

M. D. 1st Depot Battalion 2nd Quebec Regiment
Regtl. No. 225000

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class OMP)

1. Surname Lalancette
2. Christian name Joseph, Wilbrod
3. Present address Roberval, Lac St Jean
4. Military Service Act letter and number 520619 70
(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 Sept 2nd, 1893
6. Place of birth Roberval, Lac St Jean
(town, township or county and country)
7. Married, widower or single single
8. Religion Roman Catholic
9. Trade or calling labourer
10. Name of next-of-kin Alfred Lalancette
11. Relationship of next-of-kin father
12. Address of next-of-kin Roberval, Lac St Jean, Quebec
13. Whether at present a member of the Active Militia no
14. Particulars of previous military or naval service, if any no
15. Medical Examination under Military Service Act :—
(a) Place..... (b) Date..... (c) Category.....

DECLARATION OF RECRUIT

I, Joseph Wilbrod Lalancette, do solemnly declare that the above particulars refer to me, and are true.

Wilbrod Lalancette (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age..... yrs..... mths.

Height..... ft..... ins.

Chest measurement } fully expanded..... ins.

range of expansion..... ins.

Complexion.....

Eyes.....

Hair.....

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

[Signature] Depot Btl. Col.
O. C. 1st DEPOT BATTALION, 2nd QUEBEC REGIMENT
Regt.

Place..... Date.....

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Form 1)

DECLARATION OF RECRUIT

DECLARATION OF RECRUIT

M. D. 1st Depot Battalion 2nd Quebec Regiment

Regtl. No. 320300

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class OMT)

- 1. Surname Lalonde
2. Christian name Joseph, Wilfred
3. Present address Roberval, Lac St Jean
4. Military Service Act letter and number 320319 PQ
5. Date of birth Sept 2nd, 1893
6. Place of birth Roberval, Lac St Jean
7. Married, widower or single Single
8. Religion Roman Catholic
9. Trade or calling Laborer
10. Name of next-of-kin Alfred Lalonde
11. Relationship of next-of-kin Father
12. Address of next-of-kin Roberval, Lac St Jean, Quebec
13. Whether at present a member of the Active Militia No
14. Particulars of previous military or naval service, if any No
15. Medical Examination under Military Service Act: (a) Place (b) Date (c) Category

DECLARATION OF RECRUIT

I, Joseph Wilfred Lalonde, do solemnly declare that the above particulars refer to me, and are true.

Signature of Recruit: Wilfred Lalonde

DESCRIPTION ON CALLING UP

Apparent age yrs mths
Height ft ins
Chest measurement fully expanded ins range of expansion ins
Complexion
Eyes
Hair

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

Signature of Officer: J. C. ... Depot Btln. O.C. 1st DEPOT BATTALION, 2nd QUEBEC REGIMENT

Place Date

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

Class

DECLARATION OF RECRUIT

DESCRIPTION OF CALLING

REGIMENTAL DOCUMENTS

NAME LALANCETTE WILBROD REGT. NO. 3293396 UNIT 1st Depot Bn H. Q. FILE NO. _____

(S)

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

DEATH

Category

Deceased

DISCHARGE

Category

DESERTION

03934

(H)

(1)

10-10

25-11

27-11

5

1

MAJ 2/4/21

Joseph
ilbrod
Lalancette *W.*, Pte. 3293396 1st D. Bn. 649-L-16989 *2nd. Div. Regt.*

Med. & Dec. (Father) Alfred Lalancette, Esq.,
Roberval,
Lac St. Jean, Que.

P. & S. (Father) Address as above.

Per # 807702

Mem. Cross. (Mother) Mrs. Helen Lalancette.,

Address as above.

Roll Desp.

17-8-21

Reqn. No

251781

DEC 17 1921

Reqn. No

P21105 54339

Canada only.

h.

M 50638

JUN 15 1921

1182

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

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

Casualty Form—Active Service.

250M.—1-16.

H. Q. 1772-39-920.

m.k.
2/6/21 m.j.

Unit, Regiment or Corps 1st Depot Battalion 2nd Quebec Regiment

Regimental No. 3293396 Rank Private Name LALANCETTE Joseph Wilbrod

C. E. F.

Enlisted (a) 7-16-18 Terms of Service (a) C.E.F. Service reckons from (a) 10-10-18

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) Laborer

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				
15-12-19		Struck off strength on account of death with effect 20-10-18 D.O. 306-3 of 2-11-18		15-12-19	

CERTIFIED NO ENTRIES OR NO FURTHER ENTRIES UP TO _____

[Signature]

Lt-Colonel.
For. .A.A. & Q.M.G. M.D.5.
Sick List.



(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. 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				

CANADIAN CONTINGENT EXPEDITIONARY FORCE

M. D. 5

AMENDED

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 3293396 Rank..... Pte. Name Lalancette ²⁶ S. D. No.

Corps 1st. Depot Bn. 2nd. Que. Regt. who was* S.O.S. on A/C Death

On 20-10-18 191....., to.....

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 16-10-18 191..... to 31-10-18 191....., the inclusive date of transfer or discharge.



Dr.		\$	c.	Cr.		\$	c.
Bal. Dr. from prev. month.....				Bal. Cr. from prev. month.....			
Advances } No.....				Regt'l Pay <u>26</u> days at \$ <u>1.00</u>		<u>26.00</u>	
by } No.....				Field Allow. <u>26</u> days at \$..... c. <u>10</u>		<u>2.60</u>	
Cheques } No.....				Separation Allowances* (Monthly).....			
Assigned Pay and Sep'n Allice. No.....				Other Allowances*.....			
Other charges.....				Other Credits*.....			
Payment on transfer or discharge No.....				Bal. Dr. (to be deducted by new unit).....			
Balance Cr. (to be paid by the new unit)		<u>28.60</u>					
Total.....		<u>28.60</u>		Total.....		<u>28.60</u>	

* Give particulars.

A monthly stoppage of \$..... (†) has..... (‡) been paid on account of Assigned Pay for the month of..... 191..... } (to) Assignee..... }
 and Sep'n Allice. for month of..... 191..... }
 (Address).....

Documents not Completed

- (†) Insert amount to be assigned, whether it has been paid or not.
- (‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of \$..... has been paid by Paymaster, Military District No.....

REMARKS:— S.O.S. 20-10-18 L.P.C. shows Credit to 31-10-18

- State (1) date of enlistment.....
- (2) if married and if a Separation Allowance Card has been submitted.....
- (3) cause of discharge..... authority.....
- (4) authority for transfer.....

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date 6-11-18

Place Drill Hall Quebec P.Q. Sydney Lieut.
 1st. Depot Bn. 2nd. Quebec Regiment Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record. For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record. If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.



00.85

1.00

01.50

10

08.00

0.25

0.50

RECEIVED OF THE UNITED STATES DEPARTMENT OF THE INTERIOR

RECEIVED

MADE

... ..