

ATTESTATION PAPER.

No. 117

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

110256

1. What is your name?..... *Gaston Hugo*
2. In what Town, Township or Parish, and in what Country were you born?..... *Sherbrooke, Quebec, Canada*
3. What is the name of your next-of-kin?..... *Joseph Hugo (father)*
4. What is the address of your next-of-kin?..... *Chateau Frontenac, Sherbrooke, Quebec*
5. What is the date of your birth?..... *November 4th 1896.*
6. What is your Trade or Calling?..... *Bell Boy.*
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?..... *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*

Gaston Hugo.....(Signature of Man).
H. James.....(Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Gaston Hugo*, 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 *March 11th* 1915. *Gaston Hugo*.....(Signature of Recruit)
H. James.....(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Gaston Hugo*, 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 *March 11th* 1915. *Gaston Hugo*.....(Signature of Recruit)
H. James.....(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..... *Sherbrooke* this *11th* day of *March* 1915.

[Signature].....(Signature of Justice)

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

[Signature].....(Approving Officer)

Description of Gaston Hugo on Enlistment.

Apparent Age 18 years 4 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. 5 1/2 ins.

Scar over left eye

Chest measurement { Girth when fully expanded 37 ins.
 Range of expansion 3 3/4 ins.

Complexion Medium

Eyes Brown

Hair Medium

Religious denominations.
 Church of England
 Presbyterian
 Wesleyan
 Baptist or Congregationalist
 Other Protestants (Denomination to be stated.)
 Roman Catholic Yes
 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 March 11th 1915

Place Sherbrooke

A. M. [Signature]
 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.

G. Hugo 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.

G. Baker Lt. Colonel (Signature of Officer)
 O. C., 5th CANADIAN MOUNTED RIFLES

Date 11th March 1915

08M 14-11-18

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.

(S)

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers 1.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet 1.....

Compulsory Stoppages.....

Casualty Forms 1.....

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 1.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet 1.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

Payc
A & B - 178 - 1, 122 - 1

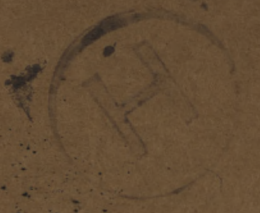
2 cards

*2 forms of will
(copy) will*

Name HUGO GASTON

Regt. No. 110256 Rank Pte

Corps Canadian Mounted Rifles



38835

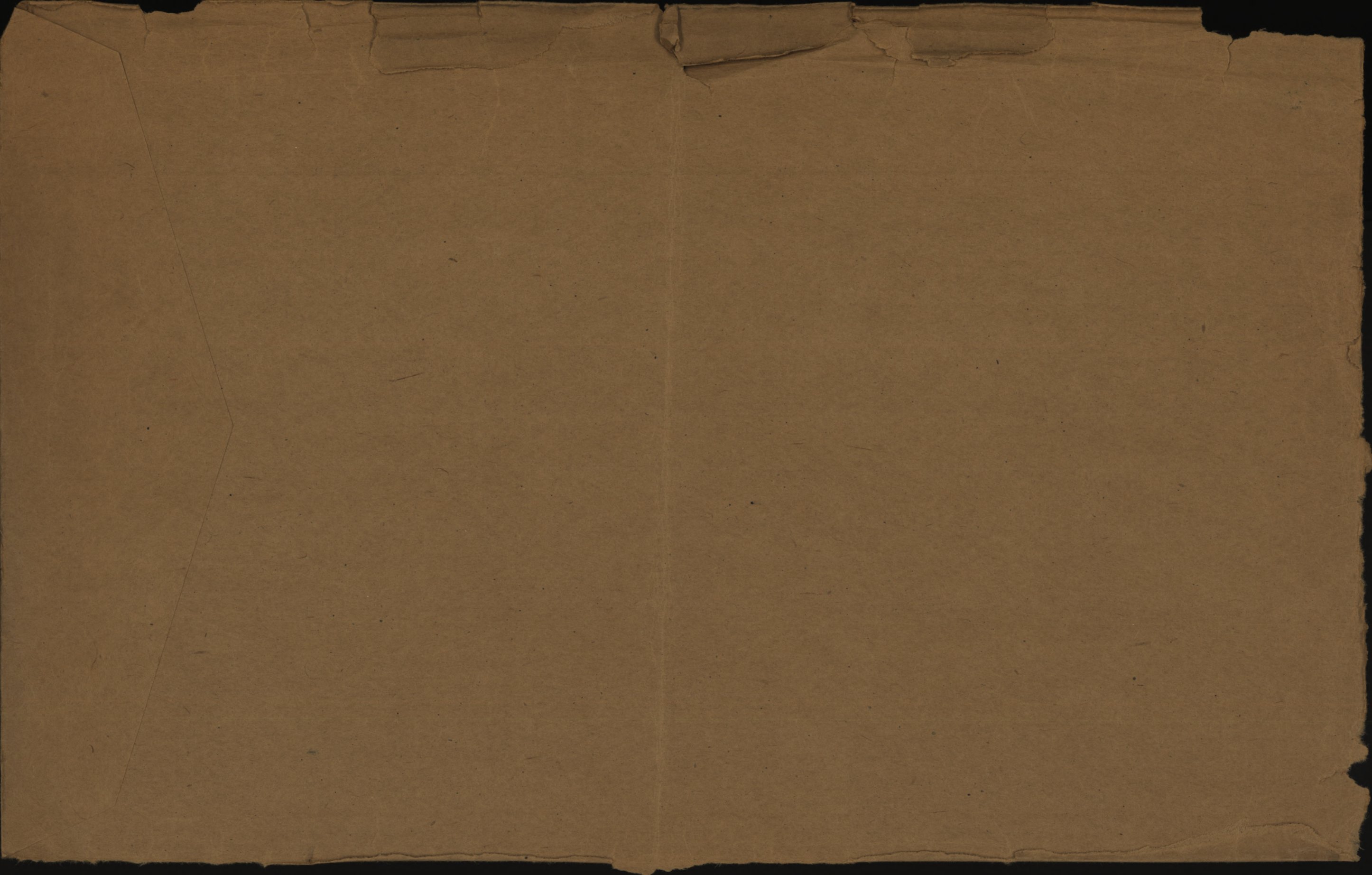
Died of Wounds
18-9-16

12-10
18-10
29-11



M. F. W. 62.
50M-9-16.
H. Q. 1772-39-935.

M. X.
2.3.20
H.C.



110256

I.D. number
No. d'identification

HUGO

Surname
Nom de famille

GASTON

Given names
Prénoms

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

Died
Sept 18, 1916

OPEN
AT IP

Location
Lieu

4602





5TH CANADIAN MOUNTED RIFLES
C. E. F.
110 x 56 Pte A. Hugo.

~~Private~~
14

WILL

In event of my death
I give the whole of my
property and effects to

Mrs Jno. Hugo.

Grand Central Hotel

Sherbrooke P. Que

Canada.

Pte. Gaston Hugo

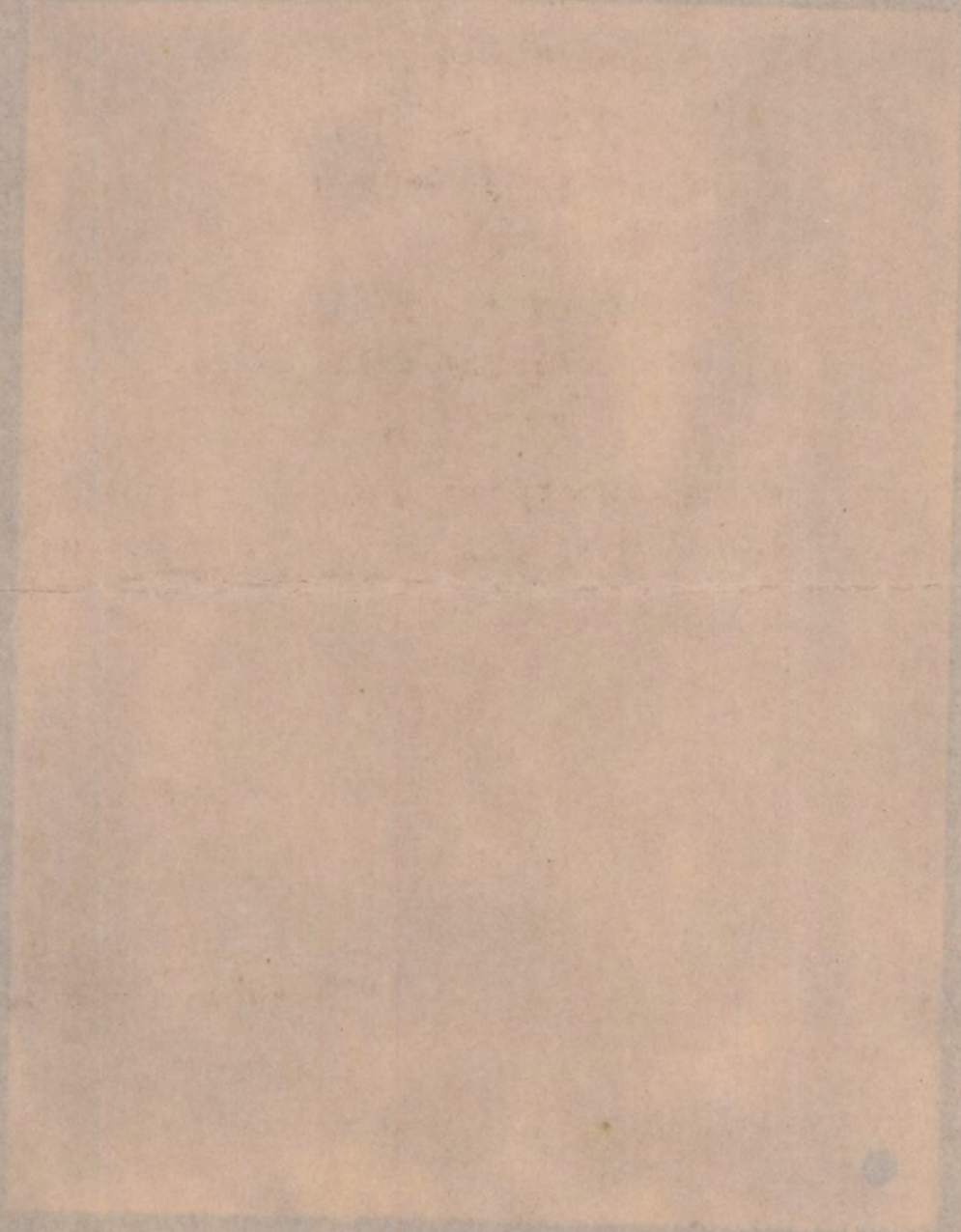
5TH C. M. R. Private. No 110256

Oct. 1/10/15.

494

S-207"21.2.17.

R. C. FEB 22 1917



Casualty Form—Active Service.

Regiment or Corps 5th Canadian Mounted RiflesRegimental No. 110256 Rank Pte Name Hugo, GastonEnlisted (a) 11.3.15 Terms of Service (a) Duration of war Service reckons from (a) 11.3.15Date 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				
20/9/16.	49661.	Died of wounds recd in action	LANDED IN FRANCE 24 10.15 49661.	18/9/16.	Report d 20/9/16. See Rec. KG. 134/1326 d 24/9/16 Dad #169 d 30/9/16 Pte O. 49 d 2/10/16.
					<i>[Signature]</i> Lieutenant for Lt Col. A. A. G.

(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				

MEDICAL HISTORY SHEET.

Surname HUGO Christian Name G.

Examined { on 9th day of April 1915
 at Sherbrooke, P.Q.

Birthplace { City or Town Sherbrooke.
 County P.Q.

Apparent age 21

Trade or occupation Bellboy.

Height 5 Feet 5-1/2 Inches.

Weight 156 Lbs.

Chest measurement { Minimum 35 inches.
 Maximum expansion 37 inches

Physical development

Small-Pox Marks

Eyes 5/5

Vaccination Marks { Arm Right Left
 Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection
Defective teeth. Gonorrhoea 2 years ago.

Approved by

J. R. Goodall

Rank Capt. M.O.

Date	Fit or U. fit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS.
<u>4-7-15</u>		<i>Capt. J. R. Goodall</i> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>13-5-15</u>		<i>Capt. J. R. Goodall</i> M.O.
<u>15-6-15</u>		" " " " M.O.
<u>29-6-15</u>		" " " " M.O.

Enlisted on day of 1915 at

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>5th C.M.R.</u>	<u>110256.</u>		
Transferred to..				

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.

com. ~~me~~
Number 110256 Rank Plt

Surname H L L G O

Christian Name Gaston

Units 5th C M R Theatre of War France

Date of Service 24.10.15 D.

Remarks

Latest Address Mr. J. J. Hugo

205. Andover St
Lawrence
Mass. U.S.A.

Roll No. B. Page 14258.
200m-2-21.M.

DESP. JUN 23 1922

REG. NO.

W 23071

V
SURNAME.

Hugo

(649-H-4703)

CARD NO.

D
FOLL.

CHRISTIAN NAMES

Gaston

REGL. No.

110256

RANK

Pte

UNIT

5th

C. M. D

FORMER CORPS

nil

NEXT OF KIN.

NAMES IN FULL

Hugo Joseph

RELATIONSHIP TO SOLDIER

Father

ADDRESS

~~Chateau Frontenac Sherbrooke~~

~~P. Q., Can.~~ *171 St Regt Valcartier P. Q.*
(GND #1197 30/9/16)

also notify
CHANGE OF ADDRESS
Honore Hugo
7913 Bridge
St. Sherbrooke
P. Q. (auth)
L. S. A. A. P. 8-9-16

COUNTRY OF BIRTH

Canada, Sherbrooke

DATE

PLACE OF ATTESTATION

Sherbrooke

DATE

Mar 11-1915

© 17-7-15. 156/8

MARRIED

SINGLE

yes.

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

Hugo Pi Gaston # 110256 - 5th C.M.R.

Name & Address of Legatee Elig. for 1914-1915 Stars Pt. 5th C.M.R.

medals + Father Joe Hugo

Decorations 205-Andrew St
Lawrence Mass USA

Name & Address of Next of Kin

Plaque & B. Father as above

(Serial no. 767552) Scroll Desp. JAN 20 1921 Reqn. No. 311414

Plaque Desp. DEC 21 1921 Reqn. No. P 21702

Name & address of

B of S. nil mother predeceased
(no widow)

H.G.

Emm



REGT'L NO 110256

H. Q. FILE NO. 649-

NAME

Hugo Gaston

RANK AND CORPS

Pte. 5th Co. M. R.

FOLLOWS

No.

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

0170628-9-16died of wounds 49 casualty bear
Stat. Sept 19th 1916 (GSW abdomen)

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
Q215	O.C no 49 cas cl that rep died of wounds	17-9-16	GSW abdomen
Q.241	Correct date of death to be	18-9-16	—

Name HUGO Gaston^{II} Rank Pte

Reg. No 110256

Unit 5th C.M.R.

RLIS-H-1589

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
8 18 -9-16	ex.WO.Tel.P31671. O.C.No.49	Cas.C.Stn.Reports:	A215	01706		29/9
	DIED OF WOUNDS.		GSW.Abdomen.			
	<i>Errata - Correct date of death should be 18/9/16 A241.</i>					

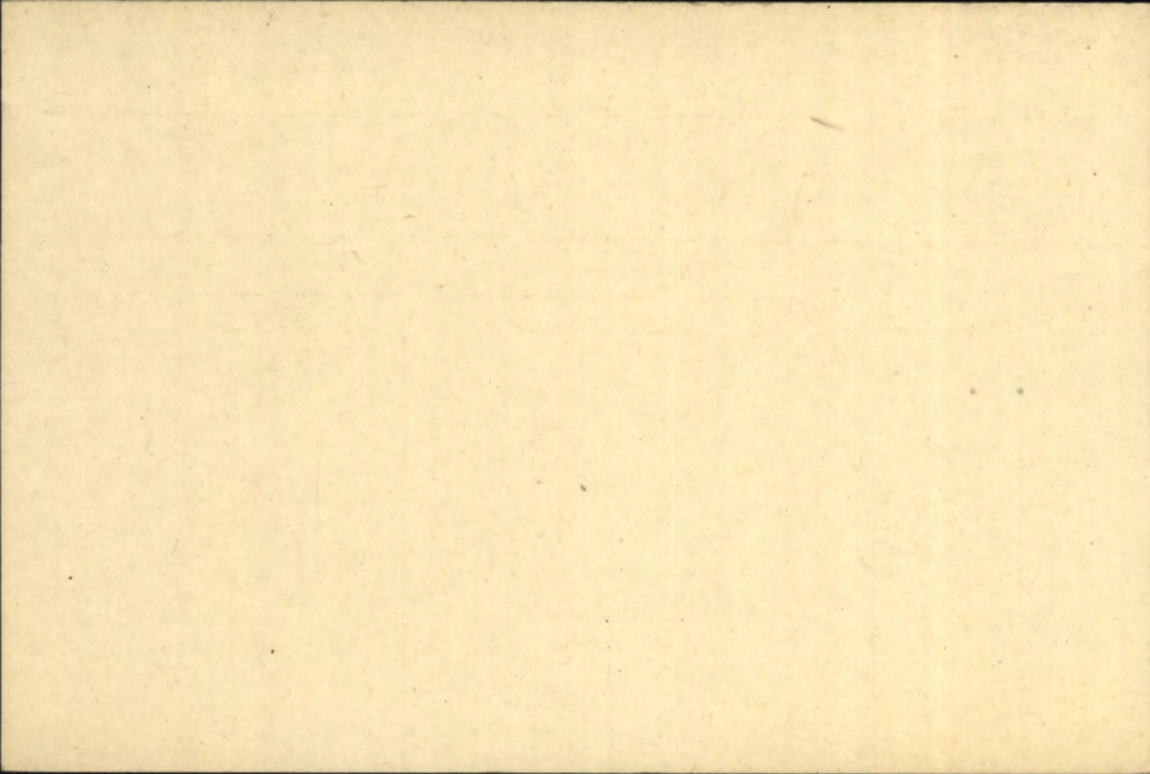
No 5775 RANK Pte.

NAME Hugo, G.

T. O. S. 11-3-15 UNIT 5th Canadian Mounted Rifles.
april payroll.

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 mar 3	1915 mar 31	N		
	april	✓		
	may	✓		
	June	✓		
	July	✓		
				UNIT SAILED JUL 18 1915



Surname

Christian Name or Names

Reg. No.

Hugo
Rank
Pte
Hospital

G.
Unit
5 C. M. R.

110256
Co. Troop Batty.

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

G.I.W. Abdomen.

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Died of Wounds *18-9-16*
19-9-16

DISPOSITION

Date

L.L. 29.9.16 H 215
30.10.16 2241

REMARKS

R. + 49 C.C. S. Reps.

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

2

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

E

Rank _____ Name **HUGO, Gaston,** Reg'l No. **II0256**
 Unit **5th C.M.R.** If in perm. Corps, }
 What Unit? } Married or Single **Single**
 Place and Date of Enlistment **Sherbrooke, P.Q. 11th March 1915** Place of Birth **Sherbrooke, P.Q.**
 Name and Address, Next-of-Kin **Joseph Hugo,**
Chateau Frontenac, Sherbrooke, Quebec. Relationship **Father.**
 Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____
 Discharge, Date and Place _____ Reason _____ Character _____

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				
		<i>Embarked for France.</i>		<i>24 OCT 1915</i>	
<i>29. 9. 16.</i>	<i>5. C.M.R.</i>	<i>Died of wounds.</i>	<i>Field.</i>	<i>18. 9. 16.</i>	<i>C.L.A. 215. See C.L.A. 241. Gled. Abdomen. ✓</i>
<i>2. 10. 16.</i>	<i>---</i>	<i>Died of wounds.</i>	<i>Field.</i>	<i>18. 9. 16.</i>	<i>C.L.A. 215. P.U. O.H. ✓</i>

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

232

Honore

To Whom

Address

By Whom Assigned

Regtl. No.

Rank

Corps

Hugo

5th Battalion Coy.
~~Grand Central Hotel~~

~~Valcartier Camp~~ *Sherbrooke*
Sherbrooke Que

Hugo Gaston

110256

Pte

C Coy 5th C.M.R

Rate

17.00

AUG 1 1915

2 M. 14.76 *29.76* **PAYMENTS**

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 1px solid black; padding: 10px; display: inline-block;"><i>Casualties</i></div>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.		<i>M5198</i>	<i>17 -</i>	<i>Died of wounds Sept. 19/16 Co. (14) 29/16</i> <i>Also 3 M. Oct. 2/16 cont. C.S.</i> <i>Stop Oct. 1/16</i> <i>J.N. 9/11/16</i>
Sept.		<i>L1896</i>	<i>17 -</i>	
Oct.		<i>L2899</i>	<i>17</i>	
Nov.		<i>O 9525</i>	<i>17</i>	
Dec.		<i>P10929</i>	<i>17</i>	
Jan.	1916	<i>Q13504</i>	<i>17</i>	
Feb.		<i>R13973</i>	<i>17 -</i>	
March		<i>W14484</i>	<i>17 -</i>	

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~~ند حسنة الله~~

1971

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 60m.-12-15.
 1772-39-319.

233

Sheet No. 2.

Honore
J. Hugo

L. L. Job 89002.-Req. 6213

PAYMENTS.

Name of Soldier

Hugo Gaston
5th. C.M.R.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i># 17⁰⁰</i>
April	1916	<i>W340</i>	<i>17</i>	
May				
June		<i>K9368</i>	<i>34</i>	<i>Issue Cheque to adj. for 34.</i>
July		<i>Cancelled W13065</i>	<i>17</i>	<i>July Cq. 34 = to adj. of</i>
Aug.		<i>M14128</i>	<i>34</i>	<i>Loady. July + Aug. Spec Reg 8/16,</i>
Sept.		<i>A17746</i>	<i>17</i>	
Oct.				<i>Account closed bas.</i>
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

Casualties

P. X. Rend. Date 238⁰⁰ By
E.F.X. " Date 4/7/17 BY M.A.C.

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.				

Rank _____ Name **HUGO, Gaston,** Reg'l No. **II0256 P-56**
 Unit **5th C.M.R.** If in perm. Corps, Married or Single **Single**
 What Unit? _____
 Place and Date of Enlistment **Sherbrooke, P.Q. 11th March. 1915** Place of Birth **Sherbrooke, P.Q.**
 Name and Address, Next-of-Kin **Joseph Hugo,** Relationship **Father.**
Chateau Frontenac, Sherbrooke, Quebec.

Assigned Pay Monthly \$ **17.⁰⁰** Payable to **J. Hugo, Grand Central Hotel, Sherbrooke,**
Due. Relationship _____

Separation Allowance \$ _____ Payable to _____ Relationship _____
 Discharge, Date and Place **18-9-16.** Reason **W of W.** Character **241.50/10/16.**



Statement of
 APR 25 1917
 Amount rendered

Cash found in
 effects \$ 17.00

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
Aug 1	Aug 31	31	1.00	31	31	10	310	10	4410			1460	17-		3160	1250	
Sep 1	30	30	1.00	30	30	10	3		4550			2676	17-		4376	174	
Oct 1	31	31	1.00	31	31	10	310		3584			1230	17-		2930	645	
Nov 1	30	30		30	30		3		3045			268	17-		1068	1077	
Dec 1	31	31		31	31		310		5387			1682	17-		3382	3005	
Jan 1	31	31		31	31		310		3410			522	17-		2222	3193	
	29	29		29	29		290		3190			523	17.		2223	4160	
Mar 1	31	31		31	31		310		3410			261	17		1961	5609	
BALANCE TRANSFERRED TO NEW LEDGER																	
		24400			2440			100027840		863113600		22231		5609			

Checked *[Signature]*

