

ATTESTATION PAPER.

No. A 57855 ✓

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?.....
- 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?.....
- 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?.....
- 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?]

Alphonse Dusseault
Montréal. Cou
2 Dusseault (Dependant)
608 St. Viateur
Sept 3/1894
News Agent
 no
 yes
 no
 no

Alphonse Dusseault (Signature of Man).
P. Mille (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Alphonse Dusseault*, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *9 July* 191*5* *Alphonse Dusseault* (Signature of Recruit)
P. Mille (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Alphonse Dusseault*, 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 *9 July* 191*5* *Alphonse Dusseault* (Signature of Recruit)
P. Mille (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 *Montréal* this *9* day of *July* 191*5*.

Alphonse Dusseault (Signature of Justice)

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

..... (Approving Officer)

Description of Alphonse Dussault on Enlistment.

Apparent Age 20 years 9 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. 6 ins.
 Chest measurement { Girth when fully expanded 37 ins.
 Range of expansion 2 ins.
 Complexion fair
 Eyes blue
 Hair light brown

2 Vacc left arm
scar left leg
Right leg

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

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 9th July 1915

J. A. Fairie
Lieut A. M. C.
 Medical Officer.

Place Montreal

*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.

Alph Dussault 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.

Date July 9 1915
McKeown (Signature of Officer)

C.E.F.

DUSSEAULT ALPHONSE

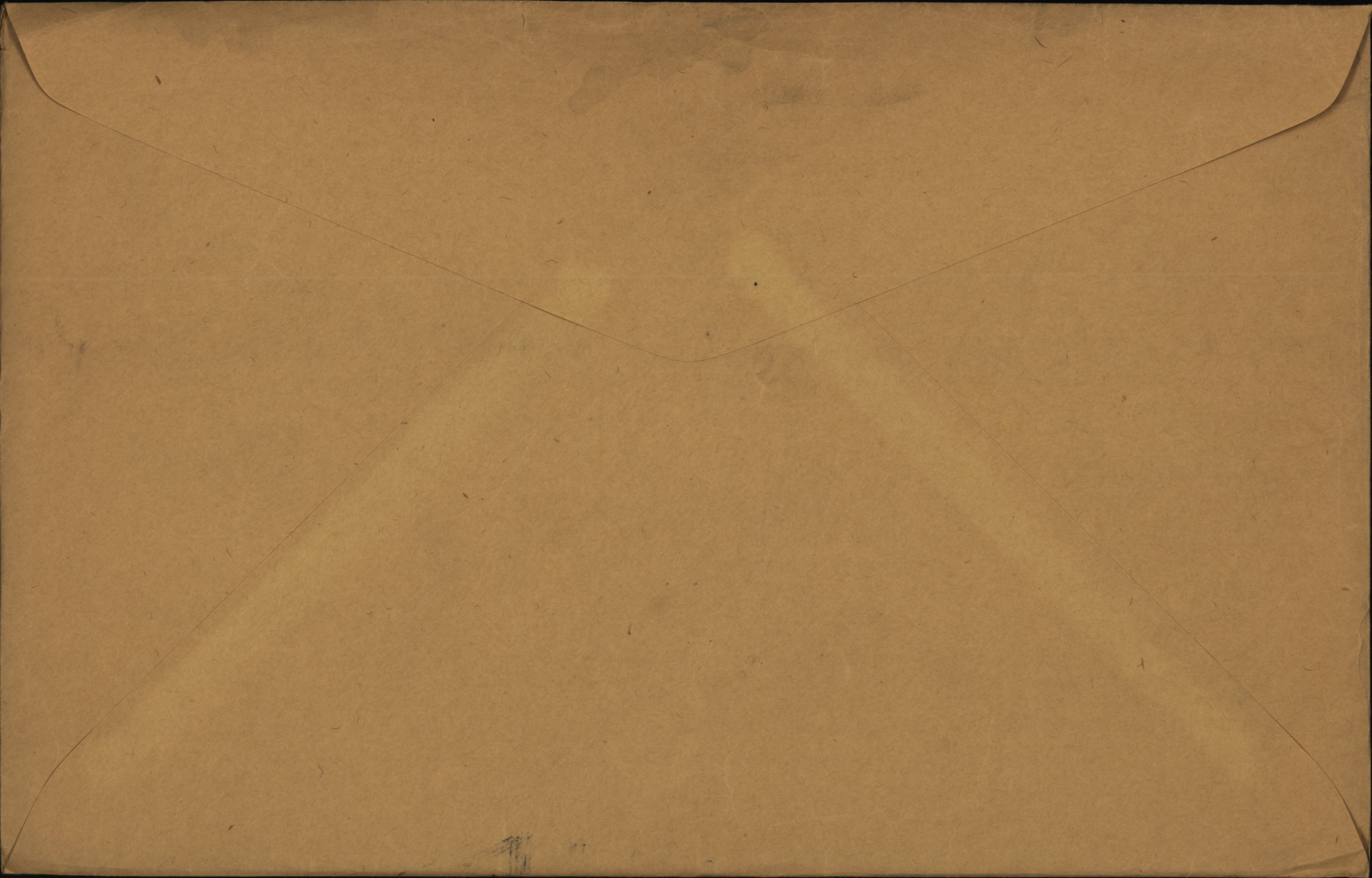
457855

23 RES BN

42417

DIED OF WOUNDS 15-4-16





Name ^EDussault, A. Rank Pte. Reg. No. 457855
 Unit 3rd. Batt. File R.L.25-D-453
 Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916						
15-4-16	No.10.Cas.Cler.Stat.	GSW.Abdomen				
	<u>DIED OF WOUNDS</u>			A337	3/15/16	29/4/16
	Ex D.C.S.No.331 Dated 19-4.					

SEP 28 1922
Scroll Despatch

Regn. No. 253018

H. A. G.
M

MAR 17 1922

Regn. No. 33071

3rd. Bn.

649-D-1419. 457855 Pte. Alphonse Dusseault. CEF

Medals & Dec.

(Sister) (~~XXXXXXXXXX~~)

Mrs. Leon Octeau,
2193 Bordeaux St.,
(17³/₂₃)
624b Delandaudiere Street,
Montreal, P.Q.,

Placque & Scroll

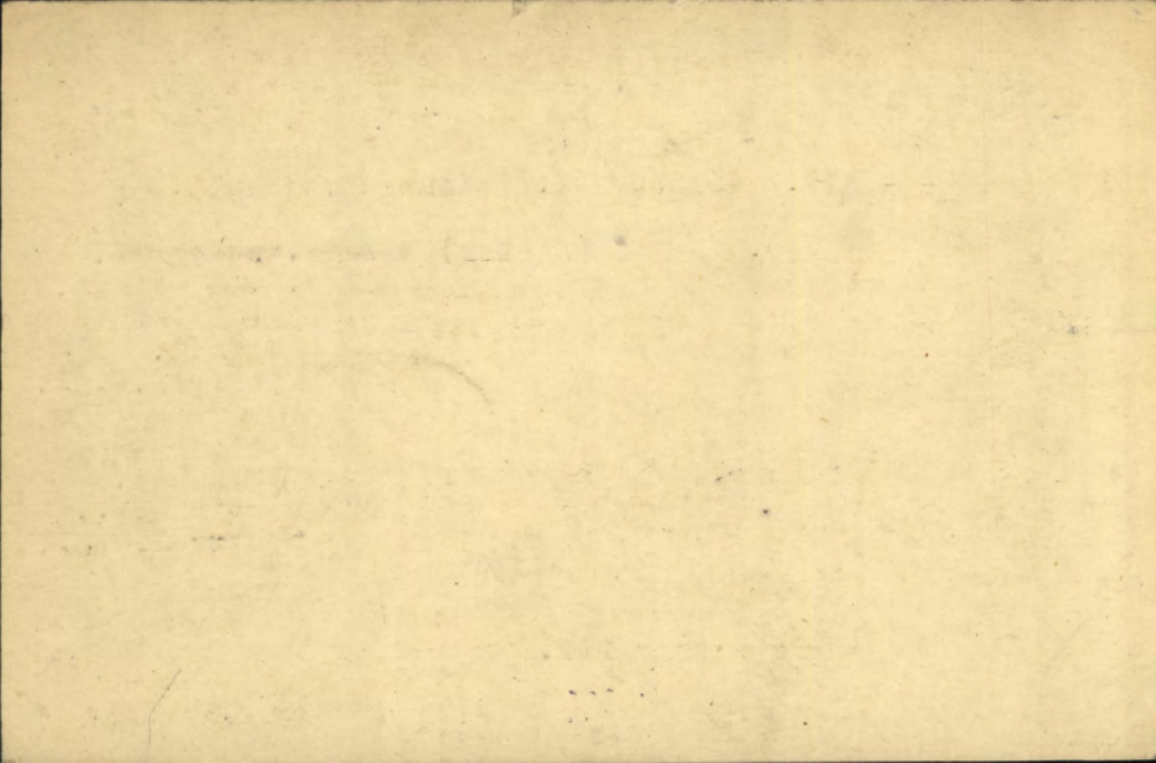
(Brother) Mr. O. Dusseault,
897 Cartier St.,
Montreal, P.Q.,

Serial # 786098
Serial # 786098

Memorial Cross.----- Nil.

54857

Eligible for star Pte. 3rd. Bn.
Elig. " V.M.
M.E.H. " B.W.M.



649-D-1419

CARD NO.

D

FOLL.

SURNAME.

Musseault.

CHRISTIAN NAMES

Alphonse.

REGL. NO.

457855

RANK

Pte.

UNIT

60th Regt R.I.C.

Bw.

FORMER CORPS

me.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Musseault.

RELATIONSHIP TO SOLDIER

Dependant.

ADDRESS

608 De St Valier, Montreal

also notify Mrs O. G. Johnston (P.O.)

97 de Normandie St. Montreal P.Q. (auth letter ^{sub file} 27.5.17)

COUNTRY OF BIRTH

Canada, Montreal, P.Q.

DATE

PLACE OF ATTESTATION

Montreal, P.Q.

DATE

July 9th 1915.

Sailed from Quebec P.S.S.

"Scandinavian" 27-8-15 ²¹⁰/₂

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

NAME **Dusseault Alphonse**

REGT'L NO **457855**
 H. Q. FILE NO. 649-

RANK AND CORPS **Pfc 3rd Batt Form 60th**

FOLLOWS
 No. **1636x**

CABLE		NATURE OF CASUALTY	FOLLOWS
No.	DATE		
M 5515	21-4-16	Died of wounds at No 10 Casualty Clearing Station, April 15 th 1916. ✓	
A 7 B 2090a (Received 16-3-17)	^{Women} 21-4-16	Died of wounds received in action April 15 th 1916 No 10 Cas ble. Station	

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

A 338.

10 Cas. Cl. Station

15-4-16

Acid of H₂O. GSW Abdomen.

ed
Number 457855 Rank Pte

Surname DUSSEHAULT

Christian Name Alphonse

Units 3rd Br Coy Theatre of War France

Date of Service 14-12-15 D

Remarks

Latest Address Mrs Leon Oteau (Sister)

2193 Bordeaux St
Montreal 624 Delanauddere Street

Roll No. Page 165/2
17³/₂₃ Montreal P.Q.

200m.-2-21.M.

Port, ship, and date of arrival.....

Next of kin.....

Address on leave.....

Address on discharge.....

Transportation issued Yes No Date.....

Character on discharge.....

Previous occupation.....

Date and place of enlistment.....

Diagnosis.....

Date of Medical Boards.....

Date.....

Remarks.....

~~DESP. MAR 21 1923
REGN. NO. 40784~~

~~DESP. SEP 22 1922
REGN. NO. 40784~~

Ret'd 11-10-22

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

Surname

Christian Name or Names

Reg. No.

Nussacalt. A.

454855.

Rank

Unit

Co.

Troop

Batty.

Pte. 3rd Batt.

Date of Admission

Transferred

#10 Cas Qg Stet.

Hosp.

15.4.16

Hosp.

Hosp.

Hosp.

Diagnosis

G.S.W. A. Abdomen

(1) Later Diagnosis (if changed)

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

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION

Died of Wounds

15.4.16

Date

C.L. 24.4.16 1337.

REMARKS

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Rank *3rd Capt* Name **DUSSAULT, Alphonse**

Reg'l No. **457855**

Unit *Dpt. 60th Bn. to 23rd Res. Bn.*

If in perm. Corps, What Unit?

Married or Single **Single.**

Place and Date of Enlistment **Montreal, 9th July, 1916.**

Place of Birth **Montreal, Can.**

Name and Address, Next-of-Kin **T. Dussault, 608 St. Valie, Montreal.**

Relationship **Dependant.**

Assigned Pay Monthly \$ *15⁰⁰ = S. P. and* Payable to *dependant.*

Relationship

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place *Died of Wounds* Reason *15/4/16 basket* Character *A337*



Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.	
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date							
<i>1915</i>	<i>Sep. 1-30</i>	<i>30</i>	<i>100</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>300</i>	<i>10</i>	<i>43</i>			<i>974</i>	<i>15</i>		<i>2474</i>	<i>1826</i>	<i>balanced 10/1</i>	
	<i>Oct 1-31</i>	<i>31</i>	<i>100</i>	<i>31</i>	<i>31</i>	<i>10</i>	<i>310</i>	<i>18</i>	<i>96</i>			<i>53</i>	<i>53</i>		<i>6853</i>	<i>1617</i>	<i>cloth. Chgs. 154. PA Bd. 274</i>	
	<i>Nov 1-30</i>	<i>30</i>	<i>"</i>	<i>30</i>	<i>30</i>	<i>"</i>	<i>300</i>	<i>"</i>	<i>33</i>			<i>3894</i>	<i>15</i>	<i>00</i>	<i>12.14</i>	<i>71.67</i>	<i>38.67</i>	<i>see Bal. Oct.</i>
	<i>Dec 1-31</i>	<i>31</i>	<i>"</i>	<i>31</i>	<i>31</i>	<i>"</i>	<i>310</i>	<i>"</i>	<i>34</i>			<i>9.04</i>	<i>15</i>		<i>38.64</i>	<i>71.51</i>	<i>37.41</i>	<i>4 Arty. P.A.B.O. 291 4194 det.</i>
<i>1916</i>	<i>1-31</i>	<i>31</i>	<i>"</i>	<i>31</i>	<i>31</i>	<i>"</i>	<i>310</i>	<i>"</i>	<i>34</i>			<i>582</i>	<i>15</i>		<i>20.22</i>	<i>23.53</i>	<i>130 296 13/12/15</i>	
	<i>1/2 29/2</i>	<i>29</i>	<i>"</i>	<i>29</i>	<i>29</i>	<i>"</i>	<i>290</i>	<i>"</i>	<i>31</i>			<i>522</i>	<i>15</i>		<i>20.52</i>	<i>11.85</i>		
	<i>1/3 21/3</i>	<i>31</i>	<i>"</i>	<i>31</i>	<i>31</i>	<i>"</i>	<i>310</i>	<i>"</i>	<i>34</i>			<i>524</i>	<i>15</i>		<i>11.20</i>	<i>35</i>	<i>1.90</i>	<i>loss of 100 B. 14 31/3/16</i>
				<i>213</i>														<i>To Ottawa for settlement. see large ledger sheet</i>
							<i>2130</i>	<i>10</i>	<i>24430</i>			<i>12693</i>	<i>105</i>		<i>1047</i>	<i>24240</i>	<i>190</i>	

Cash found in effects *in report*

Statement of
AUG 15 1916
Account rendered

W I L L

the money thats coming
to me go to my sister
Bertha Dusseault
1198 st Denis street
Montreal Canada.

Extracted from Pay-book, Page 14.

Holograph.

Pte. Dusseault, A. No. 457855.

3rd Battalion.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
20m.—5-15.
H. Q. 1772-39-819

435

To Whom ^(Father) Theodore Daussault By Whom Assigned Pte. Daussault Alphonse
Address 608 de St. Vallieres St. Regtl. No. 457855 Daussault,
St. Denis Montreal Rank Pte.
Que. Corps 60^e Battalion C.C.F.
Rate \$15.00 **SEP 1 1915** ECo

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 1px solid black; padding: 5px; display: inline-block;">Casualties</div> Died of wounds April 15/16 Telegram on Order 649-D-1419 \$60.00 a/c closed Assignee deceased Due Dec/15
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.		X 432	15 00	
Oct.		41749	15 -	
Nov.		X 4550	15 -	
Dec.		L 6904	15	
Jan.	1916	N 11869	15	
Feb.				
March				

457855

Dussault Alphone

DAU

Casualty Form—Active Service.

CERTIFIED CORRECT.
Canadian Record Office,
Westminster House,
7, Millbank, S.W.

Regiment or Corps 23RD RES BATT. C.E.F.Regimental No. 457855. Rank Private. Name Dussault, A.Enlisted (a) 9-7-15. Terms of Service (a) Duration of War. Service reckons from (a) _____Date of promotion } _____ Date of appointment } _____ Numerical position on } _____
to present rank } to lance rank } roll of N.C.Os. }

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
<u>13-12-15</u>		<u>Drafted to 3rd Canadian Battalion Galt House from 23rd Reserve Battalion C.E.F.</u>			<u>B. 2069</u> <u>Letter of Adj.</u>
<u>14/12/15</u>	<u>O.C. Can. Base Depot.</u>	<u>Taken on strength 3rd Can. Bn. on arrival at Can. Base Depot from 23rd. Reserve Bn. Shorncliffe.</u>		<u>14/12/15. Hon. Roll.</u> <u>102/12/3/157.</u>	
<u>14/12/15</u>	<u>O.C. Can. Base Depot.</u>	<u>Proceeded to join 3rd Can. Bn.</u>		<u>24/12/15. Hon. Roll.</u> <u>143/12/3/157.</u>	
<u>2-1-16</u>	<u>O.C. 3rd. Bn.</u>	<u>Joined Unit.</u>		<u>27-12-15. B. 213. D.O.S.</u> <u>266.</u>	
<u>23/2/16</u>	<u>Dr.</u>	<u>Placed under stoppage of pay to replace loss of kit.</u>		<u>18/3/16. B. 2069.</u>	<u>5/3/16.</u>
<u>15/4/16</u>	<u>Ob. No. 10. Bus. S. 4. Station</u>	<u>Ob. No. 10. Died of wounds. 2.40 a.m.</u>		<u>15/4/16. Letter of 15/4/16. Can. Rec. file 6508. Part II Ord. No. 17. 21-4-16. Daily Casualty Sheet No. 331.</u>	

(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				
					<i>to Walter Dool</i> <i>Leut.</i> <i>fr. Lt. Col. A. D. P.</i> <i>Canadian Section</i>

RECEIVED
1918-12-21

100

REC'D

Received

RECEIVED

101-1-

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
50m.-6.16.
H. Q. 1772-39-319.

457855

480

To Whom Theodore Dussault By Whom Assigned Dussault, Alphonse
Address 608 de St Vallieres St. Regt. No. 4 57855
St Denis Rank pte
Montreal Corps E Co 60 Battr
Rate 15/00 from Sept 1/15

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<p>N.B. This sheet is <u>not</u> the original cheque numbers & amounts taken from auditor General statements. Original sheet cannot be located 15/17 JLD</p> <p>COPIED FOR 5 CASUALTIES.</p> <p>3M. Stop Payment from 1⁵/₁₆</p> <p>J. X. 60.⁰⁰ 500</p> <p>Life closed. assignee deceased. See letter from Mrs. D. Johnston Jan 29/16 15/17</p>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.		X 432	15 -	
Oct.		2 1749	15 -	
Nov.		H 4550	15 -	
Dec.		L 6904	15 -	
Jan.	1916	7 11869	15 -	
Feb.				
March				

Mo
9me

Cancelled.

1916



45142

Rank _____ Name **DUSSAULT, Alphonse** Reg'l No. **457855**

Unit **Dft. 60th Bn. to 23rd Res. Bn.** If in perm. Corps, What Unit? _____ Married or Single **Single.**

Place and Date of Enlistment **Montreal, 9th July, 1915.** Place of Birth **Montreal, Can.**

Name and Address, Next-of-Kin **T. Dussault, 608 St. Valier Montreal.**

Relationship **Dependant.**

Assigned Pay Monthly \$ _____ Payable to _____

Relationship _____

Separation Allowance \$ _____ Payable to _____

Relationship _____

Discharge, Date and Place _____

Reason _____

Character **NERB No. 15**



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				
17.9.15	O.C. 23	Taken on strength	Shorncliffe	6.9.15	Part II 220
2.10.15	"	Forf. 2dys PFA. Absent.	"	2.10.15	" 234
17.11.15	"	" 1 " " " "	W Sandling	17.11.15	" 274
7.12.15	"	" 4 " " 4dys det. "	"	"	" 291
13.12.15	"	Trans. to 3rd Bn. Overseas	W Sandling	13.12.15	" 296
1.1.16	O.C. 3.	Taken on strength 3rd Bn.	In the Field	14.12.15	Part II - 1
31.3.16	3rd Bn.	Placed under stoppages of pay to replace loss of Mess tin cover val. 5/4	"	18.3.16	" 14
21.4.16	"	Died from Wounds received in action. Auth: - O.C. 10 Cas. Clearing Station	"	15.4.16	Part 2 O. 17
24.4.16	"	Died of Wounds at 10 Cas. Clearing Station	"	15.4.16	C. C. A 338 J.S.W. Alderson O.N.

*MX
25/6/21 M.J.*



Dusseault

MEDICAL HISTORY SHEET.

Surname Dusseault Christian Name Alphonse

Examined { on 9th day of July 1915
 at Montreal
 Birthplace { City or Town Montreal
 County _____

Approved by J. A. Fairie
 Rank Lieut a.m.c M.O.

Apparent age 20 years & 9 mos
 Trade or occupation News Agent
 Height 5 Feet 6 Inches.
 Weight 137 1/2 Lbs.
 Chest measurement { Minimum 35 inches.
 Maximum expansion 37 inches

Date	Fit or Unit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Physical development _____ M.O.
 Small-Pox Marks _____ M.O.
 Vaccination Marks { Arm. Right. Left. 2
 Number 2

Date	Result	VACCINATIONS.
		M.O.
		M.O.
		M.O.

When Vaccinated last _____ M.O.
 (a) Marks indicating congenital peculiarities or previous disease _____ M.O.
 (b) Slight defects but not sufficient to cause rejection _____ M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>14/7/15</u>		<u>H. Pavey</u> M.O.
<u>22/7/15</u>		<u>H. Pavey</u> M.O.
<u>31/7/15</u>		<u>H. Pavey</u> M.O.

Enlisted on 9th day of July 1915 at Montreal

	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>60th Bata C. 50.</u>	<u>457855</u>		<u>9th July 1915</u>
Transferred to..	<u>23rd Bata</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.

MARRIED OR SINGLE *S.*
 PLACE OF BIRTH *Canada*
 NAME AND ADDRESS OF NEXT OF KIN *S. A. Sussault*
608 St. Valie Montreal Que.
 RELATIONSHIP OF NEXT OF KIN *Dependant.*
 NAME AND ADDRESS OF NEXT OF KIN
 RELATIONSHIP OF NEXT OF KIN
 SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)
 PAYABLE TO
 RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.		
PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No *457855*. RANK *Private* NAME *Sussault* *Alphonse*
 IF IN PERM. CORPS: UNIT *3rd Batt.* TRANSFERRED TO *F. E.* DATE *15/4/16* AUTHORITY *67. A. 337*
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY
 PLACE OF ATTESTATION *Montreal* TRANSFERRED TO DATE AUTHORITY
 DATE OF ATTESTATION *9th July 1915.* TRANSFERRED TO DATE AUTHORITY
 ASSIGNED PAY MONTHLY \$ *15.00* DATE EFFECTIVE
 PAYABLE TO *S. A. Sussault 608 St. Valie Montreal Que.* RELATIONSHIP
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
 PAYABLE TO RELATIONSHIP
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *28/4/16* EFFECTIVE *1/5/16* REASON *Died of Wounds 15/4/16 67. A. 337*
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *15/4/16.*
 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								
<i>April</i>	<i>30</i>	<i>30</i>	<i>1.</i>	<i>30</i>	<i>30</i>	<i>10</i>	<i>3</i>																												<i>15 days overpaid April</i>						
<i>Checked term sheet</i>																																			<i>Notes on Rept. C 517</i>						
<i>W. E. Brch. Sept 1916</i>																																			<i>To Ottawa for settlement</i>						
<i>1917</i>																																			<i>1319116</i>						
<i>Sept</i>																																		<i>On 6th Dec. pay for 1917 months unpaid 1918. Also pay for 11 months. Observation no D. 176. of 16. 7. 17.</i>							

Cash found in effects *None found*

Statement of
 AUG 15 1918
 Account rendered

No. 2.

Army Form W3997.

OLYMPIC
Sa. 12 18 Ar 14 12 18

Regtl. No. 739605 Rank Pte.

Name Wallace James
(Christian Names in full) (Surname)

Unit Gen Depot Regt. 114 H Bw.
or
Corps

CATEGORY B.U. NEXT OF KIN Father

REASON FOR RETURN.

Medical Board held at Wiley

Nov 23rd 1918.

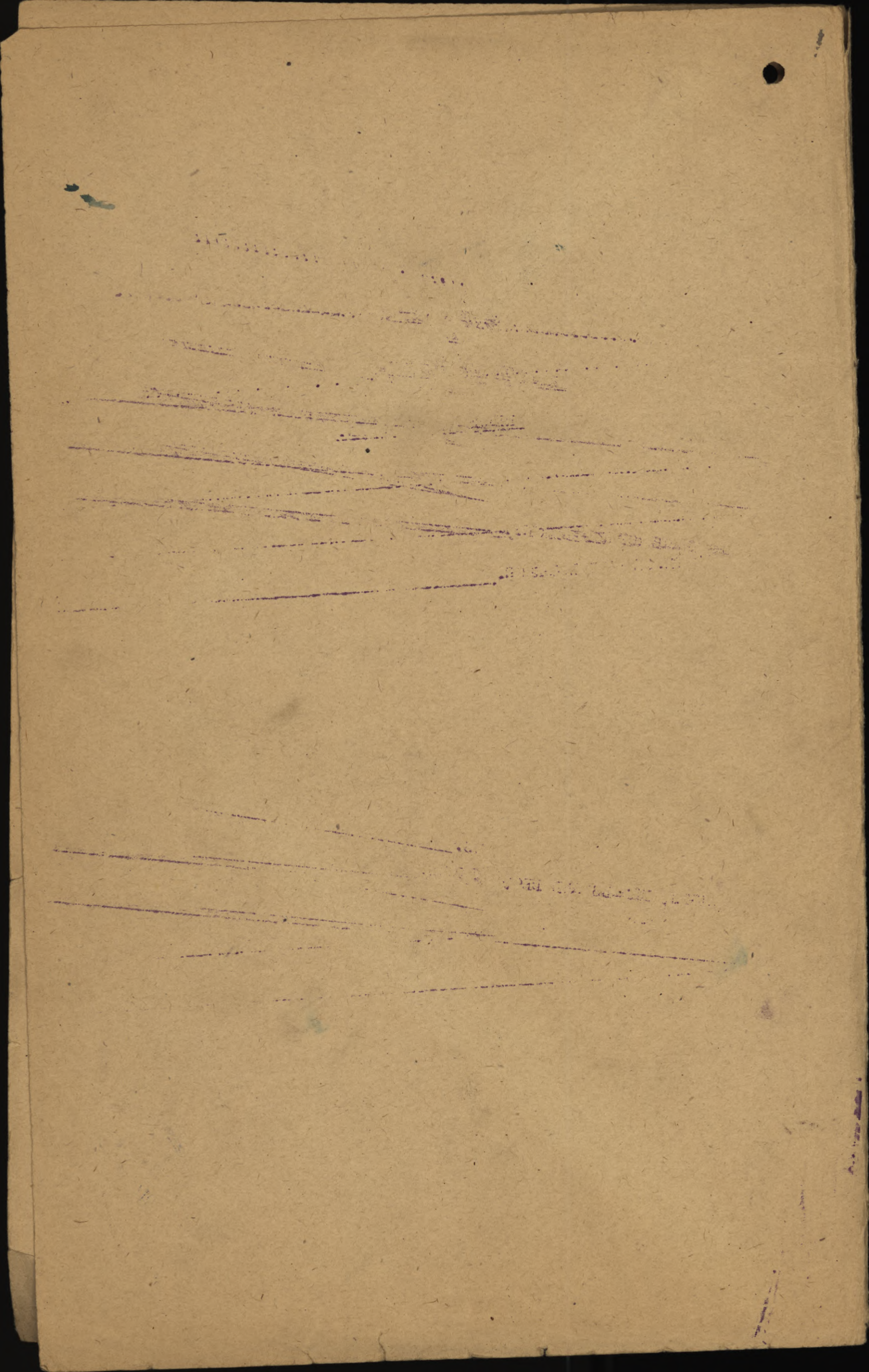
INTENDED PLACE OF RESIDENCE. Caledonia.

**COVER
FOR
DISCHARGE DOCUMENTS.**

CAMPAIGNS, MEDALS AND DECORATIONS.

12 mo in France.





57855 Dusseault Alphonse

23rd Bu.

7-1

WILLS ON PROBATE ACT

WILL

TESTATOR'S NAME: [Illegible]

100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100

The money that's coming
to me go to my sister
Bertha Dusseault
1198 St Denis street
Montreal Canada

WARRANT ON PROBATE ACT

100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100
100	100

Working for in relation to [Illegible]
[Illegible] [Illegible] [Illegible]
[Illegible] [Illegible] [Illegible]

RATES OF REGIMENTAL PAY.

OFFICERS—ALL ARMS. Per diem.

	Pay.	Field Allowance.
Colonel.....	6.00	1.50
Lieut.-Colonel	5.00	1.25
Major	4.00	1.00
Captain	3.00	.75
Lieutenant	2.00	.60
Paymaster	3.00	.75
Quartermaster	3.00	.75
Nursing Sister	2.00	.60
Command Pay, in addition to pay of rank	1.00	
Adjutant, in addition to pay of rank.....	.50	

WARRANT OFFICERS, N.C.O.'S, AND MEN.

Warrant Officers	2.00	.30
Quartermaster Sergeant	1.80	.20
Orderly Room Clerks	1.50	.20
Pay Sergeants	1.50	.20
Squad. Battery or Company Sergt.-Major	1.60	.20
Colour Sergeant or Staff Sergeant	1.60	.20
Squad. Battery or Company Q.M. Sergt.	1.50	.20
Sergeants.....	1.35	.15
Corporals.....	1.10	.10
Bombardiers or Second Corporals	1.05	.10
Privates, Gunners, Sappers, etc.	} 1.00	* .10
Trumpeters, Buglers and Drummers...		

Working pay in addition to pay of rank varying from \$1.00 to 50 cents per diem according to qualifications is granted to Artificers, Motor Car Drivers, Cooks, etc.

Army Form W. 3066.

To be filled in and pasted inside the back cover of the Soldier's Pay Book when he leaves his unit to embark for service abroad.

CERTIFIED that the equipment, clothing and necessaries of the undersigned soldier are complete with the following exceptions:—

— nil —



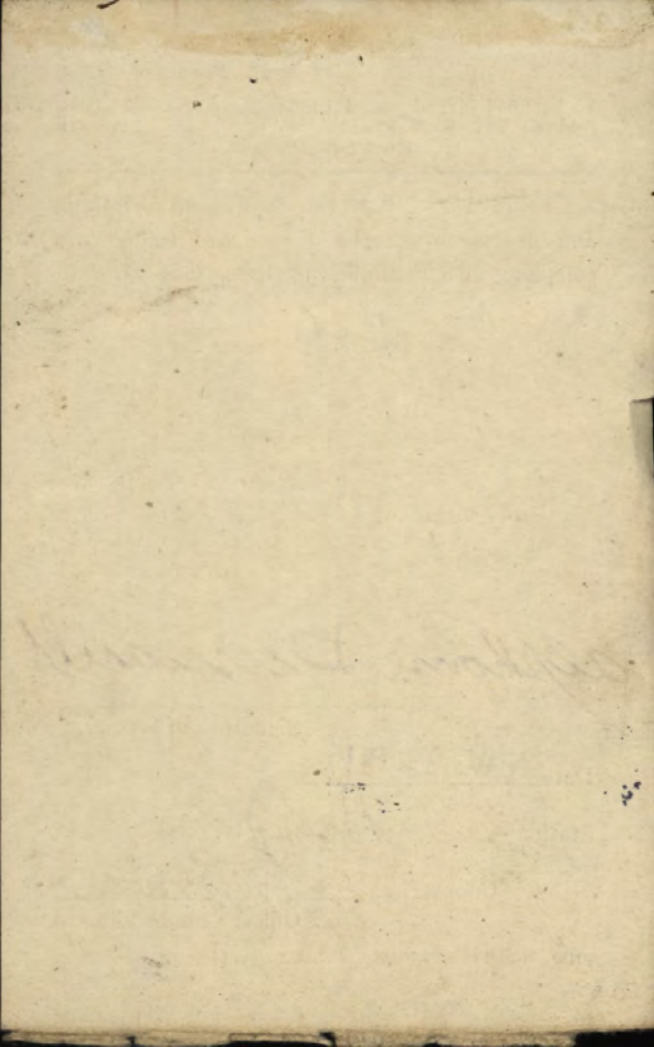
Alphonse Dussault

Signature of Soldier.

Date NOV 27 1915

Station West Sandling

Countersigned J. Bowen
Officer Commanding.



H 57.855

Pte Dusseault. A.

3 Bn

DoW

