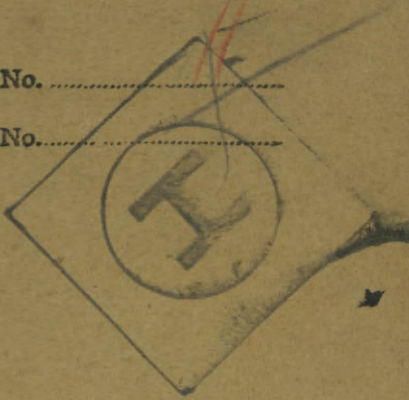


13-23-13-68

DISCHARGE DOCUMENTS

R. O. No. ....

H. Q. No. ....



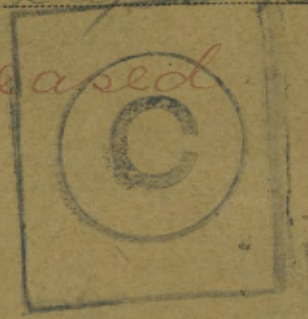
- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... <sup>23</sup>
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet .....
- Compulsory Stoppages.....
- Casualty Forms..... <sup>1</sup>
- 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.....

Name GAGNON, JUDGER,

Regt. No. 3172227 Rank Pte

Corps 2nd Depot Bn 2nd Que Regt 126

*Deceased*



*A 7 B 12 2 1*

*M 7 W 113 1*

*MX M 7 B 465 1*

*8-5-21*

*1*  
*2-11*  
*2-11*







Fill in only.—Unit, Number, Rank and Name.  
**2nd DEPOT BN, 2nd QUEBEC REGT.**  
 Casualty Form—Active Service.

*PJM.*  
 Unit, Regiment or Corps **317 2227**  
 Regimental No. **3172227** Rank **Private** Name **GAGNON Ludger**  
 C. E. F. **-----**  
 Enlisted (a) **23-8-18** Terms of Service (a) **C.E.F.** Service reckons from (a) **21-8-18**  
 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) **Engineer**

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				
9-10-18	2/2 <sup>nd</sup> Que.	Deceased	Reel St Barracks Montreal	8-10-18	Pt. II D.O. 281
					<i>Quintie</i> Capt. J. J. Doy

(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.T.O.]



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				

LEDGER No. 5810-221-315

SERIAL NO. a 11827.

REG. NUMBER 3172227 NAME Gagnon L  
 RANK Pte CORPS 2/2 Iue  
 AGE 27 SERVICE 3/12  
 NAME OF HOSPITAL F.C. In N.H. PLACE Montreal  
 DATE OF ADMISSION 1-10-18  
 DISEASE Influenza & Pneumonia (221)  
 TRANSFERRED TO OTHER HOSPITALS  
 OPERATION  
 DISCHARGED TO Died 7-10-18 IN CATEGORY

REMARKS:.....

.....

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.....

.....



8/10/18  
D

Surname *Gagnon*  
Christian names *Ludger*  
Regtl. No. *3172227* Rank *Pte*  
Unit *2nd Que Regt 2nd Sps Bn*

H. Q. ....  
M. D. No. *4* .....  
T. O. S. *Aug 21st* 191*8*  
D. O. Pt. II *33* of *21-8-18*  
S. O. S. *8-10-1918*  
Reason *dec* ✓  
Auth. *Pa 281 9-10-18 2/20P*

Next of kin *Gagnon, Lazare*  
Address *Black Lake, Megantic, P.Q.*

Relationship *Father*  
Also notify: .....

BORN—Place *Canada, St. Ferdinand* Date *Aug 17th 1891*  
ATTESTED—Place *Montreal, P.Q.* Date *Aug 21st 1918*  
O/S ..... R/C .....





H. Q. 849-3-14874.

GAGNON, Pte. Ludger, #3172227 - 2nd Que. Regt.

Med & D (Father) Lazare Gagnon Esq.,  
Black Lake,  
Megantic P. Q.

P & S (Father) Address as above

Mem Cross (Mother) Mrs. Lazare Gagnon  
(address as above)

*Canada only*  
*78*

Scroll Desp. MAY 3 - 1911 Regn No 24041080

Plaque Desp. JAN 2 1922 Regn No B - 165389

*H 4*

M

45-264

FEB 15 1921

1075



# FORM OF WILL

PJM.

SEE INSTRUCTIONS ON BACK

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

MILITIA & DEFENCE  
OCT 17 1918  
H.G. CANADA

Name, &c. I, GAGNON Ludger

3172227

Regimental number D. Rank Private serving in the

2nd DEPOT BN. 2nd QUEBEC REGT.

..... Canadian Expeditionary Force,

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

Executor I appoint nil

whose address is .....

to be the executor of this my last will.

General gift I give to Lazare GAGNON (Father)

whose address is Black Lake. Co. Megantic. Que. Can.

all my property not disposed of above.

Date Dated at Montreal. Que. Can. this 23rd August 1918 191.....

Signature Ludger Gagnon  
Signature of Soldier.

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 Benoit

Signature Alb. Lapierre

Address Rue St Barthelemy

Address Rue St Barthelemy

Occupation Soldier

Occupation Soldier



NOT CHARGED

OCT 17 1918

7-10-18

8-1-18

520-17-10-18

520-17-10-18

FORM OF WILL

# 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.







CASE HISTORY SHEET

Faint, illegible text at the top of the page, possibly containing patient information or case details.

Second section of faint, illegible text, likely describing the patient's history or symptoms.

Main body of the page containing several paragraphs of extremely faint and illegible text, which appears to be the primary case history or treatment notes.