

Recd at M
26-8-16

207TH BN

Duplicate

ATTESTATION PAPER.

No. 246266

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?
- 1a. What are your Christian names?
- 1b. What is your present address?
2. In what Town, Township or Parish, and in what Country were you born?
3. What is the name of your next-of kin?
4. What is the address of your next-of-kin?
- 4a. What is the relationship of your next-of-kin?
5. What is the date of your birth?
6. What is your Trade or Calling?
7. Are you married?
8. Are you willing to be vaccinated or re-vaccinated and inoculated?
9. Do you now belong to the Active Militia?
10. Have you ever served in any Military Force?
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

Gagnon
Joseph
Golden Lake Ont
Calabogie Ont
Mrs. Annie Gagnon
Golden Lake Ont.
Wife
7th April 1890
Labourer
Yes
Yes
Yes
3 Mrs. Lanark & Refuse
Yes
Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Joseph Gagnon, 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 May 12th 1916
Joseph Gagnon (Signature of Recruit)
J. Owens (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Joseph Gagnon, 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 May 12th 1916
Joseph Gagnon (Signature of Recruit)
J. Owens (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 Ottawa this 12th day of May 1916
C. Birtek (Signature of Justice)

Description of Joseph Gagnon on Enlistment.

Apparent Age... 26 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. 7 1/2 ins.

Chest measurement { Girth when fully expanded..... 34 1/2 ins.
 Range of expansion..... 4 1/2 ins.

Complexion..... Med

Eyes..... Brown

Hair..... Brown

Nil

Religious denominations { Church of England.....
 Presbyterian.....
 Methodist.....
 Baptist or Congregationalist.....
 Roman Catholic..... X X
 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 he declares that he is not subject to fits of any description.

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

Date..... May 12th 1916

Place..... Ottawa

J. J. D. D. 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.

Joseph Gagnon.....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. G. Hughes Major..... (Signature of Officer)

Date..... May 12, 1916

Adjutant
 207th. Ottawa Carleton Battalion

C.E.F.

GAGNON JOSEPH

246266

3D.D.

01004

DEMOB.



3358

No 246266 RANK *Pte*

NAME

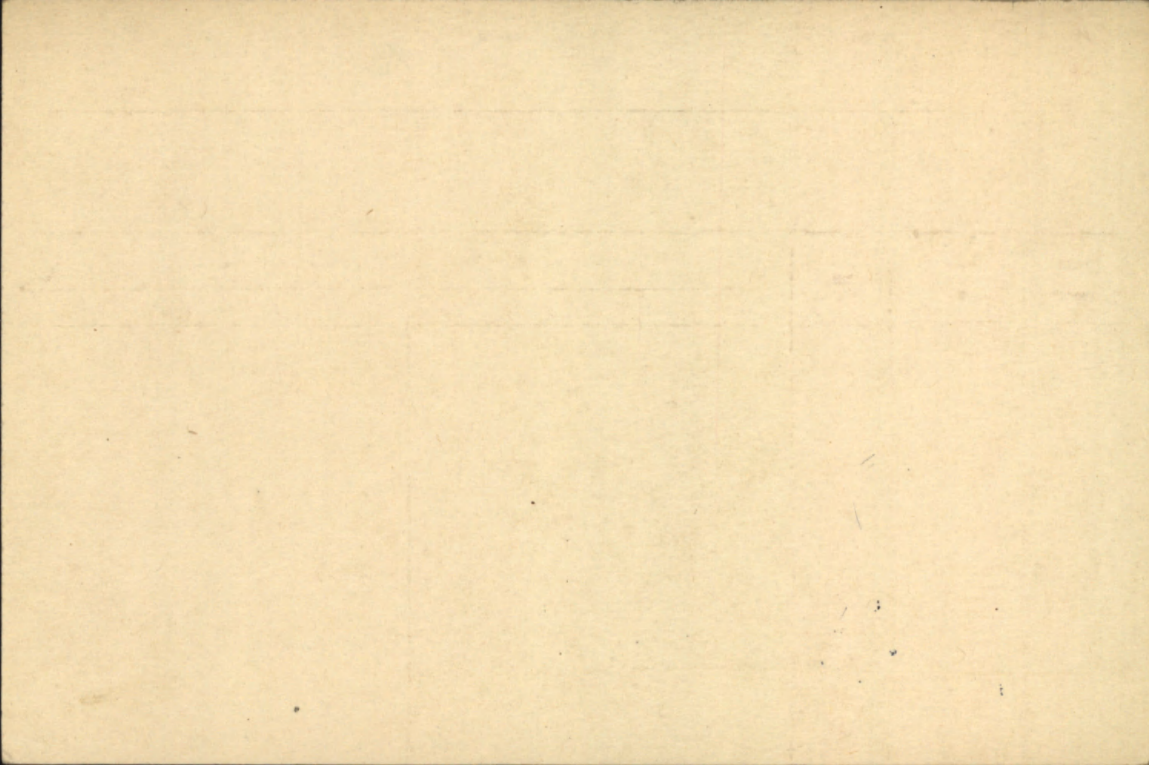
Gagne Joseph
Lagnon

T. O. S. 12-5-16

UNIT

*207th Battalion**00.62-13-5-16*M. D. *3.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916</i> <i>May 12</i>	<i>1916</i> <i>May 31</i>	<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July</i>		<i>✓</i>		
<i>Aug</i>		<i>✓</i>	<i>For 7 days pay</i>	<i>00148-17-8-16</i>
<i>Sept-</i>		<i>✓</i>		
<i>Oct-</i>		<i>✓</i>		
<i>Nov</i>		<i>✓</i>		
<i>Dec</i>		<i>✓</i>	<i>For 1 days pay abo 28-11-10</i>	<i>00239-1-12</i>
<i>1917</i> <i>Jan</i>	<i>1917</i> <i>Feb</i>	<i>✓</i>		UNIT SAILED
<i>Mar</i>		<i>✓</i>		JUN 2 1917
<i>Apr</i>		<i>✓</i>	<i>For 4 days pay all 2</i>	<i>00124-23-1-17</i>
<i>May</i>		<i>✓</i>		
<i>June 10</i>		<i>✓</i>		



NAME

BLAIR, Robert,

REGIMENTAL NO.

3056
4021343

RANK

Pte. ✓

ENLISTED AT

Kingston, Ont.

PROMOTIONS, &c.
AND DATE

DATE

23/1/18 ✓

IF SERVED PREVIOUSLY, STATE UNIT, &c.

MARRIED, WIDOWER, OR SINGLE

Single

NEXT OF KIN

Mrs Elizabeth Blair

RELATIONSHIP

Mother ✓

ADDRESS OF

Westport Ont.

ASSIGNMENT OF PAY \$

200

C.

TO

None.

ADDRESS

SEPARATION ALLOWANCE, ENTITLED OR NOT

DATE APPLICATION FORWARDED TO DIVISIONAL PAYMASTER

IN WHOSE FAVOUR

246266 Pto.

CASUALTIES, &C.

Gagnon.

NATURE

E.G. ABSENCE, PROMOTION, &C.

PART II, D. O.

NO

DATE

REMARKS

IF IN HOSPITAL, NOTE NAME &C.

E.O.R.D.,
11/12/18

2nd Ben

290. 11/12/18 S.1

C
SURNAME.

Gagnon,

CHRISTIAN NAMES

Joseph

REGL. NO.

246266

RANK

Vt. Lt.

UNIT

~~207th~~

No. 3. I.W.

FORMER CORPS

3 Mths Lanark & Renfrew.

CARD NO.

3305. demob 24-1-19

0024

FOLL

27-1-19

No 3 I.W.

B.W.

NEXT OF KIN.

NAMES IN FULL

Gagnon, Mrs. Annie

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

Golden Lake, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada, Lealabogie, Ont.

DATE

April 7th. 1890

PLACE OF ATTESTATION

Ottawa, Ont.

DATE

May 12th. 1916

o/s. 2-6-17 $\frac{862}{11}$ P/C. 30-12-18 $\frac{248}{31}$ 3.

From Halifax per SS "Olympic" 3/6/17

MARRIED *Yes*

SINGLE

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

26 YEARS

MONTHS

HEIGHT

5 FEET

7 1/4 INCHES

CHEST MEASUREMENT

37 1/2 INCHES

EXPANSION

4 1/2 INCHES

COMPLEXION

Medium

EYES

Brown

HAIR

Brown

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

Ottawa, Ont.

DATE

May 12th. 1916

Present Address Golden Lake, Ont.

NAME

RANK AND CORPS

CABLE

NO.

DATE

NATURE OF CASUALTY

REGT'L. No.

H. Q. FILE NO 649

FOLLOWS

NO.

FOLLOWS

Gagnon Joseph

Pte. 2nd Bn

form 207-Bn

2-4
Q 530not Mrs. Annie Gagnon (wife)
Golden Lake, Ont.14-9-18 Adm Co. of Middlesex War X.
Hospitury St Albans Sept 10th
1918. GSW mult.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

604.

B 315

Co of Middlesex War
Hospitals St Albans

10-9-18

was Multi-Ser

B 376

Mid Coiv. W'leat Ph

Epsom

Surrey 21-11-18

Gsw L Leg & R Arm

B 387

Dutch

4-12-18

4 4 Hand & Feet

Phalanx

[illegible]

*Name Yagnon, Joseph Rank Pte Regtl. No. 246266
 Original unit 207 Present unit 29 M. or S. P.C Fyle Depot 3-4-348
 Religion P.C Ref. H.Q.
 Port, ship, and date of arrival Halifax Carmania 30-12-18
 Next of kin C.W. Mrs. A Yagnon Golden Lake Ont.
 Address on leave Same
 Address on discharge
 Transportation issued Yes ☐ No ☐ Date Character on discharge
 Previous occupation Labourer Date and place of enlistment 12-5-16 Ottawa
 Diagnosis Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
31/12/18	T.O.S. Ent Dept Ottawa from clearing Dept	S.D. 8
31/12/18 to 14/1/19	Granted leave with subsistence	S.D. 8
24-1-19	S.O.S. Dis. from H.M. Service 1343	S.D. 25

*—Name will be given in full; surname first.

(over)

Date.

Remarks.

Pt. 2 Order No.

M.F.W. 192
150M—6-18.
1772-39-1243.

Surname

Christian Name or Names

Reg. No.

GAGNON.

J.

246266.

Rank

E.O. 2. Unit

Pte.

Cas. List.

12-9-18. B315.

10-9-18.
Co. of Midd. War St Albans.

Wds. Mult. Sev. 6

22.11.18 B 376-

2 Woodcote Pk. Epsom 21.11.18

9 sw. L Leg & R arm so

5.12.18 B 387/2 Dis.

4.12.18

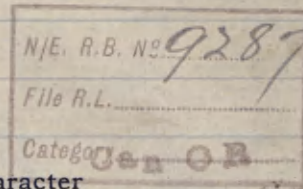
A.M.D. 2 Dept.

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

D.M.S. 1300. 50M-30-8-18.

Cas. List.

C.R. Rank **207th Bn. to East. Ont. Regt.** Name **GANNON. Joseph.** Reg'l No. **246266.**
 Unit **East. Ont. Regt.** If in perm. Corps }
 What Unit? } Married or Single **Married.**
 Place and Date of Enlistment **Ottawa. May. 12th, 1916.** Place of Birth **Calagogie, Ont.**
 Name and Address, Next-of-Kin **Mrs. Armie Gagnon.**
Golden Lake, Ont., Canada. Relationship **Wife.**
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship
 Discharge, Date and Place Reason Character



H. W. V., Ltd.—9-16-16.

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.				
	C				
		ARRIVED IN ENGLAND 9 6 17 S/S OLYMPIC.			
14th 17.	7th Res. Bn.	Taken on Strength.	Seaford.	10th 17.	Pt. II D.O. 142.
15/6/17	156th Bn.	I.O.S. from 7th Res. Bn.	Witley	13/6/17	Pt. II D.O. 165.
18th 18.	-	Posted to 2nd Bn. of Seas.	16	18th 18.	18. D.O. 64123.78
		Wounded	Field	6.9.18	4001-8 d/10.9.18 W. Leg. Amk. 2nd Bn. 094.
17.9.18	EORD.	Posted from 2nd Bn.	Seaford	10.9.18	Pt. II D.O. 234. d/21-9-18.
10-12-18	6th Res	Posted from EORD	Witley	4-12-18	" 290. E.O. A.D. 36-304. 5/9-12-18
14-1-18	✓	S.O.B. on 1/10/18 to C.B. 4th Can.	"	21.12.18	14

0/5. Can.

[illegible]

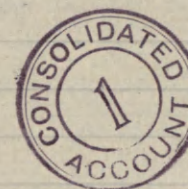
MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

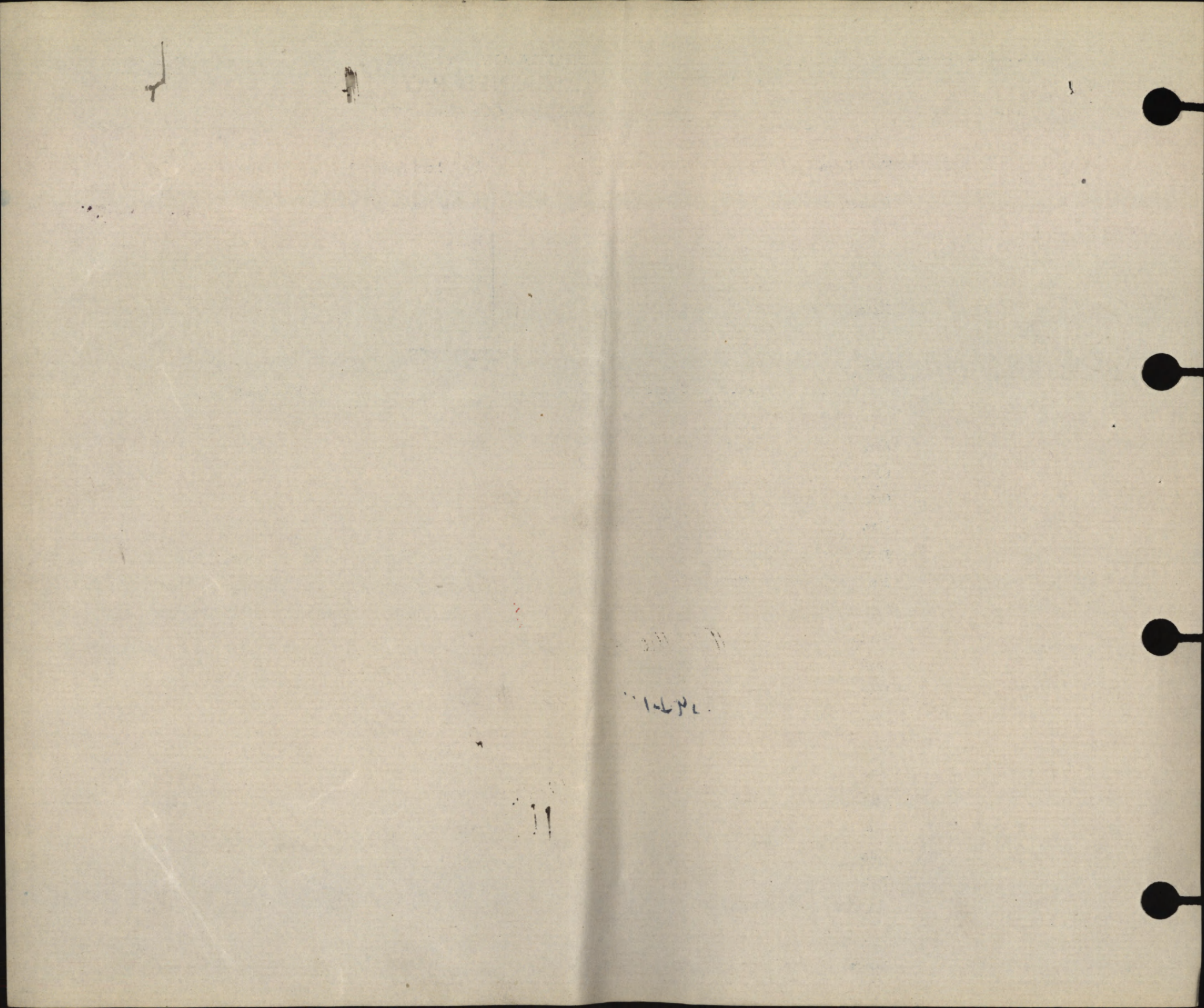
M. F. W. 12.
 25m-4-17.
 H. Q. 1772-39-819.

To Whom *Mrs Angelina Gagnon* By Whom Assigned *Gagnon Jos*
 Address *Golden Lake* Regtl. No. *246266*
Ont. Rank *pl.*
 Rate *1504* Corps *207 Bn*
 JUN 1 1917

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				





MILITIA AND DEFENCE

M. F. W. 12a.

18m.-4-17.
1772-39-819.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

(Assignee)

PAYMENTS.

Name of Soldier

L. L. Job 19227-M. & D. 7814.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June		Z 21535	15	
July		O 27015	15	
Aug.		B 33964	15	
Sept.		X 39210	15	
Oct.		F 41580	15	
Nov.		A 27636	15	
Dec.		L 57982	15	
Jan.	1918		10 5	
Feb.				
March				
April				
May				
June				
July				

Mrs Angelina Gaynon

246266

Gaynon Jos

207134

pl.

15 23

Remarks.

JUN 1 1917

mcc

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MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug. 1	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.				

SEPARATION ALLOWANCE

Name *Angeline Sagnon*

Address

*Golden Lake
Ont.*

Name of Soldier

Sagnon, Joseph

Regtl. No.

246266

Rank

Pte.

Corps

207th Batt.

Relation to Soldier

wife, child or mother

}

Wife.

To what Corps belonging

when called out

}

PAYMENTS

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



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SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Angeline GagnonWife
PAYMENTS.

Name of Soldier.

Gagnon Joseph
Pte.

L. L. Job 310.-Req. 6374.

#246266

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		~~V3051~~		
June		V3051	32	32
July		W9458	20	20
Aug.		S13280	20	20
Sept.		2.16050	20	20
Oct.		19110	20	20
Nov.		T.22588	20	20
Dec.		T25262	20	20
Jan.	1917	N28249	20	20
Feb.		U31358	20	20
March		U34438	20	20
April		U915	20	20
May		U4163	20	20
June		Y7570	20	20
July		X10627	20	20
Aug.		F14788	20	20
Sept.		G18554	20	20
Oct.		J19943	20	20
Nov.		N23071	20	20
Dec.		J26466	20	20
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

NSN

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MILITIA AND DEFENCE
SEPARATION ALLOWANCE
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.				

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

207th. OTTAWA. CARLETON BATTALION

Unit, Regiment or Corps.

Regimental No. 246266 Rank 1st Lt ✓ Name Lagnon, Joseph

Enlisted (a) 12/5/16 Terms of Service (a) 14 Years 6 mo Service reckons from (a) 12/5/16

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) *Laborer & Private*

Report		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received			
	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			

PORT OF EMBARKATION:- *Halifax* NAME OF TRANSPORT:- *2810* DATE:- *28/5/17*

PORT OF DISEMBARKATION:- Liverpool DATE:- 10/6/17

10.6.17	OC. 20 ^y th Bn.	Transferred to 7 th Res. Bn.	Scaford, 10/6/17	Part II Order N°-140 Jesse Ashblan Capt & Adj
---------	--	--	------------------	---

14-	6, 17.	8C. 7th. Res. B ^w	Taken on strength of the Res B ^w	Seaford.	10, 6, 11.	B. G. Pt II, N ^o 142, ✓
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4, 6, 17.	D.C. 4th Res. B ⁿ .	Transferred to 156 th Can. Inf. B ⁿ .	Seaford, B, 6, 17.	B.O. Pt II No 142, J.C. Fuller Lieut & Asst Adj 4th Res. B ⁿ
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15.6.17	P.C. 13th Bm.	Taken on strength	Willy	13.6.17	PTII D. G. 163-✓
---------	---------------	-------------------	-------	---------	------------------

(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.]

[P.T.O.]

CERTIFIED CORRECT.

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as re- ported 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
18-1-18	156th Bn	Proceeded overseas for service with 2nd Bn Witley		18-1-18	DO. Pt II 18 W. Armstrong Adjutant. For O.O., 156th CAN. INFANTRY BATTN.
19-1-18	C. B. D.	ARRIVED C. B. D.	FRANCE	19-1-18	N. R. D. PART II ORDERS No. 6. D. 423-1-18
27-1-18	C. B. D.	LEFT-C. B. D. FOR	CCRC	21-1-18	N. R. D.
21-1-18	O. C. BN	ARRIVED CCRC BN.	FIELD	21-1-18	B. 213 D.
2-2-18	2nd Bn.	Joined 2nd Bn.	do	1-2-18	B213
4-9-18	3 C. S. A.	Sto legs and arms Adm to C. S. A.		4-9-18	85256.
5-9-18	12 C. S. A.	do Adm to 29 A. I.		5-9-18	87268.
6-9-18	3 Ans Gen	do Adm 3 Ans Gen		6-9-18	87057
9-9-18	do	do To 32 A. I.		9-9-18	89219
8-9-18	do	Invalided & Wounded & England		8-9-18	to 3083 Stad Antwerpen
		Posted to Eastern Ontario Regtl. Depot, Seaford.			Part 11 Orders No 94 dated 21-9-18 R. Hunter Lieut. for Lt. Col. A.A.G. Canadian Section.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 246266 (Rank) Private
Name (in full) GAGNON, Joseph enlisted in
the 207th Battalion
CANADIAN EXPEDITIONARY FORCE at Ottawa on the 12th
day of May 19 16.
HE served in Canada, England, France
and is now discharged from the service by reason of Demobilization R.O. 1343
3 D.D. Reference NIL

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

Age 28 years 6 months
Height 5' 7 1/2"
Complexion Medium
Eyes Brown
Hair Brown

Marks or Scars NIL

J. S. Gagnon
Signature of Soldier

R. D. Heathcote

Issuing Officer

Capt. Fox Major,
Rank

Date of Discharge January 24, 1919

C.C. Sub-Depot, 3 D.D.
Appointment

Signed at Ottawa this 24th day of January 1919

in Military District No. 3

File Reference No. 3 D.D. Ref. NIL

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.

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

ORIGINAL MEDICAL HISTORY SHEET

Original
346266

Surname Gagnon Christian Name Joseph

Examined { on 12th day of May 1916
at Ottawa, Ont.

Birthplace { City or Town Calabogie, Ont.
County Renfrew

Apparent age 26

Trade or occupation Laborer

Height 5 feet 7 1/4 Inches

Weight lbs.

Chest measurement { Minimum 33 inches

{ Maximum expansion 37 1/2 inches

Physical development Good

Small-pox Marks None

Vaccination Marks { Arm Right Left
Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection

None

TAB 2 28-11-16 JAGH T.A.B. 1

Approved by

J. Dauby
Rank Capt. M.O.

Date Fit or Unfit EXAMINED FOR RE-ENGAGEMENT

31-11-16 A. JAGH 12 SEP 1918 M.O.

Date Result VACCINATIONS

17/2/16 Pos J. Dauby M.O.

Date Result ANTI-TYPHOID INOCULATIONS, ETC.

8/15/17 Good J. Dauby M.O.

15/6/17 Good J. Dauby M.O.

15-6-17 Good J. Dauby M.O.

Enlisted on 12th day of May 1916 at Ottawa, Ont.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment		<u>246266</u>		<u>12-5-16</u>
Transferred to	<u>7th Reg. Bn.</u> <u>156th Bn.</u> <u>2nd Bn.</u>			<u>10. 6. 17</u> <u>13. 6. 17</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.

CANADIAN

Surname *Gagnon* Christian Name *Joseph*

STATION	Date of Arrival at the Station	DATES OF						DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
COUNTY OF MIDDLESEX WAR HOSPITAL, 173 BURY ST. ALBANS. Mr. G. H. Epsom.		9	9	18	20	11	18	S.W. Legs. Flesh	83	Shrapnel wds flesh of each leg. Wd. on ulna on R. wd. excised. F.B. removed.	C.D. Falconer CS.
		20	11	18	4	DEC	1918	S.S.W. Lt. leg & R. arm (flesh)	15	Swadn - Healed. no disability Dischg to Res. Unit. category A.	Kennedy Lieut. <i>CAME</i>

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1133 (D.P. 250M-12-18.
1772-39-903.

LAST PAY CERTIFICATE

Regimental No. **246226** Rank **Private** Name **Gagnon Joseph**
(Surname first)
Unit **45 District Depot** who was **Discharged**
On **24-1-19** 191, to **24-1-19**
*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from **1-1-19** to **24-1-19** 191...
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		28 43
Regimental Pay 24 days at \$ 1 c. 00		24 00
Field Allowance 24 days at \$ 10 c. 10		2 40
Separation Allowance Month of January		24 00
Clothing Allowance		35 00
Post Discharge Pay		100 00
*Other Credits Subs		1200
Advances 594	15 00	
Separation Allowance and Assigned Pay Cheque No. 753	54 00	
*Other Charges QMS.	2 92	
Balance on transfer or on discharge, cheque No. 244 755	153 91	
Total	225 83	225 83

*Give particulars.

A monthly stoppage of \$ **15.00** (†) has **Not** (‡) been paid on account of
Assigned Pay for the month of **January** 191... }
and Separation Allee. for month of 191... } (to) Assignee **Mrs A Gagnon**
(Address) **Golden Lake Ont.**
(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

S.A. Paid up to 24-1-19 and One month's War Gratuity

ON TRANSFER OF AN OFFICER.

Outfit Allowance of \$.....has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment.....married or single.....
(2) Separation Allowance, entitled or not **YES** (3) Reason for discharge **DEM OB**
(4) Authority for discharge or transfer **R.O. 1343**

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date **27-1-19**

Place **Ottawa Ont**

Henri Macpherson
Paymaster. **MAJOR**

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.

- (B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
- (C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
- (D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

[illegible]

6455-655-6
2-8-35
6642
20285
2-8-35
This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No.	246266
Rank	Private
Surname	GAGNON
Christian name	Joseph
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	3 D.D.
Date of discharge	January 24, 1919
Place of discharge	Ottawa, Ont.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age	28 years 9 months.
Height	5 feet 7 1/2 inches.
Complexion	Medium
Eyes	Brown
Hair	Brown
Trade	Laborer
Intended place of residence	Golden Lakes, Ont.
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of	
DEMobilIZATION R.O. 1343.	
Authority for discharge..... 3 D.D. Ref. NIL.	
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.	
3. Conduct and character while in the service have been, according to the records, etc.	
N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

M. F. B. 218.

200M.—5-18.

H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of G. C. Badges

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place)..... Ottawa, Ont......

(Signature of Soldier.)

(Date)..... January 24, 1919.....

(Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.... (the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place)..... Ottawa, Ont......

(Signature).....

(Date)..... January 24, 1919.....

R. V. MacIntyre
for O. C. District Depot No. 3

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

16/10/1917
X
Sagun
man

NIL

FEB 10 1919

649/01
1918

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper	Militia Form W. 23
Squadron } Battery } Company }	Conduct Sheet, " B. 263a	or Particulars of Recruit	" W. 133
or Field Conduct Sheet	" W. 178	Proceedings on Discharge	" B. 218
In the case of recruits who are rejected on final approval, the discharge documents will consist of			
(a) Proceedings on Discharge.			
(b) Attestation.			
(c) Medical History Sheet.			

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins.....

247th OTTAWA CARLETON BATTALION

(2) Regimental Number..... 246266

(3) Full Name of Soldier..... Joseph Gagnon

(4) Place of Birth..... Griffith, Ont. Can.

(5) Are you married, or not?..... Yes.

(6) If married, state,
(a) Full name of your wife..... Mrs. Annie Gagne.

(b) Present Postal Address..... Golden Lake, Ont.

(7) Are you a widower?..... No.

(8) Have you any children?..... Yes

If so, give number of boys and girls..... 1 Boy..... 2 Girls.

Also their names and ages..... Joseph Gordon 4 months.

Viola 5 yrs. Celia, 3 yrs.

(9) Is your Father alive?.....Yes.

If so, state name and address Mr. Joseph Gagne, Calabogie, Ont.

(10) Is your Mother alive?.....Yes.

If so, state name and address Mrs. Angeline Gagne, Calabogie, Ont.

(11) If your Mother is a widow.....No.

Are you her sole support, or not?.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

.....Yes.

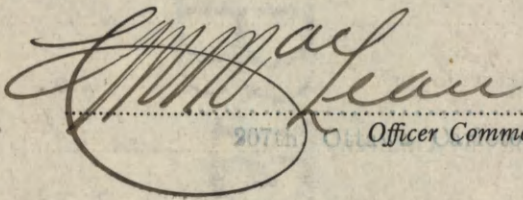
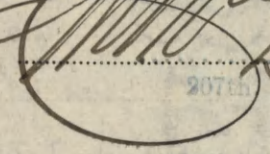
(15) Are you insured?.....No.

If so, in what Company?.....

Have you made arrangements for payment of your Insurance premium.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date Nov. 29th, 1916.


207th  Officer Commanding

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DIVISION 3rd

NAME OF SOLDIER

Gagne CAGNO14-J

REGIMENT

207 BATT

RANK

Private (P.)

No. 246266



Gagne 07th

Thurs Sept 27 at

DATE	No.	FILLINGS				Extracted	Anesthetic	Treated	Crowns	Cleaned	As 2° 3	Pulp Removed	Put Pulp	Artificial Teeth	OPERATOR	REMARKS
		Amal.	Phosp.	G. Per.	Cement											
May 27	1					1 ²		1 ¹							Dr. Wright	Mon 29 am
" 29	2			2 ²	2 ¹	2 ²		2 ³							"	Wed 31 pm
" 31	3	3 ¹			3 ³			3 ⁴							"	Mon 5 pm
June 6	3	3 ¹²				3 ³⁴					3				"	Wed 7 pm
July 27	4							4							W. R. Raman	
" 22	5							5 ¹							"	
" 23	6					6 ²									"	
Dec 5	7			7 ²	7 ¹			7 ³								
" 6	8							8 ¹								Inf at upper
" 7	9							9								
" 12	10							10 ¹						10 up		
" 15	11	11 ¹													"	
" 18	12	12 ¹														12 R.F.
" 20	13	13 ¹						13 ²								15 R.F.

11 22 14

18

14

13

Handwritten text in a cursive script, possibly a list or a series of entries, located in the upper central portion of the page.

A small, isolated handwritten mark or signature, possibly a monogram, located in the center of the page.

Handwritten text at the bottom left, appearing to be a signature or a set of initials, possibly reading "Wm. H. ...".

Vertical handwritten text on the right side of the page, possibly a date or a reference number, including the characters "18 10 11".

Vertical text on the far right edge, possibly a page number or a reference, including the characters "101" and "102".

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DIVISION

NAME OF SOLDIER.

Gagne J. GAGNON J.

REGIMENT.

207

RANK.

PL

No. 2.

No. 246266

[illegible]

NAME OF SOLDIER.

REGIMENT. *207th Det* RANK.

RANK.....*File*

No. 246266



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report, record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge from the Service.

[illegible]

1875
JAN 10 1875
NEW YORK

1875
JAN 10 1875
NEW YORK

RECEIVED
JAN 10 1875
NEW YORK

Married.

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

[illegible]

ADMISSIONS TO HOSPITAL, &c.

[illegible]

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS									
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3					
			\$	C.			\$	C.			\$	C.				NO.	DATE	NO.	DATE	NO.	DATE	NO.			
11-30 June 20	180	10	22											21 70	21 70										
July 31			34	10												22									
Aug 20			22														34	10							
" "			78	10																					
" "			12	10																					
Sept 30			33																						

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. -RED. PAY	SER. ALLGE ENG.
1917											
Sept.	Balance								24 07		
Oct	P Pay	34 10						15			
				556 10/9/17 156	9 74				33 43		
Nov								15			
				AR 660 156 Bn 29/10/17	7 30						
				AR 582 156 Bn 25/9/17	7 30						
				AR 673 156 Bn 15/11/17	9 73						

24.33

CTIONS, &c.

EFFECTIVE DATE	AUTHORITY

REG'L. NO. 246266 RANK

NAME Gagnon, Joseph.
UNIT 207th Bn

IF IN PERMT. CORPS }
WHAT UNIT

UNIT 207th Bn

TRANSFERRED TO 7th Co.

DATE 11-6-17

AUTHORITY B.O. 1442.
14-6-17

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO 156th Batt.

DATE 21-8-17

AUTHORITY acq. Roll

PLACE OF ATTESTATION

Ottawa Ont. Canada

TRANSFERRED TO 2nd Bn

DATE 1/2/18

AUTHORITY B.O. 18. 18/1/18

DATE OF ATTESTATION

May 12/1916

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$ 15 00

DATE EFFECTIVE

June 1/1917

PAYABLE TO

Mrs. Angelina Gagnon Golden Lake Ont. Canada

RELATIONSHIP

Wife

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)

QUITTANCE ROLLS

CASH PAYMENTS

BALANCE

PAY WITHHELD OR DEFERRED

PAY AVAILABLE FOR ISSUE

REMARKS

2	3	4
DATE	NO.	DATE

1	2	3	4
---	---	---	---

ASSIGNED PAY

OTHER CHARGES

TOTAL DEBITS

CREDIT

DEBIT

Bal from Canada

15

15

21 70

15

15

28 70

15

15

47 80

15

15

54 80

45

45

243 64 47

243.
2433
973
730

97.4
730

15

73 40

2407

Trans to 156th Bn 21-8-17
acq. Roll

DEFER. SEP. ALANCE
-RED. ALICE
PAY ENG.

407

3 43

246266 Pte Gagnon J.

[illegible]

J.

A.P. # 15-00

**PAY
AVAILABLE
FOR
ISSUE**

REMARKS

2

3

4

**ASSIGNED
PAY**

OTHER CHARGES

TOTAL DEBITS

CREDIT

DEBIT

Only

[illegible]

NUMBER 246266

RANK Pte

NAME

GAGNON.

Joseph

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATE
1918				Forward					11993		
Nov	P.P.	33		af 4920 21/11/18. 8 p.m.	973				11020		
				leaf				15	12793		
				af 699 4/12/18.	4867				12820		
				af 6675 11/12/18. 6 hrs.	1460				83 43		
Dec	PP	2410		Leaf	73 00			15	157 03		
	SF 4/12/18 to 14/12/18 (2 days) 2019 10/12/18. 6 hrs.	730		A 70.1823 A. 20.8108. 20/12/18. 2 hrs. 30 min.	97				157 03		
	NE Section advised for 19.30 27/12/18	9440		NE Section advised for 19.30 13/1/19.	7397			30	9036		
5/3/19				Leaf 24/7/17 Witley		60			8976		

RANK *Pte*

NAME

GAGNON.

Joseph

S	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
			<i>Forward</i>					<i>11993</i>		
	<i>33</i>		<i>af 4920 4/11/18. 6pcom 943</i>	<i>943</i>				<i>11020</i>		
			<i>leaf</i>				<i>15</i>	<i>12943</i>		
			<i>AK. 699. 4/11/18. ~</i>	<i>4867</i>				<i>12820</i>		
			<i>AK. 6675. 11/12/18. 6Res.</i>	<i>1460</i>				<i>83 43</i>		
	<i>2410</i>		<i>Leaf</i>	<i>73 00</i>			<i>15</i>	<i>157 03</i>		
	<i>730</i>		<i>A 20. 18223A. 208108. 20/11/18. Rep. 20/11/18.</i>	<i>97</i>				<i>147 50</i>		
			<i>N.E. Section advised for 940 13/1/14.</i>	<i>7397</i>			<i>30</i>	<i>9036</i>		
	<i>94160</i>		<i>Leaf 24/7/17 Willey</i>		<i>60</i>			<i>8976</i>		

Checked

J. H. Holman
14-12-18

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps

Regimental Number

*Substantive Rank

Surname

Christian Names

*Acting Rank

(* To be entered in pencil to facilitate alteration.)

(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
14-9-18	E.O. AD	50234	posted from 2 nd Bn	Scaport	10-9-18	
14-12-18	0666th Re	PT 80290	On Command Kennel Park	Witley	13-12-18	
17/12/18	attached to	Kennel Park Part 2	D.O. 7-	16/12/18		
9/18	Comm to be	Alt. on transfer to C.G. 7. on	proceeding to Canada	13	21/12/18	
			Stewart	Unit		
			MLC. Wing 3.			

(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

24/1/19	S.O.S.		Discharged	Ottawa	24/1/19 4 P.M. 25	<i>R.V. Heathcote</i> <i>Capt</i> for O. C. District Depot No. 3
---------	--------	--	------------	--------	-------------------	--

Nothing to be written in this margin.

Medical Examination upon leaving the Service **of an Officer fit for general service or a Soldier fit for duty.**

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Pte Name Joseph Surname Gagne
 Unit or Corps 6th Reserve (If a soldier) Regtl. No. 24266
 Born at Rimshaw on date 1890
 Signature (for identification) Joseph Gagne X

The examination is to be made jointly by two Medical Officers.

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight 160 lbs.
 Height 5' 8 ins.

None

2. NUTRITION AND DIATHESIS ?

Normal

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM ?

Normal

4. RESPIRATORY SYSTEM.

Normal

5. HEART ?

Abnormal Sounds? None
 Abnormal Size? None
 Pulse Rate? 76

Intermittence or irregularity? None

6. ARTERIES.—Any hardening?

Normal

7. DIGESTIVE SYSTEM ?

Normal

8. GENITO-URINARY SYSTEM ?

Normal

Urinalysis—s.g. ? 1030 Reaction? Acid Albumen? Nil Sugar? Nil

9. SKIN, MIDDLE EAR, EYE
 or any other part?

Normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

None

11. Opinion as to the health and physical condition of the one examined?

Good

Examined at Kinnel Park Signed W. J. Little Capt M.O.
 Date 16/12/18 Signed H. J. Adams Capt M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

1. *Handwritten notes at the top of the page.*

2. *Handwritten notes in the second section.*

3. *Handwritten notes in the third section.*

4. *Handwritten notes in the fourth section.*

5. *Handwritten notes in the fifth section.*

6. *Handwritten notes in the sixth section.*

7. *Handwritten notes in the seventh section.*

8. *Handwritten notes in the eighth section.*

9. *Handwritten notes in the ninth section.*

10. *Handwritten notes in the tenth section.*

11. *Handwritten notes in the eleventh section.*

12. *Handwritten notes in the twelfth section.*

13. *Handwritten notes in the thirteenth section.*

14. *Handwritten notes in the fourteenth section.*

15. *Handwritten notes in the fifteenth section.*

16. *Handwritten notes in the sixteenth section.*

17. *Handwritten notes in the seventeenth section.*

18. *Handwritten notes in the eighteenth section.*

19. *Handwritten notes in the nineteenth section.*

20. *Handwritten notes in the twentieth section.*

Gagnon J
(BLOCK LETT)

(BLOCK LETTERS SURNAME FIRST)

ORIGINAL UNIT
C.E.F.

207th Bn.

PLACE OF
ATTESTATION

TRANSFERRED TO

DATE _____

.....
AUTHORITY

DATE OF ATTESTATION

TRANSFERRED TO

DATE _____

AUTHORITY

ASSIGNED PAY

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

P | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

PLACE

DATE _____

REASON

.....
AUTHORITY

IF ENTITLED TO
POST
DISCHARGE
PAY

BALANCE
FROM
PREVIOUS
ACCOUNT

300

W. S. G. form received

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

G

163

June 1, 1917

12/5/16

RATE OF SEPARATION ALLOWANCE

20	25	30	
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1-12-17

1-9-18

P.C. 3257 P.C. 1753
no. 34027.

PARTICULARS OF SEPARATION ALLOWANCE

No. 246266

Rank Pte Promoted

Reverted

Discharge

Soldier's Name

Joseph Gagnon

Battalion

20th Battn

Beneficiary

Angeline Gagnon

Relationship

Wife

Address

Golden Lake Ontario

PARTICULARS OF ASSIGNMENT

Name

Mrs Angeline Gagnon

Address

Golden Lake Ont

Change of Address

1

2

3

4

MFW 2554 6-8-18

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec 3/17		392	105	497	
Jan 68112 P		30	15	45	
Feb 97973 F		25	15	40	
March 137777 A		25	15	40	
Apr 14969 G		25	15	40	
May 14069 S		25	15	40	
June 24501 M		25	15	40	
July 31873 M		25	15	40	
Aug 39954 M		25	15	40	
Sept 42665 T		25	15	40	
Oct 56320 R		25	15	40	
Nov 59185 M		25	15	40	
Dec 66234 M		45	15	60	
Jan 1/19		30	15	45	
		717	285	1002	

MFW 2554 ret'd O.A. 23-11-18 M.C.

MRO 55294

3/1/19

M. F. W. 128
400M-6-17-1772-38-1141
L. L. 22320-M. & D. 7993.

A/c Closed

31-12-18

Ret'd per

Carmania

Date

30-12-18 3-1-19

A/c Closed

M. Cosgrove



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

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PARTICULARS OF SEPARATION ALLOWANCE

No. _____

Rank _____ Promoted _____ Reverted _____ Discharge _____

Soldier's Name _____

Battalion _____

Beneficiary _____

Relationship _____

Address _____

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date

Cheque
No.Amount
S/AAmount
A/P

Total

REMARKS