

M. D. Depot Battalion Regiment

Regtl. No. 3322519

**PARTICULARS OF RECRUIT**  
**DRAFTED UNDER MILITARY SERVICE ACT, 1917**

(Class 1)

1. Surname..... **Mercier**

2. Christian name..... **Fortunat**

3. Present address..... **158 Guigues St, Ottawa. Ont.**

4. Military Service Act letter and number..... **P.C. 996772**

5. Date of birth..... **31st December, 1896.**

6. Place of birth..... **Ottawa, Ont.**  
(town, township or county and country)

7. Married, widower or single..... **Single**

8. Religion..... **R.C.**

9. Trade or calling..... **Labourer**

10. Name of next-of-kin..... **Mrs. Alphonse Mercier**

11. Relationship of next-of-kin..... **Mother**

12. Address of next-of-kin..... **158 Guigues, St. Ottawa, Ont.**

13. Whether at present a member of the Active Militia..... **No**

14. Particulars of previous military or naval service, if any..... **Nil**

15. Medical Examination under Military Service Act:—  
(a) Place..... **Ottawa, Ont.** (b) Date..... **11th May, 1918** (c) Category..... **A-11**

**DECLARATION OF RECRUIT**

I, **Fortunat Mercier**, do solemnly declare that the above particulars refer to me, and are true.

*Fortunat Mercier*

(Signature of Recruit)

**DESCRIPTION ON CALLING UP**

Apparent age.....	<b>21</b>	yrs.....	mths.....	} Distinctive marks, and marks indicating congenital peculiarities or previous disease.  <b>Nil</b>
Height.....	<b>5</b>	ft.....	<b>5½</b> ins.	
Chest measurement } fully expanded.....	}	range of expansion.....	<b>34</b> ins.	
			<b>2</b> ins.	
Complexion.....	<b>Sallow</b>			
Eyes.....	<b>Brown</b>			
Hair.....	<b>Brown</b>			

*[Signature]*  
O. C. 2nd. Depot Bn. E. O. R. Depot Btl. Regt.

Place **OTTAWA** Date **MAY 14 1918**

ORIGINAL

Regiment

Depot Battalion

M. D.

Regt. No. 224413

# PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1915

Class

1	Name	...
2	Christian name	...
3	Rank or address	...
4	Military service number and number	...
5	Date of birth	...
6	Place of birth	...
7	Height, weight, and chest	...
8	Complexion	...
9	Trade or calling	...
10	Name of next of kin	...
11	Relationship of next of kin	...
12	Address of next of kin	...
13	Whether at present a member of the British	...
14	Particulars of previous military or naval service	...
15	Medical examination under Military Service Act	...
16	Other particulars (a) Date of entry (b) Category	...

## DECLARATION OF RECRUIT

I, the undersigned, being the person named in the above particulars, do hereby declare that the above particulars are true and correct to the best of my knowledge and belief.

Signature of Recruit

## DESCRIPTION OF CALLING

Height	...
Weight	...
Chest	...
Complexion	...
Build	...
Other	...

Signature of Recruiting Officer

Signature of Recruiting Officer

Signature of Recruiting Officer

REGIMENTAL DOCUMENTS

NAME *Mer* **MERCIER, FORTUNAT.** REGT. NO. **3322519** UNIT **6<sup>th</sup> Res.** H. Q. FILE NO.

**CONTENTS**

DATE RECEIVED

**M**

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

**DEATH**  
Category

**DISCHARGE**

Category

*Demob*

**17721**

**DESERTION**

*33-9'  
19-10  
11-10*

**H**

1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)

1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

1 TRAINING HISTORY SHEET (M.F.W. 113)

1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

1 REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

1 DENTAL HISTORY SHEET (M.F.B. 465)

1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

1 MEDICAL EXAMINATION (M.F.W. 129)

1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

1 PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

1 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

1 LAST PAY CERTIFICATE (M.F.W. 44)

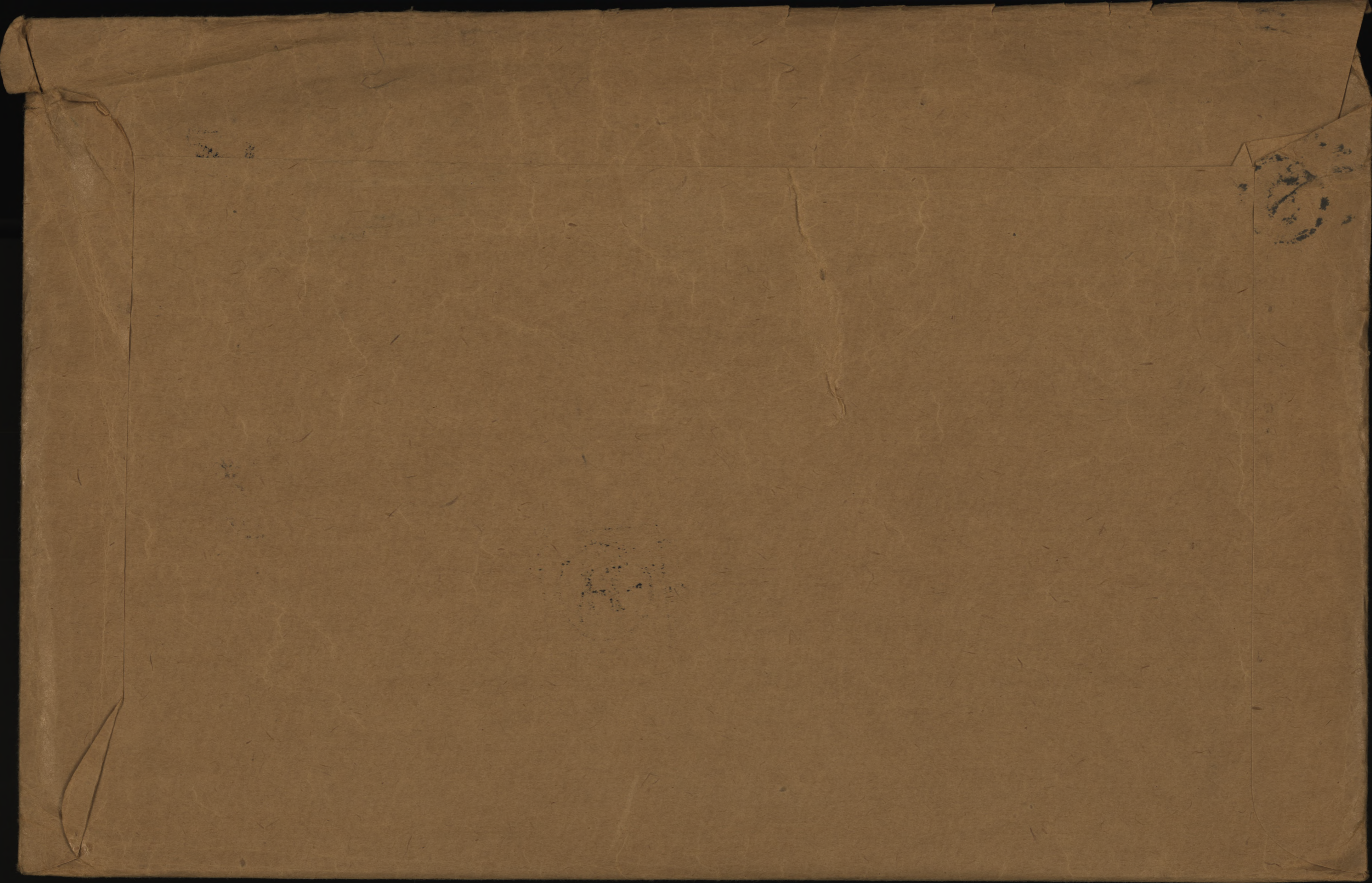
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

1 PARTICULARS OF CHARACTER (A.F.W. 3226)

1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

*misc.*

*1 1237  
1 1900  
1 1900*



Number. 3322519 Rank. Pte B

Surname. MERCIER

Christian Name. Fortunat

Units. E. G. R. Theatre of War. England

Date of Service. 22-7-18

Remarks.

Latest Address. 158 Guigues St.  
Ottawa Ont

Roll No. A Page 862

DESP MAR 7 1922  
REGN. NO. 417022







NAME.

*Mercier, Fortunat*

RANK.

*Ote*

REC. FILE.

*"2"3 m 23  
Pos 3-7-19  
D0199 of 18-7-19*

No.

*3322579*

CORPS.

*Capt. Ont Regt  
46<sup>th</sup> I.R.O.*

H. Q. FILE.

*#380*

ENLISTMENT, PLACE.

*Ottawa Ont.*

DATE.

*May 14<sup>th</sup>. 1918  
2nd Dep Bn*

~~BIRTH~~  
DISCHARGE, PLACE.

*Canada Ottawa Ont.*

DATE.

*Dec. 31<sup>st</sup>. 1896*

REASON.

T. O. S.

*May 14 1918*

ADDRESS ON DISCHARGE.

D. O. Part II No

*135*

DOCUMENTS.

NEXT OF KIN

*Mercier, Mrs. Alphonse*

RELATIONSHIP

*Mother*

ADDRESS

*158 Guigues St., Ottawa Ont.*

*O/S. 11/7/18  $\frac{1312}{2}$*

*R/61-7-19  $\frac{356}{81}$  Ple.*

CHARGED OUT

RETURNED

CHARGED OUT

RETURNED

TO                      DATE                      BY

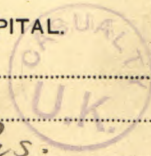
RECEIVED  
BY                      DATE

TO                      DATE                      BY

RECEIVED  
BY                      DATE



**A. & D.  
CARD**



..... HOSPITAL.....

AT.....

A. & D. No. 5209 PL. OF ACTION.....

RANK Pte REG. No. 3322319 UNIT 6<sup>th</sup> Can Res. SICK OR WOUNDED

NAME Yescier F. AGE 21 RELIGION R.C.

PLACE IN HOSPITAL F1/E2/D/R

DIAGNOSIS Influenza

ADMITTED 16 OCT 1918 Fri FROM.....

DISCHARGED 21 NOV 1918 A TO 6<sup>th</sup> Can Res.

TRANSFERRED.....

SERVICE AT HOME 5/12. IN FIELD.....

RESULTS.....

(See Document Card for M.H. Sheet and other Documents.)

REMARKS.

NAME *Mercier Fortemant*  
RANK AND CORPS *Cto E. O. Regt*

REGT'L. No. 3322519

H. Q. FILE NO 649

FOLLOWS

NO.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

*WDM.C.P. 82  
1-3*

*28-11-18*

*Disch. from hosp. after suffering  
from influenza, Nov. 21st. /18.*

*Eng. Mrs. A Mercier Mathew*

L. L. 31493. M. & D. 8476.

*158 Guignes*

*St Ottawa Post*

M. F. W. 42-100M. -23-11-17.

H. Q. 1772-39-893.

*B1570 23-11-18*

LIST NO.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

C 342

14 Can. Gen., Eastbourne

17-10-18

Influenza.

C 371

discharged

21-11-18

"

Surname

Christian Name or Names

Reg. No.

MERCIER

F.

3322519

Rank

Unit

Pte.

EO 6R.

Cas. List.

14 CGH Eastbourne 17-10-18.

23-10-18.0342

Influenza

26. 11. 18 6371

dis

21. 11. 18

A.M.D. 2 DEPT.

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

Cas. List.



CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

War Service Badge Class.....  
No..... Issued

THIS IS TO CERTIFY that No. 3322519 (Rank) Pte.

Name (in full) Mercier Fortunet enlisted in

the 2nd. Depot. Bn. C.P.P.

CANADIAN EXPEDITIONARY FORCE at Ottawa on the Fourteenth

day of May 1918

HE served in England with 6th Res. Bn.

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 23

Marks or Scars nil

Height 5' 6"

Complexion fair

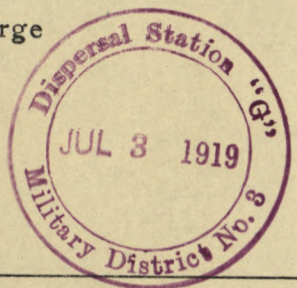
Eyes Brown

Hair Dark Brown

H. Mercier  
Signature of Soldier.

K. W. Brighton  
Issuing Officer.

Date of Discharge



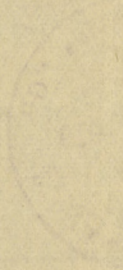
Rank

Date..... 19.....

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.

ROYAL CANADIAN MOUNTED POLICE

EXCHANGE CERTIFICATE



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

## DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

### DIRECTIONS TO DENTAL OFFICERS

NAME OF SOLDIER (Block Letters) MERCIER F

REGIMENT 6th Res RANK Pte No. 3322519

Date of Examination in England 4/6/19 Date of Examination in France \_\_\_\_\_

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



### PRESENT DENTAL REQUIREMENTS

1. FILLINGS \_\_\_\_\_
2. EXTRACTIONS 3 14
3. CROWNS \_\_\_\_\_
4. DENTURES
  - (a) Full Upper \_\_\_\_\_
  - (b) Part Upper \_\_\_\_\_
  - (c) Full Lower \_\_\_\_\_
  - (d) Part Lower \_\_\_\_\_

*A. D. D. S., M. D. No. 8*

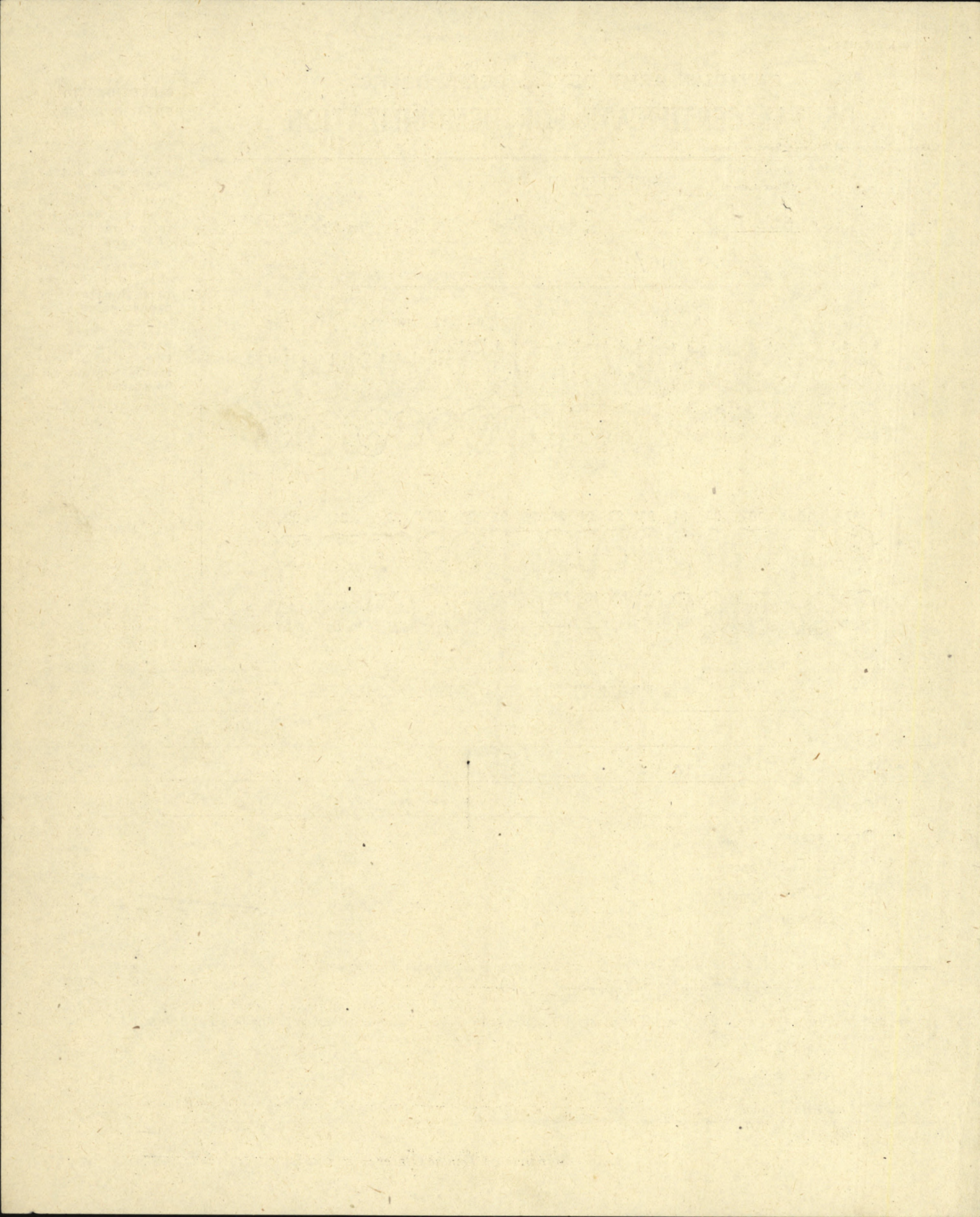
HAS HE EVER REFUSED DENTAL TREATMENT? NO

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

- (a) In Canada \_\_\_\_\_
- (b) In England \_\_\_\_\_
- (c) In France \_\_\_\_\_

Signature of Dental Officer \_\_\_\_\_

*[Handwritten Signature]*



# MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 3322519 Rank Ote Surname MERCIER  
 (Given name in full)  
Yonatan  
 Unit or Corps 6th Res. Hq. Birthplace Ottawa Ont.

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

**I. GENERAL DESCRIPTION:**

Physique good Weight 135 (st) lbs. Height 5.4 in. Colour of Eyes Brown  
 Nutrition good  
 Pulse 72 (reg)  
 Condition of arteries normal  
 Vision Rt. 20 Left 20  
 Hearing (conversational voice) Rt. 20 ft.  
 Left 20 ft.

Identification marks, scars, or deformities.  
 (Give cause and date of origin.)  
nil

Opinion as to general health and physical condition healthy

**2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)**

Nervous System no Genito Urinary System no Cardio-Vascular System no  
 Special Senses no Integumentary System no Respiratory System no  
 Disturbance of Mentality no Muscular System no Digestive System no  
 Osseous and Joint System no Any other general condition no

**3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.**

no 14 C. J. H. 16-10-18 = 21-11-18 (influenza)

# EXAMINATIONS

## THIS SECTION FOR USE OVERSEAS—

Examined at Seaford.....(Overseas)

Date June 5-17.....

Signed J. W. Leach Capt.....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature J. Mercier.....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

## THIS SECTION FOR USE IN CANADA—

Examined at .....(Canada)

Date .....

Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

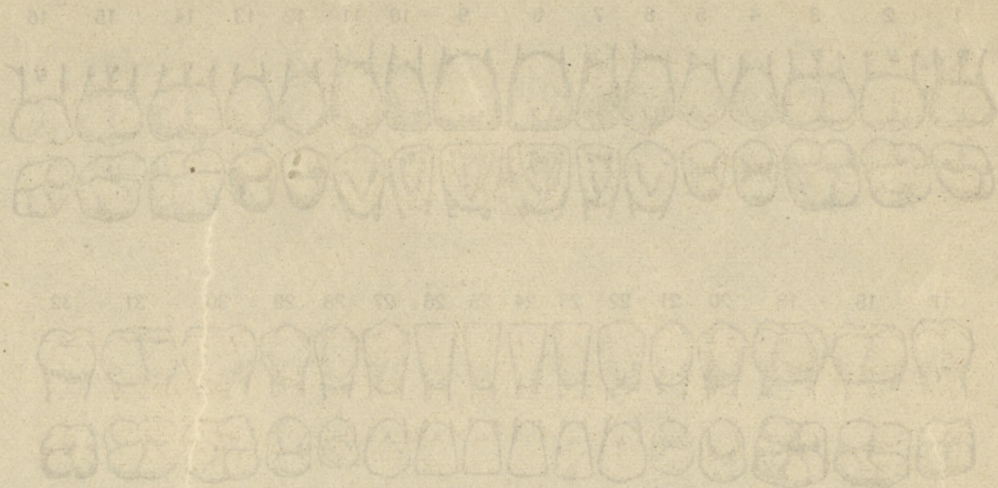
(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)



INSTRUCTIONS

- 1. On examination of the condition of patient's mouth to be marked on diagrams as - red ink
- 2. On first line of report record of same to be made in red ink
- 3. Only such entries to be made on this sheet as will show:
  1. Condition on examination in fact
  2. Condition as given by patient
  3. Condition as detected



NAME	ADDRESS	DATE	OPERATOR	EXAMINER	DATE	OPERATOR	EXAMINER

1900

1900



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

## Casualty Form—Active Service.

Unit, Regiment or Corps 2nd Depot Bn. E. O. R.Regimental No. 3322519 Rank Private Name Mercier, Fortunat  
C. E. F.Enlisted (a) 14-5-18 Terms of Service (a) C E F Service reckons from (a) 14-5-18

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) Labourer

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				
		S.O.S. 2nd. Depot Bn. E. O. R., B. 0179 <u>G. S. Poudus</u> <u>Lieut</u> of Adjnt. 2nd. Depot Batt., E. O. R.			
		Embarked Canada	Halifax	11/7/18	H.M.T. "Shogwa"
		Disembarked England	London	22/7/18	
30/7/18	U.S. 6th Res Bn	S.O.S. 6th Res Bn	Seaforth	22/7/18	P.F. B.O. 178.
14-6-19	Do Do	S.O.S. on transfer to	Do	14-6-19	B.O. 141
23-6-19		66 S in Canada		23-6-19	
		S.S. Aquitania			
					<u>W. J. Workman</u> Lieut. for Officer i/c Records, 6th Can. Res. Bn.

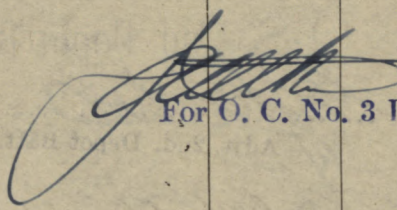
(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.

(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

I.P.T.O.

Fill in only - Unit Number, Rank and Name  
 Casualty Form - Active Service  
 The Depot Br. O. R.

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				
<p><i>Subscribed</i></p> <p>EMBARKEED L VERPOOL SS</p> <p>BELGIC 23.6.19. DISEMBARKEED</p> <p>HILFAX 1.7.19</p> <p>LT FOR CAPT &amp; ADJUT</p>					
		23.6.19	Sub Depot Ottawa		AS 199
		3.7.19	Sub Depot Re. 894		AS 199

  
 Lieutenant  
 For O. C. No. 3 District Depot

Rank **KR** Name **MERCIER Fortunat.** Reg'l No. **3322519.**  
 Unit **46th Dft 2nd Bn. E. O. R** If in perm. Corps, }  
 What Unit? }

Married or Single **Single.**

Place and Date of Enlistment **Ottawa May 14th 1918** Place of Birth **Ottawa, Ont.**

Name and Address, Next-of-Kin **Mrs. Alphonse Mercier.**

**158 Guigues, St. Ottawa, Ont.** Relationship **Mother.**

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

N/E. R.B. No. **14104**  
 File R.L.  
 Category **...**

Discharge, Date and Place Reason Character

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
	<b>C</b>				
			<b>EME. City of Vienna</b>	<b>28 6 18</b>	
			<b>RE-EMB. THONGWA</b>	<b>10 7 18</b>	
			<b>Arrived in *England</b>	<b>22-7-18</b>	
<b>30.7.18.</b>	<b>6th Res Bn.</b>	<b>T.O.S. from Canada.</b>	<b>Sturford.</b>	<b>22.7.18.</b>	<b>Pt II D/O. 178.</b>
<b>23.6.19.</b>	<b>"</b>	<b>S.O.S to Canada</b>	<b>"</b>	<b>23.6.19.</b>	<b>Do. 141 S.L. 71 .</b>
		<b>71. 9. 56</b>		<b>23.6.19</b>	



MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Mercier Christian name Fortunat  
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. P.C. 996772  
 3. Consecutive number on schedule of men reporting for service (if he appears on it) Nil  
 4. Address (including street and number, if any) 158 Guigew St. Ottawa, ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 11 th day of May, 1918. 1917, by the undersigned medical board sitting at Ottawa, ont.

5. Age as stated 21 Years 0 Months. 6. Apparent age 21 Years 0 Months  
 7. Height 5 Feet 5 1/2 Inches. 8. Weight 125 Pounds.  
 9. Chest measurement { Minimum 32 Ins. 10. Complexion Sallow { Eyes Brown  
 { Maximum 34 Ins. { Hair Brown  
 11. Physical development Fair { Good Fair Poor 12. Smallpox marks None  
 13. Number of vaccination marks { Right arm 0 14. When vaccinated last 1918  
 { Left arm 1  
 15. Distinctive marks and marks indicating congenital peculiarities or previous disease Nil

16. Slight defects but not sufficient to cause rejection Nil  
 The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis  
 (Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category All  
 17. (a) Vision R. D/30 L. D/30  
 (b) Hearing R. Normal

*M. Shillington* President.  
*Paul Law* Member.

Signature of Man Fortunat Mercier (Egd - Per D.W.)

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>25-5-18</u>		<u>Curtis</u> M.O.	<u>25-5-18</u>		<u>Curtis</u> M.O.
			<u>26-18</u>		<u>Curtis</u> M.O.
			<u>27-6-18</u>		<u>Curtis</u> M.O.

Joined 14 day of May 1918 at OTTAWA

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>2<sup>d</sup> Depot Bn. E.O.R.</u>	<u>3322519</u>		<u>14-5-18</u>
Transferred to.....	<u>1<sup>st</sup> Rusk</u>	<u>3322819</u>		<u>30-7-18</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

N. B.—This sheet is 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.



\* Strike out whichever is applicable.

ASSIGNED PAY.	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.	NAME:-	MERCIER Fortunate
EFFECTIVE DATE:-	1-7-18	EFFECTIVE DATE:-		NUMBER:-	3322519
AMOUNT:-	15 <sup>00</sup>	AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT	
NAME, ADDRESS, RELATIONSHIP & AUTHORITY				AUTHORITY	DATE EFFECTIVE
Mrs Alphonsine Mercier (Mother) 158 Liguies St., Ottawa, Ont.				P.O. 178	22-7-18
<small>WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.</small>					
Stopped Eff. 1-6-19.				No 46 Draft. UNIT AND TRANSFERS ORIGINAL UNIT:- 6TH. CAN. RES. BATTN. DATE ACCOUNT FIRST OPENED:- 1-7-18	
				AUTHORITY	DATE EFFECTIVE
				DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
					6th Res

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS							
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
19/5/19	1533	Seaford. Lt.	<del>19.47</del>				
26/8/19	1865	Lt. 3.	<del>14.60</del>				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: *Trans. to Canada 1/6/19. N.R.B. 9873. 30/5/19. Seaford to Seaford M.D. 3.*

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
1918	JUNE 30. CR BAL. CANADA								19.20		
July & Aug. P.P.		68.20		C.A.P. July & Aug				30			
				AR 6 4/5/18	5-						
				AR 904. 26/7/18. Frencham	4.87						
				AR 3281. 16/8/18. 6 Res.	4.87						
				" 3791. 29/8/18	42.66				32.93		
Sept		68.20		C.A.P.	32.93			30			
		33-		AR 4605. 28/9/18 6 Res	9.73			15	41.20		
		32		" 11.20	9.73			15			
Oct		34.10		C.A.P.				15			
				AR 144. 10/10/18 6th Res	7.30			15	53-		
		34.10		C.A.P.	7.30			15			
Nov		33-		C.A.P.				15			
Dec		34.10		AR 600. 28/11/18	9.73			15			
Jan		34.10		✓ 6530 11/12/18	4.867			15			
				✓ 6974 15/12/18	14.60				36.20		
		101.20			73.00			45			
	Feb & Mar	64.90		AR 7612 9/1/19 6 Res	7.30						
				✓ 8323 24/1/19	9.73						
				✓ 8605 13/2/19	7.30						
				C.A.P. Feb & Mar				30			
				AR 8744 24/2/19 6 Res	9.73						
				✓ 9432 14/3/19 6 Res	7.30						
				✓ 9692 20/3/19	7.30						
		64.90			48.66			30	73.40		

Forward

NUMBER 3322519

RANK

*Lte.*

NAME

MERCIER

7.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
<i>Apr</i>	<i>Forward</i>								<i>2244</i>		
<i>May</i>	<i>P.P. Army</i>	<i>6710</i>		<i>379 11/4/19. 6 Res. 730</i>							
				<i>Cap.</i>					<i>15-</i>		
				<i>May</i>					<i>15-</i>		
				<i>817. 24/4/19. 6 Res 913</i>							
				<i>1328 12/5/19. ✓ 1703 730</i>							
				<i>1533 19/5/19 - 1947</i>							
		<i>6710</i>			<i>4380</i>				<i>30 - 1574</i>		
				<i>1865 26/5/19 ✓ 1460</i>							
				<i>5645 16/6/19 ✓ 973</i>							
		<i>0</i>			<i>2433</i>				<i>0 859</i>		

*22.44 2433*  
*6710 30*  
*89.54 3207*  
*8840 9840*  
*1.14*  
*708mit*  
*30-5-19.*

*As Cap 24/5/19. 1671. 6 Res.*



War Service Badge Class B.

SHORT FORM.

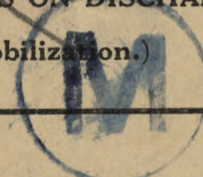
PROCEEDINGS ON DISCHARGE.

(Demobilization.)

War Service Badge Class B.

Issued

Occupation, 7.



20  
V

1. No. 3322519

2. Rank. Pte.

3. Name. Mercier Fortunat

4. Unit. 6th Can Res. Bn.

5. Date of Discharge 3.7.19 Place Hawke

6. Reason for Discharge Demobilization

7. Authority RO 1420 1894

8. Proposed Residence after Discharge 158 Guigness St.  
Ottawa  
Ont.

CERTIFICATE TO BE SIGNED BY SOLDIER.

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

M. F. W.?

39

Fortunat Mercier

Signature of Soldier.

CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

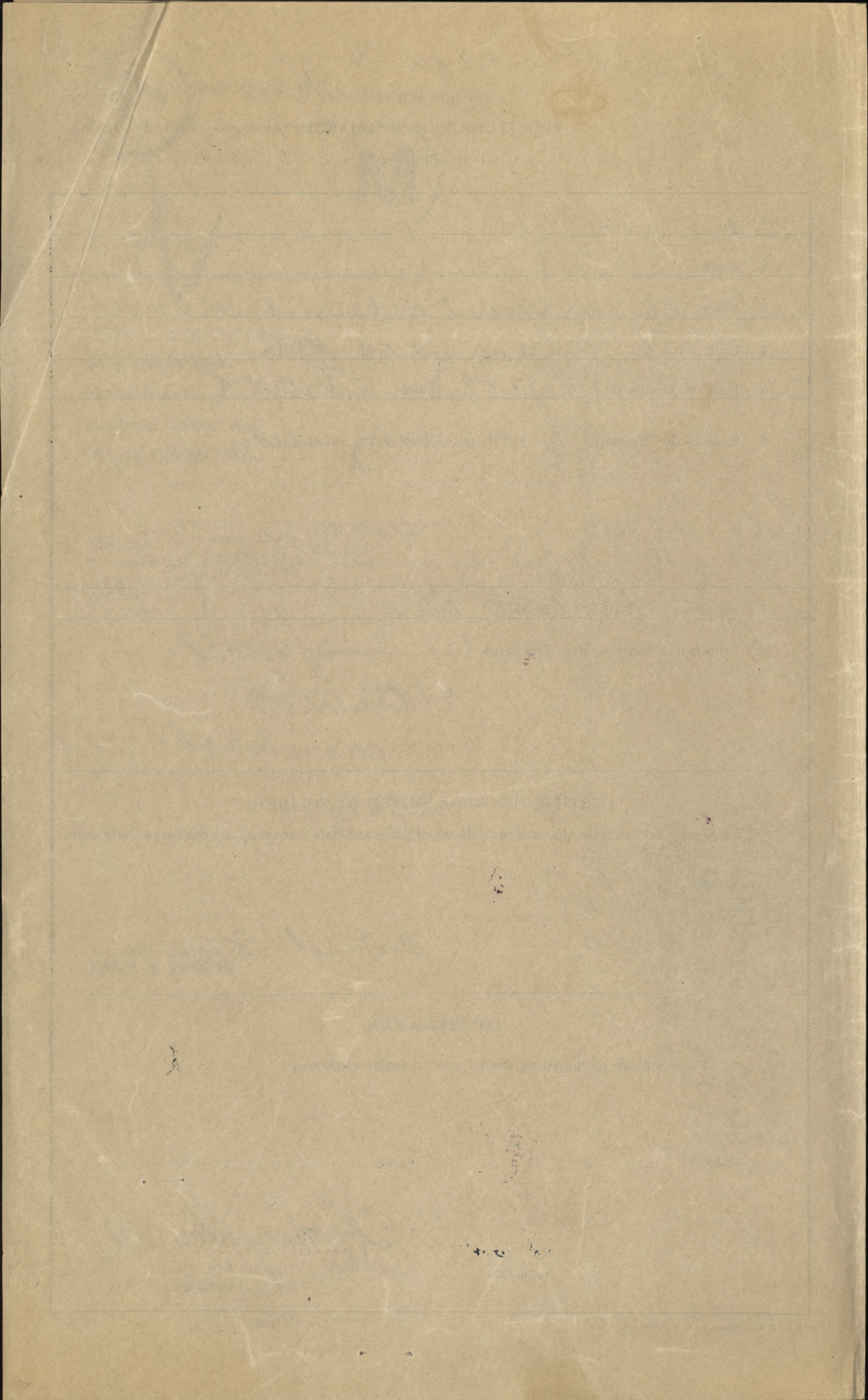
Date



Signature

W. Houghton  
for O. C. Dispersal Area Station G.  
(O. C. Discharging Unit.)

EMBARKEE L VEIPOOL SS-  
BE GIC 23.6.19. DISEMBARKED  
HULL EX 1.7.19  
FOR CAPT & ADT



LIST OF DISCHARGE DOCUMENTS

No.	Name	Rank	Company	Regiment	Discharge Date	Remarks
1	John Smith	Private	1st Regt	1st Div	1864	Discharged for disability
2	James Brown	Sergeant	2nd Regt	2nd Div	1864	Discharged for disability
3	William Jones	Private	3rd Regt	3rd Div	1864	Discharged for disability
4	Robert Taylor	Private	4th Regt	4th Div	1864	Discharged for disability
5	Thomas White	Private	5th Regt	5th Div	1864	Discharged for disability
6	George Black	Private	6th Regt	6th Div	1864	Discharged for disability
7	Charles Green	Private	7th Regt	7th Div	1864	Discharged for disability
8	Henry Lee	Private	8th Regt	8th Div	1864	Discharged for disability
9	John King	Private	9th Regt	9th Div	1864	Discharged for disability
10	William Hall	Private	10th Regt	10th Div	1864	Discharged for disability

11

**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 Statement Q.M.G. Form (D.O.S. 2), and Clothing)
12. Last Pay Certificate (P. 851),
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595),
15. Sanitary Documents.

Group..... **All**

Checked by No. **27**.....  
*[Signature]*

Date..... **JUN 1919**.....

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

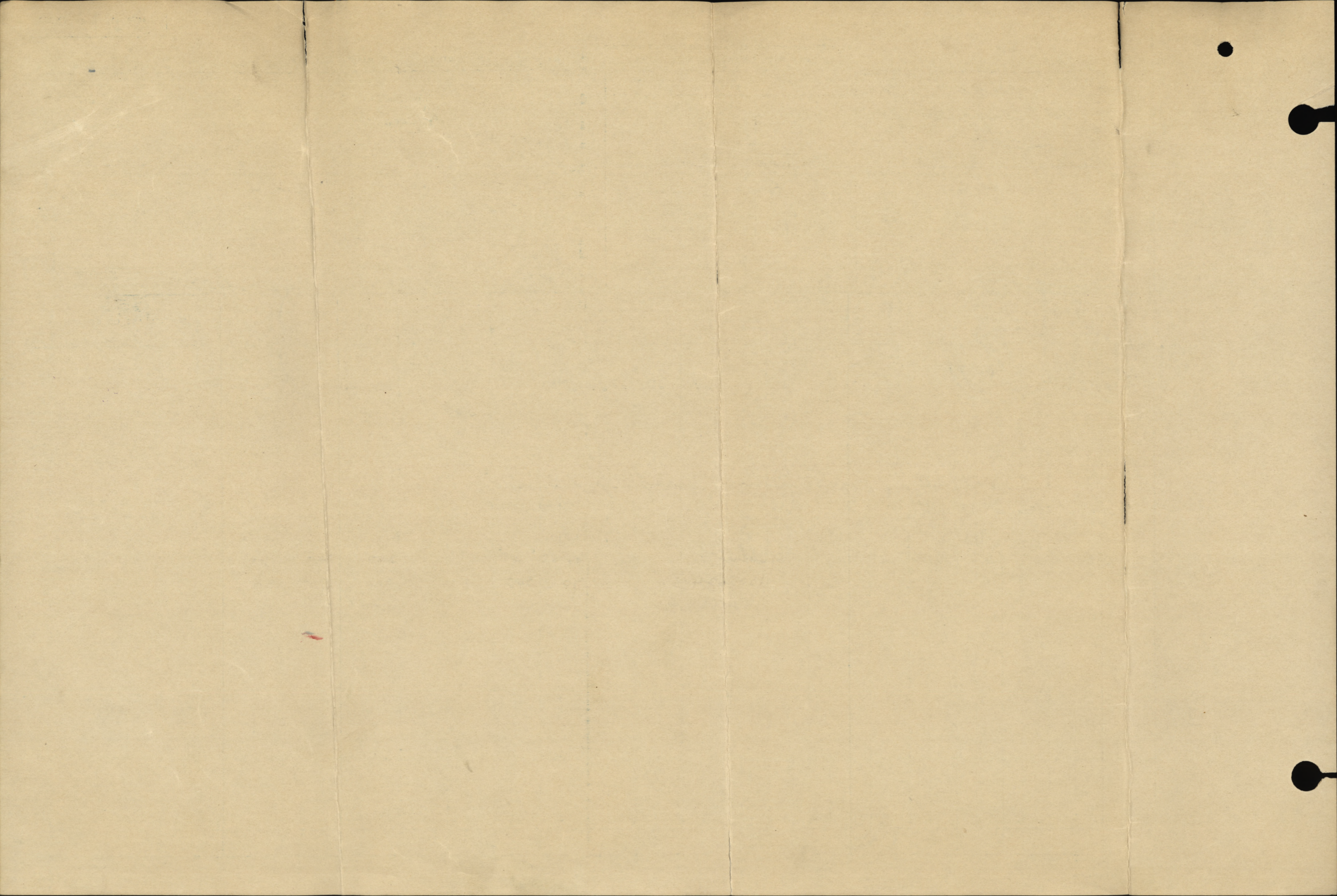
M. OR S.

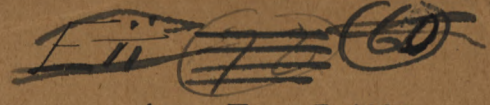
REGT. NO. *3322519* RANK *Pte*

NAME (IN FULL) *Mercier, Fortunat*

NEXT OF KIN <i>Mrs F. Mercier (Mother)</i>	RELATIONSHIP <i>(Mother)</i>	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT <i>2nd J. Bn.</i>	IF IN P.F. WHAT UNIT?
ADDRESS <i>158 Gunguis St. Ottawa Ont.</i>					PLACE OF ATTESTATION	TRANSFERRED TO
IS SEPARATION ALLOWANCE PAID? <i>Yes</i>	DATE EFFECTIVE <i>1-8-19</i>	<i>Fortunat Mercier</i>			DATE OF ATTESTATION <i>14-5-1918</i>	TRANSFERRED TO
TO WHOM PAID <i>as above</i>	RELATIONSHIP <i>(Mother)</i>	<i>Bank of Ottawa Ottawa Ontario</i>			ASSIGNED PAY \$ <i>15.00</i>	DATE EFFECTIVE <i>1-8-19</i>
ADDRESS					PAYABLE TO <i>Mrs F. Mercier</i>	RELATIONSHIP   ANY CHANGE IN ASSIGNEE OR ADDRESS
					ADDRESS <i>158 Gunguis St. Ottawa, Ont.</i>	
					STOP PAYMENT FORM RENDERED, DATE	EFFECTIVE
					DISCHARGED <i>Ottawa</i>	PLACE DATE REASON AUTHORITY <i>5-7-19 Demot</i>

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT		CREDITS		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	S	C.	S	C.	S	C.	S	C.	S	C.	
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.											
<i>1-6-19</i>			<i>3500</i>	<i>14</i>	<i>14</i>				<i>943</i>														<i>Returned Belgie</i>
<i>8-7-19</i>	<i>38</i>	<i>1.15</i>	<i>41.80</i>	<i>7000</i>	<i>146.80</i>				<i>487</i>	<i>500</i>	<i>9834</i>	<i>3000</i>							<i>147.94</i>				<i>Bul per Eng I. P.C.</i>
																		<i>550</i>		<i>550</i>	<i>550</i>		<i>Clothing Alice and 1st Payment W. S. G.</i>
																							<i>Pay to Estimate date of discharge</i>
																							<i>Advances in England</i>
																							<i>Rent Money Train Money</i>
																							<i>Overpaid 5 days on discharge</i>
																							<i>M. F. W. 2595 Rec</i>
																							<i>1st Pay W. S. G.</i>
																							<i>17-7-19 ch 2760-15</i>
																							<i>0 pay 27 dep S. G.</i>
																							<i>Debit Return</i>





MEDICAL CASE SHEET.\*

D-44  
F. [Signature]

No. in Admission and Discharge Book. 5209 Year 16/10/18.	Regimental No. 3322519 Rank PTE Surname MERCIER Christian Name F.
Station and Date. 17/10/18	Unit. 6 <sup>th</sup> Can. Res. Age. 21 Service. 5/12 Disease Influenza Urinalysis - Acids (cloudy) acid (sl. 1012.) Neg's Complaints:- Headache, ear ache, chilly and cough Duration:- 2 days. Past Hist.:- Small Pox diphtheria when a child No other illnesses. Pres. Ill.:- Commenced with chills and headache followed by fever. P.S. - Face flushed. T.P.R. 101 <sup>6</sup> -104-26 Tongue coated. Heart:- normal. Lungs:- Rhonchi heard throughout both lungs. Normal resonance no blowing breathing heard. Abd.:- negative Treatment:- Bed, Milk Diet and Laxative.
23-10-18	T.P.R. Normal Patient Feels well.
24-10-18	Still normal. Chest clear.

DISCHARGED 5209  
27 NOV 1918

A.W. Jeffrey, Capt,  
C.M.C.  
A.W. Jeffrey, Capt,  
C.M.C.

\* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.

Station  
and Date.

26/10/18

Diminished resonance and breath sounds  
more distant in lft base than at right.  
No rales or rhonchi in any position

6.11.18

Lung Cond improving.  
Oth Parulect Oth. Medica  
R. ear, old tubercle showing  
exam. by Capt Scler =  
Eardrops = to be used.

9.11.18

Transfer to Church Army Hut  
to attend Capt Scler's Clinic

10/11/18

To Remond Hospital - for examination of  
ears by Capt Scler  
J. M. Hedman

15.11.18

Byde thro. Convolv.  
Catheter  
capu

21-11-18

21 NOV 1918

Condition now Normal fit for Discharge.  
Discharge Category A  
H. E. Cunningham  
May. Coml



Date of Enlistment 14-5-18

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

# M

24014

1st July 1918

14-5-18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

25	30 1918		
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Pl. 2753  
M.P.O. 39354

RATE OF ASSIGNMENT

15 <sup>00</sup>			
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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

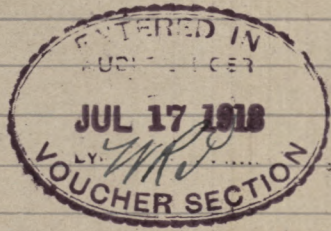
92 11 M 4  
M.P.

No. \_\_\_\_\_  
 Rank \_\_\_\_\_ Promoted \_\_\_\_\_ Reverted \_\_\_\_\_ Discharge \_\_\_\_\_  
 Soldier's Name \_\_\_\_\_  
 Battalion 2nd Dept - Bath E. O. R. 46 Draft-  
 Beneficiary Mrs Alphonse Mercier  
 Relationship \_\_\_\_\_  
 Address \_\_\_\_\_

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Change of Address \_\_\_\_\_  
 1 MRS. F. MERCIER, M24014  
 158 GINGUES ST.,  
 2 OTTAWA, ONT. 15 15.00  
 % 3322519 PTE FORTUNET MERCIER  
 3 FIFTEEN DOLLARS  
 4 \_\_\_\_\_

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1918					12694-7-4
July	A 26922		15	15	✓
July		64		64	✓
July	P 36092	25	15	40	✓
Sept	S 47344	25	15	40	✓
Oct.	X 51612	25	15	40	✓
Nov.	J. 58065	25	15	40	✓
Dec.	P. 66752	45	15	60	✓
Jan	X 73935	30	15	45	✓
Feb	W 72933	30	15	45	✓
Mar	X 90624	30	15	45	✓
Apr	P 812	30	15	45	✓
May	9 5820	30	15	45	✓
June	H 9822	30	15	45	✓
July	F 17554	30	15	45	✓
		419	195	614	

A/c Closed 31<sup>19</sup>  
 Ret'd by Belgis 7<sup>19</sup>  
 Date M.F.W. 187 7<sup>19</sup>  
 Clerk mg [unclear] 3  
 J. A. Morel P 104145 D 7<sup>19</sup> mgd.



M. F. W. 128.  
 400M-6-17-1772-39-1141  
 L. L. 22320-M. & D. 7993.

M.P.O. no 5842 att'nd 19<sup>17</sup> H  
 AUTHORITY } G. R. M. D. 3 B. 8  
 FOR } J. A. Morel  
 NEW ACC'T. } 17-7-18

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Rank

Promoted

Reverted

Discharge

Name

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
------	------------	------------	------------	-------	---------

M. F. W. 128.  
40m, 6-7-47-2-39-1141  
L. L. 22230-M. & D. 1991.

Regt. No., Rank & Name *39226-14 Pte Mercer* Ward *7172*

*(38)*

Diagnosis: *Influenza*

To: Officer i/c Laboratory:-

Please carry out an examination of the accompanying specimen of urine, with special regard to: *Routine*

Date 1918.

*May: McPhedran*  
.....  
Officer i/c Lab.

LABORATORY REPORT

Color: *Amber (cloudy)*

Reaction: *Acid.*

S. G.: *1018.*

Sugar: *neg.*

Albumen: *neg.*

Microscopic: ..

Special:

Date of Examination: *17/10/18* 1918.



*J. D. Moore*  
.....  
Capt. C.I.M.C.  
for Officer i/c Laboratory.

*14.*

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