

No 660539

163rd B'n. (F.C.) C.E.F.
PIÈCE D'ATTESTATION.

No.
Folio

Original

CORPS EXPÉDITIONNAIRE CANADIEN D'OUTRE-MER

QUESTIONNAIRE REQUIS AVANT ATTESTATION

(RÉPONSES)

- 1. Quel est votre nom de famille?..... Leclaire
- 1a. Quels sont vos noms de baptême?..... Joseph
- 1b. Quelle est votre présente adresse?..... 1609 rue Cadieux, Montreal, Canada.
- 2. En quelle ville, village ou paroisse, et en quel pays êtes-vous né?..... Sault au Récollet, P. Que, Canada.
- 3. Quel est le nom de votre plus proche parent?..... Emélie Racette.
- 4. Quelle est l'adresse de votre plus proche parent?..... 1609 rue Cadieux, Montreal, Canada.
- 4a. Quel est votre degré de parenté avec icelui?.... Mère.
- 5. Quelle est la date de votre naissance?..... 14 février 1893.
- 6. Quel est votre métier ou profession?..... Journalier.
- 7. Êtes-vous marié?..... Non.
- 8. Consentez-vous à être vacciné ou revacciné et inoculé?..... N.N. Oui.
- 9. Faites-vous déjà partie de la Milice active?..... Non.
- 10. Avez-vous déjà fait du service militaire?..... Non.
(En ce cas, mentionner les états de service)
- 11. Comprenez-vous bien la nature et les termes de votre engagement?..... Oui.
- 12. Consentez-vous à être attesté pour service dans le Corps Expéditionnaire Canadien d'outre-mer?..... Oui.

DÉCLARATION REQUISE DU SUJET

Je, Joseph Leclaire, déclare solennellement que ce qui précède contient les réponses que j'ai faites au questionnaire ci-dessus, et que ces réponses sont véridiques, et que je consens à remplir les engagements que je prends maintenant, et je m'engage et consens à servir dans le **Corps Expéditionnaire Canadien d'outre-mer** et à être affecté à une arme quelconque dans le service de ce Corps pour le terme d'une année, ou pour la durée de la guerre actuellement engagée entre la Grande Bretagne et l'Allemagne si elle dure plus d'une année, et pour six mois après la conclusion de cette guerre dans le cas où Sa Majesté requerrait mes services d'autant, ou jusqu'à ce que je sois légalement libéré.

Date 15 mars 1916. Joseph Leclaire (Signature de la Recrue)
Phaliberte (Signature du Témoin)

SERMENT REQUIS DU SUJET

Je, Joseph Leclaire, prête le serment d'être fidèle et de donner mon entière allégeance à **Sa Majesté le Roi George V**, ses Héritiers et Successeurs, de me faire un devoir de défendre honnêtement et fidèlement la Personne, la Couronne et la Dignité de Sa Majesté, et de ses Héritiers et Successeurs contre tous ennemis, et d'obéir ponctuellement à tous les commandements de Sa Majesté, de ses Héritiers et Successeurs, ainsi que de tous Généraux et Officiers placés au-dessus de moi. Ainsi Dieu me soit en aide.

Date 15 mars 1916. Joseph Leclaire (Signature de la Recrue)
Phaliberte (Signature du Témoin)

CERTIFICAT DU MAGISTRAT

La Recrue ci-dessus nommée a été prévenue par moi que, s'il répondait faussement à aucune des questions ci-dessus, il serait passible des pénalités pourvues par la loi de l'Armée.

Les questions ci-dessus ont alors été lues à la Recrue en ma présence.

J'ai vu avec soin, à ce qu'il comprît chaque question, et à ce que les réponses à chacune fussent dûment inscrites telles que reçues, et la dite Recrue a fait et signé la déclaration et prêté le serment en ma présence, à Montreal ce 15ième jour de mars 1916.

Joseph Leclaire (Signature du Juge)
Phaliberte

Signalement de

Joseph Leclaire

à l'Enrolement

Age apparent 23 ans.....mois.
 (Déterminable d'après les instructions contenues dans les règlements du Service Médical de l'Armée.)

Signes distinctifs, et indices d'affections congénitales ou de maladies antérieures.

Si le Médecin-Officier est d'avis que la Recrue a fait du service antérieurement, il devra, à moins que l'engagé reconnaisse le fait, ajouter une note à cet effet pour l'information de l'officier approbateur.

Taille 5 pieds. 9/2 pouces

Mesure de la poitrine { Tour de poitrine, à pleine expansion 35.....pouces
 { Marge d'expansion 3.....pouces

Teint..... Medium

Yeux..... Bruns

Chevelure..... Brune

Confession religieuse { Anglican.....
 { Presbytérien.....
 { Méthodiste.....
 { Baptiste ou Congregationaliste.....
 { Catholique Romain..... Oui.....
 { Juif.....
 { Autres dénominations.....
 (Indiquer laquelle)

CERTIFICAT D'EXAMEN MÉDICAL

Ayant examiné le sujet ci-haut nommé, je constate qu'il ne présente aucune des causes de rejet spécifiées dans les règlements du Service Médical de l'Armée.

Il peut voir de chaque œil à la distance requise; le cœur et les poumons sont sains; il a le libre usage de ses articulations et de ses membres, et il déclare n'être sujet à aucune syncope quelconque.

Je le considère*..... 74..... pour le Corps Expéditionnaire Canadien d'outre-mer.

Date..... March 15 1916..... E. J. Mullet

Lieu..... Montreal PQ..... Exp. a. m. c.
 Médecin-Officier.

* Insérer ici "valide" ou "non-valide".

NOTE.—Si le médecin-officier trouve le sujet impropre au service, il remplira le certificat ci-dessus dans les seuls cas où il y a eu attention et notera brièvement ci-dessous les causes d'invalidité:

CERTIFICAT DE L'OFFICIER COMMANDANT

Leclaire Joseph..... ayant été finalement approuvé et examiné par moi ce jour, et le nom, l'âge, la date d'attestation et tous les autres détails réglementaires ayant été notés, je certifie être satisfait de l'exactitude de cette attestation.

W. D. Desrosiers Lt Col..... (Signature de l'officier.)

Date..... March 15 1916..... W. D. Desrosiers Lt Col O. C.

163rd B'n. (F.C.) C.E.F.

REGIMENTAL DOCUMENTS

NAME **LECLAIR JOS.**

REGT. NO. **660539** UNIT **163rd Bn** FILE NO.

S



CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY
DEATH

- 1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- 1 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- 1 TRAINING HISTORY SHEET (M.F.W. 113)
- 1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)
- 1 REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)
- 1 COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)
- 2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- 1 DENTAL HISTORY SHEET (M.F.B. 465)
- 1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 1 MEDICAL EXAMINATION (M.F.W. 129)
- 1 TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)
- 1 PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)
- 1 DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)
- 1 LAST PAY CERTIFICATE (M.F.W. 44)
- 1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- 1 PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)
- 1 card
- 1 will
- 1 cas card
- 1 m.w. 2
- 1 record

[Handwritten signature]

[Red circled stamp]

Category

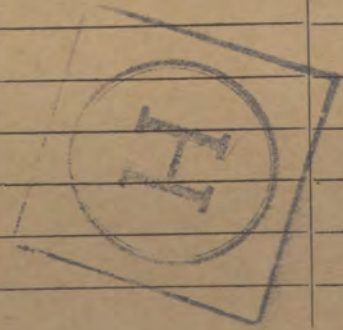
11 m d

DISCHARGE

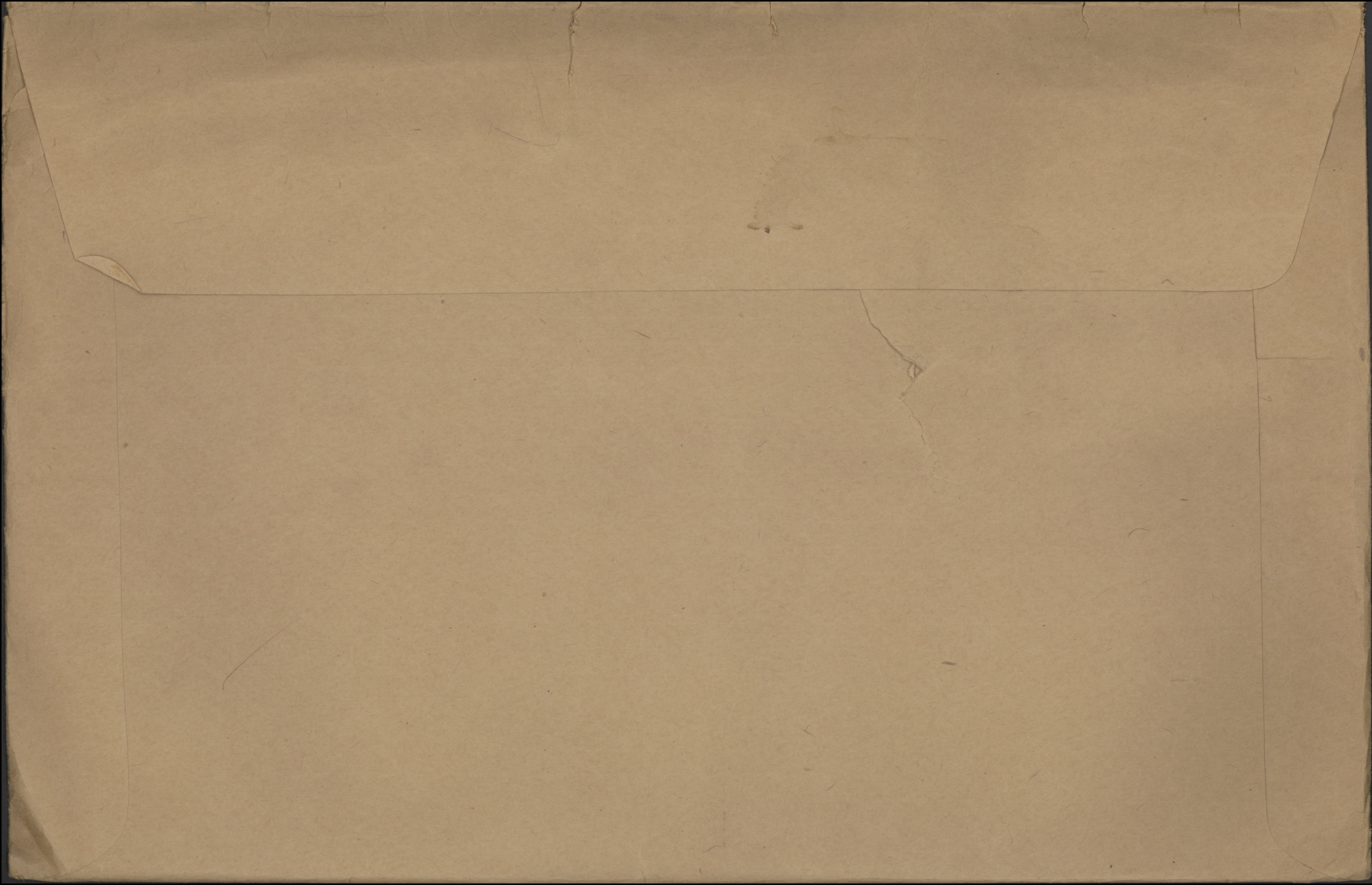
Category

16976

DESERTION



[Handwritten scribbles]



Surname

Christian Name or Names

Reg. No.

Lecaire

Rank

Unit

660539.

Pte

Que 22.

Cas. List.

16.9.18 A3702.

R.F.B. Killed in action 27.8.186.

A.M.D. 2 DEPT.

Beh. of D.G.M.S. O.M.F.C. London.

Cas. List.

1192
Number.. 660539..... Rank..... Pte..... A

Surname.. H. E. C. L. A. I. R. E..... V

Christian Name.. Joseph.....

Unit nd 22. Brn. Can. Inf. Theatre of War, France..... D

Date of Service.. 10-7-17.....

Remarks.....

Latest Address.. ~~Miss~~ Miss Emelie Leclaire ^{sister}
1357 Hotel de Ville Ave
Montreal

Roll No. B. Page 4620 P.R.

9a 32073 *DM*

AUG 18 1921

^{1023/181}
SURNAME.

Leclair,

CARD NO. ✓

CHRISTIAN NAMES

Joseph.

FOLL.

REGL. NO.

668539

RANK

Pte

UNIT

163rd

Batt.

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Racette Mrs Emelie

RELATIONSHIP TO SOLDIER

Mother

ADDRESS

*1609 Ladieux St. Montreal,
P. Q.*

COUNTRY OF BIRTH

Canada, Sault au Re collet

DATE

July. 14th 1893

PLACE OF ATTESTATION

Montreal, P. Q.

DATE

March. 18th 1916

MARRIED

SINGLE *yes*

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

23 YEARS

MONTHS

HEIGHT

5 FEET

7 1/2 INCHES

CHEST MEASUREMENT

35 INCHES

EXPANSION

3 INCHES

COMPLEXION

Medium

EYES

Brown

HAIR

Brown

DISTINGUISHING MARKS

Nil.

MEDICAL EXAMINATION.

PLACE

Montreal, P. Q.

DATE

March 15th 1916

No 660539 RANK *Ste*

NAME *Leclair Joseph*

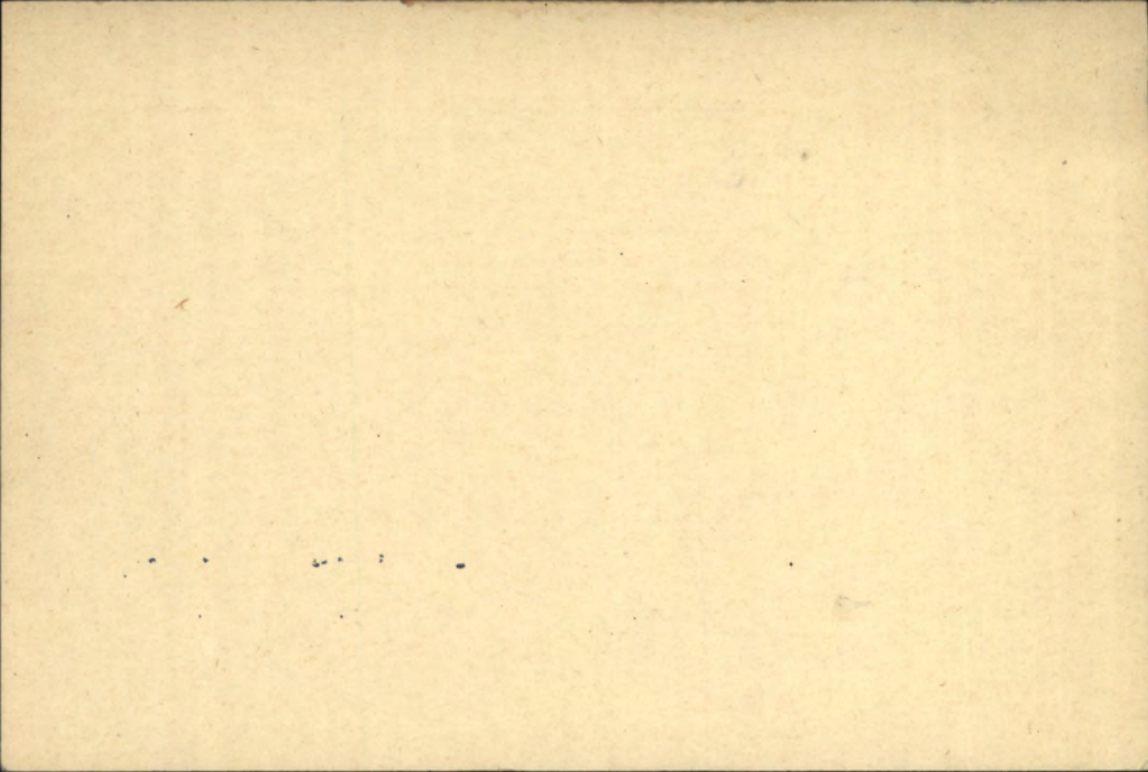
T. O. S. 15-3-16
 DO 72/16-3-16

UNIT *163rd Battalion, C. E. F.*

M. D. of

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916</i>	<i>1916</i>			
<i>Mar 15</i>	<i>Mar 31</i>	<i>✓</i>		
<i>Apr.</i>		<i>✓</i>		
<i>May.</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July</i>		<i>✓</i>		
<i>Aug.</i>		<i>✓</i>		
<i>Sept</i>		<i>✓</i>	<i>120 hrs det</i>	<i>Do 5478-16</i>
<i>Oct.</i>		<i>✓</i>	<i>3 weeks 1 days pay</i>	<i>" " "</i>
<i>Nov.</i>		<i>✓</i>	<i>24 hrs det</i>	<i>Do 93-19-9-16</i>
<i>Dec</i>		<i>✓</i>		

UNIT SAILED
 NOV 27 1918



Reclaire P. Joseph #660539-22nd Bn

Name & Address of Legatee

P. T. O.

Name & Address of Next of Kin

JAN 18 1921

Scroll Desp. Reqn. No.

71057
PAJ
119

Plague Desp. Reqn. No.

JAN 11 1922

PL 3316

Name & Address of Female Next of Kin

339
J.P.

Leclaire Pte Joseph 660539 649-1-16057

Not elig. for 1914-1915 Star

Medals Sister Miss Emelie Leclaire
1357 Hotel de Ville Ave
Montreal

7837

P & S Mother Mrs E. Leclaire
Serial No 768146 same address

P. & S. mother as above

Not married

74.9.

Desp MAY 31 1920 69578

NAME

Leclair Joseph.

RANK AND CORPS

Pvt.

22nd Bn. former 163rd Bn.

REG'TL. No.

660539

H. Q. FILE No. 649

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

NO.

FOLLOWS

h. of Mr. & Mrs. Emelie Pasette, mother,
 1609 Cadieux St. Montreal, P. Q.
 47-10.
 P. 322, 17.9.18 K. in A. Aug. 27/18.
 H. 9320 16-9-18

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS



6779

BPC 49850 30660

6613

FORM OF WILL.

137351

I, Joseph Leclaire (Name in full)

Regimental Number 660539 serving in 10th Can. Res. Batta

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

I bequeath all my real estate unto

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

absolutely, and my personal estate I bequeath to

Miss Emelie Leclaire
1609 Godieux st.
Montreal Canada
Name and Address of person or persons to receive personal estate* (See note).

IMPORTANT NOTE
This must be Signed and Dated by THE SOLDIER HIMSELF.

this Fifth day of July A. D. 1917

Joseph Leclaire 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 Heaton LeBlanc

Address of Witness 10th Can. Res Batta

THE TWO WITNESSES MUST SIGN HERE

Occupation of Witness Soldier

Signature of Second Witness J. R. Drouin

Address of Witness 10th Res Bn.

Occupation of Witness Soldier

ESTATES BRANCH
NOV 20 1918
MILITIA DEPT

ESTATES BRANCH
NOV 20 1918

M. F. W. 82
300M-5-18
1772-39-983

28 OCT 1918
CANADIAN.

FORM OF WILL

I, _____ of the County of _____ State of _____ do hereby certify that I am of legal age and sound mind and memory and that I am not under any legal disability and that I am not being coerced, influenced or unduly persuaded by any person to make this my last will and testament and that I declare this to be my last will.

I bequeath all my real estate unto

Name and Address
of person to
whom I bequeath

absolutely and my personal estate I bequeath to

Name and Address
of person to
whom I bequeath

IMPRINTED BY
THE
THE
HIMSELF

Signature of Testator _____
Address of Testator _____
Occupation of Testator _____
Signature of Witnesses _____
Address of Witnesses _____
Occupation of Witnesses _____

Leclair, Joseph

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 163rd Bn C.E.F
 Regimental No. 660539 Rank Pte Name Leclair Joseph
 Enlisted (a) 15-3-16 Terms of Service (a) DoW. Service reckons from (a) 15-3-16
 Date of promotion to } Date of appointment } Numerical position on }
 present rank } to lance rank } roll of N. C. Os. }
 Extended Re-engaged Qualification (b) Labourer

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	Bermuda	18-1-16	
		Disembarked	England	6-12-16	✓
7-1-17	163 rd Bn	Transf. to 10 th Can. Res. Bn.	Shoreham	7-1-17	Do Port 2 & 7 G. Scatter Lieut Adj. 163 rd Bn
7-1-17	10 th Res. Bn.	Taken on from 163 rd Bn.	Shoreham	7-1-17	Do Port 2 1 ✓ G. Scatter Lieut Adj. 10 th Res. Bn
11-7-17	O. C. 10th. Res. Bn.	Transf. to 22nd. Bn. C. E. F.	Shoreham	10-7-17	D. P. 11. O. 171 ✓
12-7-17	G. B. D.	ARRIVED G. B. D.	FRANCE	12-7-17	N. R. D. _____ PART II ORDERS No. 79. D. 11-8-17
17/17	C. B. D.	LEFT G. B. D. FOR	2 nd Cent.	17/17	N. R. D. _____
	O. C. BN	ARRIVED	PN	FIELD	

CERTIFIED CORRECT
 25 JUL 1917
 GAIN RECORDS, LONDON

(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.

660539 The Leclaire, J.

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				
19 ⁸ /17	2 nd Ent.	Arrived 2 nd Ent. Bn	Field	19 ⁸ /17	RR
21 ⁸ /17	"	Left for Unit	"	21 ⁸ /17	"
25 ⁸ /17	22 nd	Joined Unit	"	22 ⁸ /17	B213
26-1-18	150	Attached to 1 st Can Lundry Coy	"	19-1-18	B213
23-2-18	50	Rejoined Unit	"	18-2-18	B213
7-9-18	22nd Bn.	KILLED IN ACTION	Field	27-8-18.	K. I. 17-1182. Pt. II. O. 90/1918.

Whogau Major for Lt.-Col., A. A. G.
Canadian Section. G. H. O. 3rd Echelon B. E. F.

J.P.

R-122
8,401-80,000-21-10-16.

Rank

Name **LECLAIRE, Joseph**

Reg'l No. **660539**

Unit **163rd Bn**

If in perm. Corps,
What Unit?

Married or Single **Single**

Place and Date of Enlistment **Montreal. 15th March. 1916**

Place of Birth **Sault au Recollet.
P. Que. Canada**

Name and Address, Next-of-Kin **Emelie Racette**

1609 rue Cadieux. Montreal. Canada

Relationship **Mother**

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No. **14406**
File R.L. **25L 2821** 28/9/15
KILLED IN ACTION
Category

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.				
ARRIVED IN ENGLAND Per S.S. Metagama 6-12-16					
7-1-17	163rd Bn.	S-O-S to 10th RES. BN. BramSt		7-1-17	PT 11 0 7
7-1-17	10th R. BN.	TOS. of 10th RES BN Shore'm		7-1-17	PT. 2 D.O.1
11-7-17	"	SOS to 22 Bn of seas	"	10-7-17	PHO 171
15-8-17	22 Bn	TOS	Fulu	12-7-17	— 79
13-9-18.	22 nd Bn	Killed in Action	"	27-8-18	20.90. + Que 6h (220 d) 16/9/18

a 25.103 dkt
24-7-17
B.

66
gc

Register No. Del. 832

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 10816-8-44

Reg'tl No. 660539 Name Joseph Leclair
(Christian Name) (Surname)
Unit 22 Battrn Rank pte Date of enlistment 15-3-16
Date of casualty 27-9-18 B.P.C. File No. 49850
Was service performed overseas? Yes

DEPENDENT

Name Mrs Emelie Leclair Relationship w. mother
Address 1357 City Hall Ave
Montreal

~~Amount of Special Pension Bonus \$ nil Abstracted by W Parlow~~

Eligible for Gratuity \$ 180
Less amount of Special Pension Bonus paid \$ -
Less Debit Balance of S. A. or A.P. \$ -

Total deductions \$ -
Balance due \$ 180

Cheque No. 9. 190/457 Date issued 19/8/20

Clerk Arnold

REMARKS :
.....
.....
.....
.....

Audited by
Keut
Date 12/8/20

D. 827

M.F.W. 2652
25M-6-20,
H.Q. 1772-39-1473

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay \$ _____ per diem; Field Allowance \$ _____ per diem. Separation Allowance \$ _____ per month.

L.L. 53061—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

M. F. W. 127
 300M-1-19
 1772-30-1140

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12.
 50m.—4-18.
 H. Q. 1772-39-519.

To Whom *M^{rs} Emilie Racette Leclaire*
 Address *1609 Cadieux St*
Montreal
Que

Mother

By Whom Assigned

*Leclaire Joseph*Regtl. No. *660539*Rank *Pte*Corps *163rd Battⁿ B. Co.*Rate *\$15.* JUN 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



1885

1885

1885

MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.
 50m.-4-16.
 1772-39-819.

Mrs Emilie Leclaire
 Sheet No. 2.

OVERSEAS CONTINGENTS

Name of Soldier Leclaire, Jos.
 PAYMENTS # 660539

L. L. Job 310.-Req. 6574.

JUN 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June		96200	15	
July		X 11725	15	
Aug.		m 14458	15	
Sept.		V 18424	15	
Oct.		V 23442	15	
Nov.		Y 25028	15	
Dec.		Y 033258	15	
Jan.	1917	340480	15	
Feb.		245822	15	
March		S 51870	15	15 (W)
April		P 3136	15	15-15 (W)
May		P 9294	15	
June		O 15907	15	Bu
July		P 23143	15	Bu
Aug.		Z 32177	15	
Sept.		S 37665	15	S
Oct.		D 43827	15	
Nov.		A 30134	15	
Dec.		M 60189	15	
Jan.	1918			
Feb.			285	
March				
April				
May				
June				
July				

Handwritten initials

Handwritten initials

285
 \$ 285
Handwritten notes

CANADIAN
 ASSIGNED PAY AUDITED
 10/21/18
 W. A. Monland
 AUDIT CLERK
 DATE 17/6/19

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

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.				

15-3-16.

MILITIA AND DEFENCE

M. F. W. 11.
15m.—3-16.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name *Emilie R. Le'clair.* Name of Soldier *Le'clair Joseph*
 Address *1609. Cadieux St-
Montreal
Rue.* Regtl. No. *660539*
 Rank *plc*
 Corps *163 Bttu*
 Relation to Soldier } *Widowed.* To what Corps belonging }
 wife, child or mother } *Mother* when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



011

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011

MILITIA AND DEFENCE
SEPARATION ALLOWANCE

M. F. W. 11a.
15m.-3-16.
H. Q. 1772-39-818.

Sheet No. 2.

Emilie R. LeBlanc - Mother
OVERSEAS CONTINGENTS
PAYMENTS.

Name of Soldier

LeBlanc. Jos.
pl6

L. L. Job 95618-M. & D. 6555.

660539.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	P 861	20	30
May		E 3251	20	20
June		V 4605	20	20
July		K 11004	20	20
Aug.		D 11617	20	20
Sept.		K 17260	20	20
Oct.		M 19792	20	20
Nov.		T 23166	20	20
Dec.		T 25825	20	20
Jan.	1917	Z 29221	20	20
Feb.		Z 32146	20	20
March		Z 35099	20	20
April		C 1423	20	20
May		Z 4342	20	20
June		B 9258	20	20
July		Z 11349	20	20
Aug.		J 14565	20	20
Sept.		Q 1775R	20	cancelled 7/11/52
Oct.		V 20349	20	20
Nov.		J 23666	20	20
Dec.		W 25928.	20	20
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

\$ 430

430
pl6

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 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.				

EFFECTIVE DATE
 AUTHORITY
 IF IN PERM. CORPS
 WHAT UNIT
 PERMANENT FORCE ALLOWANCES
 PLACE OF ATTESTATION
 DATE OF ATTESTATION

REG'L No. **660539** RANK **Private** NAME **Leclair Joseph**
 UNIT **163rd** TRANSFERRED TO **10th Can Rec Bn** DATE **1/2/17** AUTHORITY **R.O. 69**
22/1/17
 TRANSFERRED TO **22nd Bn** DATE **1-11-17** AUTHORITY **Request**
 PLACE OF ATTESTATION **Montreal** TRANSFERRED TO _____ DATE _____ AUTHORITY _____
 DATE OF ATTESTATION **15/3/16** TRANSFERRED TO _____ DATE _____ AUTHORITY _____
 ASSIGNED PAY MONTHLY \$ **15.00** DATE EFFECTIVE **November 1st 1916** ~~December~~

PAYABLE TO **Emilie Racette, 1609 Cadieux St. Montreal, Canada.** RELATIONSHIP **Mother**
 ASSIGNED PAY MONTHLY \$ _____ DATE EFFECTIVE _____

PAYABLE TO _____ RELATIONSHIP _____
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) _____ EFFECTIVE _____ REASON _____
 DISCHARGE DATE AND PLACE _____ REASON AND AUTHORITY _____
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) _____
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE) _____

DISTANCE ROLLS
 2 3 4
 DATE NO. DATE NO. DATE

CASH PAYMENTS					ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1	2	3	4	CREDIT				DEBIT				
								2290				Balance from Canada
	973	486			15		3959	1091				
					15		15	3001				
	487				15		2474	3607				
29/3/16	487	487			15	351	5360	1657				Q4005-171-16.2.17
16/3/16	487	1947			15	101	1500	3457				Q4005-41-3.2.17
	730				15	660	4118	2749				5840 P.P.H. 24000 Do. 118 18/5/17
	730				15	498	3204	2845				508.788 5/4/17
	974				15		509	2009	4246			1285
	730				15		2716	4940				10R. 405. 285.17
16/6/17	730	486			15		348	1848	6392			Q4005. 3340. 44.17. 3.7.17. 9.7.17.
					15							
					150		2467	27688				

CANADIAN
 ASSIGNED PAY AUDITED
Shore To 31/8/14
 AUDIT CLERK
 DATE **17/6/19**

ASSIGNED PAY. *11* ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.
EFFECTIVE DATE: *1-12-16* EFFECTIVE DATE: -
AMOUNT: *1500* AMOUNT: -

NAME: *LECLAIR Joseph*
NUMBER: *660.539*

NAME, ADDRESS, RELATIONSHIP & AUTHORITY { WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.
*Emilie Racette
1609, Cadieux St.
Mothus, Montreal, Canada*

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>PTD.</i>

UNIT AND TRANSFERS
ORIGINAL UNIT: *163rd B^m*
DATE ACCOUNT FIRST OPENED: *16-12-16*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F D	UNIT TRANSFERRED TO
<i>CLA 320</i>	<i>1.9.18</i>	<i>19.9.18</i>	<i>32 B^m h&h</i>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS CE ALL CE
	<i>1.20</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE:

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	By	BALANCE	DEFERRED	SEPARATION
<i>1918</i>												
<i>Mar 31</i>	<i>Bal Foid</i>									<i>92.33</i>		
<i>Apr</i>				<i>AR 14. 22 Bm 5/4/18</i>	<i>1.78</i>					<i>90.55</i>		
				<i>" 52 " 15/4/18</i>	<i>4.46</i>					<i>86.09</i>		
				<i>" 92 " 26/4</i>	<i>3.57</i>					<i>82.52</i>		
				<i>AP ban</i>				<i>15</i>		<i>67.52</i>		
	<i>P.P</i>	<i>33</i>								<i>100.52</i>		
		<i>33</i>				<i>9.81</i>		<i>15</i>				
<i>MAY</i>				<i>AP ban</i>				<i>15</i>		<i>85.52</i>		
				<i>AR 182 " 12/5</i>	<i>4.46</i>					<i>81.06</i>		
	<i>P P</i>	<i>34.10</i>								<i>115.16</i>		
				<i>" 235 " 29/5</i>	<i>5.35</i>					<i>109.81</i>		
		<i>34.10</i>				<i>9.81</i>		<i>15</i>				
<i>JUN</i>	<i>do</i>	<i>33</i>		<i>AP ban</i>				<i>15</i>		<i>124.81</i>		
				<i>AR 277 " 16/6</i>	<i>3.57</i>					<i>124.24</i>		
		<i>33</i>				<i>3.57</i>		<i>15</i>				
<i>JUL</i>	<i>do</i>	<i>34.10</i>		<i>ban AP</i>				<i>15</i>		<i>143.34</i>		
				<i>AR 332 " 2/7</i>	<i>4.46</i>					<i>138.88</i>		
				<i>" 423 " 15/7</i>	<i>3.57</i>					<i>135.31</i>		
				<i>" 539 " 27/7</i>	<i>4.46</i>					<i>130.85</i>		

PAY BOOK CHECKED.
Date *11/11/18*
By *[Signature]*

My

* Strike out which ever inapplicable.

27/1/18 CLP/320 14/9/18

UNIT AND TRANSFERS
 ORIGINAL UNIT:- *163rd Bm*
 DATE ACCOUNT FIRST OPENED:- *16-12-16*
 AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T'S'FO UNIT TRANSFERRED TO
CA 320 1.9.18 19.9.18 22 Bm H&L

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1.20	10		

PARTICULARS OF RENDERING NON-EFFECTIVE:-

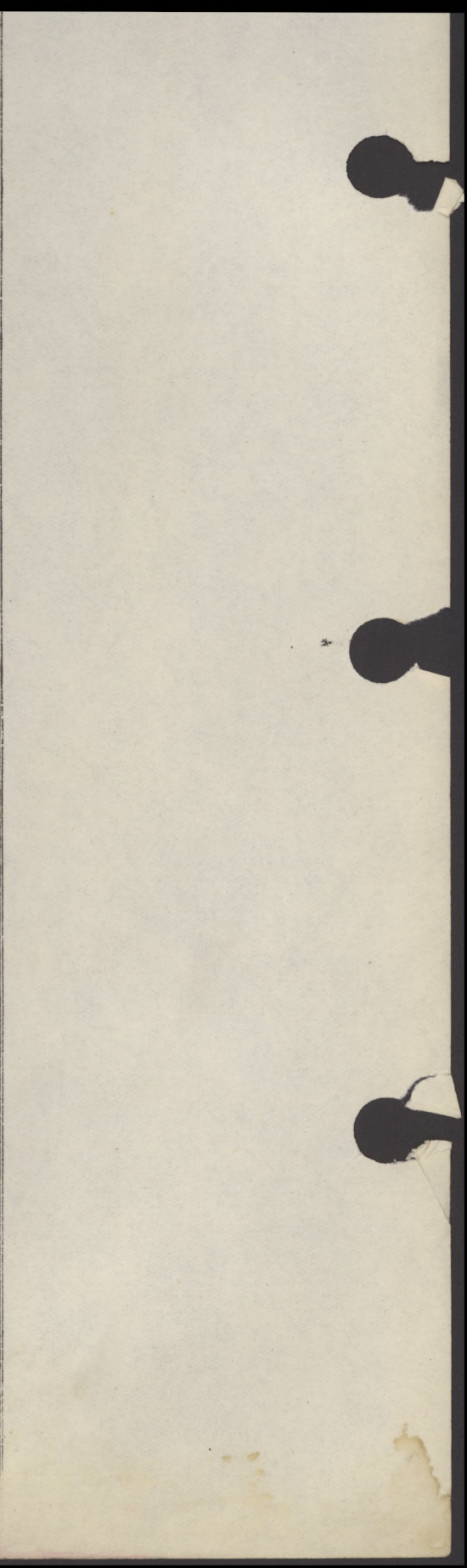
PAY BOOK CH. CLD.
 Date *21/11/18*
 By *P. J. [Signature]*
 BALANCE DEPARTED SEPARATION BRANCH

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4
Mar 31	<i>Bal Fwd</i>							92.33
Apr				<i>AR 14. 22 Bm 5/4/18</i>	<i>1.78</i>			90.55
				<i>" 52 " 15/4/18</i>	<i>4.46</i>			86.09
				<i>" 92 " 26/4</i>	<i>3.57</i>			82.52
				<i>AP ban</i>			<i>15</i>	67.52
	<i>P.P</i>	<i>33</i>						100.52
		<i>33</i>			<i>9.81</i>		<i>15</i>	
MAY				<i>AP ban</i>			<i>15</i>	85.52
				<i>AR 182 " 12/5</i>	<i>4.46</i>			81.06
	<i>P.P</i>	<i>34.10</i>						115.16
				<i>" 235 " 29/5</i>	<i>5.35</i>			109.81
		<i>34.10</i>			<i>9.81</i>		<i>15</i>	
JUN	<i>do</i>	<i>33</i>		<i>AP ban</i>			<i>15</i>	127.81
				<i>AR 299 " 16/6</i>	<i>3.57</i>			124.24
		<i>33</i>			<i>3.57</i>		<i>15</i>	
JUL	<i>do</i>	<i>34.10</i>		<i>ban AP</i>			<i>15</i>	149.34
				<i>AR 332 " 2/7</i>	<i>4.46</i>			138.88
				<i>" 423 " 15/7</i>	<i>3.57</i>			135.31
				<i>" 539 " 27/7</i>	<i>4.46</i>			130.85
		<i>34.10</i>			<i>12.49</i>		<i>15</i>	
AUG	<i>do</i>	<i>34.10</i>		<i>AP Can</i>			<i>15</i>	149.95
				<i>AR 175 - 56 B 22/8</i>	<i>3.57</i>			146.38
		<i>34.10</i>			<i>3.57</i>		<i>15</i>	
SEP				<i>Dr. Paid to Ottawa</i>	<i>146.38</i>			<i>ml</i>
					<i>146.38</i>			

CANADIAN ASSIGNED PAY AUDITED
Smorie
 AUDIT CLERK
 DATE *17-6-19*

14/9/18
27/11/18 CA 320

NET PAID 30.10
 OR 146.38



No 660539

Duplicate

ORIGINAL MEDICAL HISTORY SHEET.

Surname Leclair Christian Name ~~XXXXXXXX~~ Joseph

Examined { on 15 day of March 1916
at Montreal P.Q.
Birthplace { City or Town Sault au Récollet
County P. Que, Canada.

Approved by [Signature]
Rank Capt a. w. c M.O.

Apparent age 23
Trade or occupation Journalier
Height 5 Feet 7 1/2 Inches.
Weight 124 Lbs.
Chest measurement { Minimum 32 inches.
Maximum expansion 35 inches.
Physical development Good
Small-Pox Marks none

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm. Right. Left.
Number none
When Vaccinated last never

Date.	Result.	VACCINATIONS.
<u>9/11/16</u>	<u>Good</u>	<u>J. D. Bishop Capt</u> M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease
(b) Slight defects but not sufficient to cause rejection

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>6/26/16</u>	<u>Good</u>	<u>R. N. Higgins both arms</u> M.O.
<u>7/4/16</u>	<u>5/5/17 TAB</u>	<u>of Higgins</u> M.O.
<u>7/26/16</u>	<u>2/15/17 TAB</u>	<u>of Higgins</u> M.O.

Enlisted on 15 day of March 1916 at Montreal P.Q.

	CORPS.	REG'T. NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>163rd Bn</u>	<u>660539</u>		
Transferred to	<u>10th Res Bn</u>			
	<u>22 Bn.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
			<u>Att of Higgins</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.

No 660539.

B

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of Inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Ho-pital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Bermuda	9/10/16								Examined for Active Service and found fit.	J. H. D. S. L. S. M. J.	Capt. C. A. M. C.

Christian Name

Surname

M O P P O F 3 5 7

2

Date of Enlistment

15-3-16

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

3968
L 8988

Date of Assignment

Jun. 1/16

RATE OF SEPARATION ALLOWANCE

20	1/2/17		
	25		

P.C. 3257

RATE OF ASSIGNMENT

15.			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 660539
 Rank Pte. Promoted Reverted Discharge
 Soldier's Name Joseph Leclaire
 Battalion 163 Battrn. B. Coy.
 Beneficiary Emilie R. Leclaire
 Relationship W. Mother
 Address

PARTICULARS OF ASSIGNMENT

(Mother)
 Name Emilie R. Leclaire
 Address 1609 Cadieux St.
 Change of Address Montreal P.Q.
 1
 2
 3
 4

MFR 2/1/15

Date	Cheque No.	Amount S/A	Amount A/P	Total
1917				
Dec 31		430	285	715
Jan/18	569060	30	15	45
Feb	72183	25	15	40
March	92153	25	15	40
April	15708	25	15	40
May	L 15959	25	15	40
June	A 20885	25	15	40
July	P 32888	25	15	40
Aug	J 37558	25	15	40
Sept	K 48069	25	15	40
Oct		25	15	40

10816-J-44 REMARKS

CANADIAN
 ASSIGNED PAY AUDITED
 10 24/8/18
 W.A. Moreland
 AUDIT CLERK
 DATE 17/6/19

KILLED IN ACTION }
 DIED OF WOUNDS } DATE Aug. 27/18
 G. L. No. 306 DATE 19.9.18
 M.R.O. TO DESTROY REPERED 24/9/18
 B. P. C. FORM 1 & C. F. X. ON FILE
 at Cloud 30/9/16
 CLERK K.H.H. DATE 24/9/18

MeH y 314 5"
 665 420 5"

Pension Granted. Effective 1-10-18.
 S.A. Ines. for Sept 1918 @ 5th in mo L714691 mailed 3-4-19 H
 ETR und 25-3-19 BATT. H.

M. F. W. 128
 400MC-6-17-1772-88-1141
 L. L. 22220-M. & D. 7988.

A STENCIL
 HAS BEEN MADE
 FOR THIS ACCOUNT

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque No.

Amount S/A

Amount A/P

Total

REMARKS

M. F. W. 128
400M-6-17-1772-39-1141
L. L. 23320-M. & D. 7193.