

Card
m m
19 4
cert
T.P.
9/4/16

ATTESTATION PAPER.

No 788933

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

- 1. What is your surname? Stoqua
- 1a. What are your Christian names? Michael Joseph
- 1b. What is your present address? Golden Lake Ont.
- 2. In what Town, Township or Parish, and in what Country were you born? Pembroke, Ont. Canada
- 3. What is the name of your next-of kin? Mrs. J. Stoqua
- 4. What is the address of your next-of-kin? Golden Lake Ont.
- 4a. What is the relationship of your next-of-kin? Mother
- 5. What is the date of your birth? Aug. 3 1893
- 6. What is your Trade or Calling? Labourer
- 7. Are you married? No.
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes.
- 9. Do you now belong to the Active Militia? Yes.
- 10. Have you ever served in any Military Force? Yes 42nd Regt Guards, Petawawa, since 17-9-1915
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 } Yes.
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }
- 13. Date of Enlistment March 26th 1916

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Michael J. Stoqua, 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.

M J Stoqua (Signature of Recruit)
J. R. Dunning (Signature of Witness)

Date March 26th 1916

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Michael J. Stoqua, 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.

M J Stoqua (Signature of Recruit)
J. R. Dunning (Signature of Witness)

Date March 26th 1916

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 Pembroke, Ont. this 26th day of March 1916.
W. H. Dunning (Signature of Justice)

Description of M. J. Stoqua on Enlistment.

Apparent Age...22.....years7.....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).

Weight	140
Height	5.....ft..... <u>7</u> ¹ ins.
Chest measurement	Girth when fully expanded..... <u>38</u>ins.
	Range of expansion..... <u>2</u>ins.
Complexion	<u>Dark</u>
Eyes	<u>Black</u>
Hair	<u>Black</u>
Religious denominations	Church of England.....
	Presbyterian.....
	Methodist.....
	Baptist or Congregationalist.....
	Roman Catholic..... <u>XX</u>
	Jewish.....
Other denominations..... (Denomination to be stated.)	

Mole on right shoulder.

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.....March 26th.....1916.....
 Place.....Pembroke Ont.....
 Lt. H. B. Delaney
 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.

.....M. J. Stoqua.....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. B. de Hertel.....Lt. Colonel (Signature of Officer)
O. C. 130th OVERSEAS BATTALION, C. E. F.
 Date.....Mar. 26.....1916.....

Stoqua

NAME *Stoqua Michael Joseph*

REGIMENTAL DOCUMENTS

REGT. NO. *788933*

UNIT *130th Bn*

H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

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

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

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

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

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

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

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

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

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

MEDICAL EXAMINATION (M.F.W. 129)

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

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

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

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

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

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

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

130

M

DEATH

Category

DISCHARGE

Category

DESERTION

45535

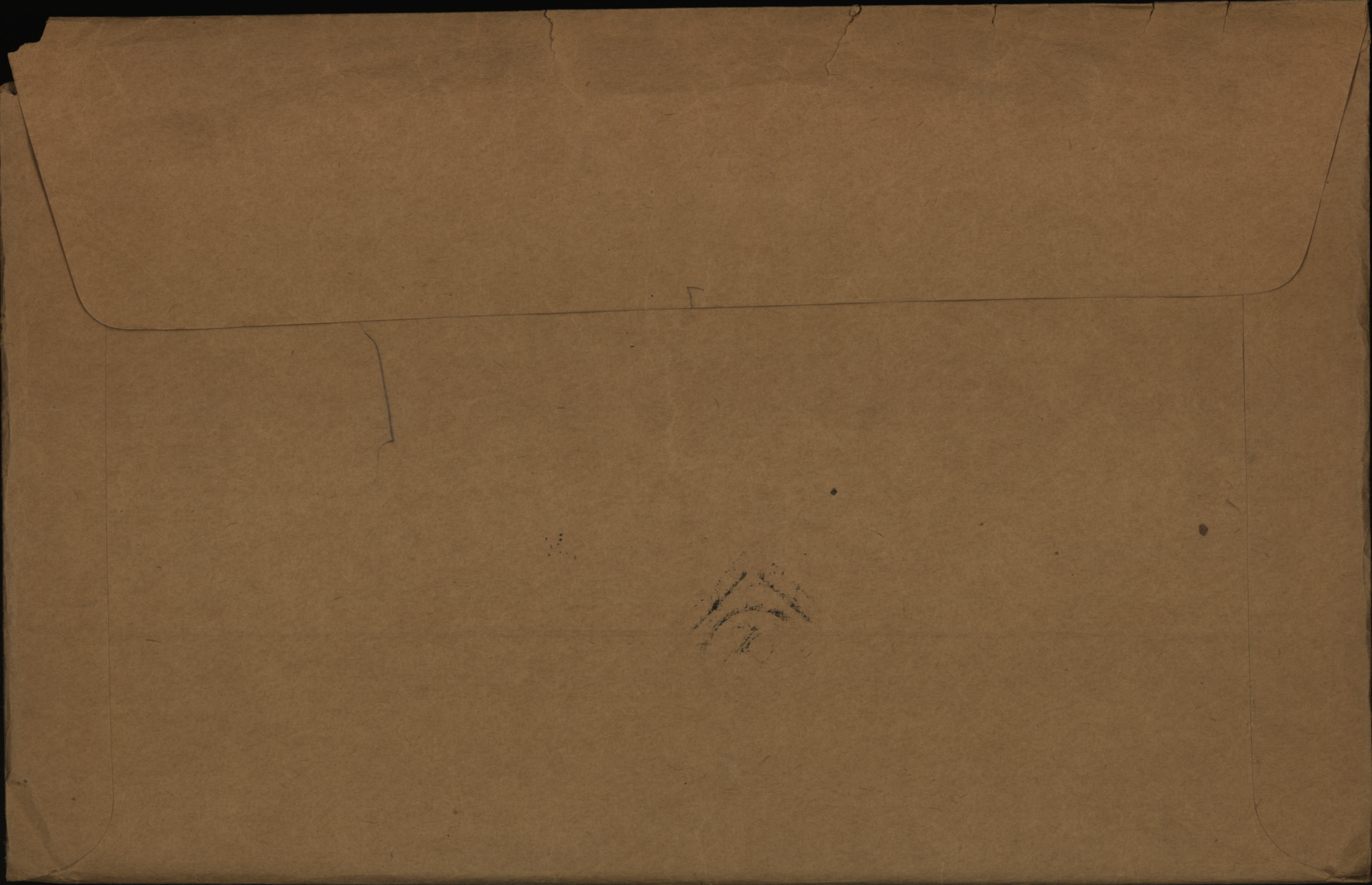
H

20 - 1

20 - 1

7 - 2

1



STOQUA, Pte. M. J. ^{Michael Joseph} #788933. 75th Bn. 649-S-11592.

Not eligible for star.

15643

M

Medals and
Decorations

Mrs. Jennie Stoqua, (Mother)
Golden Lake P.O.
Ont.

Plaque and
Scroll

(Serial no. 790141)

Memorial
Cross

Dep. JUL 21 1920 (D.M.) C. 15697.

Scroll Desp. _____ Reqn. No. 7-27831

FEB 21 1922
Plaque Desp. _____ Reqn. No. P 30140

E.S. 1/1/20.

PL 505

M

170

Name **STOQUA. Michael** Rank
Jospeh.

Pte.

Reg. No. **788933.**

Unit **75th Batt.**

25-5-2868

Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List	
1917.							
12-4.	13 Gen Hosp.	Boulogne.	GSW.	Head.	A184.M1806.	14-4.	
		<u>DIED OF WOUNDS.</u>					

CARD NO.

D

SURNAME.

Stoqua

(649-S-11592)

CHRISTIAN NAMES

Michael Joseph

FOLL.

REGL. NO.

788933

RANK

Pte.

UNIT

130th.

Bn.

FORMER CORPS

43rd. Regt.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Stoqua, Mrs. J.

RELATIONSHIP TO SOLDIER

mother

ADDRESS

Golden Lake, Ont.

COUNTRY OF BIRTH

Canada, Pembroke Ont.

DATE

Aug. 3rd. 1893

PLACE OF ATTESTATION

Pembroke Ont.

DATE

Mar. 26th. 1916

O/S-23-9-16 ⁵⁴²/₁₃

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

labourer

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

22

YEARS

7

MONTHS

HEIGHT

5

FEET

7 1/2

INCHES

CHEST MEASUREMENT

38

INCHES

EXPANSION

2

INCHES

COMPLEXION

Dark

EYES

Black

HAIR

Black

DISTINGUISHING MARKS

Mole R. shoulder.

MEDICAL EXAMINATION.

PLACE

Pembroke Ont,

DATE

Mar. 26th. 1916

Present address,

Golden Lake, Ont.

SP
Number 788933 Rank A. Cpl. ~~10~~

Surname STOQUA

Christian Name Michael Joseph ~~X~~

Units 75th Bu Cav. Inf Theatre of War France

Date of Service 6-12-16 **D**

Remarks

Latest Address (M) Mrs. Jennie Stogua,
Golden Lake PO

Roll No. B Page 13774 Out.

DESP AUG 12 1922

REGN. NO. 91.31831

REG'TL NO 788933

NAME

Stoqua Michael Joseph

H. Q. FILE NO. 649-

RANK AND CORPS

Plt. 75th. Bn. (Form. 130th. (Res.))

FOLLOWS

K22.

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

No.	DATE	NATURE OF CASUALTY
M. 1800	14-4-17	Died of wounds No. 13. Gen. Ars. Boulouge Apr. 12th. 1917 (G. S. W. Head.) ✓
A. F. B. Rouen	2090 a. 18-4-17.	Died of wounds received in action, April 12th. 1917.

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

2184

#3 Gen. Baucogné

12-4-17

(Gsw. Head)
Died of wounds

No. 283.

RANK

Pt.

NAME

Stoqua, M.

John.

T. O. S. 17-9-15.

UNIT 42nd Regt. (Kauai & Hawaii)

(D.O. 48-17-9-15.)

M. D. 3.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915.	1915.			
Sept. 17.	Sept. 30.	✓.		
Oct.		✓.		
Nov.		✓.		
Dec.		✓.		
1916				
Jan.		✓.		
Feb.		✓.		
Mar. 1.	Mar. 25.	✓.	forfeit, days of pay. Overstaying pass. Shans. to 1.30 & Bn. 25-3-16	D.O. 76-16-3-16. D.O. 85-25-3-16.



No. 788933 RANK *Pvt.*

NAME *Stogqua, M. J.*

T.O.S. 26-3-16 UNIT *130th Battalion*
D. O. 76 of 29-3-16

M. D. *3*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>Mar. 26</i>	<i>Mar. 31</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>Forfeits 3 dys. pay.</i>	<i>D. O. 186 - atq payhist</i>
<i>Sep</i>		<i>✓</i>	<i>Pro Cpl. 7-8-15</i>	<i>D. O. 186 of 9-8-16</i>
				UNIT SAILED
				SEP 23 1916



Surname

Christian Name or Names

Reg. No.

Stoqua.

M. J.

788,933.

Rank

Unit

Co.

Troop

Batty

PTE.

75th.

Battn.

Hospital

Date of Admission

No. 13. Gen. Hosp. Boulogne.

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)

G.W. Head.

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Died. of Wounds. 12-4-17.

DISPOSITION

Date

P.L. 14-4-17 184

REMARKS

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

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

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

250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps **130th OVERSEAS BATTALION, C.E.F.**

Regimental No. **788933** Rank **Plt.** Name **Stoquira Michael Joseph**

Enlisted (a) **26-2-16** Terms of Service (a) **10 yr.** Service reckons from (a) **26-3-16.**

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) **42 Regd. since 17-9-15 Labourer.**

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 38, 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. 38, or other official documents.
Date	From whom received				

11-10-16

O.C. 130th

Embarked

Halifax

23/9/16

Disembarked

Liverpool

6/10/16

Transferred 12th Batta

W Sandling

9/10/16

O.D. 275 10/10/16

12th

Taken on strength 12th Batta

W Sandling

9.10.16

CAPTAIN
ADJUTANT
C.E.F.

Trans to 75th Bn. BO. 327W. Sandling

DEC 5 1916

J. E. Pulley
Captain & Adjutant
No 327.

CERTIFIED CORRECT.
9.12.16
14 DEC. 1916
GEN. RECORDS, LONDON.
DEC 5 1916

6.12.16

O.C. 130th

Arrived in France

C.B.O.

6.12.16

N. Roll.

12.12.16

Adj. Can. Sec.

Taken on strength

Field

6.12.16

O.D. 280

7.12.16

O.C. 130th

Left to join unit

En Route

7.12.16

N. Roll.

16.12.16

O.C. 75th

Joined unit

Field

9.12.16

B.213; D.C.S. 81 dt 30.12.16

(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.

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				
6-1-17	OC.75th	On Lewis Gun Course	Field	1-1-17	B.213;DCS.93 d/-20-1-17
13-1-17	OC.75th	Rejoined Unit	Field	6-1-17	B.213;DCS.96 d/-25-1-17.
12-4-17	13 Gen.	G. S. M. Head - <u>died of Mds.</u>	13 Gen.	12 4/17	Return: K. 2 16/2281 D.O. 59 dt 18-4-17 <i>J. Anderson</i> Lieutenant, for Major, D.A.A.S. Cad. Sec. 3476 H.A. 2

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-316

400

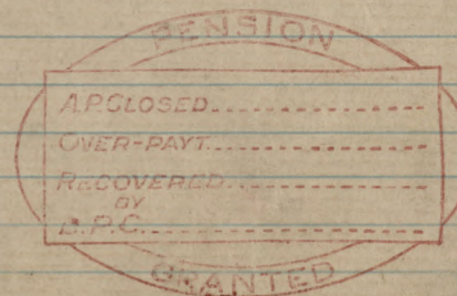
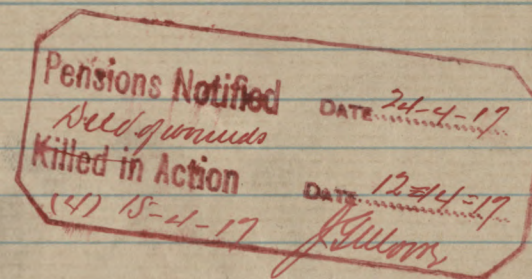
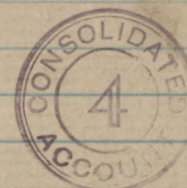
To Whom *Mrs. Jas. Stogua*
Address *Golden Lake*
Ont.

By Whom Assigned *Stogua Michael Jos.*
Regtl. No. *788933.*
Rank *Plt.*
Corps *130th Bn.*

Rate *15⁰⁰* *OCT 1 - 1916*
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				



24-4-17

1-2 87000

U 87000

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-6-16.
 1772-39-819.

Sheet No. 2. *Mrs. Jas. Stogua*

L. L. Job 4503. - Req. 633Z.

PAYMENTS.

Name of Soldier *Stogua Michael Jos.*
788933 *Plt* *130th Bn.*

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>15⁰⁰</i>	<i>OCT 1 1916</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		<i>321960</i>	<i>15</i>	
Nov.		<i>32762</i>	<i>15</i>	
Dec.		<i>735164</i>	<i>15</i>	
Jan.	1917	<i>240105</i>	<i>15</i>	
Feb.		<i>046750</i>	<i>15</i>	
March		<i>E53182</i>	<i>15</i>	<i>15</i> <i>1056 F.X. 24-4-17</i>
April		<i>25346</i>	<i>15</i>	<i>74,182.95</i>
May	<i>15⁰⁰</i>	<i>910117</i>	<i>15</i>	<i>Acc't closed</i>
June	<i>M23100</i>	<i>18295</i>	<i>15.15</i>	<i>Assignee dependent. Doct. to continue</i>
July		<i>525527</i>	<i>15</i>	<i>until pension granted.</i>
Aug.		<i>02098</i>	<i>15</i>	<i>Baldsmith 30/4/17</i>
Sept.		<i>739847</i>	<i>15</i>	<i>Spec. Reg. (W)</i>
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

ey

J.P.

180.00

Pension Granted *1-10-17*
 B.P.C. to Recover \$
 Clerk *J.E.L.* Date *11/9/17*

Total By *180.00*
 F. V. Bond. Date *19-11-17* By *J.M.*
 E.F.X. " Date *19-11-17* By *J.M.*

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.				

26 - 3 - 16
SEPARATION ALLOWANCE

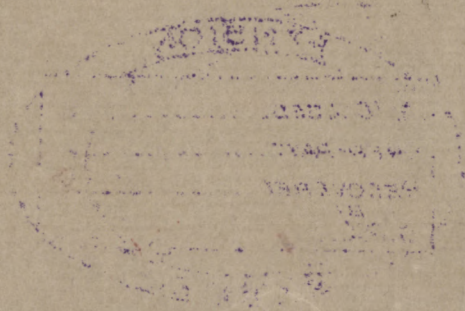
Wm. J. Stogua
 Name *Mrs. Jennie Stogua,* Name of Soldier *Stogua, M. J.*
 Address *Golden Lake,* Regtl. No. *788933*
Co. Renfrew, Rank *pte.*
Ont. Corps *130th Bn. Bn.*
 Relation to Soldier } *deserted* To what Corps belonging }
 wife, child or mother } *mother* when called out }

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				



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



1880
1883
383

180
183
383

Register No. 08722

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 17487-M-1

Regt'l No. 788933 Name Michael Joseph Stogua
(Christian Name) (Surname)
 Unit 75th from 130th Rank Pte Date of enlistment.....
 Date of casualty 12-4-14 B.P.C. File No. 15088
 Was service performed overseas? yes

C/o Dept Indian Affairs (Ottawa)
 DEPENDENT

Name Mrs Jane Stogua Relationship Mother
 Address Ottawa
Ont.

M.F.W. 2652
 23M-0-20.
 H.Q. 1772-30-1473

Amount of Special Pension Bonus \$ nil Abstracted by M L Dunn

Eligible for Gratuity \$ 180⁰⁰

Less amount of Special Pension Bonus paid..... \$ nil

Less Debit Balance of S. A. or A.P..... \$

Total deductions \$ nil

Balance due \$ 180⁰⁰

Cheque No. 9.18965-67 Date issued 28. 7. 20

Clerk J. Lehoult

REMARKS: Pensioner's money to
be administered by
Dept of Indian Affairs
Ottawa Ont

Audited by
[Signature]
 Date 22/2/20 \$180⁰⁰

Dg 28

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay \$

per diem; Field Allowance \$

per diem.

Separation Allowance \$

per month.

L.L. 53961—M. & D. 9791

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127
 300M-1-19
 1772-93-1140

Remarks:

A.C. Rank *Pte* Name **STOQUA, Michael Joseph.** ✓ Reg'l No. **788933** ✓
 Unit **130th. Bn.** } If in perm. Corps, } Married or Single **Single.** ✓
 What Unit? }

Place and Date of Enlistment **Pembroke, Ont. March. 26th. 1916.** Place of Birth **Pembroke, Ont.** ✓
Canada.

Name and Address, Next-of-Kin **Mrs. J. Stoqua.** ✓
Golden Lake, Ont. Relationship **Mother.** ✓

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

N/E. R.B. No. *4221*
 File R.L. *25-S-2868*
 Category *D of W.*

M

H

Discharge, Date and Place Reason Character

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.				
		Arrived in England, S.S. Lapland		6-10-16.	
9.10.16	130th BN	SOS TO 12th Bn.	W. Sandling	6-10-16	DO, 247
9.10.16	"	To be 4/6 pl with pay	"	6-10-16	Pl II DO 247
9-10-16	12th Bn	Taken on strength.	" "	6-10-16	Pl II 6 275
16-10-16	12th Bn	Reverts at own request	do	15-10-16	" 281
5-12-16	12 BN	SOS to 75th Bn overseas	do	5-12-16	" 324
17.12.16	75th	J.O.S from 12th Batt	Field	6.12.16	✓ 280.
14.4.17	"	Died of Wounds	13 for Mrs. Paulogrod	12.4.17	C.L. 184 J.S. W head 49th 6. 59 27 18/4/17

A.F.B. 103 CHECKED
 12 DEC 1916

788933

ORIGINAL ORIGINAL MEDICAL HISTORY SHEET.

Surname Stogna Christian Name M. J.

Examined { on 26 day of Mar 1916
at Fembroke
Birthplace { City or Town Fembroke
County Penfrew

Approved by [Signature]
Rank Surf Am M.O.

Apparent age 22
Trade or occupation Labourer
Height 5 Feet 7 1/2 Inches.
Weight 140 Lbs.
Chest measurement { Minimum 36 inches.
Maximum expansion 38 inches.
Physical development Good
Small-Pox Marks none

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

Vaccination Marks { Arm Right Left.
Number 0 1
When Vaccinated last 1905

Date.	Result.	VACCINATIONS.
<u>1915 Nov 5</u>	<u>ok.</u>	<u>W.A. Jones T.M.</u> M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease none on right shoulder

(b) Slight defects but not sufficient to cause rejection none

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1915 Sept 17</u>		<u>W.A. Jones T.M.</u> M.O.
<u>1915 Sept 27</u>		<u>W.A. Jones T.M.</u> M.O.
<u>4/7/16</u>		<u>Cd. Mollun Captain</u> M.O.

Enlisted on 26 day of March 1916 at Fembroke ent

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>42nd Regt Detachment</u>	<u>283</u>	<u>Good</u>	<u>sept 17/1915</u>
Transferred to	<u>130th OVERSEAS BATTALION, C. E. F.</u>		<u>TRANS. TO 15th. Bn. BO 275</u>	<u>October 9th 1916</u>
	<u>Trans to 75th Bn. BO. 327 DEC 5-1916</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.

P. 559
MARRIED OR SINGLE *Single*
PLACE OF BIRTH *Pembroke, Ontario*
NAME AND ADDRESS OF NEXT OF KIN *Mrs J Stogard
Golden Lake Ont Can.*
RELATIONSHIP OF NEXT OF KIN *Mother*
NAME AND ADDRESS OF NEXT OF KIN
RELATIONSHIP OF NEXT OF KIN
SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)
PAYABLE TO
RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.		
PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>reverts to ranks</i>	<i>15/10/16</i>	<i>6028529196</i>
<i>Died of Wounds</i>	<i>12.4.17</i>	<i>CXA184 14/14</i>

ADMISSIONS TO HOSPITAL, &c.				
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL	
			<i>St. Michael's</i>	

REG'L No. *788933* RANK *Corp* NAME *Stogard Joseph*
IF IN PERM. CORPS } WHAT UNIT } UNIT *1304 Bn* TRANSFERRED TO *12th Res Bn* DATE *6.10.16* AUTHORITY *10247*
PERMANENT FORCE ALLOWANCES TRANSFERRED TO *75th Bn* DATE *1-1-17* AUTHORITY *13037*
PLACE OF ATTESTATION *Pembroke Ont* TRANSFERRED TO *"K"* DATE *13/4/17* AUTHORITY *C.L.184*
DATE OF ATTESTATION *26/3/16* TRANSFERRED TO *12th Res Bn* DATE *1/5/17* AUTHORITY *10247*
ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE *1/10/16*
PAYABLE TO *Mrs J Stogard, Golden Lake Ont Can.* RELATIONSHIP *Mother*
ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
PAYABLE TO RELATIONSHIP
STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *18/4/17* EFFECTIVE *1-5-17* REASON *Died of Wounds*
DISCHARGE DATE AND PLACE REASON AND AUTHORITY *Discharged on N.E. Can. Index, M.F.*
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) Checked by *[Signature]*
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS																		
	No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE	AMOUNT					1 2 3 4				1	2	3	4	CREDIT	DEBIT																												
			\$	C.			\$	C.			\$	C.				No.	DATE	No.	DATE							No.	DATE				No.	DATE																					
1916													2.50	2.50												2.50					<i>Balance from Canada</i>																						
Oct 6	6	110	660		6	10	60																																														
7-14	8	80	640																																																		
15-31	17	100	1700	75	75	750																																															
Nov 1-30	30		3000		30		3000																																														
Dec 1-31	31		3100				310																																														
Jan 1-31	31	100	3100				920																																														
Feb 1-28	28	100	2800				340																																														
Mar 1-31	31		3100				310																																														
Apr 1-12	12		1200				1320																																														
July							49																																														
18th Aug 17							49																																														
Nov 17																																																					
Feb 18																																																					

Statement of
SEP 19 1917
Account rendered

Bank A/R #15-00 from 1/10/16 to 30/4/17. = \$105-00 In agreement with Ottawa, HQ 593-1-12 dated 3/5/17 Lief #20.

reverts to ranks 14/10/16 6028529196
Trans to 75th Bn. 1-1-17
P.O. 5112-16
24005-28-1/12/16
To "K" 13/4/17 C.L. 184
18 Days @ 12th April unpaid
CHECKED
[Signature]
On 11/1/17 6053 2375
Dr 261 AR 35 du 11. 4.17
2549 to 9/4 + 75 On.

*Sup 50
261*

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
	NO. OF DAYS	RATE		AMOUNT		NO. OF DAYS	RATE		AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2	3	4	CREDIT	DEBIT								
		\$	C.	\$	C.		\$	C.	\$	C.		NO.				DATE	NO.														DATE	NO.			

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. - RED. PAY	SEP. - ALLGE. EN'S
June/18.				Trans to Paym. O.					261		fran W
Aug/18	Drad Oct 1	261							261		miles

7/2

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

26-3-16

Separation and Assigned Pay Branch

Oct. 1.16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20			
----	--	--	--

RATE OF ASSIGNMENT

15			
----	--	--	--

Emir

PARTICULARS OF SEPARATION ALLOWANCE

No. *788933*
 Rank *Sgt.* Promoted Reverted Discharge
 Soldier's Name *Michael Jos. Stogua*
 Battalion *130th Battn*
 Beneficiary *Mrs. Jennie Stogua*
 Relationship *deserted mother*
 Address

Stogua
M J Stogua

PARTICULARS OF ASSIGNMENT

Name *Mr Jas. Stogua*
 Address *Golden Gate. Ont.*
 Co. *Renfrew.* Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917 Dec 31</i>	<i>✓</i>	<i>363-</i>	<i>180-</i>	<i>543-</i>	<p><i>Sold 30⁹ Pension 1¹⁰ 17.0 P closed 1¹⁰ 17.</i></p> <div style="border: 1px solid black; padding: 5px;"> <p>Pensions Notified Date... <i>24.4.17</i></p> <p>Killed in Action</p> <p>Died of Wounds } Date... <i>12.4.17</i></p> <p>Missing</p> <p>O. I. (H.)... <i>15.4.17</i> Clerk.....</p> <p>Date Noted..... <i>24.4.1917</i></p> </div> <p><i>Pension granted 1¹⁰ 17</i></p> <p><i>Assignee dependent. account to continue till pension granted.</i></p>

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.	Promoted	Reverted	Discharge
Rank			
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
------	------------	------------	------------	-------	---------

B/95

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	Unit.	Age.	Service.	
3764-a	788933	Pvt	Stoquam	J
1917	75/Canadian			
Station and Date.	Disease			
13 General Hospital 14-4-17	<p>T. 4. Rt Parieto Occipital Large GSW. Rt Parieto Occipital region on 9.4.17 Patient admitted 13 Genl Hptl on 11.4.17 Drowsy & semiconscious. Restless Rigidity Rt leg. Paresis Rt Arm & Hand. Reflexes normal. Hernia cerebri escaping thro wound. X-Ray showed large defect in Rt Occipital region with several radiating fractures Operation 11.4.17 T rephine Large area of lacerated brain & dura extending forward to temporal lobe No missile in brain. Patient very restless after operation Died without recovering consciousness on 11.4.17.</p>			
JMR	<p>T O Graham Capt R. H. [unclear] 12.4.17</p>			

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

Station
and Date.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

Mrs.
Sheet No. 2.

Jennie Stoqua

mother

Name of Soldier

Stoqua, M. J.
pte.

L. L. Job 310.-Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		K 24311	183	
Jan.	1917	H 30186	20	
Feb.		H 33316	20	
March		J 36293	20	
April		J 2997	20	
May		J 5954	20	
June		J 9186	20	
July		I 12356	30	
Aug.		T 15927	20	
Sept.		T 19422	20	
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Pension Granted. 1-10-17.
B.P.C. to Receiver \$
Clerk J. P. Date 11-9-17

PENSION
A. CLOSED.....
OVER-PAYT.....
RECOVERED BY B.P.C. 12-9-17
GRANTED

363
mailed 229
17cwc

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

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

Home Address - Pembroke, Ont.
MEDICAL HISTORY OF AN INVALID.

1. Station. **Renfrew, Ont.** 8. General remarks on his:—
 2. Regiment or Corps. **42nd Regt. Guard Detch.** (a) Conduct.
 3. Regimental No. and Rank. **308 Private** (b) Habits.
 4. Name. **Stoque, John,** (c) Temperance.
 5. Age last Birthday. **48 Years.** (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
 6. Enlisted on **October 8th, 1915**
 at **Petawawa Camp**
 7. Former trade or occupation. **Laborer** Date. **December 14th, 1917**

9. Service.	Years.	Days.	PERIODS	
			FROM	To
42nd Regt. Guard Detch.			Oct. 8th, 1915	Dec. 14th, 1917

10. (a) Disease or disability. **Overage**
 (b) Date of origin. **Not Applicable**
 (c) Place of origin. **Not Applicable**
 (d) Cause. **Not Applicable**

11. Present condition. (Most Important.)
(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, i.e., debility, breathlessness on exertion, necessity of treatment by rest, etc.)
Man in good physical condition.
No signs or symptoms of disease .

12. (a) Is the disability the result of service or climate? **Not Applicable**
 (b) Has it been aggravated by intemperance, vice or misconduct? **Not Applicable**

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Nil

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held?

Not Applic.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not Applic.

14. Treatment.

None

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

Not Applic.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

Able to earn a full livelihood.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

Yes.

18. State if for discharge on account of unfitness for Service.

H.D. Johnson

Capt. C.A.M.C.

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes.

11. Yes.

12. Yes.

15. Yes.

16. Yes.

17. Yes.

18. Is he unfit for Military Service. Yes.

Recommendations :

On account of overage recommend discharge from service. Category E. No treatment indicated. Able to pass under his own control

Signatures :—

W. A. James Capt. C.A.M.C. President.

A. H. ... Capt. C.A.M.C.

Station. Renfrew, Ont.

Members.

Date. December 14th, 1917.

H. D. Graham Capt. C.A.M.C.

Date. JAN 8 - 1918

Approved.

Date.

[Signature]
Asst. Director of Medical Services.
D/ A.D.M.S. Mil. District No. 5
For A.D.M.S. Mil. District No. 3

Director-General of Medical Services.



(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

Index No.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

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.....

Date of final Medical Board or decision. } Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227. 200m. 8-6. H. Q. 1772-89-117.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal.

Date of final disposal

How finally disposed of

The original Report is invariably to accompany the discharge documents of invalids.