		Character on discharge	

Promotions or appointments

R139-36

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
	O.C.				
16/5/15	3rd Bn	Trans to 3rd Bn	France	3/5/15	Part II Orders No 12
7.6/15	G.D.75	N.Y.D.	1 Canfield Ambulance	26/5/15	O.N.
15/6/15	" 82	"	8 Genl Hosp Rouen	7/6/15	
17/6/15	" 84	Shock.	"	11/6/15	To Convalescent Camp
21/6/15	W.O.		3 Genl Base Details	14/6/15	G.D.87 - 3rd Bn
24/7/15	O/C. 1.	Taken on strgth. 1st Inf Bde H.Qrs.	In the Field	24/7/15	Pt II - 22. & 3rd Bn. No 22.
6.11.15	O.C. 1st Inf Bde Hq.	Granted 7 days leave from 25/10/15 to 1/11/15	-	-	Part II Orders 37.
25.12.15	" "	Sentenced to 2 days F.P. No 2. for galloping a horse across a rough road. 29.11.15.		29.11.15	" " " 44
7.3.16	" "	Trans to 3rd Bn	In the Field	10.2.16	Pt II - 11 "
7.3.16	3rd Bn.	Taken on strength	"	11.2.16	" 11.
14.4.16	"	Admd. North Mdl Div. Cas Clg Stn	"	30.3.16	C.L. No. A331 Tubercle of Lungs.
26.4.16	"	Discharged from — to —	"	2.4.16	" " A340 "

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					
14-6-16	1st Bn.	Granted Extension of Leave	Field	to	8-6-16.	Pt 2 O 24 Auth A.A.G. Can Ca 3rd Gd 942
22-3-19	3 Batt	Proceed to England	"	"	16-3-19	23 (6 a 24-3-19 E Wing E.E.C)
12-4-19	C.E.E. E Wing	SOS to Canada	Bshot	Pte	10-4-19	— 14 45 - A - 31 10-4-19

29247

NAME BORDEAU Rene

Regimental No.	63084	Name and address of next-of-kin	
Unit	23rd.Batt.		William Rose, (friend)
Date of enlistment	Jan 5th.1915.		1032 St Dominique St.
Place of birth	Montreal.P.Q.		Montreal, P.Q.
Married (yes or no)	No.	Date and place discharged	
Amount of pay assigned monthly $		Reason for discharge	
To whom payable		Character on discharge	

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.
Feb 28	28	28	1	28 -	28	10	2 80	1 10	31 90			30 80		* 1 10	31 90	* 1 Chgs. 1 day Pay refund to public
Mch 1	31	31	1	31 00	31	10	3 10		34 10			32 50		1 60	34 10	Credit from previous Pe
Apr 1	30	30	1	30	30	10	3	1 60	34 60			10			10	Y.C. Ass to 3rd Batt 30/4/15
1/5	31/5	31	1	31	31	.10	3 10	24 60	58 70			4			4	
1/6	30/6	30	1	30	30	.10	3	54 70	87 70							
1/7	31/7	31		31	31		3 10	87 70	121 80			3			3	
								118 80								
					Exchange			1 32								
1/8	31/8	31		31	31		3 10	120 12	154 22			23			23	Trans 1 Bde HQ Sub Staff.
1/9/15	30/9/15	30		30	30	.25	7 50	6 75 131 22	175 47			5 35			5 35	Ex 9A from 18/7 to 21/8/15 @ 15¢ per day Pt Order 22. 1/8/15 -
1/10/15	31/10/15	31		31	31	"	7 75	170 12	208 87			156 83			156 83	52.04
1/11/15	30/11/15	30		30	30	"	7 50		89 54			49 51			49 51	40.03
1/12/15	31/12/15	31		31	31	"	7 75		78 78			18 33		2 50	20 83	57.95 2 days F.P. No 2 PT 0444 2.50
1/1/16	31/1/16	31		31	31	"	7 75		96 70							96.70
1/2/16	10/2/16	10		10 -	10	"	2 50		109 20			14 82			14 82	94.38 To 3rd Bn Pt 2 order 11
11/2/16	31/3/16	50		50	50	10	5	94 36	94 38 55			4 36			4 36	
								4 50								
				425 -			66 95	9 17	501 12			352 50		3 60	356 10	# 145 02¢ Cr Bal

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					

BOURDEAU, Rene Pte. 63084 C.E.F.

649-B-39024

Medals

Cross - Single.
Mother- Deceased.

Number 63084 Rank Pte

Surname BOURDEAU

Christian Names Rene

Unit 3rd Bn Can Inf Theatre of War France

Date of Service 3.5.15

Remarks

Latest Address ~~GPO~~ 559 St Andrew St

Montreal PQ

Roll No. Page 2709

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39) (Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing } Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). and duplicate
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B

Checked by No. 15

Date 3-4-19

Dat. 10/10/39

SHORT FORM.

War Service Badge Class "A" No. 164667

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

Occupational Group No. 21

1. No. 63084
2. Rank. Private
3. Name. Bourdeau. Rene
4. Unit. 3rd Bn attd. 13th Bn
5. Date of Discharge 20-4-19 Place Montreal
6. Reason for Discharge DEMOBILISATION
7. Authority. R.O. 1420 D.D.#4 D.O.R. Pt. II-115
8. Proposed Residence after Discharge G.P.O. Montreal P.Q.

M.1 4/1 39024 P.S. 4/1

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W. 2 839 Montreal April 30. 1919.

R. Bourdeau
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place Montreal

Date April 30. 1919.

Signature L. Jacoreau Major
Commanding Dispersal Unit
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, 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
7th & 20th Jan '15	Inoculations agst Typhoid
21-3-19.	Amputation Ring and Middle Fingers Left Hand. Category B II C.W. Mills Capt.

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
Quebec P.Q. Canada	14/11/14				
Foreign Service	23/2/15				

A

ORIGINAL

84

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname Bourdeau *Christian Name* Rene

TABLE I.—GENERAL TABLE.

Birthplace ... Parish St John Baptist County St. John Baptist (Que Canada)

Examined ... ... on fifth day of January 191 5 at Montreal

Declared Age ... ... 28 years 166 days.

Trade or Occupation ... Loco Fireman

Height ... ... five feet, six inches.

Weight ... ... 140 lbs.

Chest Measurement: Girth when fully Expanded. 36 inches. Range of Expansion 2 inches.

Physical Development ... Good

Vaccination Marks: Arm ... Right two Left; Number ~~two~~ 2

When Vaccinated ... 1912

Vision ... ... R.E.—V= Good; L.E.—V= Good

(a) Marks indicating congenital peculiarities or previous disease ... (a) Small scar over l. eye

(b) Slight defects but not sufficient to cause rejection ... ... (b) Two fingers missing from the left hand

Approved by (*Signature*) J R Spier

(*Rank*) Maj. *Medical Officer.*

The Medical History Sheets of all men proceeding overseas, must be returned by the Officer commanding their unit to the Record Office when they leave England.

W.R. WARD, Colonel in Charge of Records, Canadian Contingents, London.

Enlisted ... ... at Montreal on fifth day of January 191 5

Joined on Enlistment ... 23rd Batt. Can. Exp. Force — Regtl. No. 63084

Transferred to ... ... 3rd Bn.

Became non-effective by

on day of 191 .

(*Signature*) ~~Rene Bourdeau~~

(*Rank*) ~~Private~~

Entries in Red Ink made from Attestation Sheets.

2/15/15 RMS/W

for D. D. M. S.

(25013) Wt.W10943-1990. 300 M. 1/15. M.R.Co.,Ltd. 59.

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
N. Mid D.C.C. Stn	30	3	16	2	4	16	Tubercle of Lungs	3.	Discharged	A331-340

B 1554

AUDITOR | PAYMASTER

M. & R. S.

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

REGT. No. 63084 RANK Pte NAME (IN FULL) BOURDEAU R. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
I.O.S.	10/4/19	Do 115 Supp 2 P 212.

ORIGINAL UNIT C.E.F. 1st C.O.R. | IF IN P.F. WHAT UNIT? | (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 5-1-15 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY $ Nil | DATE EFFECTIVE

PAYABLE TO | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS Wsg. - General Post Office, Montreal - Gen.

ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED PLACE Montreal - DATE 20-4-19 REASON Demob - Do 115 Supp 2 P 2 AUTHORITY IF ENTITLED TO POST DISCHARGE PAY

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.			TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.			TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
							555	33	555	33																									555	33	"Carmania" Ter Bal Sug L.P.C. 555 33
1-4-19					70	00									Ch.																						Wsg. N.P.C. Co. 35.00
25-4-19	25	1.10	27	50	35	00			132	50	Boat		Training		36611		487	5	00	677	96						5	50			693	33	5	50	P.B.R.		Bd 5.50 for pd. on Sug L.P.C. 21-4-19 to 25-4-19
									687	83																											
			Other Credits		W.S.C.	S.A.	Total						War Service Gratuity												Other Charges		W.S.C.	S.A.			Total		Soldier		Balance Dependant		
					420		420																				70				70		350				
20.5.19																									550		64	50			70		280				307071
20.6.19																											70				70		210				911662
20.7.19																											70				70		140				1073147
20.8.19																											70				70		70				1534643
20.9.19																											70				70						
																															420						

Paid

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1300.

Married or Single S.

Place of Birth Montreal P.Q.

Name and Address of Next of Kin William Rose.
1032 St. Dominique St. Montreal Que.

Relationship of Next of Kin Friend.

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

Reg'l No. 63084 Rank Private Name Bordeau Rene.

If in Perm't. Corps What Unit Unit 3rd Batt. Transferred to ~~1st D.B. R.F.C.~~ Date ~~1/4/17~~ Authority ~~[illegible]~~

Permanent Force Allowances Transferred to 1st C.O.R.D. Date NOV 1 1917 Authority

Place of Attestation Transferred to Date Authority

Date of Attestation 5th Jan. 1915. Transferred to Date Authority

171

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

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

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
			425				66	95						9 17	501 12											352 50		3 60	356 10	145 02					
April 30	30	1.	30	.	30	.10	3	-							33 .															178 02					
May 31	31	1.	31	.	31	.10	3	10							34 10	276 7/4 19.13 H9 256 6/3 14 Sub B. 149								2 62 2 62		48 67									
✓	✓	✓	✓	✓	✓	✓	✓	✓								314 2/4 76 @ 20/- 316 ~~[illegible]~~ 1st Bde A.S. 550 6. 9/7 337 2/6								3 49						57 40	164 72				
June 30	30	1.	30	.	30	.10	3	.							33 .									97 33	2 43 9 73					109 49	78 23				
July 31	31	1.	31	.	31	.10	3	10							34 10									4 36 2 56						6 92	105 41				
Aug 31	31	1.	31	.	31	.10	3	10							34 10																139 51				
130.9	30		30		30		300								33 00	367 367 } 1/8								17 44 7 67											
✓			✓												✓	319 17/5 386 17/8								5 11 4 36						29 53	142 98				
Oct 31	31	1.	31		31	.10	3	10							34 10	436 12/10 418 3/10 408 15/9								3 49 3 49 3 23						12 21	164 87				
✓					✓										✓																				
Nov 30	30	1.	30	.	30	.10	3	.							33 .	75 1st Mch. Gun 3/11 1st B Bde H. 453 18/11 473 1/12								2 61 13 08 6 98						2 61	195 26	165 00			
Dec	31		31		31		3	10							34 10															20 06	209 30	183 00			
			944	45			944	5							803 62									177 39	41 33			3 60	594 32						
			794	45																															

63084 Pte. Bordeau Rene

Date 1917	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
			794	45										9 17	803	62							
Jan 15	1	10	16	50											16	50							
Jan 31	16	10	17	60											17	60				1st Sup Bde HQ 489	19/1		
Feb 28	28	10	30	80											30	80				521	1/1	1st B.S.	
																				507	5/1	2nd Bde	
																				558	1/2	1st D.A.	
																				532	16/2	8th	
Mch	31	10	34	10											34	10				1760	7/3	4th Bn	
✓				✓												✓				2054	16/3	1st Bn	
Apl	30		33												33								
May	31		34	10											34	10							
June	30		33												33					111	1st Bde		
																				35	18/4		
July	31		34	10											34	10	328	29/6					
Aug	31		34	10											34	10	328	29/6					
Sept	30		33	—											33					19	Bde	14/7	
			1094	95										9 17	1103	92				39		4/7	
																				30		3/8	
																				378		30/8	

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sep. Allce. Eng.
1917											
		401 35							401 35	315 00	
Oct.	P/e Pay	34 10		A.R. 1610 8th Bde 21/7	35 69						
				1st Bde Det Paris 7/7	35 69						
				875 1st Bn 2/9	2 68						
				277 " 20/5	2 67						
				207 " 8/5	3 57						
				817 " 23/8	2 68						
				1006 " 25/9	2 68						
				722 " 5/8	2 67				347 12		
		34 10			88 33						
Nov	P.P.	33									
Dec	P.P.	34 10							414 22		
		67 10									
Jany 1918				D.R. 1621 21 A.R. 1091 31/10/17 per Bde	4 46						
	P.P.	34 10							443 86		
		34 10			4 46						
Feby	P.P.	30 80		D.R.A.R. 1518 5/1/18 1st Batn	4 46						
				D.R.A.R. 1551 14/1/18 "	3 57						
				D.R. 27488 18/12/17							
				A.R. 1396 "	12 49						
Carried fwd		30 80			20 52				443 86		

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
			177 39	413 33		3 60	594 32	209 30				1st S.B.A.S. 16/7 2D Rdm
								225 80				
			3 49				3 49	239 91		195	44 91	
			2 62									
			2 62				5 24	265 47		210	55 47	
			3 49									
			2 62									
			2 61									
			3 49				12 21	287 36		225	62 36	
								320 36		240		
								354 46		255		
			2 62				5 23	387 23		270	112 23	
			2 61									
	71 38						71 38	416 33		285	131 33	
	71 38						71 38	379 05		300	79 05	
			2 68									
			2 67									
			2 67									
			2 68				10 70	401 35		315	86 35	
			177 39	413 33		3 60	594 32					

Month 1918	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Deferred Pay	Sep. Allce. Eng.
	Arr. fwd Feby P. Pay	30 80			20 52				443 86		
				D.R. 8334 29/10/17							
				A.R. 1254 " 1st Batn	4 46				449 68	375 00	
		30 80			24 98						
	Funds P. Pay	34 10		D.R.A.R. 1717 21/2/18 "	3 57						
				D.R. 43401 11/2/18 "	4 46						
				A.R. 1658							
				D.R.A.R. 1789 6/3/18 "	4 46						
				D.R.A.R. 1845 17/3/18 "	3 57						
				D.R. 30046 24/11/17							
				A.R. 1335 "	8 92				458 80	390 00	
		34 10			24 98						

P 820
12474—379M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY *	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:–		EFFECTIVE DATE:–	
AMOUNT:–		AMOUNT:–	

NAME:– BORDEAU, Rene.

NUMBER:– 63084

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:– 3rd Battn

DATE ACCOUNT FIRST OPENED:–

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			16 RD
NR.	1.6.18		3 Bn. 1a

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
12/3/19	6718		~~£ 46~~				
19/3.	808	B'shott.	~~£8 69~~				

DAILY RATES OF PAY AND ALLOWANCES

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

PARTICULARS OF RENDERING NON-EFFECTIVE: Dis-to Can. Eff. 1-4-19 NR. 4918 B'shott 20/3/19 B'shott m.D. 4 Cl. Bal. £555.33 RR/pw

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mar	Balance Fwd.								458 80	390	
April	Pte pay	33		Draft. 1160 14/10/17 1st Battn	3 57						
				Draft 19. 8/4/18 do	4 46						
				Cl 92 23/4/18 1st Can Battn	3 57				480 20	405	
		33			11 60						
May	Pte pay	34 10		Draft. 144 4/5/18 do	4 46						
				✓ 314 16/5/18 3 Bn.	5 35				504 49	420	
		34 10			9 81						
June	"	33		287. 1st Bn 1/6/18	4 46						
				362 " 15/6/18	3 57				529 46	435	
July		33 34 10		108. 1. 1st Bde 2/7/18	8 08 3 57						
				150 2 " 17/7/18	8 92						
				2786 C.D.R. 23/7/18	13 38						
				2617 " 21/7/18	4 46						
				2427 " 19/7/18	35 69				457 39	450	
Aug		34 10 34 10		329. 1. 1 Bde 15/8/18	106 17 3 57				487 92	465	
				Encroachment on Dep £5 9/8					57 0 12	25	
				" " " £5 13/9/18						25	
										415	
Sept		34 10 33		461. 2. 1 Bde 2/9/18	3 57 8 92						
				C.D. 32355 10/9/18	14 60						
				" 3400 14/9/18.	24 33						
				" 30608 4/9/18	24 33						
				" 30853 5/9/18	24 33						
		33		713. 1. 1 Bde 24/9/18	3 57 100 06				420 84	430	
Oct		34 10		755 31/10/18 1 C J Bde ①	3 73					B	
				949 26/10/18 "	3 73				~~446 48~~ 447 48	445	
		34 10			7 46						

NUMBER 63084 RANK Pte NAME Bourdeau R.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	Brought forward								447 48	445	
Nov	P.P. Nov & Dec	67 10		~~Cancel~~							
				1319 16/11/18 Crane D	3 73						
Jan	"	34 10							514 95	490	
		101 20			3 73						
Feb.	✓ (Feb & Mar)	64 90									
				1912 24/12/18 " 3 Bm	2 60						
				1662 15/12/18 "	14 93						
				2049 7/1/19	5 03						
				1036 3/11/18 "	3 73						
	Int on Def Pay	45 62		2674 4/2/19 "	16 99						
		10 52		2972 16/2/19 "	3 73				608 66	520	
				6718 13/3/19 La Plane	4 66						
				508 19/3/19 Gwynfee	48 67				555 33		
		110 52			100 14						

S.O.S. to Canada 10/4/19
MD 4
Sailing List 45.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, 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
7th.&20th. Jan 1915.	Inoculations agst. typhoid

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
Quebec P.Q. Canada.	14/11/14				
Foreign Service	23/2/15				

E.C.

DUPLICATE

63084

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname BOURDEAU *Christian Name* RENE

TABLE I.—GENERAL TABLE.

Birthplace ... Parish St. John Baptist County St.John Baptist, Que. Canada

Examined ... ... on 5th day of January 191 5. at Montreal.

Declared Age ... ... 28 years 166 days.

Trade or Occupation ... Loco. Fireman.

Height ... ... 5. feet, 6 inches.

Weight ... ... 140. lbs.

Chest Measurement: Girth when fully Expanded. 36 inches. Range of Expansion 2. inches.

Physical Development ... Good.

Vaccination Marks: Arm ... Right Left; Number 2.

When Vaccinated ...

Vision ... ... R.E.—V= Good. L.E.—V= Good.

(a) Marks indicating congenital peculiarities or previous disease ... (a) Small Scar over L. eye.

(b) Slight defects but not sufficient to cause rejection ... ... (b) Two fingers missing from the left hand.

Approved by (*Signature*) J.R.Spier.

(*Rank*) Major.

Medical Officer.

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

for the Officer in Charge of Records C.A.M.C. Canadian Contingents.

Enlisted ... ... at Montreal. on 5th. day of January. 191 .5.

	Corps.	Regtl. No.
Joined on Enlistment ...	23rd. Batt. Can.Exp.Force.	63084.
Transferred to	3rd. Bn.	

Became non-effective by

on day of 191 .

(*Signature*)

(*Rank*)

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

The Morgan Reeve Co., Ltd., Printers, 20/22, Goldsmith St., Kingsway, W.C. (25289) Wt.W13871/604. 300m. 4/15. Forms B. 178.

W.R.WARD, P.T.O.
Colonel in Charge of Records,
Canadian Contingents.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
N. Mid. D.C.C Stat.	30	3	16	2	4	16	Tubercle of Lungs	3	Discharged	A331-348.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

yes.

19. Is the invalid fit for

(*a*) General service,	(Category A)	~~(Yes or No.)~~
(*b*) Service abroad, not general service,	(" B)	~~(Yes or No.)~~
(*c*) Home service (Canada only),	(" C)	~~(Yes or No.)~~
(*d*) Temporarily unfit.	(" D)	~~(Yes or No.)~~
(*e*) Unfit for service in Categories A, B and C	(" E)	~~(Yes or No.)~~

yes. Cat. B ii

20. It is certified that the invalid
(*a*) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

(*b*) Does not require treatment.
(*c*) ~~Should pass under his own control.~~
(*d*) ~~Should not pass under his own control.~~
(Strike out condition not applicable.)

21. It ~~is recommended that the invalid be discharged.~~ (When not for discharge add special recommendation.)

Board authority A.G. 9083. of 11-11-18.

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

A. Bowyer Capt. *President.*

PLACE Bramshott

DATE 20-3-19.

C.W. Mills Capt. } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

President

PLACE.....

DATE..... } Members

APPROVED BY

for D. McKenzie Capt.
Assistant Director of Medical Services.

DATE 20/3/19.

APPROVED BY

Director-General of Medical Services.

DATE.....

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

7

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Bramshott DATE 20-3-19

1. 1 (*a*) Unit 3rd. Bn. (*b*) Regimental No. 63064 (*c*) Rank Pte.

(*d*) Surname Bourdeau (*e*) Christian name R.

(*f*) Home address G.P.O. Montreal

(*g*) Next of Kin William Rose. (*h*) Relationship Uncle

(*i*) Address of Next of Kin 1032 Ste. Dominique St., Montreal

2. Age last birthday..... Date of birth.....

3. Enlistment, or Appointment (if an Officer) (*a*) Place Montreal (*b*) Date 5-1-15

4. Personal description:

(*a*) Height 5 ft 6 in (*b*) Weight 140 lbs (stripped) (*c*) Complexion Dark

(*d*) Colour of hair Brown (*e*) Colour of eyes Blue (*f*) Identification marks, Scars, etc. Scar over L. Eye

5. Former trade or occupation Locomotive Fireman

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	4	74

	Periods From	Periods To
Canada	5-1-15	23-2-15
England	23-2-15	1-5-15
France or other theatres of War	1-5-15	16-3-19.

7. Original disease, or injury Contusion & Laceration of L. Leg

(*a*) Date of origin Oct. 1902 (*b*) Place of origin Canada

(*c*) Cause Coupling Cars

M. F. B. 227.
400M.—11-18.
1772-30-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (*a*) Weakness—slight, moderate, marked, etc; (*b*) Loss, complete or partial, of an organ or member, or of its functions; (*c*) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (*d*) Any other restrictions in choice of occupation.)

Loss of Middle & Ring fingers of R. hand

9. Present condition—(*a*) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Objective Findings Middle & Ring fingers L hand missing at the base. Good stump. Grip of L hand weaker than right

Subjective Findings He says left hand is weaker than right and he cannot carry a hold as much with left hand as right hand

(*b*) Has the invalid now any affection of the following systems, not described in Section 9 (*a*) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System no Cardio-Vascular System no (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System no (Albumen and Sugar will be excluded.)

Special Senses no Respiratory System no Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems no Any other general condition no

10. (*a*) History (of the condition referred to in Section 9 (*a*).)

While Coupling Cars the middle & ring fingers of the L hand were crushed and afterwards amputated in Hospital

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

a. K.B. 102
30/3/16 Inflamed lung. 4 days in Hospital recovered no present disability
26/5/15. N.Y.D. (Shock) 12 days duration " " "

(*c*) (Here give a description of wounds, scars and deformities.)

N. a

11.—(*a*) Did the disabling condition have its origin before enlistment? yes

(*b*) If so, has it been aggravated by Service? no (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (a) no (b) no.
The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? Permanent

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Nil.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? no
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? yes
(If not, briefly state why)

17. Recommendations Nil.

G. H. MacKinnon Capt. A.M.C.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned R. Bourdeau have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (~~If dissatisfied, statement should follow.~~)

~~I complain in addition of~~

A. G. M.

R. Bourdeau Pte. Rank.
Signature of invalid examined.