

ATTESTATION PAPER.

No. 23/40

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

OK.

- 1. What is your name?..... *Carlou Gouast*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Montgomery Falls Ont*
- 3. What is the name of your next-of-kin?..... *Mrs Gouast*
- 4. What is the address of your next-of-kin?..... *65, Champlain Montreal*
- 5. What is the date of your birth?..... *25 July 1895*
- 6. What is your Trade or Calling?..... *Blacksmith*
- 7. Are you married?..... *No*
- 8. Are you willing to be vaccinated or re-vaccinated?..... *Yes*
- 9. Do you now belong to the Active Militia?..... *No*
- 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?..... *Yes*
- 12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?.....

O Gouast (Signature of Man).
J Crawford (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *O Gouast*, 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 *Sept 29* 1914. *O Gouast* (Signature of Recruit)
J Crawford (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I,, 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 *Sept 29* 1914. *O Gouast* (Signature of Recruit)
J Crawford (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 *Valcartier Camp* this *29* day of *September* 1914.

C. H. Fraser (Signature of Justice)

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

H. J. McLeod (Approving Officer)

OC 12th Batt

Description of A. Genest on Enlistment.

Apparent Age 19 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. 8 1/2 ins.

Two vaccinations left arm

Chest measurement { Girth when fully expanded 37 1/2 ins.
 Range of expansion 2 1/2 ins.

Complexion dark

Eyes Brown

Hair black

Religious denominations. { Church of England
 Presbyterian
 Wesleyan
 Baptist or Congregationalist
 Other Protestants
 (Denomination to be stated.)
 Roman Catholic X
 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 Sept 29 1914.

H. Sutherland

Place Valcartier Camp

Capt. M. C.

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 been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

A. Genest having been finally approved 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. J. McLeod Lt Col (Signature of Officer)

Date Sept 28th 1914.

OC 12th Bn

REGIMENTAL DOCUMENTS

NAME

Genie O. Dilson

REGT. NO.

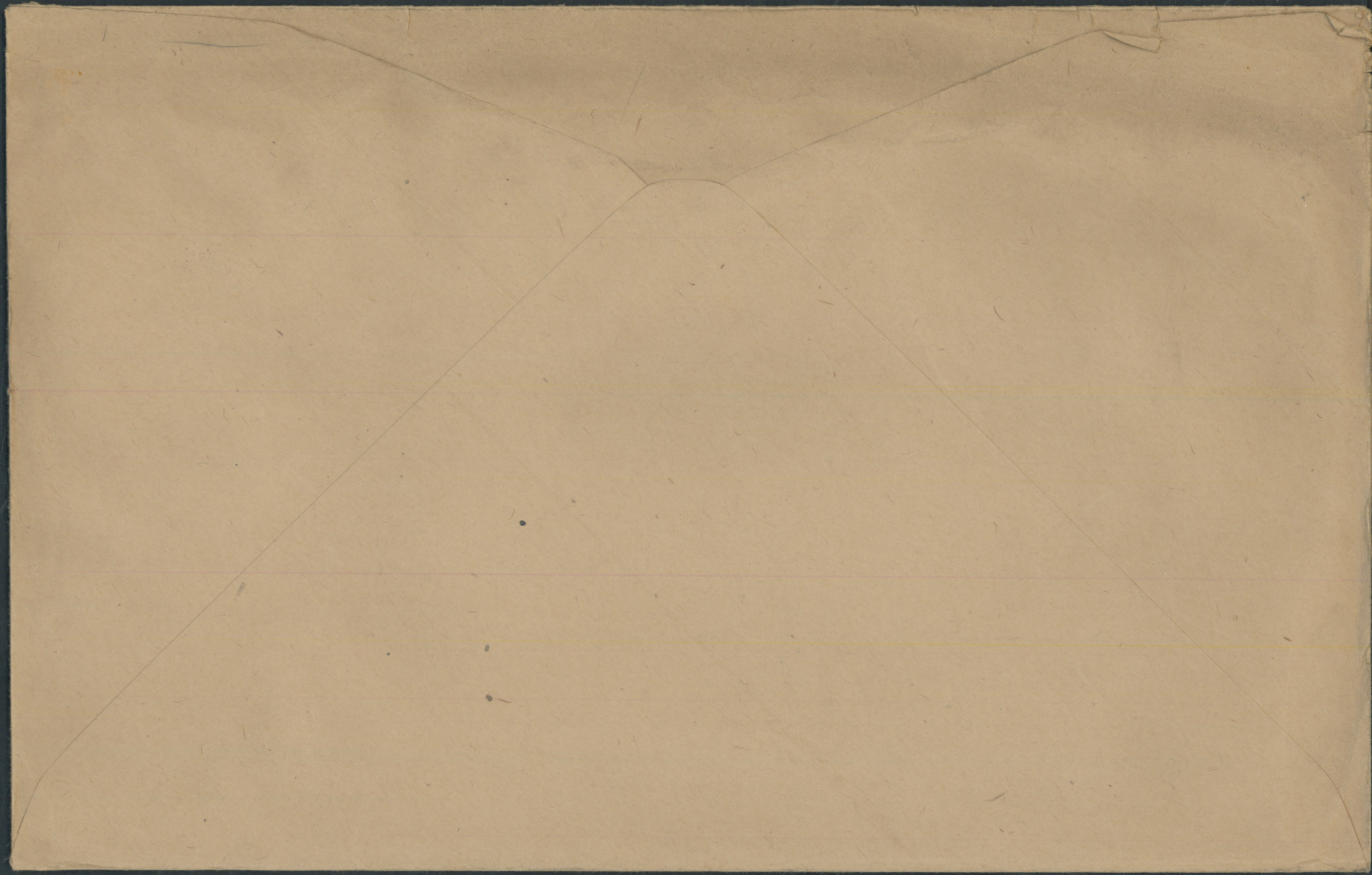
23140 UNIT

H. Q. FILE NO.

S	CONTENTS	M	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)		<i>15-10-21</i>	<i>M. J. ...</i>	H		DEATH
	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)						Category
	TRAINING HISTORY SHEET (M.F.W. 113)						<i>Depends</i>
	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)						
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)			<i>Depends</i>		<i>03050</i>	
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)						
	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)						DISCHARGE
	DENTAL HISTORY SHEET (M.F.B. 465)						Category
	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)						DESERTION
	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)						
	<i>casualty</i>						<i>12-8</i>
	<i>PR 122</i>						<i>9-8</i>
							<i>34-9</i>
							<i>1</i>

H

mx
2010 20



Name Genest Odilon. Rank Pte.

Reg. No. 23140.

Unit 15th. Batt.

25. G. #478

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916.						
29-12.	No. 8. B. Red Cross Hos.	Le Touquet.	A534.	0	7018.	3-1
1-1-17.	<u>SERIOUSLY ILL.</u> <u>DIED OF WOUNDS.</u>		GSW. L. Foot.	A535.0.	7064.	3-1

ac
Number. 23140 Rank. Pte

Surname. GENESE 9. 282 FEB 23 1927

Christian Name. Odilon

Unit. 15th Bn Can. Inf. Theatre of War. France

Dates of Service.

Remarks.

Latest Address Mrs. V. J. Genest "Mother"
651, Chamblay St. Montreal
P.Q.

Roll No. 13

Page 334

G. a 25503 Resp

MAY 13 1921

649-G-4887. 23140 Pte. Odillon Genest. 15th. Bn.,

Exp for star Pte 15th Bn.

Medals & Dec. (Mother) Mrs. V. I. Genest.,
651 Chambly St.,
Montreal, P. Q.,

Plaque & Scroll; (Mother) Same as above.

(Serial no. 786477)

Memorial Cross. (Mother) Same as above.

MAR 3 - 1921
Scroll Desp. Reqn. No. 2-24748

AUG 18 1922
Plaque Desp. Reqn. No. P44802

25713

A Desp 1-11-20

(m) c28712

B

No.

RANK

NAME

T. O. S.

UNIT

M. D.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
731				

berth leonard
K.I. 101/buff/15/9
Army Form B. 103. ✓

Casualty Form—Active Service.

Regiment or Corps 15th Canadian Battalion

Regimental No. 23140 Rank Pvt. Name Leone, Odilon

Enlisted (a) 29/8/14 Terms of Service (a) _____ Service reckons from (a) _____

Date of promotion to } _____ Date of appointment } _____ Numerical position on } _____
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				
		<i>Taken on Strength 1154 Carbu.</i>		<i>3/5/15</i>	<i>Pt 20th No 11 d/23/5/15</i>
<i>26/11/15</i>	<i>Ob. 15/12/15</i>	<i>Granted 7 days leave from</i>		<i>26/11/15</i>	<i>B213-26/11</i>
<i>23/12/16</i>	<i>8 Red x</i>	<i>Y.S.W. TX W h. took Adm.</i>		<i>23/12/16</i>	<i>W 3034</i>
<i>22/12/16</i>	<i>15 Am</i>	<i>To Hospital W</i>		<i>15/12/16</i>	<i>B 213. D. C. S 360 dated</i>
<i>1/1/17</i>	<i>8 Red x Hook</i>	<i>Died of Wounds received in action</i>		<i>1/1/17</i>	<i>B213 Can. Sect 3rd Echelon. File K.1 137/2741 Part II. O. 1/26. 3 DCS 361. 8/1/17</i>
		<i>Jenneth May</i> Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.			

(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				

202

H2

No. 23140

RANK

Plt

NAME

Genest D

T. O. S.

UNIT

8th Regt. Royal Rifles

M. D. 5

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1914 Aug 14 Aug 23 rd Sept 22	1914 Aug 22 Sept 21 st Oct 31	✓ ✓ ✓	<i>Now shown on 2nd An payroll left payroll</i>	

UNIT SAILED
OCT 3 1914



C
NAME

Genest, Odilion ~~649-8-4207~~ D.C.

RANK & NO.

Pte. 23140

CORPS

~~15th~~ 12th Battalion

ENLISTMENT, PLACE

Valcartier

DATE

Sept. 29th 1914 S

FORMER CORPS

Nil

COUNTRY OF BIRTH

Montmorency Falls, Quebec, Canada

NEXT OF KIN

Genest, Mrs.

ADDRESS OF NEXT OF KIN

651 Chamblay St. Montreal, Quebec
Canada.

(with C.P.R. Tel. 207.4-1-17)

DISCHARGE, PLACE

DATE

O/S 7-10-14. $\frac{12}{9}$

REMARKS:

Take on Strength 15" Batt 3/5/15 Auth. C. Part II Pro 11 Echels 23/5/15.

Surname	Christian Name or Names	Reg. No.
Gemest	O.	23140
Rank	Unit	Co. Troop Batty.
Pte	15th Bn	
Hospital	8.B.R.C.Latouquet	Date of Admission
		29-12-16

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis G.S.W.Lt Foot

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Died of Wds. 1-1-17

DISPOSITION

Date

C.L. 2-1-17 A534

REMARKS

3-1-17 A535

A.M.D. 2 Dept

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

R

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

REGT'L NO 23140

H. Q. FILE NO. 649-

NAME Genest OdilionRANK AND CORPS Plé. 15th. Bn. (form. 12th. Bn.)

FOLLOWS

No.

FOLLOWS

CABLE

No.

DATE

b.

NATURE OF CASUALTY

04018

1-1-17

seriously ill at 7108 British Red Cross Hosp.
Le Yauguel - Dec. 29th. 1916 (cause not stated.) ✓

07064

2-1-17

Died of wounds No. 8. British Red Cross Hoop.
Letouquet Jan. 1st. 1917 (Y.W. Left foot) ✓

A7B2090a

Rover
8-1-17(Date rec. 12-3-17) Died of wounds rec. in action at No 8 + Hoop
France. 1-1-17.

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 534	No 8 British + Hosp. Le Songuet	29-12-16	seriously ill
A 535	" " " " " "	1-1-17	ESW L. Foot (Died of wounds prev. rep. ser. ill)

MEDICAL HISTORY SHEET.

350

Surname Genest Christian Name J.

Examined { on 29 day of Sept. 1914
 at Valparaiso
 Birthplace { City or Town Montgomery Falls Bank Capt OMC. M.O.
 County Ind.

Approved by 23140
B.A. Lutherland

Apparent age 19
 Trade or occupation Blacksmith M.O.
 Height 5 Feet 8 1/2 Inches. M.O.
 Weight _____ Lbs. M.O.
 Chest measurement { Minimum 35 inches. M.O.
 Maximum expansion 37 1/2 inches. M.O.
 Physical development _____ M.O.
 Small-Pox Marks _____ M.O.

Vaccination Marks { Arm Right Left 2
 Number 2
 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.
 _____ M.O.
 _____ M.O.

Enlisted on 24 day of Sept. 1914 at Ind.

	CORPS.	REG'TL NUMBER.	HABITS.
Joined on enlistment		<u>23140</u>	
Transferred to..	<u>15 Batt.</u> <u>12 Batt.</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.

Entries in Red Ink made from
 Attestation Sheets.
July 15 1915
R. M. Shaw
 for D. D. M. S.

Regimental No. **23140**
 Unit **12th Battn.**
 Date of enlistment **Sept. 29th, 1914**
 Place of birth **Montmorency Falls, Quebec**
 Married (yes or no) **No**
 Amount of pay assigned monthly \$ **20.00.**
 To whom payable **Next of kin.**

Name and address of next-of-kin
L
Mrs. Genest
651 Chambly St.,
Montreal

Date and place discharged **1-1-17**

Reason for discharge **Dudg**

Character on discharge **CH A. 535-2/3-1-17**



Died of Wounds. 1/1/17 bL 535 d/ 3/1/17.

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount					
22/9	31/10	40	1	40	40	10	4			24	20		44	
1/11	31/11	30		30	30		3			1250	20		3250	
11/12	31/12	31		31	31		310	50		1460	20		3460	Entered on N.E. Card Index.
1/15	31/1	31		31	31		310			1410	20		3410	checked by H. P. Lillison
1/2	28/2	28		28	28		280			10	20		30	
1/3	31/3	31		31	31		310	80		1250	20		3250	
1/4	30/4	20		30	30		3	240		10	20		30	
15. May	1-31	31	100	31	31	10	310	540		6	20		26	
June	1-30	30	100	30	30	10	300	1350		6	20		26	
July	1-31	31	..	31	31	10	310	2050		3	20		23	
							3160			11270				
							299							Exchange.
Aug	1-31	31	100	31	31	10	310	3459		292	20		2292	
Sept	1-30	30	1-	30	30	10	300	4577		5682	20		7682	
Oct	1-31	31	1-	31	31	10	310	19536		530	20		2530	
Nov	1-30	30	1-	30	30	10	300	107543		524	20		2524	
Dec	1-31	31	1-	31	31	10	310	185152		8047	20		10047	
Jan.	1-31	31	1-	31	31	10	310	4786		524	20		2574	Carried forward to Large Ledger
							3900							
				497			4970	29954969		26969	320		58869	

Statement of
 8 1917
 entered

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					
Feb.	1-29	29	1 ⁰⁰	497	29	10	290	299	549 69			268 69 320			588 69	
				29			290	39 00	31 90			5 22 1/20			64 22	
Mar.	1-31	31	1 ⁰⁰	31	31	10	310	22 32	34 10			9 60 20			61 92	
								27 82								
				557			55 70	299	615 69			283 51 360			643 51	
								27 82								

Handwritten signature
checked

Comptancy Falls, Quebec
Next of kin

Handwritten scribbles

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

384

M. F. W. 12a.
 60m.-12-15.
 1772-39-819.

Sheet No. 2.

Ass C. Geest

Name of Soldier

Geest O.
23/40
12th Btn

L. L. Job 89002.-Req. 6213.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
			360	\$ 20 ⁰⁰
April	1916	C 674	20 -	
May		D 1684	20	
June		Q 9690	20	120 ⁰⁰
July		H 9172	20	Debit Bal. Stop 3 M. July 6/16 JH
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		Q 32988	40	240 ⁰⁰ dec. 1. Adj
Jan.	1917			460 ⁰⁰ full Ant closed. Cas.
Feb.				
March				
April				# 40 ⁰⁰ classific 3-11-20
May				file 6808-0-2 M. 460 ⁰⁰
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Called
85
48

Casualties

F. X. Rend. Date *Total* By *420.00*
 E. F. X. " Date *19/17* By *SA*
2-1-18 RS.

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.				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

323

mi

To Whom *Genest, Mrs L.*
Address *651 Chambly St*
Montreal

By Whom Assigned *Genest, O.*
Regtl. No. *23140*
Rank *Pte*
Corps *2 Co, 12 Bn*

Rate *20 00* ~~per month~~ *Mar 1/16*

2-M-20 1/16 ~~2-M-20 1/16~~ *30 1/16* PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 2px solid red; padding: 10px; display: inline-block; transform: rotate(-5deg);"> <p><i>Casualties</i></p> </div> <p><i>Died of wounds Jan 1/17</i> <i>C.P.(2) 3/1/17. B.N.M.</i></p> <p><i>Stop payment 1-2-19</i></p> <p><i>3 M - 1-5-19</i></p> <p><i>J.A.M.</i></p> <p><i>2-2-17</i></p> <p><i>7-V-10/1/17</i></p> <p><i>Posted in error</i> <i>36000</i></p>
Sept.				
Oct.		<i>7 347</i>	<i>20</i>	
Nov.		<i>D 1831</i>	<i>20</i>	
Dec.		<i>D 2838</i>	<i>20</i>	
Jan.	1915	<i>C 3468</i>	<i>20</i>	
Feb.		<i>B 4965</i>	<i>20</i>	
March		<i>9797</i>	<i>20</i>	
Apl.		<i>H 7644</i>	<i>20</i>	
May		<i>49264</i>	<i>20</i>	
June		<i>J 8627</i>	<i>20</i>	
July		<i>E 9970</i>	<i>20</i>	
Aug.		<i>D 12312</i>	<i>20</i>	
Sept.		<i>C 12790</i>	<i>20</i>	
Oct.		<i>B 13901</i>	<i>20</i>	
Nov.		<i>A 14890</i>	<i>20</i>	
Dec.		<i>D 16412</i>	<i>20</i>	
Jan.	1916	<i>D 1202</i>	<i>20</i>	
Feb.		<i>H 18009</i>	<i>20</i>	
March		<i>H 17371</i> <i>C 19053</i>	<i>20</i> <i>20</i>	

A. S. Rogers -
D 1103 - 20th
Messing Rogers

Register No. 109778

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 680P-0-1

Regt'l No. 23140, Name Adilion Genest
(Christian Name) (Surname)
Unit Cpt Rank Plt Date of enlistment.....
Date of casualty Jan 1, 1917 B.P.C. File No. 85686
Was service performed overseas? yes

DEPENDENT

Name Mrs. J. Genest Relationship Mother
Address 651 Champlain St
Montreal

Amount of Special Pension Bonus \$ 200 Abstracted by J. M. [unclear]

Eligible for Gratuity \$.....
Less amount of Special Pension Bonus paid..... \$.....
Less Debit Balance of S. A. or A.P..... \$.....
Total deductions \$.....

Balance due \$ ✓

Cheque No..... Date issued.....

Clerk R. J. [unclear]

REMARKS : Not eligible
No. A. A. [unclear]

Audited by
Date.....

M.F.W. 2652
25M-6-20.
H.Q. 1772-89-1473

Noted 11-8-20
26

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. 9721

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		

Remarks:

M. F. W. 127
306M-1-19
1772-39-1140

MARRIED OR SINGLE *S*
 PLACE OF BIRTH *Quebec*
 NAME AND ADDRESS OF NEXT OF KIN *Mrs. L. Genest*
651 Shamblly St., Montreal P.Q.
 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.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Died of Wounds</i>	<i>11/17</i>	<i>661 a 535 3/17</i>

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
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REG'L. NO. *23140* RANK *Plt.* NAME *Genest Odilon*
 IF IN PERM. CORPS | UNIT *15th Bn* TRANSFERRED TO *Mt. Sch* DATE *2/17* AUTHORITY *Cha 535 1/17*
 WHAT UNIT |
 PERMANENT FORCE ALLOWANCES | TRANSFERRED TO | DATE | AUTHORITY
 PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY
 DATE OF ATTESTATION *Sept 22 1914* | TRANSFERRED TO | DATE | AUTHORITY
 ASSIGNED PAY MONTHLY \$ *20.00* DATE EFFECTIVE *Restarted 1.11.16 a.2.M. forms Rend. 18.10.16.*
 PAYABLE TO *Mrs. L. Genest 651 Chamblly St. Montreal, Que.* RELATIONSHIP
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
 PAYABLE TO
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *5/7/16* EFFECTIVE *1-7-16* REASON *#704 for Debt Balance 31/5/16*
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *2.11.17*
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

P.B. 10860
 Entered on N.E. Card Index
 Checked by *H. Villolsson*

COMPILED BY *J.P.S.*
 CHECKED BY

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>Apr</i>			<i>557</i>	<i>00</i>			<i>55</i>	<i>70</i>							<i>615</i>	<i>69</i>																							
<i>1-30</i>	<i>30</i>	<i>1</i>	<i>30</i>		<i>30</i>	<i>10</i>	<i>3</i>	<i>-</i>							<i>33</i>	<i>-</i>	<i>1085</i>							<i>2</i>	<i>62</i>	<i>v</i>		<i>20</i>		<i>22</i>	<i>62</i>		<i>17</i>	<i>44</i>					
<i>May</i>																	<i>1152</i>								<i>2</i>	<i>55</i>	<i>v</i>		<i>46</i>	<i>20</i>	<i>20</i>	<i>66</i>		<i>104</i>	<i>00</i>	<i>42 days 7.P.#1 = 46.20</i> <i>Waiting trial 45 days @ 7/10 = 45.10</i> <i>B.O. 21 21/5/16.</i>			
<i>June</i>																	<i>1119</i>	<i>3/5/16</i>	<i>1144</i>	<i>26/7/16</i>					<i>3</i>	<i>41</i>	<i>v</i>	<i>3</i>	<i>40</i>	<i>v</i>			<i>20</i>	<i>00</i>	<i>45</i>	<i>10</i>			
<i>July</i>																			<i>1252</i>	<i>21/6</i>					<i>3</i>	<i>2</i>	<i>-</i>				<i>23</i>	<i>41</i>		<i>94</i>	<i>41</i>				
<i>Aug</i>																			<i>1293</i>	<i>30/6</i>	<i>1353</i>	<i>21/7</i>			<i>3</i>	<i>4</i>	<i>10</i>	<i>1293</i>	<i>30/6</i>	<i>1353</i>	<i>21/7</i>			<i>5</i>	<i>17</i>		<i>65</i>	<i>48</i>	
<i>Sept</i>																			<i>1393</i>	<i>29/7</i>	<i>1498</i>	<i>15/8</i>			<i>2</i>	<i>62</i>	<i>v</i>	<i>3</i>	<i>49</i>	<i>v</i>			<i>6</i>	<i>11</i>		<i>37</i>	<i>49</i>		
<i>Oct</i>																			<i>1607</i>	<i>15/9</i>	<i>1732</i>	<i>14/9</i>			<i>3</i>	<i>3</i>	<i>-</i>				<i>6</i>	<i>10</i>		<i>10</i>	<i>59</i>				
<i>Nov</i>																			<i>1628</i>	<i>1/10</i>	<i>1664</i>	<i>13/10</i>			<i>2</i>	<i>61</i>	<i>v</i>	<i>3</i>	<i>48</i>	<i>v</i>			<i>6</i>	<i>09</i>		<i>17</i>	<i>42</i>		
<i>Dec</i>																			<i>1696</i>	<i>2/11</i>	<i>1731</i>	<i>17/11</i>			<i>3</i>	<i>3</i>	<i>-</i>			<i>26</i>	<i>10</i>	<i>24</i>	<i>32</i>		<i>15</i>	<i>932</i>			
<i>1-31</i>	<i>31</i>		<i>31</i>				<i>3</i>	<i>10</i>										<i>1799</i>	<i>4/12</i>						<i>8</i>	<i>72</i>	<i>v</i>	<i>20</i>	<i>00</i>	<i>28</i>	<i>42</i>	<i>29</i>	<i>40</i>						
<i>Checked</i>			<i>83</i>	<i>20</i>			<i>83</i>	<i>20</i>																		<i>20</i>	<i>-</i>			<i>20</i>	<i>-</i>	<i>10</i>	<i>80</i>						
<i>N.E.B</i>	<i>May 17</i>																																						
<i>N.E.B</i>	<i>June 17</i>																																						
<i>"</i>			<i>33</i>																																				

(Can Acc Pay \$20.00) in agreement with Ottawa Slip A-593-1-12 D/20-12-16

Statement of
 JUL 6 1917
 Account rendered

Statement of
 DEC 5 1918
 Account rendered

PAY BOOK CHECKED
 Date *8-11-17*
 By *J.P.S.*

small
 Ledger Sheet.

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		1	2	3	4	1	2				3	4				CREDIT	DEBIT
			\$	c.						\$	c.																

1917
 Toward
 Aug

155 10

155 10

155 10

155 10

To Ottawa for Lett. Writs & Dis-7-17.

DATE	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4
1918 Nov	Am't realized by sale of N.W. 1/4 Sec 10, Twp 29 S, R. 10 E, P.O. Savings Bank P.M. safe keys no 2927, C.N. 1162 1919 Jan		55 87 55 87			Dead 1/1/17		
				60. Bal. transf. to Ottawa 0.283 17/19 to 37 A.N. 59388	55 87			
								Estates stake coming through today 23/1/19. If not rec. within 10 days take up again 28/1/19

Env No 19329

Rank and Name GENEST, Odilon

Regimental No. 23140

Name and Address of Next-of-kin

Unit 12 Batt

Mrs L. Genest

Date of enlistment 29 Sept. 1914.

651 Chambly Street, Montreal, P.Q.

Place of birth P.Q.

Married (Yes or No) No.

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge ✓

Promotions or appointments

File No 25- G-1448

U.S. 12



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				
23 May	CC. 15	Taken on strength. On strength 15 th	France	2 May	Part II "
11. 12. 15	15 th	Granted 4 days leave	do	31 st 15	Non Roll.
2. 1. 17	15 th	Adm # 8 B, R, G Hosp l Le Touquet (seriously ill)	do	20 th 15	Part II O# 40
3. 1. 17	do	Died of Wounds	do	29. 12. 16	Gas Rept A 534 Stated G. S. W. L. foot Gas Rept A 535 Part II O 3 dj- 8-1-17.

mt 20
2010
21

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				

