

# ATTESTATION PAPER.

No. *Léves*

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio. 318

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *A. L. 2. Hogue*
2. In what Town, Township or Parish, and in what Country were you born?..... *Montréal*
3. What is the name of your next-of-kin?..... *J. Hogue*
4. What is the address of your next-of-kin?..... *389 Mountain St, Montréal*
5. What is the date of your birth?..... *23/2/89*
6. What is your Trade or Calling?..... *Electrical Engineer*
7. Are you married?..... *No*
8. Are you willing to be vaccinated or re-vaccinated?..... *No - if necessary, yes*
9. Do you now belong to the Active Militia?..... *Yes*
10. Have you ever served in any Military Force?.. *Yes 3 years 3rd Bat. C. 2 A*  
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*

..... *A. L. 2. Hogue* (Signature of Man).  
 ..... *L. Hogue* (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I,....., 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..... *25 Sept*..... 1914. .... *A. L. 2. Hogue* (Signature of Recruit)  
 ..... *L. Hogue* (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..... *25 Sept*..... 1914. .... *A. L. 2. Hogue* (Signature of Recruit)  
 ..... *L. Hogue* (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..... *Quebec*..... this..... *25*..... day of..... *Sept*..... 1914.

..... *André St. Laurent JP* (Signature of Justice)

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

..... *J. Hogue* (Approving Officer)



4 balls

Description of Shayne Owen Casley <sup>7</sup> on Enlistment.

Apparent Age 25 years 7 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. 7 ins.

Chest measurement { Girth when fully expanded 36 ins.  
Range of expansion 5 ins.

Complexion fresh

Eyes greyish-green

Hair brown

- Church of England ✓
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated)
- Roman Catholic
- Jewish

2 moles on back  
3 vac. tubs. left arm.

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 3 1914.

Place Valcartier

A. J. H. [Signature]  
Capt. R.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 have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

A. L. J. Hogue 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.

[Signature] (Signature of Officer)

Date 4 Sept 1914.



- 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.....

*Specie*  
**DISCHARGE DOCUMENTS**

R. O. No. ....  
 H. Q. No. ....

*7-10-19*

Name *HAGUE OWEN C. F.*  
 Regt. No. \_\_\_\_\_ Rank *Serjeant*  
 Corps *7th Bty. 2nd Art. Bde.*

00971



*Dep't 2-5-15*

*Med 4-4-19*



*R. 29/11/19*

*Burial Rpt.*

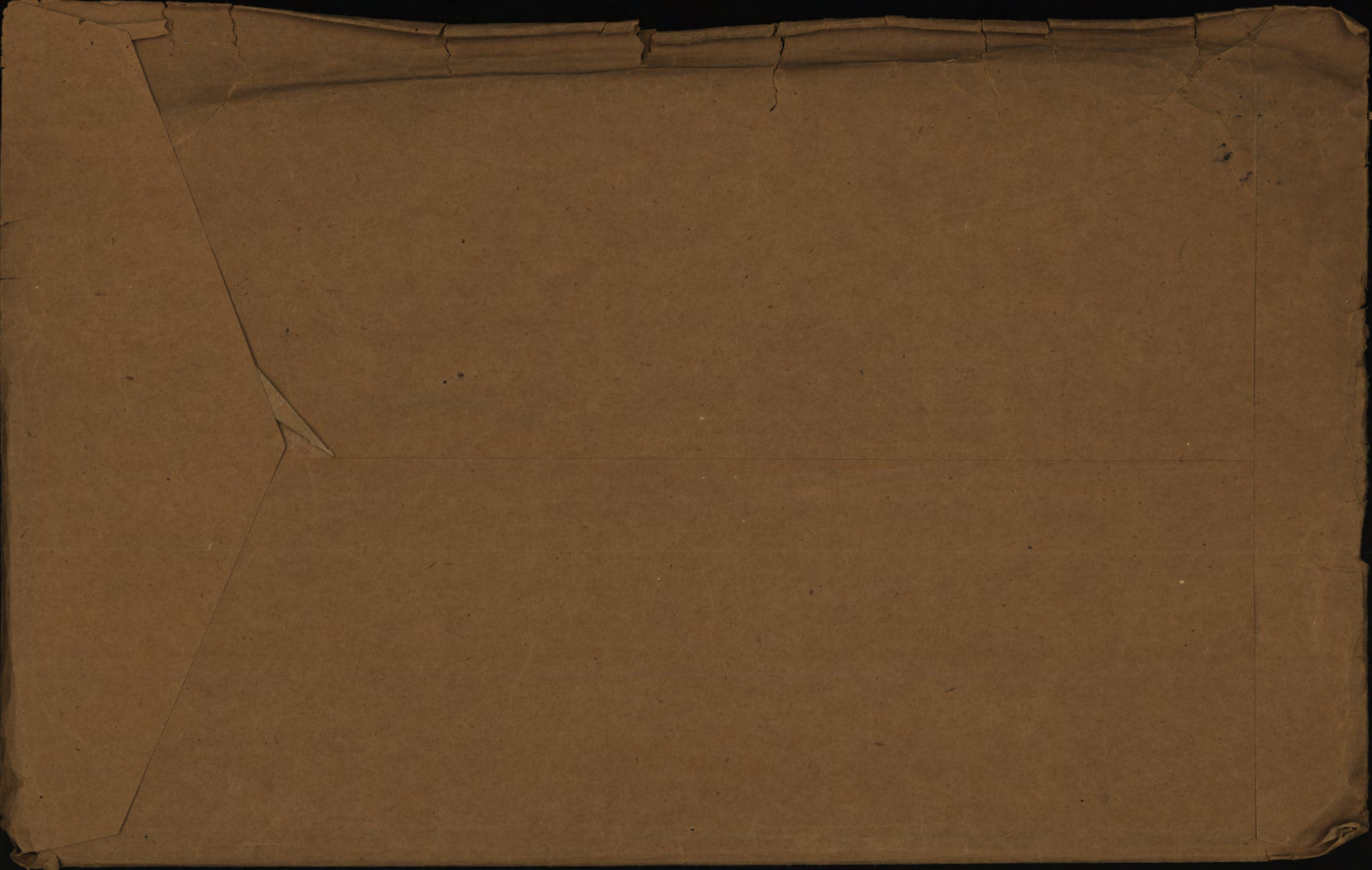
*Mx 20 11.49*  
*21/10*

M. F. W. 62.  
 60M.-9-16.  
 H. Q. 1772-89-935.

*Paycard*

*1 - 10*  
*1 - 10*







Number ..... Rank *Lieut* *P*

Surname ..... *HAGUE*

Christian Names ..... *Owen C. F.* *X*

Unit ..... ~~*2<sup>nd</sup> Bde CFA*~~ Theatre of War ..... *France*

Dates of Service ..... ~~*22.9.14 - 9.2.15*~~ - *2.5.15*

Remarks ..... ~~*Died of Wounds 2.5.15*~~ **D**  
*Dutch*

Latest Address *Frederick Hague Esq.*

*389 Mountain St.*

Roll No. *B* *Montreal P. Q.*

*Page 1026*

My-5032- Resp.

MAR 9 - 1921

Q. Q 27133 Resp.

AUG 2 1921

H.A.2

Hague,

Owen Carsley Frederick,

Lieut. 2nd Bde.

C.F.A.

*Cliff for star - 7th Bty 2nd Bde - Lt.*

MEDALS & DECORATIONS

Frederick Hague (Father)  
389 Mountain St., Montreal, P.Q.

*M*

PLAQUE & SCROLL

Scroll <sup>FEB 21 1922</sup> Father, as above. No. 2-21828

JUN 13 1922

MEMORIAL CROSS

*Serial No 782580*

Mrs. Frederick Hague (Mother)  
389 Mountain St., Montreal, P.Q.

*139917*

*H Deep 28/10/20*

*8950  
(m) C 28212*

M

736



A.F.B. 104-93

Name Hague O.S.F. Rank Lieutenant Reg. No.

Unit 2 Bde C.F.A.

Next of Kin

Date	Movement	Place	Casualty	List No.	Notified N/KO.	W.O. List
2.5 18	<u>Died of Wounds</u> <del>Killed</del>	✓ ✓		53 54		



Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List



No

RANK

*Serjeant*

NAME

*Hoague O. C. F.*

T. O. S.

UNIT #4

*Battery, 2<sup>nd</sup> Brigade. C. I. A. - C. E. F.*M: D. *Val*PAID  
FROMPAID  
TOSIG.  
OR  
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

<i>1914</i> <i>aug 29</i>	<i>1914</i> <i>Sept 31</i>	<i>✓</i>
<i>Sept 22</i>	<i>Oct 31</i>	<i>✓</i>

UNIT SAILED  
OCT 3 1914





NAME

Wagne, Owen Carsley Fred.

REG'T'L. No.

RANK AND CORPS

Lieut. 2nd. Field Artillery Bde.

CABLE

NO.

DATE

NATURE OF CASUALTY

NO. 39

FOLL.

C639

9/5/15

Died of wounds. 2-5-15 R2.  
per file H.-75



LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

✓ 53

✓ 54

2/5/15

Died of wounds  
Killed

CARD NO.

D

SURNAME.

Hague

CHRISTIAN NAMES

Owen Carsley Frederick

REGL. NO.

RANK

Lieut.

UNIT

2<sup>nd</sup> Bde. C. F. A.

FORMER CORPS

3<sup>rd</sup> Bty. C. F. A. 3 yrs.

NEXT OF KIN.

NAMES IN FULL

Hague, F.

RELATIONSHIP TO SOLDIER

Father

ADDRESS

389 Mountain St.  
Montreal, P. Q.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada Montreal P.Q.

DATE

Feb. 23<sup>rd</sup> 1889

PLACE OF ATTESTATION

Valcartier

DATE

Sept. 25<sup>th</sup> 1914.O/S. 7-10-14.  $\frac{36}{2}$



Sailed From Quebec. Per S.S. "Ivernia" 3-10-14-

MARRIED

SINGLE *yes.*

WIDOWER

TRADE OR CALLING

*Electrical Eng.*

RELIGION

*Church of Eng.*

DESCRIPTION.

APPARENT AGE

*25* YEARS

*7* MONTHS

HEIGHT

*5* FEET

*7* INCHES

CHEST MEASUREMENT

*36* INCHES

EXPANSION

*5* INCHES

COMPLEXION

*Fresh*

EYES

*Guyish-green*

HAIR

*Brown.*

DISTINGUISHING MARKS

*2 moles on back. 3 Vac. marks left arm.*

MEDICAL EXAMINATION.

PLACE

*Valcartier*

DATE

*Sept. 3<sup>rd</sup> 1914.*

Hague.

O. C. F.

Lieut. 2nd. Bgde. C.F.A.

DIED OF WOUNDS:-.  
2-5-15.

C.L. 5-5-15. 54.  
3-5-15. 53.

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



Surname

Christian Name

Reg. No.

Rank

Unit

**MEDICAL BOARD** held at

Date

Serial No.

(1)

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

**PENSIONS & CLAIMS BOARD** held at

Date.....

Disposition

Remarks

### Casualty Form—Active Service.

Regiment or Corps 4th Battery, 2nd Artillery Brigade.

Regimental No. \_\_\_\_\_

Rank Lieut

Name Owen J. Heague

Enlisted (a) 25.9.14

Terms of Service (a) \_\_\_\_\_

Service reckons from (a) \_\_\_\_\_

Date of promotion to present rank } \_\_\_\_\_

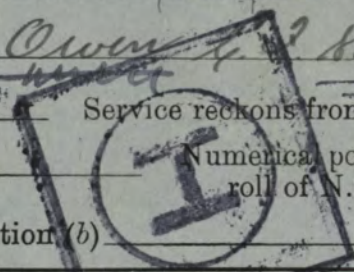
Date of appointment to lance rank } \_\_\_\_\_

Numerical position on roll of N.C.Os. } \_\_\_\_\_

Extended \_\_\_\_\_

Re-engaged \_\_\_\_\_

Qualification (b) \_\_\_\_\_



*mt 10*  
*22 NOV 1918*  
*CANADIAN RECORDS SECTION*

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				
2.5.15	<u>Telegram</u> <u>S.M.W.S.S.</u>	<u>Embarked</u> <u>tired of wounds.</u> <u>left leg + right arm.</u>	<u>Avonmouth</u>	<u>11.2.15.</u> <u>2.5.15</u>	<u>K.H.H. 2/H.</u>

*J.H. Smith*

CAPT.  
OFFICER in CHARGE  
CANADIAN SECTION G. H. Q.

(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				



NAME <sup>Hague</sup> ~~HAGUE~~ Owen C.F. <sup>Lieut.</sup> ✓

Regimental No.

Name and address of next-of-kin

Unit

2nd Brigade

F. Hague

Date of enlistment Sept 25th, 1914

389, Mountain St., Montreal

Place of birth Quebec

Married (yes or no) No

Date and place discharged 3/5/15

Amount of pay assigned monthly \$ NIL

Reason for discharge Died of Wounds.

To whom payable

Character on discharge

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.
22.9.14	21.10.14	10	2.00	80 -	10	60	24 -			104 -					
1.11.14	30.11.14	30	"	60 -	30	"	18 -	164 -		182 -			182 -		✓
1/11/14	31/12/14	31		62	31		18 60	2 -		82 60			80 60		✓
1/1/15	31/1/15	31		62	31		18 60			82 60			82 60		✓
1/2/15	28/2/15	28		56	28		16 80			72 80			72 80		✓
1/3/15	31/3/15	31		62	31		18 60	31		111 60			111 60		Men. ✓







ASSIGNED PAY.

UNIT. *2<sup>nd</sup> Arty Bde. C.F.A*  
 NAME OF DATE AUTHORITY

RANK. *Lieut*  
 DATE AUTHORITY

NAME.

Beneficiary

Name *Hague*

Address

Initials *O.B.F.*

Bank

Amount. \$

Separation Allowance issued. Yes or No.....

*Died of wounds 2<sup>5</sup>/<sub>15</sub>*



DATE	NO OF DAYS	REGT RATE	AMOUNT REGIMENTAL	PARTICULARS F.A. MESSING	OTHER CREDITS	OK. NO. TOTAL	CR. ASS PAY	DR. CHARGES	ASSIGNED PAY PAID IN CANADA DR. BALANCE	CREDIT BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case. BANK	INITIALS.
<i>27. 9. 14</i>												
<i>31. 10. 14</i>	<i>40</i>	<i>2.00</i>	<i>80</i>	<i>24</i>		<i>104</i>				<i>104</i>		
<i>1. 11. 14</i>												
<i>30. 11. 14</i>	<i>30</i>		<i>60</i>	<i>18</i>		<i>182</i>				<del><i>182</i></del>	<i>180</i>	
<i>1. 12. 14</i>												
<i>31. 12. 14</i>	<i>31</i>		<i>62</i>	<i>18 60</i>		<i>87 60</i>				<i>2</i>	<i>80 60</i>	
<i>1. 1. 15</i>												
<i>31. 1. 15</i>	<i>31</i>		<i>62</i>	<i>18 60</i>		<i>87 60</i>					<i>87 60</i>	
<i>1. 2. 15</i>												
<i>28. 2. 15</i>	<i>28</i>		<i>56</i>	<i>16 80</i>		<i>72 80</i>					<i>72 80</i>	
<i>1. 3. 15</i>												
<i>31. 3. 15</i>	<i>31</i>		<i>67</i>	<i>18 60</i>	<i>31</i>	<i>111 60</i>					<i>111 60</i>	
<i>1. 4. 15</i>												
<i>30. 4. 15</i>	<i>30</i>		<i>60</i>	<i>18</i>	<i>58</i>	<i>136</i>					<i>136</i>	<i>Miss includes Feb</i>
<i>1. 5. 15</i>												
<i>31. 5. 15</i>	<i>31</i>		<i>67</i>	<i>18 60</i>	<i>31</i>	<i>111 60</i>		<i>118</i>			<i>110 47</i>	<i>Ord Issue.</i>
						<i>61 71</i>	<i>61 71</i>				<i>61 71</i>	<i>Money found on body</i>

*Miss includes Feb  
 Ord Issue.  
 Money found on body  
 Mil Balshans to  
 Canada 18/10/16*

Statement of  
 OCT 4 1916  
 Account rendered







NAME *Hague, O. C. F.* *Lieut.*

UNIT *2<sup>nd</sup> City Bgde. C. F. A.*

DATE OF APPOINTMENT *25.9.14.*

MARRIED (YES OR NO) *No*

NEXT OF KIN: - NAME *Father. F. Hague.*  
ADDRESS *839. Mountain St. Montreal. Canada.*

ASSIGNED PAY: -  
MONTHLY AMOUNT  
TO WHOM PAYABLE

**1915-16**

DATE NON-EFFECTIVE } *3/5/15.*  
AND CAUSE } *Out of Unuds A.P. 2090 a.*

BANK IN WHICH PAY & ALLOWANCES DEPOSITED *Bank of Montreal.*

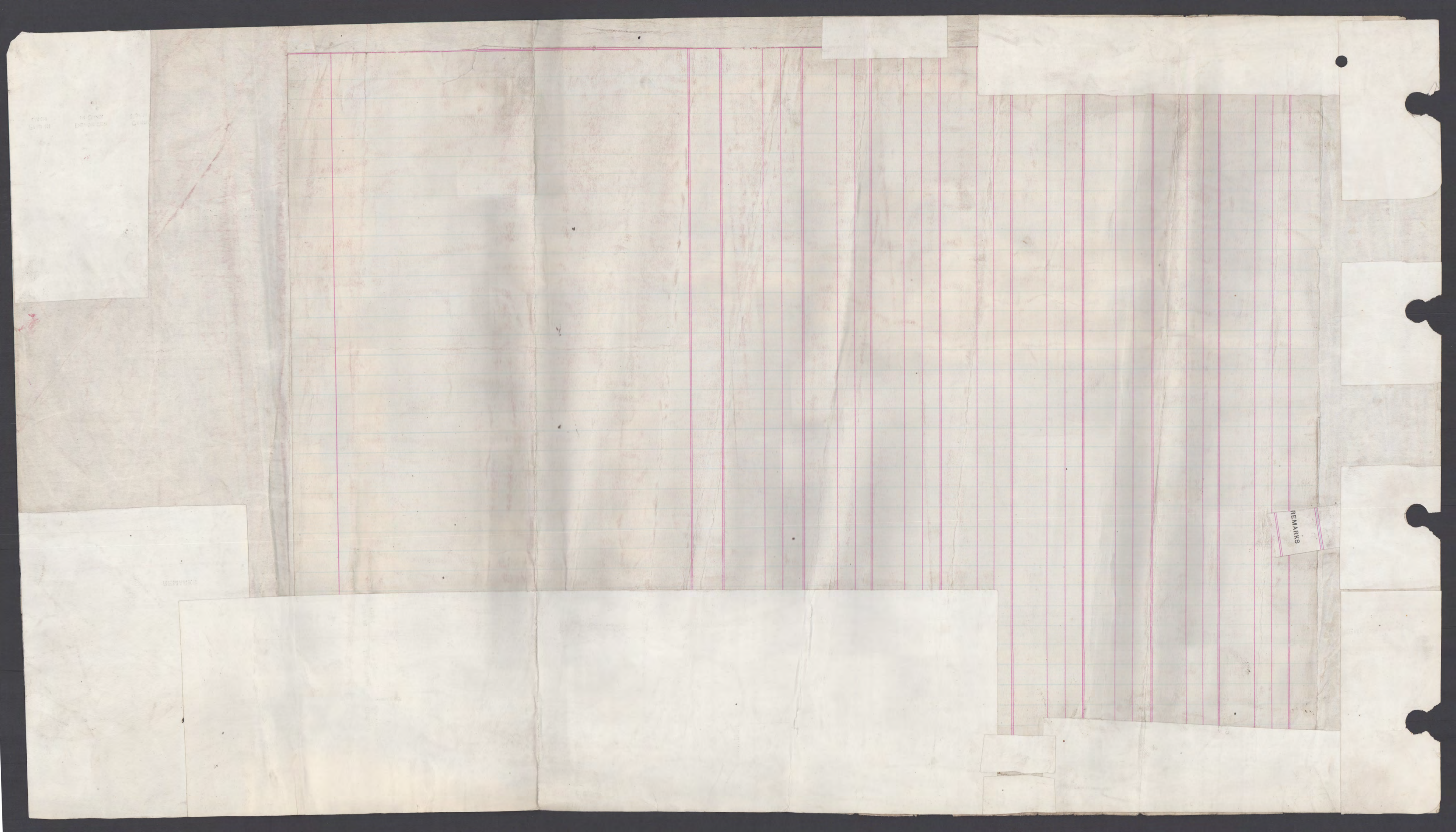
PERIOD		No. of DAYS	REGT. RATE	PAY				RATE OF FIELD ALLOWANCE	ALLOWANCES				TOTAL PAY AND ALLOWANCES	ASSIGNED PAY	SUNDRY DEDUCTIONS	NET P. A.	PAID IN CASH	DEPOSITED IN BANK	CARRIED FORWARD	REMARKS
FROM	TO			AMOUNT OF REGIMENTAL	COMMAND	ADJUTANT	CR. FROM PREV. ACCOUNT		TOTAL PAY	AMOUNT OF FIELD ALLOWANCE	P. F. ALLOWANCE	MESSING								
<i>Apr 1</i>	<i>Apr 30</i>	<i>30</i>	<i>2</i>				<i>60</i>	<i>60</i>	<i>18</i>		<i>58</i>	<i>76</i>	<i>136</i>		<i>136</i>		<i>136</i>			
<i>15</i>	<i>3/5</i>	<i>3</i>					<i>6</i>		<i>180</i>		<i>3</i>	<i>480</i>	<i>1080</i>		<i>118</i>	<i>962</i>	<i>962</i>			<i>10.2.16 Bal P.A.</i>
<i>4/5</i>	<i>3/5</i>	<i>28</i>					<i>56</i>		<i>1680</i>		<i>28</i>	<i>4480</i>	<i>10080</i>				<i>10080</i>			<i>10.2.16 Cr fr. Non-eff. br. 28044</i>
	<i>11/16</i>								<i>6171</i>			<i>6171</i>	<i>6171</i>		<i>6171</i>		<i>6171</i>			<i>10.2.16 Cr fr. Non-eff. br. 28044</i>
									<i>16251</i>			<i>16251</i>	<i>16251</i>				<i>16251</i>			

SUNDRY PAYMENTS

DATE	CHEQUE No.	PARTICULARS	AMOUNT					REMARKS
			\$	c.	£	s.	d.	
<i>1915</i>	<i>6.10</i>	<i>7702 Outfit all.</i>	<i>100</i>		<i>20</i>	<i>10</i>	<i>11</i>	

CARRIED FORWARD





1900  
1901  
1902

REMARKS

REMARKS



Rank and Name HAGUE, Owen C.F.

Regimental No. Lieut.

Unit 2nd Bgde

Date of enlistment Sept 25th., 1914.

Place of birth Quebec

Married (Yes or No) No

If in Permanent Force

Name and Address of Next-of-kin

F. Hague,

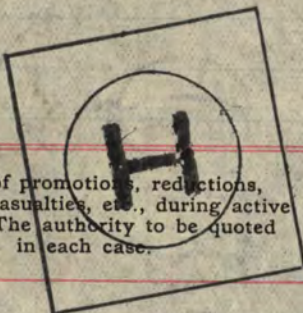
389, Mountain Ave., Montreal.

Date and place of discharge

Reason for discharge

Character on discharge

Promotions or appointments



Report

Date

From whom received

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

3/5/15

W.O.

On strength 2nd Art Bgde France  
Died of Wounds.

31/15

A.F. B158

2/5/15

On Cas Report No 53.

8-5-15

2nd Bgde Struck of Strength Died of Wounds.

2-5-15

Part II ord. No 11

Reported by-

Pl. 2 Bde. 67.A - Buried at, Hazelbush cemetery -  
Graves Reg. Com.

3-5-15

Burial Report.

Died of Wounds. South Mid Cas Clg Stn 2-5-15

A.F. B2090a

A.F.B. 103

22 NOV. 1918

M

Died of Wounds

Art. B



Regimental No. \_\_\_\_\_  
Unit \_\_\_\_\_

REMARKS  
Taken from Official Documents  
Date of enlistment \_\_\_\_\_  
Place of birth \_\_\_\_\_  
Marrried (Yes or No) \_\_\_\_\_  
H in Permanent Force \_\_\_\_\_  
Promotions or appointments \_\_\_\_\_  
Report \_\_\_\_\_  
From whom received \_\_\_\_\_  
Date received \_\_\_\_\_

Name and Address of Next-of-Kin \_\_\_\_\_  
Place \_\_\_\_\_  
Date \_\_\_\_\_

Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case. \_\_\_\_\_  
Date and place of discharge \_\_\_\_\_  
Reason for discharge \_\_\_\_\_  
Character on discharge \_\_\_\_\_

Date \_\_\_\_\_  
From whom received \_\_\_\_\_  
REMARKS  
Taken from Official Documents \_\_\_\_\_



REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_

REMARKS  
Taken from Official Documents \_\_\_\_\_  
Date \_\_\_\_\_  
Place \_\_\_\_\_



BURIAL REPORT

2nd Brigade, Can. Fld. Art.

Lieut. O. C. F. Hague

Reptd. by  
Graves Reg.  
Commission.

Date of Burial.  
3-5-15

Place of Burial.  
HAZEBROUCK CEMETERY.



1911

1911

1911

1911

1911

1911







