

M. D. FIRST Depot Battalion SECOND QUEBEC Regiment

Regtl. No. 3286676

*old form
29/10/16*

PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)



OCT 23 1918

1. Surname Gagnon
2. Christian name Joseph Alphonse
3. Present address St. Michel, Bellechase Co. P. Q. Canada
4. Military Service Act letter and number 156176 EC
(If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension, or surrender)
5. Date of birth 31 st. March 1896
6. Place of birth St. Michel, Bellechase Co. P. Q. Canada
(town, township or county and country)
7. Married, widower or single Single
8. Religion Roman Catholic
9. Trade or calling Farmer
10. Name of next-of-kin Joseph Gagnon
11. Relationship of next-of-kin Father
12. Address of next-of-kin St. Michel, Bellechase Co. P. Q. Canada
13. Whether at present a member of the Active Militia No
14. Particulars of previous military or naval service, if any Nil
15. Medical Examination under Military Service Act :—
(a) Place Quebec, Que. (b) Date 27-6-1918 (c) Category A2

DECLARATION OF RECRUIT

I, Joseph Alphonse Gagnon, do solemnly declare that the above particulars refer to me, and are true.

Joseph Alphonse Gagnon (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 21 yrs. 4 mths.

Height 5 ft. 2 ins.

Chest measurement } fully expanded 32½ ins.
range of expansion 29½ ins.

Complexion Fair

Eyes Brown

Hair Brown

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Nil

O. C. FIRST Depot Btin. SECOND QUEBEC Regt.

Place Quebec, Que. Date 27th. June 1918



Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

Docs \$7.10
ASR 122
man 113

ml - 1 copy
Am X
3-2-21

DISCHARGE DOCUMENTS

Name GAGNON JOSEPH ALPHONSE

Regt. No. 3286676 Rank 7^{te}

Corps 1st Depot Bn 2nd Quebec Regt.

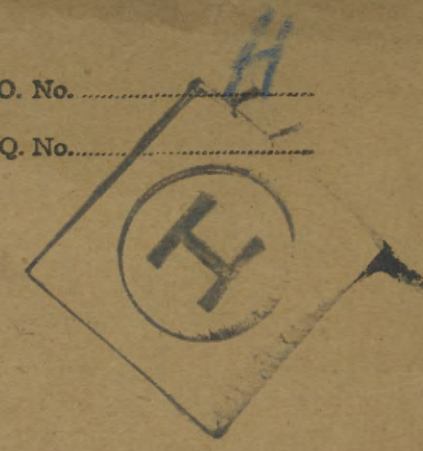
Deceased 7-10-18



R. O. No.

H. Q. No.

01033





649-G-14872

Gagnon, Jos. A. Pte. #. ~~3286676~~ ⁶²⁸⁶⁷⁷⁶ = 1st. Depot. Bn. 2nd. Que. Regt.

3286676

Medals & Dec. (Father)

Mr. Joseph Gagnon,
St. Michel,
Bellechasse Co. P.Q.

P. S. S. (Father)

See above.

Mem. Cross. (Mother)

Mrs. Joseph Gagnon,
St. Michel,
Bellechasse Co. P.Q.

MAY 3 1922

Canada only

Scroll Desp. _____

Recon. No. 241079

SEP 26 1922

Plaque Desp. _____

Recon. No. 146480a

1064

M 46044 FEB 22 1921

1

D
7/10/18

H. Q. 649 914878 ✓

M. D. No. 5

Surname Gagnon T. O. S. 19

Christian names Joseph Alphonse D. O. Pt. II of

Regtl. No. 3286676 Rank Plt S. O. S. 7-10-1918

Unit 2nd Que Regt 1st Ligne Bn Reason deceased

Auth. no. 283 10-10-18 1/20

Next of kin Gagnon Joseph Relationship Father

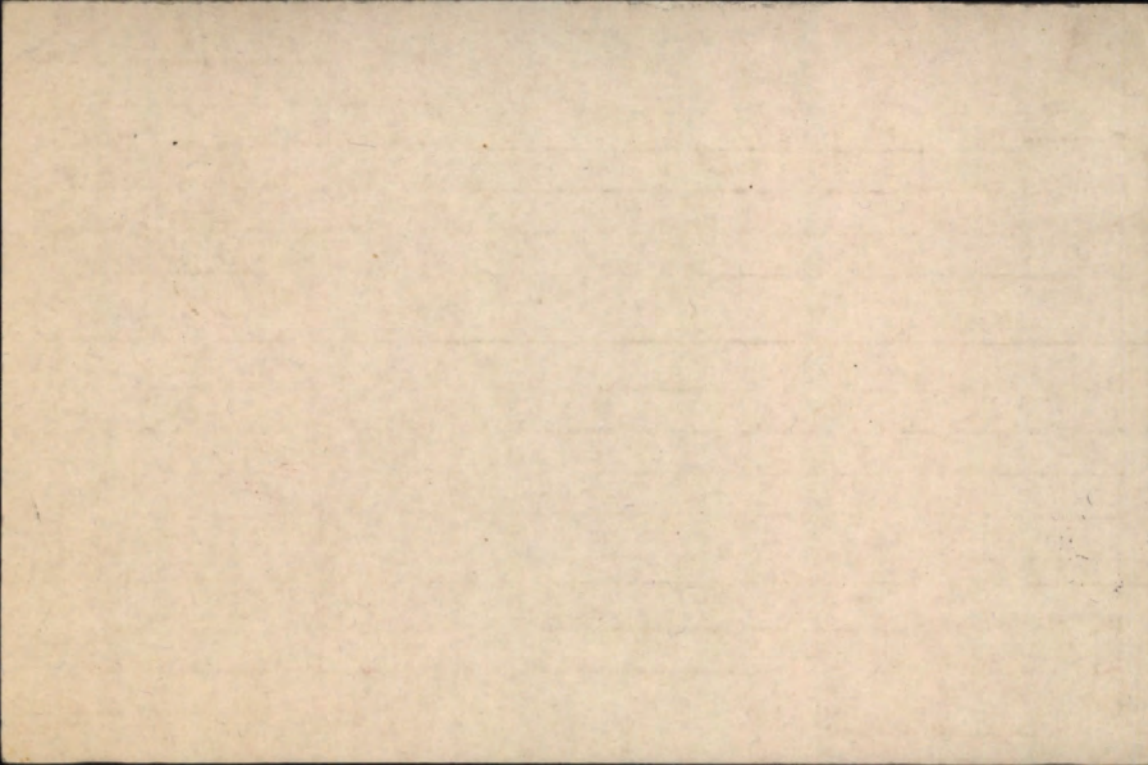
Address St Michel Bellechase Co Also notify:

PQ

BORN—Place Canada St Michel PQ Date May 31st 1896

ATTESTED—Place Quebec PQ Date June 27th 1918

O/S R/C





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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

1st DEPOT BATTALION 2nd. QUEBEC REGIMENT

Unit, Regiment or Corps.....

Regimental No. 3286676 Rank Private Name Joseph Alphonse Gagnon
C. E. F.

Enlisted (a) 27-6-1918 Terms of Service (a) Can. Exp. Force Service reckons from (a) 27-6-1918

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) Farmer

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				
10-10-18	2nd Lieut.	Deceased	Mill Hall	7-10-18	S.O. 253

X
3-2-21
or

Dr. Smith
Capt. for Dept

(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.



FORM OF WILL

SEE INSTRUCTIONS ON BACK

If you do not specifically mention your life insurance it will be assumed to pass by this will.

Name, &c. I, Joseph Alphonse Gagnon (Father)

Regimental number 3286676 Rank Private serving in the

1st DEPOT BATTALION 2nd QUEBEC REGIMENT Canadian Expeditionary Force,

declare this to be my last will, revoking all previous wills, if any.

Executor I appoint Joseph Gagnon (Father)

whose address is St. Michel, Bellechase Co. P.Q. Canada

to be the executor of this my last will.

General gift I give to Joseph Gagnon (Father)

whose address is St. Michel, Bellechase Co. P.Q. Canada

all my property not disposed of above.

Date Dated at 27 this June 1918

Signature Joseph Alphonse Gagnon
Signature of Soldier.
Joseph Alphonse Gagnon

Signed and acknowledged by the testator as and for his last will in the presence of us, both present at the same time, who at his request, in his presence and in the presence of each other have hereunto subscribed our names as witnesses.

	1ST WITNESS	2ND WITNESS
Witnesses	Signature <u>[Signature]</u>	Signature <u>[Signature]</u>
	Address <u>Drill Hall, Quebec, Que.</u>	Address <u>Drill Hall, Quebec, Que.</u>
	Occupation <u>Clerk</u>	Occupation <u>Clerk</u>

died 8/10/18

OCT 22 1918

INSTRUCTIONS

NAME

Give your first names and surname in full. Fill in correctly your rank, regimental number and the name of the unit to which you belong.

EXECUTOR

Appoint as executor some responsible person, preferably a civilian, and if possible someone who is permanently resident in the Province where the property is situate. It is advisable that the person to whom you leave your property should be the executor. For instance, if you leave your property to your wife, you should ordinarily appoint her. One, two or more executors may be appointed, but the appointment of more than two is inconvenient.

LIFE INSURANCE

If you do not wish to pass life insurance by the will this should be stated.

SHARES

If you wish to give part of your property to one person and part to another, write in the blank space a gift of the property of which you want to dispose specially, and then complete the rest of the form. Thus, if you wanted to give your farm and implements to your sister, whose name was Mary Smith, and to leave the rest of your property to your mother, whose name was Elizabeth Smith, you would write into the form what appears in italics below.

For example:—

I give to my sister, Mary Smith, whose address is 154 William Street, Winnipeg, my homestead and farm implements.

I give to.....*my mother, Mrs. Eliz. Smith,*.....
whose address is.....*250 Yonge Street, Toronto,*.....
all my property not above disposed of.

DATE

Do not forget to insert the date on which the will is signed.

WITNESSES

Two witnesses are absolutely necessary. They and the soldier must all be present together when the three signatures are made. It is advisable that the witnesses should be persons permanently resident in Canada, and they must not receive any benefit from the will.