



Records,

ATTESTATION PAPER

No.

a 16795

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

- 1. What is your name? Magnan Adolard
- 2. In what Town, Township, or Parish, and in what Country were you born? Weldon
- 3. What is the name of your next-of-kin? maison Magnan
- 4. What is the address of your next-of-kin? Weldon
- 5. What is the date of your birth? 12 Nov 1896
- 6. What is your trade or calling? Printer
- 7. Are you married? non
- 8. Are you willing to be vaccinated or re-vaccinated? oui
- 9. Do you now belong to the Active Militia? non
- 10. Have you ever served in any Military Force? non  
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? oui
- 12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? oui

(Sgd) Adolard Magnan (Signature of Man.)  
J. G. Gosselin (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Adolard Magnan, 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 3rd Feb 1915 } Sgd Adolard Magnan (Signature of Recruit.)  
J. G. Gosselin (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Adolard Gosselin, 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 3rd Feb 1915 } (Sgd) Adolard Magnan (Signature of Recruit.)  
J. G. Gosselin (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 3rd day of February 1915

(Sgd) A. J. General (Signature of Justice.)

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

Sgd Emile P. Rivest (Approving Officer.)

Lieut.

Certified true copy for U. A. Lieut. Records. K. R. & O. PARA. 1904.

DESCRIPTION OF Adelard Magnan ON ENLISTMENT.

Apparent Age 19 years 2 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 6 ft. 0 ins.

Chest measurement { Girth when fully expanded 37 1/2 ins.  
 Range of expansion 32 1/2 ins.

Complexion Fair

Eyes Blue

Hair Brown

Religious Denominations { Church of England  
 Presbyterian  
 Methodist  
 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 3<sup>rd</sup> February 1915 Sgt J. Daigneaux

Place Sherbrooke Que 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

Adelard Magnan 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.

(Sgt) Edmond S Bois Hel (Signature of Officer.)

Date 21<sup>st</sup> May 1915 Op 41 B Bat 7 C

MAGNAN, ADELARD

416795

23 BN

01295

GEN. REGIMENTAL DOCUMENTS  
WAR SERVICE RECORDS D.V.A.

PRES. TO HAVE DIED  
ON OR SINCE 26-9-16



WASHERMAN  
WASHERMAN  
WASHERMAN

SURNAME.

Magnan. (649-M-3325)

CARD NO.

D

CHRISTIAN NAMES

Adilard.

FOLL.

REGL. NO.

416 795

RANK

pl

UNIT

~~41st Bn (1st R.A.)~~ ~~23rd~~ 14<sup>ch</sup>

Br.

FORMER CORPS

nil.

NEXT OF KIN.

NAMES IN FULL

Magnan. Mrs. M.

RELATIONSHIP TO SOLDIER

R. N. S.

ADDRESS

Weedon P. Q.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada. Montreal.

DATE

Nov 12th 1896

PLACE OF ATTESTATION

Montreal

P. Q.

DATE

March 4 1918

61517-615-124a  
3

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Tailor

RELIGION

R. Catholic

DESCRIPTION.

APPARENT AGE

19

YEARS

2

MONTHS

HEIGHT

6

FEET

INCHES

CHEST MEASUREMENT

37 1/2

INCHES

32 1/2

EXPANSION

INCHES

COMPLEXION

Fair

EYES

blue

HAIR

Fair

DISTINGUISHING MARKS

nil

MEDICAL EXAMINATION.

PLACE

Sherbrooke Que

DATE

Feb 3rd 1915

NAME

Magnan Adelaud.

REG'T L No

416795.

RANK AND CORPS

Pte. 14th Batt.

FOLLOWS

No.

37X

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

No.	DATE	NATURE OF CASUALTY
M4769	29-3-16	Adm. to No 3 Gen. Hosp. Mar 20. (Y.S.W. Shoulder, slight)
O3720	26-10-16	Reported wounded Sept. 26th 1916
O6192	11-12-16	Prev. rep. wounded now rep wounded and missing Sept. 26th 1916 ✓
O6720	25-12-16	With ref. to mytel. Dec. 11th. O6192.
W.S.M.		
Cas Report	28-3-17	Prev. reported wounded & missing
U.F.B.	2090C	now for official purposes presumed to have died on or since Sept 26th 1916
Recd. 17	27-7-17	
	7-17	

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 319.	No 3 Cav. Gen., Boulogne	20-3-16	Gsw. R. Shldr. slight
A 332 <sup>(2)</sup>	No 1 Conv. Depot, Boulogne	6-4-16	Gsw. R. Shldr. Lt.
A 334	Disch. to Base Details	7-4-16	Gsw. Shldr. Lt
A 342.	Cav. Base Depot	18-4-16	Proceeding to Unit.
9495	Rep. from Base	26-9-16	wounded
A 533	Prev. rep. wd. now wounded & missing	26-9-16	
A 700	Prev. rep. missing	now for official purposes presumed to have died on or since 26-9-16	



Name Magnan, A *delord* Rank Pte. Reg. No. A16795  
 Unit 14th Battalion  
 Next of Kin Canada

*25-M-3636*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916						
20-3	No. 3 Can. G. H.	B'logne,	GSW, R			
			shldr.slt.	319	<i>m.</i> 4769	<i>99</i>
6 4	Tras. to No. 1. Home Dep. Bloque			332		
24 4	Dischgd. to Base Details			334	0	<i>99</i>
26 9	Accounted			A 445	3720	<i>10</i>
26 9	do and Missing			A 533	6192	<i>12/12</i>
	P. Dead	26.9.16		a 700		

Date

Movement

Place

Casualty\*

List  
No.Notified  
N/K O.

W.O. List

Name *Magnan* Rank *Plt*  
 Unit *14<sup>th</sup> Coy.* Address *Adelaide*  
 Next of Kin *Canada*

Reg. No *A16795*

*Q.L. 25 M 3636.*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1916 369</i>	<i>Redeemed &amp; Missing</i>			<i>A33</i>	<i>6195</i>	<i>12/18</i>
<i>Mar 29</i>	<i>Extract from War a. Presumed Dead</i>	<i>ban. Pres X</i>				
	<i>Presumed Dead</i>	<i>10700</i>	<i>57/17</i>			



No. 416795 RANK

pte

NAME

Magnan Adilard

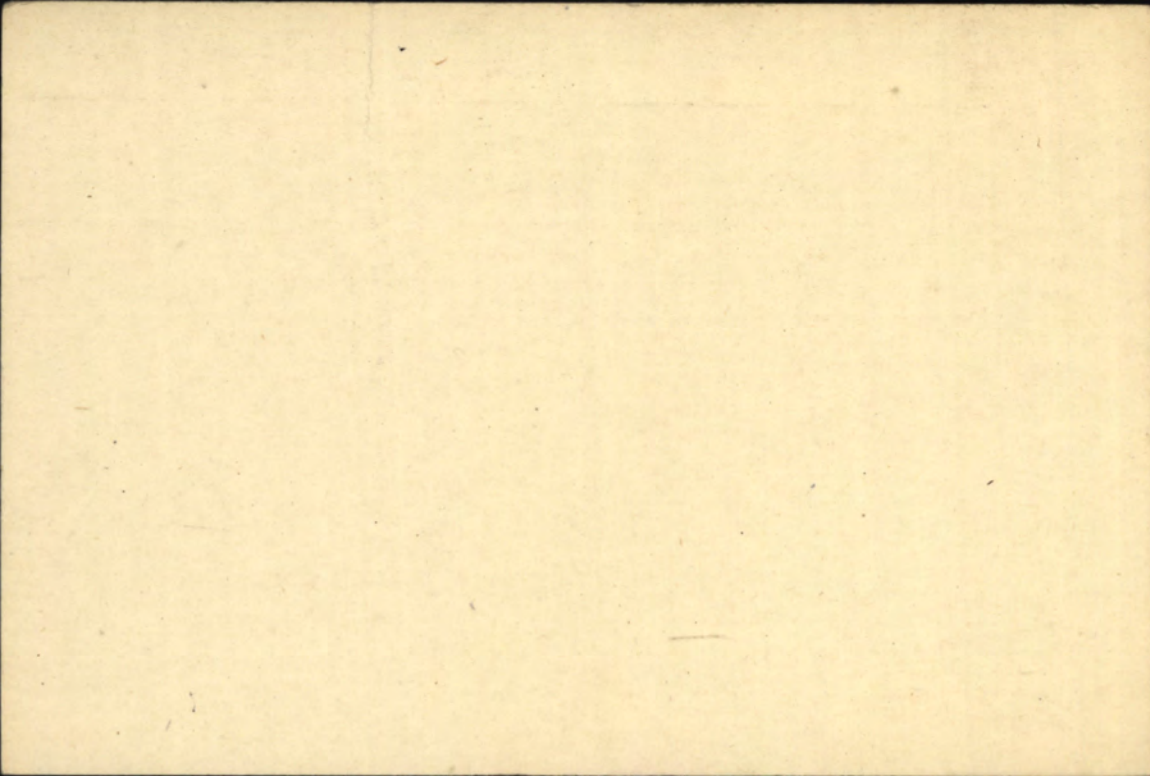
T. O. S. 3-2-15  
April Pass list

UNIT

41st Battalion  
(Sherbrooke Det)

M. D. ✓

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Feb. 3	Feb. 28	✓		
Mar. 1	Mar. 18	✓		
April		✓		
May		✓		
June		✓	o/s 17 - 6 - 15.	50. 85 of 18 - 6 - 15.
				UNIT SAILED OCT 18 1915



H.A.G. 1914

MAGNAN A. <sup>deland</sup> Pte. #A16795 - 14th Battn.

*Elig for 14-15 stars.*

MEDALS &

DECORATIONS. Mother- Mde. Magloire Magnan,  
Weedon, Que.,

P. & S. Mother- as above.

*Serial No 468416*

C. of S. Mother- as above.

*Rth*  
*resp.*  
*C. 241.*

JAN 18 1921

Scroll Desp.

Reqn. No

210847

Plague Desp.

DEC 3 1921

Reqn. No

P19254



gm  
Ham

Number. A 16795 . . . . . Rank. . . . . Pte

Surname. MAGNAN . . . . .

Christian Name. Adelaide . . . . .

Units 14<sup>th</sup> Bu Loan Coy. Theatre of War. France

Date of Service. 6-9-15 . . . . . D

Remarks. . . . . Mother

Latest Address. Mrs. Magloire Magnan  
Weldon, Ill.

Roll No. "B" Page 5103.

92 32125 *elm*

AUG 18 1921

NAME

M. D.

RANK

UNIT

No.

T. O. S.

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

AUTHORITY

PARTICULARS

SIG.  
OR  
REC'T

PAID  
TO

PAID  
FROM

Surname

Christian Name or Names

Reg. No.

Magnan O

416795

Rank

Unit

Co.

Troop

Batty.

Pte

14th Batt

Hospital

Date of Admission

Transferred

No 3 Barr G Boulogne Hosp. 20.3.16

#1 Con Depot Boulogne Hosp. 6.4.16

Hosp.

Hosp.

Diagnosis

G.S. W right shldr

(1)

Later Diagnosis (if changed)

Dr

(2)

(3)

Additional Diagnoses: If more than one state present

Now for Official Purposes presumed to have D.P.  
Died on or since 26.9.16

DISPOSITION

Dis to Base Details 7.4.16 Date

Proceeding to Unit 18.4.16

REMARKS

6.4.16	90.3.16	A319	
14.4.16	A332(2)		Rept from Base.
17.4.16	A334		Wd 26.9.16
28.4.16	A342		
27.10.16	A495		Pres rept - wd now wd
12.12.16	A533		& missing 26.9.16
5.7.17	A700		

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

R. 47

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

A16795  
~~416795~~

Casualty Form—Active Service.

CERTIFIED CORRECT.  
Canadian Record Office,  
Westminster House,  
Millbank, S.W. 1.

Regiment or Corps 23rd Reserve Battalion C.E.F.

Regimental No. ~~16795~~ Rank Private Name Pragman Adelaire

Enlisted (a) 3/2/15 Terms of Service (a) \_\_\_\_\_ Service reckons from (a) 3/2/15

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) \_\_\_\_\_

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				

7/9/15	Sgt. B.D.	Reinforcements	Sgt. B.D.	7/9/15	7-73
25/9/15	Ob. Unit.	joined Batt.	Field	24/9/15	B. 213
16.3.16.	Unit.	sentenced to 21 days S.P.hol, 14.3.16, for 'breaking away from fatigue' r.3.16.	Field	14.3.16.	Probq. Pl. r. ho 14, dt. 31.3.16.
20/3/1916.	C103 Cav Gen.	G.S.W. d. R. shoulder. all. aduld.	C1013 Cav Gen.	20/3/16.	W. 3034 (44)
25/3/1916.	C102 C.C. Steu	G.S.W. d. R. shoulder. Aduld	C102 C.C. Steu	20/3/16.	A. 36 (8026)
6.4.16.	"	" " Traus	C1021 Amb Grain	20/3/16.	—do—
6.4.16.	1000 hq. post.	wounded. Ad.	1000 hq. post.	6.4.16.	W 2034. (log)
7.4.16	do	fil. horsch	base details	7.4.16	do 170.
6.4.16.	3 lean ful.	G.S.W. d. shldr. yf.	1000 hq. post.	6.4.16.	W 2034/61.
14.4.16.	L.D.D.	on strength from Boulogne.	L.D.D.	14.4.16.	101/B10/3/280. 256.
17.4.16	do	left for unit.	Field	18.4.16.	101/B10/3/287. 204/16. 257.
21.4.16	unit	Reph'd from C.E.F.	unit	20.4.16	B 213. 262
29.5.16	Records	for change of number see file	K.1.101/INF/111/11		

(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				Date	
9. 6. 16	Unit	8 days leave to	Unit	3. 6. 16	Bris.	No. 30 1/16
21. 8. 16	do	1 day P. hol, 17 8/16, for "improperly dressed on parade" 15 8/16.	Field	17. 8. 16	Probq.	37. 4. 9. 16.
do	do	7 days P. hol, 23. 8. 16, for Insobene to a hco, 19. 8. 16.	do	23. 8. 16	do	do
24. 9. 16	do	Wounded.	Field	26. 9. 16	Bris.	362. 23 1/16.
20. 11. 16	Unit	Wounded + Missing	do	26. 9. 16	Kl. 12/1998.	79. 30 1/16.

*Jennett D. Meyers*  
 Lieut. for Lt. Col.  
 A. A. G. Gen Section.

5. 7. 17 14<sup>th</sup> Bn Presumed to have died  
 on or since 26. 9. 16 Cef. 700

*P. A. Anderson*  
 Lieut.  
 for Colonel i/c Records, C. Unit

Rank \_\_\_\_\_ Name **MAGNAN Adelard** Reg'l No. **A/16795** R-122.  
 Unit **41st Bn.** If in perm. Corps,  
What Unit? Married or Single **Single**

Place and Date of Enlistment **Sherbrooke 3rd Feb. 1915.** Place of Birth **Weedon**

Name and Address, Next-of-Kin **Ma Ven. <sup>Lo</sup> Maguire Magnan Weedon Quebec.**  
 Relationship \_\_\_\_\_

Assigned Pay Monthly \$ \_\_\_\_\_ Payable to \_\_\_\_\_  
 Relationship \_\_\_\_\_

Separation Allowance \$ \_\_\_\_\_ Payable to \_\_\_\_\_  
 Relationship **Rx 25-M-3636.**

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				
11-8-15	O. 6. 23	Taken on sh 23	Shomcliffe	27-6-15	PT II 188
7-9-15	"	Proceeded to 14th	"	6-9-15	" 211
25-9-15	Mo. 14.	Joined 14 Bn.	France	1-10-15	Daily Gas sheet 158
30-3-16	14 Bn.	No 3. Can. Gen. Hosp.	Boulogne.	20-3-16	Gas L. A 319
7-4-16	Mo. 14.	21 days No 1 S.P. Breaking	France.	14-3-16	P.S.W. R. Shoulder slight. on. PT 40. 15. 4.
14-4-16	14 Bn.	To No 1. Can. Depot.	do	6-4-16	Gas L. A 332. 2.
17-4-16	do.	To Ball Details.	do.	7-4-16	do A 334.
28-4-16	do	Proceeding to Unit.	do	18-4-16	do A 342.
20-6-16	Mo. 14.	Granted 8 days leave 3-6-16	do	20-6-16	Part II 026
27-10-16	14th Bn	Rept from Base Wounded	France	26-9-16	CA 495

Report

Date

From whom  
receivedRecord of promotions, reductions,  
transfers, casualties, etc., during active  
service. The authority to be quoted  
in each case.

Place

Date

REMARKS  
Taken from Official Documents

30-11-16

11<sup>th</sup> Bn

Wounded &amp; Missing

Fld

26-9-16

Pt II 079 + CL 1533

5-4-17

11<sup>th</sup> BnPresumed to have  
Died on or since11<sup>th</sup> Bn11<sup>th</sup> Bn

CL 700

-1  
-81



**MEDICAL HISTORY SHEET.**

Surname Magnan Christian Name Adelard

Examined { on 3 day of Feb 1915  
 at Sherbrooke Que  
 Birthplace { City or Town Woods  
 County Shefford

Approved by J. Gauthier  
 Rank Capt M.O.

Apparent age 19 years 2 months  
 Trade or occupation weaver  
 Height 6 Feet  Inches.  
 Weight  Lbs.  
 Chest measurement { Minimum 32 1/2 inches.  
 Maximum expansion 37 1/2 inches.

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

Physical development complex: fair, eyes blue, hair fair  
 Small-Pox Marks

Vaccination Marks { Arm Right Left  
 Number

Date	Result	VACCINATIONS.
		M.O.
		M.O.
		M.O.

When Vaccinated last  
 (a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>5 Mar 1915</u>	<u>None</u>	<u>J. Gauthier</u> M.O.
<u>14 "</u>	<u>"</u>	<u>J. Gauthier</u> M.O.
		M.O.

Enlisted on 3<sup>rd</sup> day of February 1915 at Sherbrooke Que

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment		<u>A 16795</u>		
Transferred to..	<u>23<sup>rd</sup> Reserve Batta</u> <u>C. E. F</u>	<u>416795</u>		

**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.

Christian Name.....

Surname.....

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 Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
No 3 Can Genl. Coys Boulogne No 1 Conv Dep. Boulogne											
		20	3	16	6	4	16	G. S. W. Right Shk.	17	Dis to No 1 Conv. Depot Boulogne	List No A 319
		6	4	16	7	4	16	" " "	1	Dis to Base Details	List No. A 332-A 334

COPY.

13

SHORT FORM OF WILL.

\_\_\_\_\_

In the event of my death I give the whole of my property and effects to Mde veuve Magloire Magnan Weedor Station Canada P.Q.

Date.. Jul 20 1915

Signature.....

Adelard Magnan..... (Corps)

14

WILL.

Après ma mors je  
laisse tout mon  
argain a ma maire  
adresse Page 13

COPY

REPRODUCED FROM THE ORIGINAL

AC/11/11-50AM

113 25 03  
2021-011  
A. 1085

out 17. 7. 17

649.9.3325

416795 Pte.  
Magnan A.  
14th. Bn.  
Missing

### Short Form of Will

If a soldier on active service, or under orders for active service, wishes to make a short will, he may do so on the opposite page. It must be in his own handwriting and must be signed by him and dated. The full names and addresses of the persons whom he desires to benefit, and the sum of money or the articles or property which he desires to leave to them, must be clearly stated.

The following is a specimen of such will leaving all to one person:—

In the event of my death I give the whole of my property and effects to *Mrs. Marie Magnan*  
*Magnan Hudson Station, Canada P.O.*  
(Signature) JOHN SMITH,  
Private, No. 1793.  
Date. *Jul 20. 1916*

The following is a specimen of such a will leaving legacies to more than one person:—

In the event of my death I give \$50 to.....  
.....and I give \$25 to.....  
.....and I give the remaining part of my property to.....  
(Signature) JOHN SMITH,  
Private, No. 1793.  
Date.....  
*adlard Magnan* (Corps)

### WILL

*après ma mort je laisse  
tout mon argent à  
ma mère adresse Page 13*

Rec'd. from A.A.G., his K.C. 179-454, 13/3/17.

ESTATES BRANCH  
SEP 21 1917  
MILITIA DEPT.

5. From A.A.G., his K.C. I.

*lev 100*

Register No. *10m97*

WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. *11651-a-3*

Regt'l No. *416795'* Name *Adelard Magnan*  
(Christian Name) (Surname)  
Unit *14 Batt* Rank *Pte* Date of enlistment  
Date of casualty *26/9/16* B.P.C. File No. *1296*  
Was service performed overseas? *yes*

DEPENDENT

Name *Mrs Maglone Magnan* Relationship *w. Mother*  
Address *Weldon Co of Wolfe  
Zuel*

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

Amount of Special Pension Bonus \$ *nil* Abstracted by *M. Wilson*

Eligible for Gratuity ..... \$ *180.00*  
Less amount of Special Pension Bonus paid ..... \$ *-*  
Less Debit Balance of S. A. or A.P. .... \$ *5.06*  
Total deductions \$ *5.06*  
Balance due \$ *174.94*  
Cheque No. *9/90/241* ✓ Date issued *18/8/20* *JK*

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

Clerk *AH mile*

Audited by  
*Geo Howard* \$174.94  
Date *17.8.20*

*Imo*

# 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. 53961—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



*From 1/10/15*

59

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

*E.O.S.*

Name *M. ~~Magnan~~ Magnan*  
 Address *Weldon*  
*Inver*  
 Relation to Soldier } *Mother*  
 wife, child or mother }

Name of Soldier *Magnan A. Magnan*  
 Regtl. No. *16795* 416795  
 Rank *Pte*  
 Corps *41<sup>st</sup> Batta. Coy.*  
 To what Corps belonging }  
 when called out }

PAYMENTS

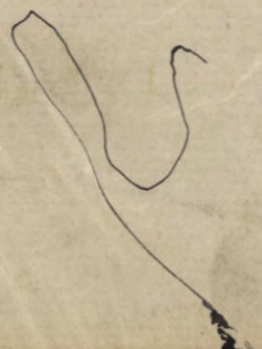
Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Name cgd per mothers letter 14/2/14 \$23<sup>27</sup></i>
Sept.				
Oct.				
Nov.				
Dec.	1915			
Jan.				
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916	<i>019869</i>	<i>80 - 80</i>	
Feb.		<i>L 22839</i>	<i>20 - 20</i>	
March		<i>K 26862</i>	<i>20 - 20</i>	

**ACCOUNT CLOSED**  
 DATE.....PER.....  
*W*

STATIONARY ENGINEER

M. 10300

7-11-24



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

Sheet No. 2.

Name of Soldier

L. L. Job 89002.-Req. 6213.

*M. Magman*  
*Magman*  
*Magman*

*Magman*  
*Magman*

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	H 2864	20	20
May		M 6694	20	20
June		S 8694	20	-20
July		V 9253	20	20
Aug.		X 14484	20	20
Sept.		Z 16267	20	20
Oct.		W 19780	20	20
Nov.		C 23131	20	20
Dec.		b 26644	20	20
Jan.	1917	K 28772	20	20
Feb.		N 32032	20	20
March		K 35206	20	20
April		L 1678	20	20
May		L 4794	20	20
June		L 8019	20	20
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

**Proviso Granted.** 27/12/16 ✓  
**R.P.C. to Recover \$** 123.23  
**Chk. M. G. Hill** Date 13/6/17

**ACCOUNT CLOSED**  
 DATE..... PER *W*

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.				

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MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

*E. J. S.*

To Whom *Mrs Magloire Mangau* By Whom Assigned *Magnan*  
Address *Weedon Weedon Station* Regtl. No. *410420 416795*  
Rank *Pr.*  
Corps *C. Co 41 Batta*  
Rate *15.<sup>00</sup> Jan 1. 1914*  
*P.C. 148.*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 1px solid black; padding: 5px; display: inline-block;">Casualties</div> <i>Step payments</i> <i>"Wounded Missing"</i> <i>3m 15/16 - 17/16</i>  <i>Missing 26 Sept./16. Ch (1) 12/12/16. J.A.G.</i>  <i>44 20/12/14</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916	<i>710595</i>	<i>15-</i>	
Feb.		<i>K14571</i>	<i>15-</i>	
March		<i>416719</i>	<i>15-</i>	
		<i>416962</i>	<i>15 45</i>	

*Notified Date 5-9-14*  
*Dec. 1914*  
*Jan. 4-10-16*  
*Feb. 3/8/14*  
*March 2*  
*April 5-9-1914*

*44 20/12/14*

*cancelled*



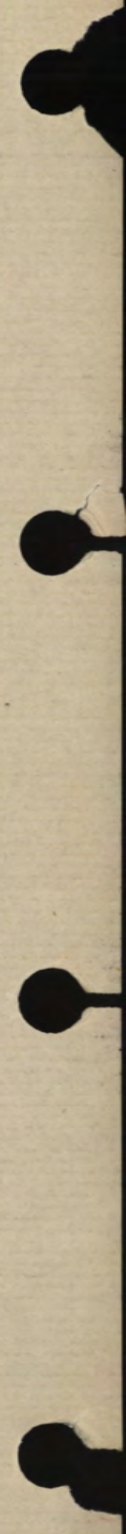
*Faint, illegible handwriting at the top of the page.*

*Faint handwriting, possibly a name or date.*

*Faint handwriting in the center of the page.*

*Faint blue handwriting, possibly initials.*

*Red ink scribbles and faint markings on the left side of the page.*



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS  
**PAYMENTS.**

M. F. W. 12a.  
 60m.-12-15.  
 1772-39-819.

Sheet No. 2.

*Mrs. Magloire Mangan*

Name of Soldier

*Maguan*  
*Mangan. A.*

174

L. L. Job 8902.-Req. 6213.

410410

Ch 41/184

Month.	Year.	Cheque No.	Amt.	Remarks.
			48	
			15.00	
			15.XX	
April	1916	3664	15	<div data-bbox="1228 407 1701 598" style="border: 1px solid black; padding: 5px; display: inline-block;"> <i>Casualties</i> </div>
May		2033	15	
June		B3167	15	
July		R9609	15	
Aug.		D13305	15	
Sept.		617659	15	
Oct.		E22179	15	
Nov.		627366	15	
Dec.		ay 31386	15	
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

*Casualties*

180.00 / Account closed.

Caos

Pension Granted... 27/12/16.  
 B.P.C. to Recover \$ 241  
 Clerk *HCB* 13 6/17

Total \$ 180.00  
 F. X. Rend. Date 28/1/17 By *CB*  
 E.F.X. " Date 28/1/17 By *CB*

Total \$ 180.00  
 F. X. Rend. Date 15/1/17 By *CB*  
 E.F.X. " Date 15/1/17 By *CB*

*W B*

*W B*

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.				



Rank

Name

MAGNAN Adelard

If in perm. Corps, 1

What Unit?

Reg'l No.

16795

P-56

Unit

41st Bn.

Married or Single

Single

Place and Date of Enlistment

Sherbrooke 3rd Feb. 1915.

Place of Birth

Weedon

Name and Address, Next-of-Kin

Ma Ven. Magtère Magnan, Weedon Quebec.

Relationship

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Missing  
Off Pres Dead

Reason

26/9/16. 62 of 700 d/5/7/17

Character

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						
July 1-31	1915	31	1.00	31	31	.10	3.10		34.10			32.50			32.50	1.60	
Aug 1	31	31	1	31	31	10	3.10	87 Exchange	34.10			17.03			17.03	19.54	
Sept 1	30	30	1	30	30	10	3		33	577		17.03			17.03	35.51	
Oct 1	31	31	1	31	31	10	3.10		34.10							69.61	Sept 14 <sup>th</sup> Batt
Nov 1	30/11/15	30	1.00	30	30	10	3	102	69.61			12.36			12.36	90.25	Nov 23 <sup>rd</sup>
Dec 1	31/12/15	31		31	31		3.10		124.35			16.62		09	16.89	107.46	4 <sup>th</sup> Batt on 14 <sup>th</sup> Dec 16 <sup>th</sup> 1915
Jan 1	31/1/16	31		31	31		3.10		141.56			5.22			5.22	136.34	
Feb 1	29/2/16	29		29	29		2.90		168.24			5.23			5.23	163.01	
March 1	March 31	31		31	31		3.10		197.11			2.62		1.08	3.90	193.41	6 <sup>th</sup> Batt Change 23 <sup>rd</sup> Batt 108
				275			27.50	87	303.37			108.61		1.35	109.96	193.41	
				275			27.50	.87	303.37			108.61		1.35	109.96	193.41	

Statement of  
JUL 12 1917  
Account rendered

Checked Zel

Checked Standard 30  
Larkin Ledger sheet

Settled





