

1st Depot Bn. 1st Quebec Regiment

ORIGINAL

Regt. No. **3089045**

E.L. PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917

B

(Class 1)

1. Surname GOYET

2. Christian name Elphege

3. Present address R. R. No. 3 Valcourt, Que.

4. Military Service Act letter and number 56162 DC
(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 March 12th. 1896.

6. Place of birth Ste. Christine, Que.
(town, township or county and country)

7. Married, widower or single Single

8. Religion R. C.

9. Trade or calling Farmer

10. Name of next-of-kin Ferdinand GOYET

11. Relationship of next-of-kin Father

12. Address of next-of-kin Valcourt, Que. SUFFICIENT ADDRESS

13. Whether at present a member of the Active Militia No

14. Particulars of previous military or naval service, if any None SEE C & D

15. Medical Examination under Military Service Act:—
(a) Place Montreal, Que. (b) Date Sept. 23rd. 1918 (c) Category A²



DECLARATION OF RECRUIT

I, A. GOYET Elphege, do solemnly declare that the above particulars refer to me, and are true.

Elphege Goyet (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 22 yrs. 6 mths.

Height 5 ft. 3 ins.

Chest measurement } fully expanded 36 ins.
range of expansion 3 ins.

Complexion Med

Eyes Brown

Hair D. Brown

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

Eyes R. 20 L. 20

Hearing R. J. L. J.

[Signature] Major
for O.C. 1st Depot Bn. 1st Quebec Regiment.
O. C. First Depot Btl.
First Quebec Regt.

Place Montreal, Que. Date July 22nd. 1918.

1st Depot Battalion, 1st Cavalry Regiment

U.S. Army, M.D.

Form 8089045

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

1. Surname	BOYD
2. Christian name	Walter
3. Present address	11, St. John's Street, London, W.
4. Military service Act letter and number	11111111
5. Place of birth	London, England
6. Place of birth	London, England
7. Marital status	Single
8. Religion	Anglican
9. Trade or calling	None
10. Name of firm or business	None
11. Relationship of next of kin	None
12. Address of next of kin	None
13. Whether at present a member of the British Legion	No
14. Particulars of previous military or naval service	None
15. Medical examination under Military Service Act	None

DECLARATION OF RECRUIT

I, Walter Boyd, do hereby declare that the above particulars refer to me, and are true.

(Signature of Recruit)

DESCRIPTION ON CALLING UP

Age	21
Height	5 ft 6 in
Chest measurement	36 in
Complexion	Fair
Eyes	Blue
Hair	Dark Brown
Build	Slender
Complexion	Fair
Complexion	Fair
Complexion	Fair

Place of capture, no. of the British Legion, 1917.

1st Depot Battalion, 1st Cavalry Regiment



REGIMENTAL DOCUMENTS

1st Depot Bn

NAME **Goyet Elphege**

Pte REGT. NO. **3089045**

UNIT **1st Depot Bn** H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

3-2
1

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

1 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)

1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

1 DENTAL HISTORY SHEET (M.F.B. 465)

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)

2 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

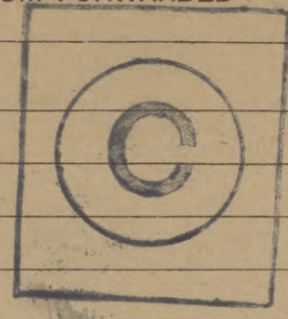
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

1 Dec. S.F. 10.

1 M.F.W. 82.



20817

DEATH

Category

Deceased

DISCHARGE

Category

DESERTION

652-9-244

Box

3659

Original not available

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

500M.-9-16

H. Q. 1772-39-920.

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

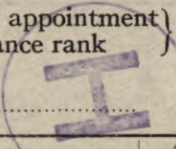
Casualty Form—Active Service.

Unit, Regiment or Corps. 1st Depot Bn. 1st Quebec Regt.

Regimental No. 3089045 Rank. Pte Name. Goyet, Elphege

Enlisted (a) 22-7-18 Terms of Service (a) 6-6-7 Service reckons from (a) 22-7-18

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) 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				
22-7-18	1/1 Q.R.	J.O.S. 22-7-18 date ordered report under m.s.a.	Montreal	22-7-18	100. 203.
24-9-18	1/1 Q.R.	Reported 23-9-18	Montreal	23-9-18	100. 267.
27-8-19	1/1 Q.R.	S.O.S. with effect 5-3-19 and Grant of Inquiry dated 26-3-19 Montreal	Montreal	5-3-19	100. 86.
25-4-19	1/1 Q.R.	S.O.S. with effect 11-2-19. Auth. m.s. 100. letter 4 p-22-6-305 (Death)	Montreal	11-2-19	100. 115



O.B. Langman

Capt. for 100 of R.

(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.]

This record of the military and naval service of the individual is a permanent record of his military and naval service.
Continuation of Army Form 213, Army Form A. 36, or in other official documents.

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				

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

B

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar

1. Surname GOYET Christian name Elphege
 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. 56162 DC
 3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
 4. Address (including street and number, if any) R. R. No. 3 Valcourt, Qu3.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 23rd. day of Sept. 1918. 1917, by the undersigned medical board sitting at Montreal, Que.

5. Age as stated 22 Years 6 Months. 6. Apparent age 22 Years 6 Months
 7. Height 5 Feet 4 Inches. 8. Weight 130 Pounds.
 9. Chest measurement { Minimum 32 ins. Maximum 34 ins. 10. Complexion Med { Eyes Brown Hair D. Brown
 11. Physical development. Good { Good Fair Poor 12. Smallpox marks _____
 13. Number of vaccination marks { Right arm _____ Left arm _____ 14. When vaccinated last Child
 15. Distinctive marks and marks indicating congenital peculiarities or previous disease _____



16. Slight defects but not sufficient to cause rejection _____
 The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis
 (Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category **A²**
 17. (a) Vision R. W L. W
 (b) Hearing. R. OK L. OK

R.R. Scott ^{Capt} President.
Robert Main ^{Capt} Member. R. Fontaine ^{LT} Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.			M.O.
		M.O.			M.O.
		M.O.			M.O.

Joined 22nd. day of July 1918. 1917 at Montreal, Que.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>1st Depot Bn. 1st Quebec Regime</u>			
Transferred to.....	<u>3089045</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

N. B.—This sheet is 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.

Signature of Man

FORM OF WILL

I, GOYET Elphege (Name in full)
 Regimental Number 3089045 serving 1st DEPOT BN. 1st QUEBEC REG'T.
 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

NIL } Name and Address
 of person or
 persons to whom
 it is to go.

absolutely, and my personal estate I bequeath to

Ferdinand GOYET } Name and Address
 of person or
 persons to receive
 personal estate*
 (See note).

Valcourt, Que.

NOTE

This space for the
 appointment of
 Executor if
 necessary.

IMPORTANT NOTE

This must be signed
 and Dated by
 THE SOLDIER
 HIMSELF.

this 23 day of Septembre A.D. 1915

Elphege Goyet Signature of Soldier.

*N.B. Personal estate includes ~~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.....

Address of Witness.....

Occupation of Witness.....

THE TWO
 WITNESSES

MUST
 SIGN HERE

Signature of Second Witness.....

Address of Witness.....

Occupation of Witness.....

WILL

3089045

1st DEPT. NO. 1st QUBEC REGT.

of the Canadian Forces

to be made

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Surname Goyet H. Q.

Christian names Elphege M. D. No. 4

Regtl. No. 3089045 Rank Pte T. O. S. July 29th 1918

Unit 1st. Que Regt. 1st. Dep Bn D. O. Pt. II 2 to 3 of 22-7-18

Reason Des. cancelled S. O. S. 5-3-1919

Auth Look up. D.O. Pt. II 867.27-3-19

Next of kin Goyet Ferdinand Relationship Father

Address Valcourt, P.Q. Also notify: S.O.S. Jan 11-2-19
Sub No. 215 of 25-4-19
116-11

BORN—Place Canada Ste Christine P.Q. Date Mar 12th 1896

ATTESTED—Place Montreal, P.Q. Date July 22nd 1918

O/S..... R/C.....

