

ATTESTATION PAPER.

Folio. 13

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... GINGRAS.
- 1a. What are your Christian names?..... Joseph Olier
- 1b. What is your present address?..... Grand'Mere, QUE.
2. In what Town, Township or Parish, and in what Country were you born?..... St. Justin, Que. CANADA.
3. What is the name of your next-of-kin?..... Ovila Gingras.
4. What is the address of your next-of-kin?..... Grand'Mere, QUE. *Sufficient Address*
- 4a. What is the relationship of your next-of-kin?..... Father.
5. What is the date of your birth?..... 17th. October 1895
6. What is your Trade or Calling?..... Electrician.
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?..... No.
10. Have you ever served in any Military Force?..... No.  
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? } Yes.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Joseph Olier Gingras, 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.

Olier Gingras (Signature of Recruit)

Date..... 18th. July..... 1916. Fred. Ollard (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Joseph Olier Gingras, 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.

Olier Gingras (Signature of Recruit)

Date..... 18th. July..... 1916. Fred. Ollard (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 Grand Mere this 18<sup>th</sup> day of July 1916.

H. J. Macpherson (Signature of Justice)

Description of Joseph Olier Gingras 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 11 3/4 ins.

Chest measurement { Girth when fully expanded 37 1/2 ins.  
 Range of expansion 3 ins.

Complexion Fair

Eyes Brown

Hair Brunette

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

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 July 18 1916.

Place Grand mare du

W. Es. Scott  
 Medical Officer.  
D. G. Lamont

\*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.

Joseph Olier Gingras 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.

D. G. Lamont (Signature of Officer)  
 o/c 2441 "Overseas" Battalion, C. L. F.  
T. A.

Date JUL 21 1916 1916.

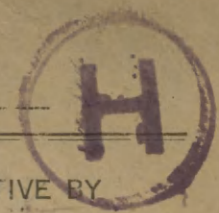
REGIMENTAL DOCUMENTS

NAME

*bingras joseph B.*

REGT. NO. *1054106* UNIT

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)	M				DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				13310	Category
TRAINING HISTORY SHEET (M.F.W. 113)					<i>Ka</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)					
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)		H			
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>cc card</i>					
<i>Army of Will</i>					
<i>will out</i>					

*mz*



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.

Unit, Regiment or Corps 244th "OVERSEAS BATTALION, C. E. F."

Regimental No. 1054106 Rank Private Name GINGRAS, Joseph Olier  
C. E. F.

Enlisted (a) 18/7/16 Terms of Service (a) auto Service reckons from (a) 18/7/16

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) Electrician

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				
		EMBARKED CANADA	<i>Salpa</i>	MAR 25 1917	<i>J. Brown</i> Capt. & Adjutant
		DISEMBARKED ENGLAND	<i>Liverpool</i>	APR 7 1917	<i>J. Brown</i> Capt. & Adjutant
<u>7/12/16</u>	<u>244th Bn. C.E.F.</u>	Appointed Acting <u>Captain</u>	<i>Shoreham</i>	APR 7 1917	Daily Order Part 2 No. <u>7</u> <i>J. Brown</i> Capt. & Adjutant
		Transferred to <u>22nd Reserve Bn.</u>	<i>Shoreham</i>	APR 7 1917	<u>1609</u> <i>J. Brown</i> Capt. & Adjutant
<u>11.4.17</u>	<u>22nd R. Bn.</u>	Taken on strength.	Shoreham	7.4.17	D.P.11 O.53 ✓
<u>25.4.17</u>	<u>22nd R. Bn.</u>	Posted to <u>23rd Res. Bn.</u>	Shoreham	24.4.17	D.P.11 O.57 ✓
<u>25.4.17</u>	<u>23rd R. Bn.</u>	Taken on strength.	Shoreham	24.4.17	D.P.11 O.115 ✓ <i>J. Brown</i> Adjutant 22nd Reserve Bn., C.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.

CERTIFIED CORRECT.  
 30 JUN 1917  
 CAN. RECORDS LONDON.

Date	Report From whom received	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
27.5.17	REB.	Posted to 14th Bn.	Shoreham	27.5.17	D.P. 11 O 144 ✓
<i>W.A. Chalmer</i> Lieut. 1st C. 2nd Reserve Batt. C.M. 144					
	C. B. D.	ARRIVED C. B. D.	FRANCE	27.5.17	5.6.17
	C. B. D.	LEFT C. B. D. FOR	1st Lt. Bn	2.6.17	PART II ORDERS No. <del>56</del> D 5.6.17
25.8.17	O.C. .... BN Unit	ARRIVED 14 <sup>th</sup> BN. wounded.	FIELD	18.6.17	B 213 D 23.6.17 483.
8.9.17	do	now reported	do	15.9.17	B 213 468.
		Killed in Action	do	15.8.17	B 213. 470. Pty no 89-1917.
<i>Chas. B. Stagnell</i> Lieut for <i>Woolwich</i>					

FORM OF WILL

I, Olier Joseph Guigas (Name in full)  
Regimental Number 1054106 serving in 244th Batta K.O.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

Mrs. Mary Louise Guigas } Name and Address  
Grand Mere Que } of person or  
persons to whom  
it is to go.

absolutely, and my personal estate I bequeath to

Mrs. Mary Louise Guigas } Name and Address  
Grand Mere Que } of person or  
persons to receive  
personal estate\*  
(See note).

NOTE

This space for the appointment of Executor if necessary.

IMPORTANT NOTE

This must be signed and Dated by THE SOLDIER HIMSELF.

this 22 day of March A.D. 1917

Joseph Olier Guigas Signature of Soldier.

\*N.B. Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

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

Signature of First Witness J. Glichodeau

Address of Witness # 17 Rue St Maurice N.B.

THE TWO WITNESSES

Occupation of Witness Soldier

MUST SIGN HERE

Signature of Second Witness L. Cronberg

Address of Witness 10 Bank of Montreal Montreal

Occupation of Witness Soldier

FORM OF WILL

*[Faint, illegible text, likely bleed-through from the reverse side of the page]*



JM

Rank Name GINGRAS, Joseph Olier. Reg'l No. 1054106.  
 Unit 244th Bn. If in perm. Corps }  
 What Unit? } Married or Single Single.  
 Place and Date of Enlistment Grand Mere, 18th July 1916. Place of Birth S t. Justin, Que, Canada.  
 Name and Address, Next-of-Kin Ovila Gingras.  
 Grand Mere, Que. Relationship Father.

Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 9106  
 File R.L.  
 Category KA.

Discharge, Date and Place Reason Character

H. W. V., Ld.—9546-16.

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.				
<b>ARRIVED IN ENGLAND 7 4 17 S.S. LAPLAND.</b>					
11-4-17	22 Res	Taken on Strength	Shoreham	7-4-17	PT 2 O 53
25-4-17	do	S O S to 23 Res.	Shoreham	24-4-17	PT II C 65 & II 23 Res
27. 8. 17	23 Res	50 5 to 14 <sup>th</sup> Bn		27. 5 17	DO # 56 2/5. 6. 17 14 Bn 144
11. 9. 17	1 Q.R.	Rep' from Base Wounded	Field	15. 8. 17	Ch A # 8
13. 9. 17	1 Q.R.	Killed in Action	"	15. 8. 17	Also 10 PTD 089-159-17

RECEIVED

*2/11/2017*



# MEDICAL HISTORY SHEET

1054106

Surname GINGRAS Christian Name Joseph Olier

Examined { on 18 day of July 1916.  
 at Grand Mere Que  
 Birthplace { City or Town St. Justus  
 County Maskinonge

Approved by \_\_\_\_\_  
 Rank \_\_\_\_\_ M.O.

Apparent age 20  
 Trade or occupation Electrician  
 Height 5 feet 11 3/4 Inches  
 Weight 152 lbs.  
 Chest measurement { Minimum 34 1/2 inches  
 Maximum expansion 37 1/2 inches  
 Physical development Jan.  
 Small-pox Marks no.

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT	M.O.
<u>20/11/16</u>	<u>fit</u>	<u>Dr. Paul Bell</u>	M.O.
			M.O.
			M.O.
			M.O.
			M.O.
			M.O.

Vaccination Marks { Arm Right Left no  
 Number 1  
 When Vaccinated last 1913  
 (a) Marks indicating congenital peculiarities or previous disease \_\_\_\_\_  
 (b) Slight defects but not sufficient to cause rejection \_\_\_\_\_

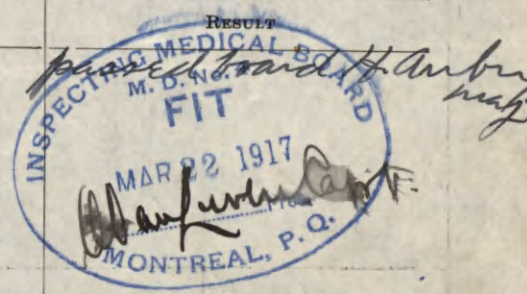
Date	Result	VACCINATIONS	M.O.
<u>15/1/17</u>	<u>req.</u>	<u>Klauderque</u>	M.O.
<u>26/1/17</u>	<u>req.</u>	<u>Klauderque</u>	M.O.
<u>28/2/17</u>		<u>Klauderque</u>	M.O.
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.	M.O.
<u>NOV 17 1916</u>		<u>Klauderque</u>	M.O.
<u>NOV 27 1916</u>		<u>Klauderque</u>	M.O.
<u>Dec 8 1916</u>		<u>Klauderque</u>	M.O.

Enlisted on 18th day of July 1916 at Grand Mere P.Q.

CORPS	REG'TL NUMBER	HABITS	DATE
	<u>1054106</u>		
Joined on enlistment			
Transferred to			

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Montreal</u>	<u>5/12/16</u>	<u>fit</u>	<u>Fit</u>



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.



54

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

M. F. W. 12  
50m.—7-16  
H. Q. 1772-39-819

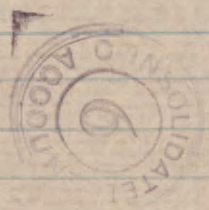
To Whom *Oliva Gingras*  
Address *Grand Mere*  
*Que*

By Whom Assigned *Gingras Joseph O.*  
Regtl. No. *1054106*  
Rank *S/Corp.*  
Corps *244 Bns*

Rate *20<sup>00</sup>*

APR 1 1917

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;">           Pensions Notified Date <i>24-9-17</i>            Killed in Action }  <del>Red Cross</del> } Date <i>15-8-17</i>  <del>...</del> }  <i>O. (1) 8/17</i> Clerk <i>J. A. Gelling</i>            Date Noted <i>24-9-1917</i> </div> <div style="text-align: center; margin-top: 20px;">  </div>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

12021  
12021  
12021  
12021  
12021  
12021

x

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

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

Sheet No. 2.

*Olivia Gingras*

Name of Soldier

*Gingras Joseph O.*  
*L/Corp*

L. L. Job 4503. - Req. 6332.

PAYMENTS.

*No 1054106*

*24/1/17*

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>20<sup>all</sup></i>
				<i>20</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>S 5918</i>	<i>20</i>	
May		<i>Q 10047</i>	<i>20</i>	<i>20 ch</i>
June		<i>X 19479</i>	<i>20</i>	<i>Bu</i>
July		<i>R 21687</i>	<i>20</i>	<i>B.</i>
Aug.		<i>B 28806</i>	<i>20</i>	<i>in 120<sup>00</sup> of 4 30/9/17 J.A. Collins 24/9/17</i>
Sept.		<i>Y 35414</i>	<i>20</i>	<i>20 of closed fees 30/9/17 J.A. Collins 24/9/17</i>
Oct.	<i>Cancel</i>	<del><i>K 41323</i></del>	<del><i>20</i></del>	<i>K 41323 Cance-</i>
Nov.			<i>120</i>	
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				



SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

Gingras

J. O.

1054106

RANK

UNIT

CO.

TROOP

BATTY.

Pte

1st. Que.

14<sup>th</sup> Batt.

HOSPITAL

DATE OF ADMISSION

1.

HOSP.

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

1.

2.

3.

Previously reported Wd, now  
Killed in Action 15-8-17

DISPOSITION

A 3 ①.

DATE

c. 12-9-17

14-9-17 A 100

REMARKS

R.F. Base Wd.

15-8-17

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

*MD*  
Number 1054106

Rank PTE

*B.*

Surname GINGRAS

Christian Name Joseph Olier

*✓*

Units 14<sup>th</sup> Bu Can Coy Theatre of War France

Date of Service 27/5/17

*□. -*

Remarks

Latest Address (W) Mrs. Mary Louise Gingras,  
Grand Mere.

Roll No. *B* One

200m.-2-21.M. *Page 155-35-*

DESP. JUL 27 1922

REGN. NO. *PH 29046*

649-G-8951

*M*  
Gingras, Joseph O. No. 105406

Pte. 14th. Bn.

*not elig. for stars*

Med. and Dec.

Mother

Mrs. Mary Louise Gingras,  
Grand Mere, Que.

P. & S.

Father

Oliva Gingras, Esq.  
Address as above.

*Serial No 766874*

Memorial Cross

Mother

Mrs. Mary Louise Gingras,  
Address as above.

*30425*

*Desp 11. 11. 20. (M) @ 30. 90*

*M.G.*

483

M

JAN 14 1921  
Scroll Desp. Regn. No. 710211  
JAN 18 1922  
Plaque Desp. Regn. No. 710208

SURNAME.

*Gingras*

(649-g-8951)

CARD NO.

*X*

CHRISTIAN NAMES

*Joseph Olier*

FOLL.

REGL. NO. *1054106*

RANK

*Pte.*

UNIT *244th.*

*Bn.*

FORMER CORPS

*nil.*

NEXT OF KIN.

*Letter 6<sup>10</sup>/<sub>19</sub>*

CHANGE OF ADDRESS

NAMES IN FULL

*Gingras Olier*

RELATIONSHIP TO SOLDIER

*Father*

ADDRESS

*Grand Mere, P. Q.*

COUNTRY OF BIRTH

*Canada, St. Justin P. Q.*

DATE

*Oct. 17<sup>th</sup> 1895*

PLACE OF ATTESTATION

*Grand Mere, P. Q.*

DATE

*July 18<sup>th</sup> 1916.*

From Halifax Per S. Lepland" 28-3-17.

MARRIED

SINGLE *Yes*

WIDOWER

TRADE OR CALLING

*Electrician*

RELIGION

*Roman Catholic*

DESCRIPTION.

APPARENT AGE

*20* YEARS

*9* MONTHS

HEIGHT

*5* FEET

*11  $\frac{3}{4}$*  INCHES

CHEST MEASUREMENT

*37  $\frac{1}{2}$*  INCHES

EXPANSION

*3*

INCHES

COMPLEXION *Fair*

EYES *Brown*

HAIR *Brunette*

DISTINGUISHING MARKS

*Not stated*

MEDICAL EXAMINATION.

PLACE

*Grand Mere P. Q.*

DATE

*July 18<sup>th</sup> 1916.*

*Present address: Grand Mere, P. Q.*



No 1054106 RANK *Pte*

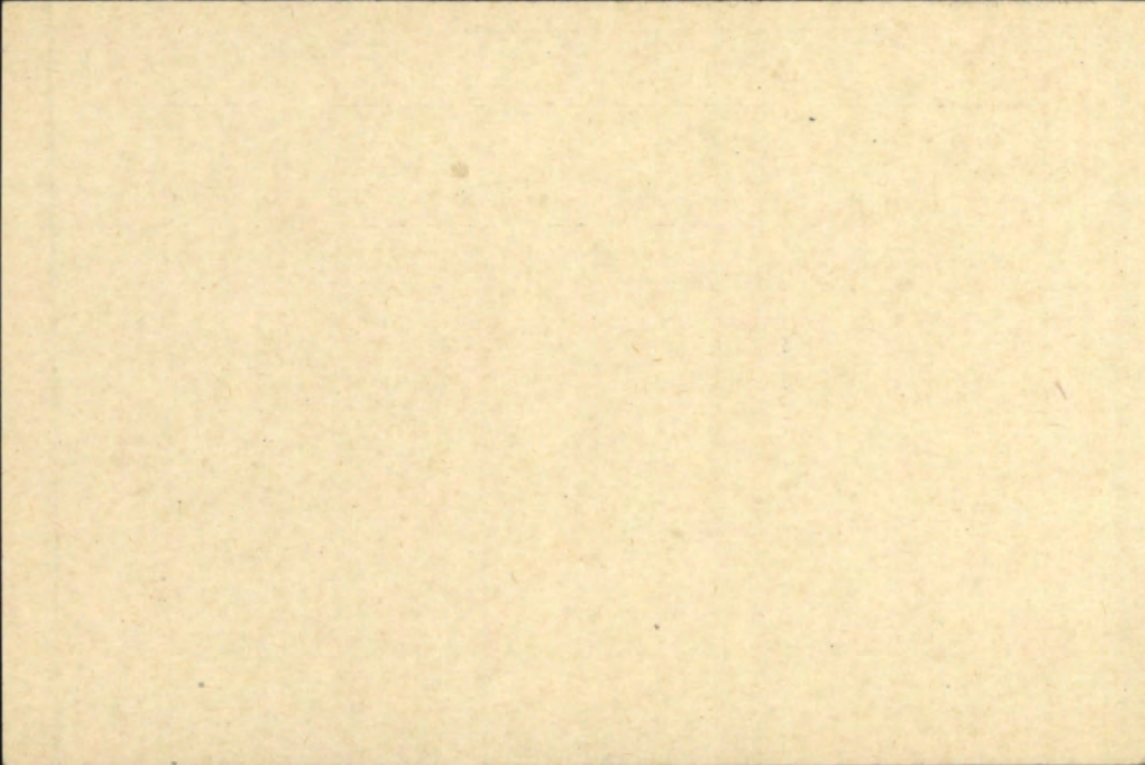
NAME *Gingras. Joseph J Oliver*

T. O. S. *18-7-16*  
*no 23 of 22-7-16*

UNIT *244th Battalion C. I.*

M. D. *X*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>July 18</i>	<i>July 31</i>	<i>U</i>		
<i>Aug</i>		<i>U</i>		
<i>Sept</i>		<i>U</i>		
<i>Oct</i>		<i>U</i>		
<i>Nov.</i>		<i>U</i>		
<i>Dec</i>		<i>U</i>		
<i>1917</i>	<i>1917</i>			
<i>Jan.</i>		<i>U</i>		
<i>Feb.</i>		<i>U</i>		
<i>Mar.</i>		<i>U</i>		



NAME

Lingras Joseph Olier

REG'T L No. 105'4106

H. Q. FILE NO. 649.

RANK AND CORPS

Pte

14<sup>th</sup> Bn form 244<sup>th</sup> Bn

FOLLOWS

No.

FOLLOWS

CABLE

NO.

DATE

NATURE OF CASUALTY

m 6046

12-9-17

Reported wounded Aug. 15<sup>th</sup> 1917. ✓m 606's  
19-1  
38-2

14-9-17

Prev. rep. wounded now killed in action  
August 15<sup>th</sup> 1917. ✓

a 7B 2090a

Rouen  
15-8-17

Date rec 31-10-17.

Killed in action 15-8-17.

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

a 8<sup>1</sup>

Rep. from base

15-8-17

wounded. (1st. Lie.)

a 10<sup>1</sup>

prev. rep. wounded

15-8-17

now killed in action

Name

Gingras

Rank

Joseph O. Lier Pte

Reg. No. 1051106

Unit

14th Bn ✓

Next of Kin

Canada

R 25-G-2274

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917	15-8 Reported Wounded	(D. C. S) 46024-9/17		A 8	60746	
15-8-17	Preo. reported Wounded thro. base	Now Killed in Action				
	They from Base					



P. 559 MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

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
Killed in Action	15-8-17	Ch 10 12/9/17

ADMISSIONS TO HOSPITAL, &C

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. 1054106

RANK *The corporal.*

NAME *Singras J. O.*

IF IN PERMT. CORPS

UNIT *244<sup>th</sup> Bn*

TRANSFERRED TO *2<sup>nd</sup> Res. Bn* DATE *7-4-17*

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO *23<sup>rd</sup> Res. Bn* DATE *24-4-17*

PLACE OF ATTESTATION *MONTREAL P.Q.*

TRANSFERRED TO *14<sup>th</sup> Bn* DATE *31-8-17*

DATE OF ATTESTATION *July 18<sup>th</sup> 1916*

TRANSFERRED TO *Pay II L* DATE *1-9-17*

ASSIGNED PAY MONTHLY \$ *20<sup>00</sup>* DATE EFFECTIVE *April 1<sup>st</sup> 1917.*

PAYABLE TO *Mr. Orila Singras Grand. Mere P. Q.*

RELATIONSHIP *Father*

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *21-9-17* EFFECTIVE *1-9-17*

REASON *Killed in Action 15/8/17 Ch 10 12/9/17*

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

Entered on N.E. Card Index *V. 10*

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

Checked by *T. J. Williams*

Stamp: *DEC 4 1917*

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
1917															17 50																<i>Bal. from Canada</i>		
<i>April</i>	<i>1-30</i>	<i>30</i>	<i>110</i>	<i>33</i>											<i>33</i>								<i>20</i>	<i>20</i>	<i>30 50</i>								
<i>May</i>	<i>1-31</i>	<i>31</i>		<i>34 10</i>											<i>34 10</i>	<i>110 30/4</i>							<i>20</i>	<i>49 20</i>	<i>15 40</i>								
<i>June</i>	<i>1-30</i>	<i>30</i>		<i>33</i>											<i>33</i>	<i>190 15/5 25/5 30/5</i>							<i>20</i>	<i>76</i>	<i>32 33</i>	<i>16 07</i>						<i>Quota: C 46 20/5</i>	
<i>July</i>	<i>31</i>			<i>34 10</i>											<i>34 10</i>								<i>20</i>	<i>20</i>	<i>30 14</i>								
<i>Aug.</i>	<i>20</i>			<i>32</i>											<i>32</i>								<i>20</i>	<i>20</i>	<i>32 17</i>						<i>32 17 to 15th Bn Bn 104</i>		
<i>"</i>	<i>11/5</i>			<i>17 10</i>											<i>17 10</i>										<i>44 27</i>								
<i>Sept</i>				<i>114 30</i>											<i>114 30</i>										<i>20</i>	<i>16</i>	<i>141 53</i>						<i>Drawn to Pay II L Eff 1/9/17</i>
															<i>155 80</i>								<i>100</i>										

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. DR. 4	BALANCE	ENC.
<i>Oct</i>																
				<i>AR 448. 1<sup>st</sup> Dec 8-6-12 3-57</i>								<i>44 27</i>				
				<i>" 360 14<sup>th</sup> 15-7-17 69</i>												
				<i>" 431 . . . 20<sup>th</sup> 17<sup>th</sup> 468 693</i>												

*A. J. L. Mont...  
Certified ...*

Statement of  
26/18 1917  
Account rendered





Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

*April - 1917*

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>20</i>			
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*221430*

## PARTICULARS OF SEPARATION ALLOWANCE

No. *1054106*

Rank *2/cpl.* Promoted Reverted Discharge

Soldier's Name *Joseph O. Lengras*

Battalion *244th Batta*

Beneficiary

Relationship

Address

## PARTICULARS OF ASSIGNMENT

Name *Olivia Lengras*

Address *Grand-Mere Ave*

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>			<i>120</i>	<i>120</i>	<i>Account closed, 30-9-17</i> <i>Pensions Notified 24-9-17</i> <i>Killed in action 15-8-17</i> <i>G.L. (1)</i>
<i>Dec 31</i>					

