

ATTESTATION PAPER.

No. *127*
Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS).

- 1. What is your surname? **Webb**
- 1a. What are your Christian names? **John**
- 1b. What is your present address? **Annidale Queens Co. N. B.**
- 2. In what Town, Township or Parish, and in what Country were you born? **London Eng.**
- 3. What is the name of your next-of-kin? **Robert Webb**
- 4. What is the address of your next-of-kin? **Annidale, N. B. (Queens County)**
- 4a. What is the relationship of your next-of-kin? **Father**
- 5. What is the date of your birth? **August 20 1897**
- 6. What is your Trade or Calling? **Farmer**
- 7. Are you married? **No**
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? *J. Webb* **Yes**
- 9. Do you now belong to the Active Militia? **No**
- 10. Have you ever served in any Military Force? **No**
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**

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, **John Webb**, do solemnly declare that the above are answers made by me to the above questions and that they 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 **November 10th** 191**5**. *John Webb* (Signature of Recruit)
Wm. G. Cahalan (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, **John Webb**, 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 **November 10th** 191**5**. *John Webb* (Signature of Recruit)
Wm. G. Cahalan (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 **Sussex N. B.** this **10th** day of **November** 191**5**.
R. MacLachlan (Signature of Justice)

Description of John Webb on Enlistment.

Apparent Age **18** 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. **6½** ins.

Chest measurement. { Girth when fully expanded **36** ins.
 Range of expansion **3** ins.

Complexion **Fair**

Eyes **Blue**

Hair **Light Brown**

Religious denominations { Church of England **Yes**
 Presbyterian
 Methodist
 Baptist or Congregationalist
 Roman Catholic
 Jewish
 Other Denominations
 (Denomination to be stated)

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 declares that he is not subject to fits of any description.

I consider him* **fit** for the **Canadian Over-Seas Expeditionary Force.**

Date **November 10th** 191**5**.

Place **Sussex N. B.**

J. H. Bennett

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.

John Webb 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.

H. A. Boyce Major (Signature of Officer)

COMMDG. 104th O. S. BATTN. C. E. F.

Date **November 10th** 191**5**.

TA

1917-31-7-10

DISCHARGE DOCUMENTS

R. C. No.

H. Q. No.

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 2
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet..... 1
- Compulsory Stoppages.....
- Casualty Forms..... 1
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet..... 2
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet..... 1
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

Name Webb John

Regt. No 817194 Rank Pte

Corps 140th O/S Bn CEF

Killed in Action 15-8-17



Cards - 1. Part II

1. Casualty



11192



Box 483903

42-14

4-14

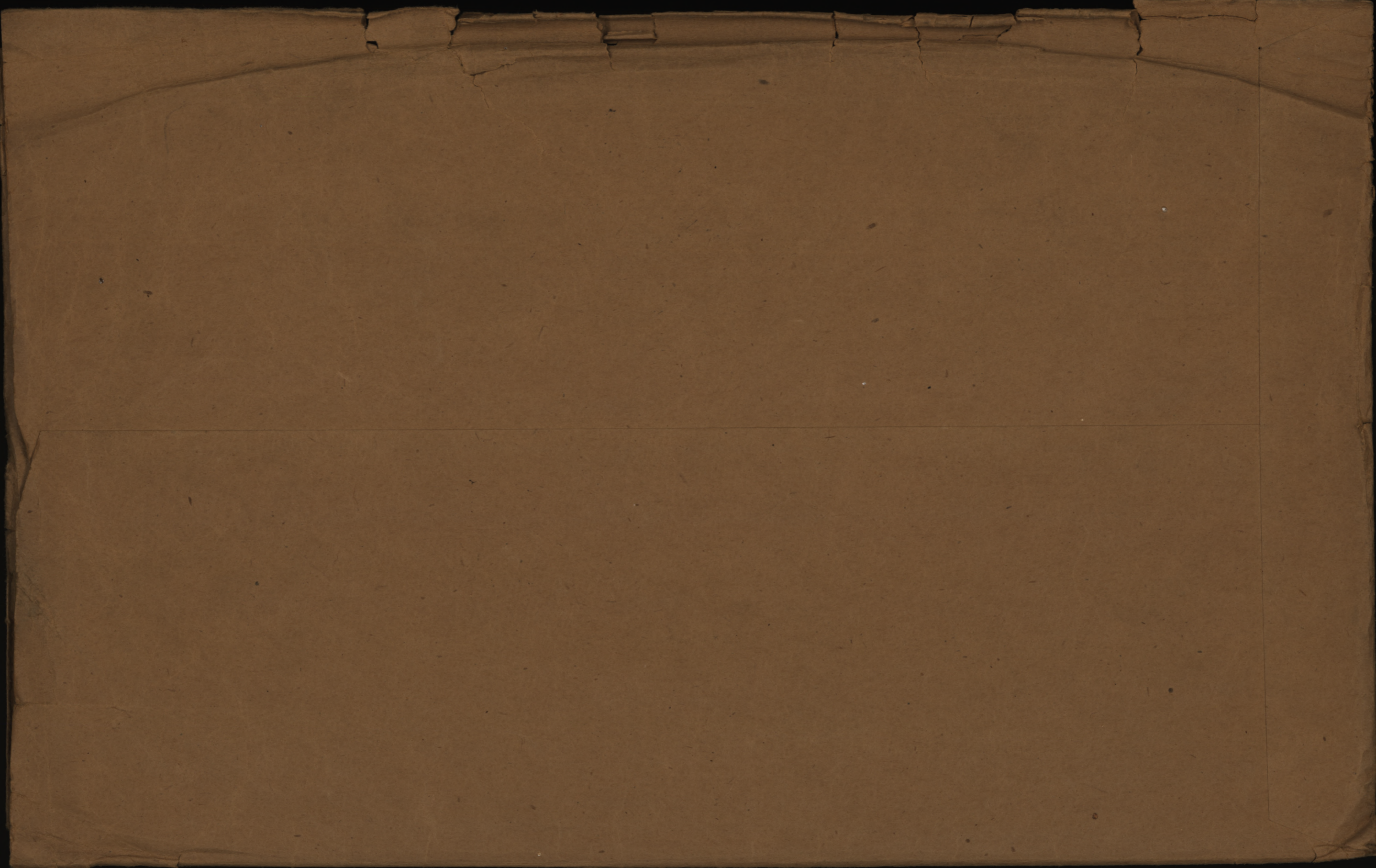
6-14

MX
11-14
2-14

a7 B722-1

form of bill -

copy with



Surname **WEBB** Christian Name or Names **J.** Reg. No. **817194**
Rank **Pte** Unit **26th Bn.** Co. Troop Batty.
Hospital Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

RFB? KILLED IN ACTION 15-8-17. ♂

DISPOSITION

Date

CL. 25-8-17 A599.

REMARKS

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

NAME

Webb

John

REG'TL No.

817194

H. Q. FILE No. 649.

RANK AND CORPS

Pvt.

26th Bn (form 140th)FOLLOWS
No. (Bn)

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

ms 946

25-8-17

C. Killed in action Aug. 15th 1917. ✓A.S. 13³ 2090a

Rowen 22-8-17

(noted 13-10-17)

LIST NO.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A599 Reported from Base 15-8-17 Killed in action

No. 817194. RANK *Plt.*NAME *Webb John.*

T. O. S.

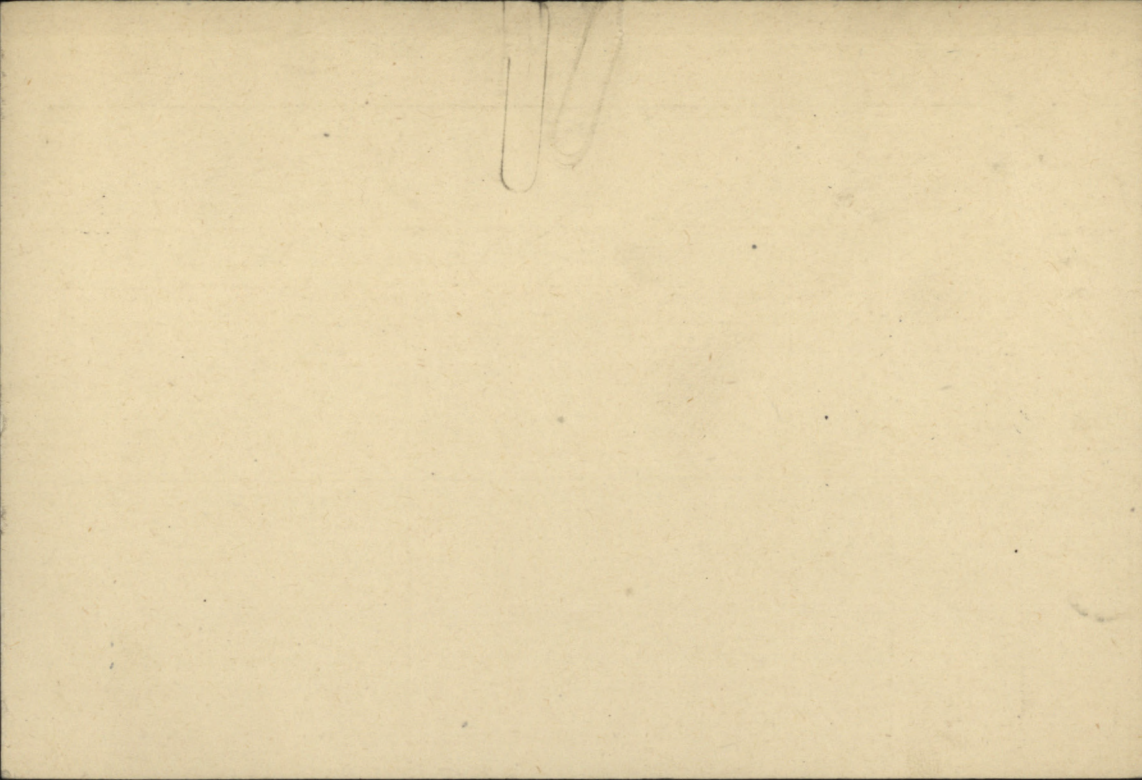
UNIT

*140th Battalion I.R.S.**Drawn for 10 of the Ser. 6-3-16.
(1804-9-2-16)*M. D. *6*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>Feb. 6.</i>	<i>Feb. 29.</i>	<i>✓</i>	<i>From S/cpl. 10-3-16.</i>	<i>Do 30-10-3-16.</i>
<i>Mar.</i>		<i>✓</i>		
<i>Apr.</i>		<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July</i>		<i>✓</i>		
<i>Aug.</i>		<i>✓</i>		
<i>Sept.</i>		<i>✓</i>		
<i>Oct.</i>		<i>✓</i>	<i>Rev. to Rks 26/10/16</i>	<i>Do 23/10/27/10/16</i>

UNIT SAILED

SEP 25 1916



RS

Number

817194

Rank

R/Cpl

Surname

WEBB

Christian Name

John

Units

26th Bn Can Inf

Theatre of War

France

Date of Service

29-10-16

II

Remarks

mother

Latest Address

Mrs. Lottie Webb

Amudale Querus Co.

Roll No.

B Page 12722

U.B.

DESP. MAY 26 1922

REQN. NO.

4617575

649-W-10722

FEB 12 1921
Scroll Desp. 2-19438 Reqn. No

JAN 20
Plaque Desp. 2-19438 Reqn. No 2196

WEBB, John (Pte) No. 817194

140th Bn.

Medals and Decorations (Mother) Mrs. Lottie Webb,
Annidale Queens Co.,
N.B.

Plaques and Scroll (Father) Robert Webb,
address as above.

(Serial no. 779342.)

Memorial Cross. (Mother) Mrs. Lottie Webb,
address as above.

not elig. for 14-15 Star.

elig. for U. M.

" " B. W. M.

[Handwritten flourish]

35660

[Large handwritten 'M' mark]

[Handwritten 'D' mark]

M

C.34868

DEC 6 1920

856

X

No. 181119 RANK

PTE

NAME

Webb John

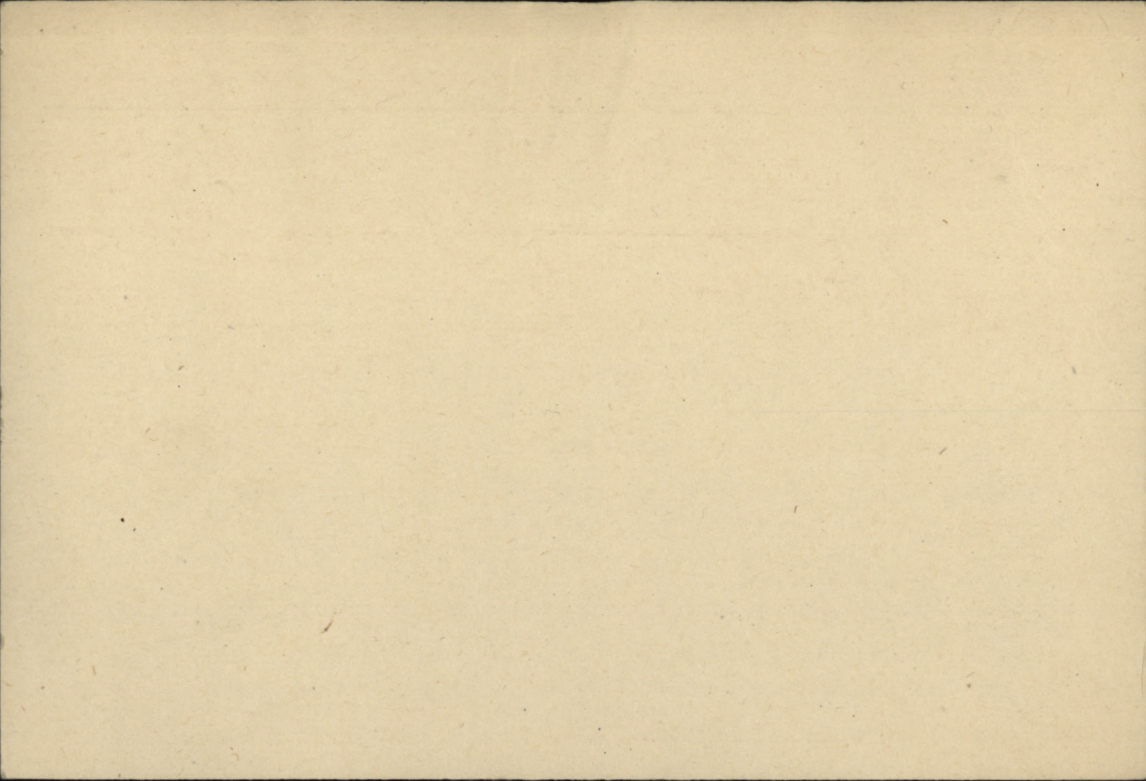
T. O. S. 30-10-15 UNIT

104th Battalion. C. E. F.

(L. O. 27.11-11-15)

M. D. G.

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1915	1915			
Oct 30	Nov 30	✓		
Dec		✓		
1917		✓		
Jan		✓		
Feb 4	Feb 5	n.	trans to 140 th Bn. 6. 2-16	L. O. 30. 5-2-16.



J.P.

Rank

Name

WEBB, John

Reg'l No.

817194.

Unit 140th Bn.

If in perm. Corps, }
What Unit?

Married or Single Single.

Place and Date of Enlistment

Sussex.N.B. 10th Nov.1915.

Place of Birth London.England.

Name and Address, Next-of-Kin

Robert Webb.

Annidale Queens County.N.B.Canada.

Relationship Father.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

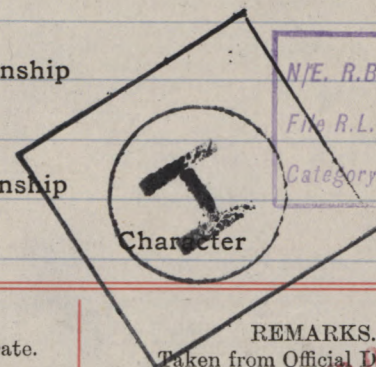
Payable to

Relationship

Discharge, Date and Place

Reason

H. W. & V., Ltd.-7165-16.



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.				
	Arr. in ENGLAND	S.S.	CORSICAN	6-10-16.	<i>Wms</i>
25.10.16	140th	To be Lt/Opl	Caesars Camp	6.10.16	D.O. 229
27.10.16	"	Revert to ranks	" "	26.10.16	" 231
27.10.16	140Bn	T'fd to 26th. Res Bn	<i>Caesars Camp</i> E-r Diggate	27-10-16	D, O. 231
11.11.16	26th Bn	T.O.S from 140th Bn	Field	29-10-16	Pt II O 68
25.8.17	✓	Killed in action	4Pte ✓	15.8.17	C Ra 599
22.8.17	✓	✓ ✓ ✓	✓ ✓	15.8.17	Pt II O 83

AFIB. 103 CHECKED
6 NOV. 1916

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

M. F. W. 54. (A. F. B. 103.

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps. *140th P. S. Bn. C.S.A.*

Regimental No. *817194^c* Rank *Plt.* Name *John Webb*
C. E. F.

Enlisted (a) *Nov. 10/15* Terms of Service (a) *duration of war* Service reckons from (a) *Nov. 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) *Good Corps Grade*

CERTIFIED CORRECT.
7 NOV. 1916
C.A.F. RECORDS, LONDON

27¹⁰/₁₆
29/10/16
22. 11. 16
25. 11. 16
10/3/17

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
From whom received				
	<i>Embarked</i>	<i>Halifax</i>	<i>25/9/16</i>	
	<i>Disembarked</i>	<i>Liverpool</i>	<i>6/10/16</i>	<i>S.S. Corsican</i>
	<i>Transferred to 26th Bn. Overseas.</i>	<i>Casson Camp</i>	<i>27¹⁰/₁₆</i>	<i>Part II 231. 27¹⁰/₁₆</i>
		<i>Chorncliffe</i>		<i>Adjutant 140th Bn. C.S.A.</i>
	<i>Taken on strength</i>	<i>26th Bn</i>	<i>29/10/16</i>	<i>N.R. P.S.O. 68 11/11/16.</i>
	<i>Left for 2nd Ent Bn</i>		<i>22. 11. 16</i>	<i>N.R.</i>
	<i>Arrived</i>		<i>25. 11. 16</i>	<i>N.R.</i>
	<i>Unit Files</i>		<i>5³/₁₇</i>	<i>B.2.13.</i>

(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.

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				
17 8/17	26 Bn	Killed in Action Field		15 8/17	W. 16/18503 Doc. 343 Pt. 2. Ord. 8 th 17 Major for Lt.-Col. A.A.G. Canadian Section G.H.Q. 3rd Echelon

ORIGINAL.

ORIGINAL.

MEDICAL HISTORY SHEET.

Surname WEBB. Christian Name JOHN.

Examined { on 10th day of Nov. 1915.
 { at Sussex, N.B.

Approved by (Sgt) J. U. Burnett.
 Rank _____ M.O.

Birthplace { City or Town London,
 { County W England,

Apparent age 18 years.

Trade or occupation Farmer.

Height 5 Feet 6 Inches.

Weight _____ Lbs.

Chest measurement { Minimum 36 inches.
 { Maximum expansion _____ inches.

Physical development _____

Small-Pox Marks _____

Vaccination Marks { Arm Right Left
 { Number _____

When Vaccinated last _____

(a) Marks indicating congenital peculiarities or previous disease _____

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

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

Date.	Result.	VACCINATIONS.
<u>16⁶/₁₆</u>		<u>D.C.M.</u>
		M.O.
		M.O.
		M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>9⁵/₁₆</u>	<u>T.V.</u> <u>+</u>	<u>D.C.M.</u>
<u>20⁸/₁₆</u>	<u>I.H.B.</u> <u>+</u>	<u>D.C.M. (1, 2, 3, 4, 5, 6)</u>
<u>24⁸/₁₆</u>	<u>+</u>	<u>D.C.M. (1, 2, 3, 4, 5, 6)</u>
		M.O.
		M.O.
		M.O.

Enlisted on 30th day of October 1915 at Sussex NB

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment <u>Jh</u>	<u>104th. Batt.</u>	<u>181119.</u>		<u>30-10-15</u>
Transferred to	<u>140th Patt., C.F.F.</u>	<u>817,194.</u>		<u>6-2-16.</u>
	<u>28th Bn</u>			

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.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2. *Mrs Lottie Webb*
(Assignee)

Name of Soldier *Webb J.*

L. L. Job 5470—Req. 6888.

PAYMENTS.

817194

140 Battrn.

L. L. Job

1700 **OCT 1. 1916** Remarks

Month.	Year.	Cheque No.	Amst.	Remarks
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>322264</i>	<i>17</i>	
Nov.		<i>30415</i>	<i>17</i>	
Dec.		<i>734806</i>	<i>17</i>	
Jan.	<i>1917</i>	<i>W 37239</i>	<i>17</i>	
Feb.		<i>747243</i>	<i>17</i>	
March		<i>153782</i>	<i>17</i>	
April		<i>95444</i>	<i>17</i>	<i>17</i> <i>(W)</i>
May		<i>912092</i>	<i>17</i>	
June		<i>21941</i>	<i>17</i>	
July		<i>25862</i>	<i>17</i>	<i>B.</i>
Aug.		<i>033473</i>	<i>17</i>	<i>18700 let 4 31/8/17 JA Gelling 28/8/17</i>
Sept.				<i>eye closed do do do</i>
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

AM

note

18

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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.				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

To Whom *Mrs Lottie Webb*

By Whom Assigned *Webb John*

Address *Annisdale
Lourens bo. N.B.*

Regtl. No. *817194*

Rank *Lieut.*

Corps *140 o/s Bathn. C.E.F*

Rate *17⁰⁰*

OCT 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



Pensions Notified Date *28-8-17*
 Killed in Action }
 Died of Wounds } Date *15-8-17*
 Missing }
 C. L. *(38) 26/8/17* Clerk *J A Gelling*
 Date Noted *28-8-1917*

11 22 3

11 22 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

No 817194

Pte Webb John

19383

140th Bn.

61708

20

Perforated sheet for Will from Pay Book of Reg.

No... 8.17.1916
Name... John Webb
Unit... 26th & 140th Bn

Military Will

In event of my death I leave all my property to my mother

Mrs. L Webb
Amidale
Queens Co
N.Y.

Signature... John Webb
Rank and Regt... Pte 26th & 140th Bn
Date... Oct 24/16

Will page abstracted by

J. Harper

Paymaster 140th O. S. Batt. C. E. F.

ESTATES BRANCH,

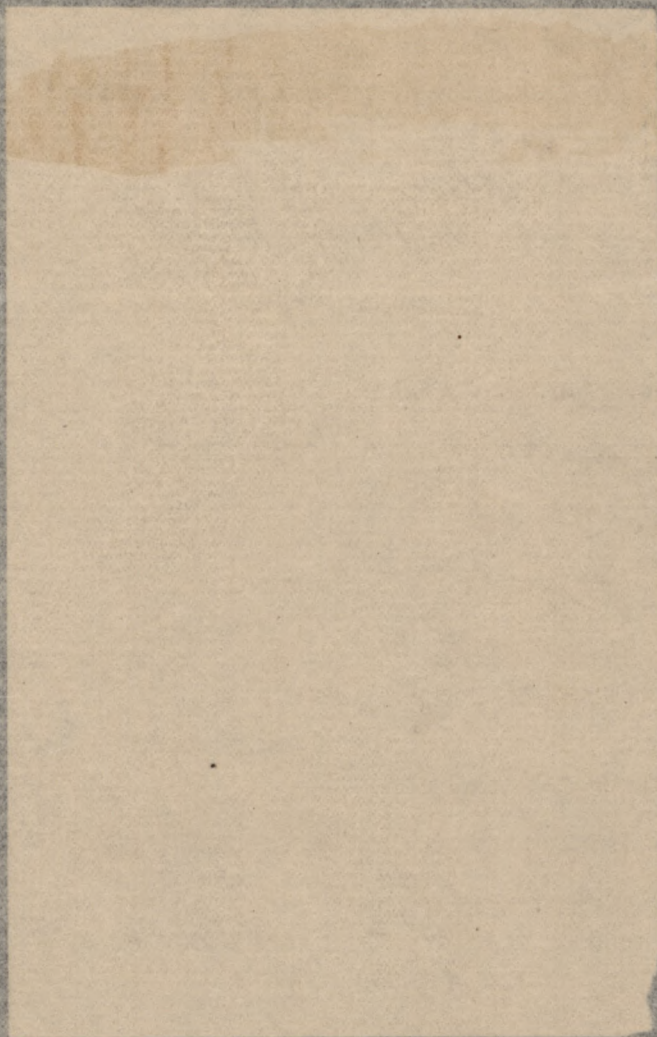
DEC 13 1917

MILITIA DEPT.

OCT 27 1916

Handwritten text at the top of the page, possibly a name or address, written in cursive.

30739



Handwritten text in the middle section, appearing to be a signature or a name, written in cursive.

ESTATES BRANCH

1900

UNITED STATES

RECEIVED - 1900

58

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Oct 1, 1916

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>14.</i>			
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H 211 W 32 JOR

PARTICULARS OF SEPARATION ALLOWANCE

No. *817194*
 Rank *L. Cpl* Promoted Reverted Discharge
 Soldier's Name *John Webb*
 Battalion *140 O/S Battn*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *M^{rs} Lottie Webb*
 Address *Annisdale Queens Co N. B*
 Change of Address
 1
 2
 3
 4

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

<i>Dec. 31</i>	<i>—</i>		<i>187⁰⁰</i>	<i>187⁰⁹</i>	
----------------	----------	--	-------------------------	-------------------------	--

Pensions Notified Date	<i>28-8-17</i>
Killed in Action	
Died of Wounds	Date <i>15-8-17</i>
Missing	
C. L. (S)	<i>26-8-17</i> Clerk
Date Noted	<i>28-8-1917</i>

AP. acct closed 31-8-17. Last cheque written Aug-17.

C

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____

Rank _____ Promoted _____ Reverted _____ Discharge _____

Soldier's Name _____

Battalion _____

Beneficiary _____

Relationship _____

Address _____

Name _____

Address _____

Change of Address _____

1 _____

2 _____

3 _____

4 _____

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

M. F. W. 128
 4009-6-17-1772-89-1141
 L. L. 22320-M. & D. 7883.