

**CANADIAN OVER-SEAS EXPEDITIONARY FORCE**

**QUESTIONS TO BE PUT BEFORE ATTESTATION.**  
 (ANSWERS)

- 1. What is your name?..... **MARCOUX WILFRID**
- 2. In what Town, Township, or Parish, and in what Country were you born?..... **Wedon que**
- 3. What is the name of your next-of-kin?..... **Telesphore Marcoux "Father"**
- 4. What is the address of your next-of-kin?..... **Wedon que**
- 5. What is the date of your birth?..... **23 June 1886**
- 6. What is your trade or calling?..... **Labor Man**
- 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**

*Wilfred Marcoux* (Signature of Man.)  
*Bellefleur* (Signature of Witness.)

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

I, **Marcoux Wilfrid**, 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.

*Wilfred Marcoux* (Signature of Recruit.)  
*Bellefleur* (Signature of Witness.)

Date **4<sup>th</sup> August** 191**5**

**OATH TO BE TAKEN BY MAN ON ATTESTATION.**

I, **Marcoux Wilfrid**, 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.

*Wilfred Marcoux* (Signature of Recruit.)  
*Bellefleur* (Signature of Witness.)

Date **4<sup>th</sup> August** 191**5**

**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 **Montreal** this **4<sup>th</sup>** day of **August** 191**5**

*W. H. L.* (Signature of Justice.)

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

*J. Marion* (Approving Officer.)

*D. C. 57th Bn C.E.F.*

DESCRIPTION OF MARCOUX WILFRID ON ENLISTMENT.

Apparent Age 29 years      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.

Chest measurement { Girth when fully expanded 34 ins.  
 Range of expansion 2 1/2 ins.

Complexion Light Brown

Eyes Brown

Hair Black

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 Aug 4th 1915

Place Montreal

*Jachabotcaptant*  
 X.X.F.A.  
 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

Wilfrid Marcoux 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.

Date 17/9 1915 *J. Jacques Major* (Signature of Officer.)

*Sgt D.C. 57th Bn C.E.F.*  
*A.O.D.*

RT 18-11-18

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

Attestation Papers..... 2

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..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 2

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

A7B122- 1

card - 1

1 Card

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

MA. 11 3/20

DISCHARGE DOCUMENTS

Name MARCOUX WILFRID

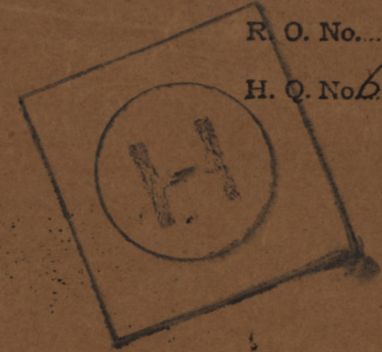
Regt. No. 448616 Rank Plé.

Corps 24<sup>th</sup> Bn. Form. 57<sup>th</sup> Bn.

Killed in Action 1-10-16  
Killed in Action 1-10-16 06970

R. O. No. ....

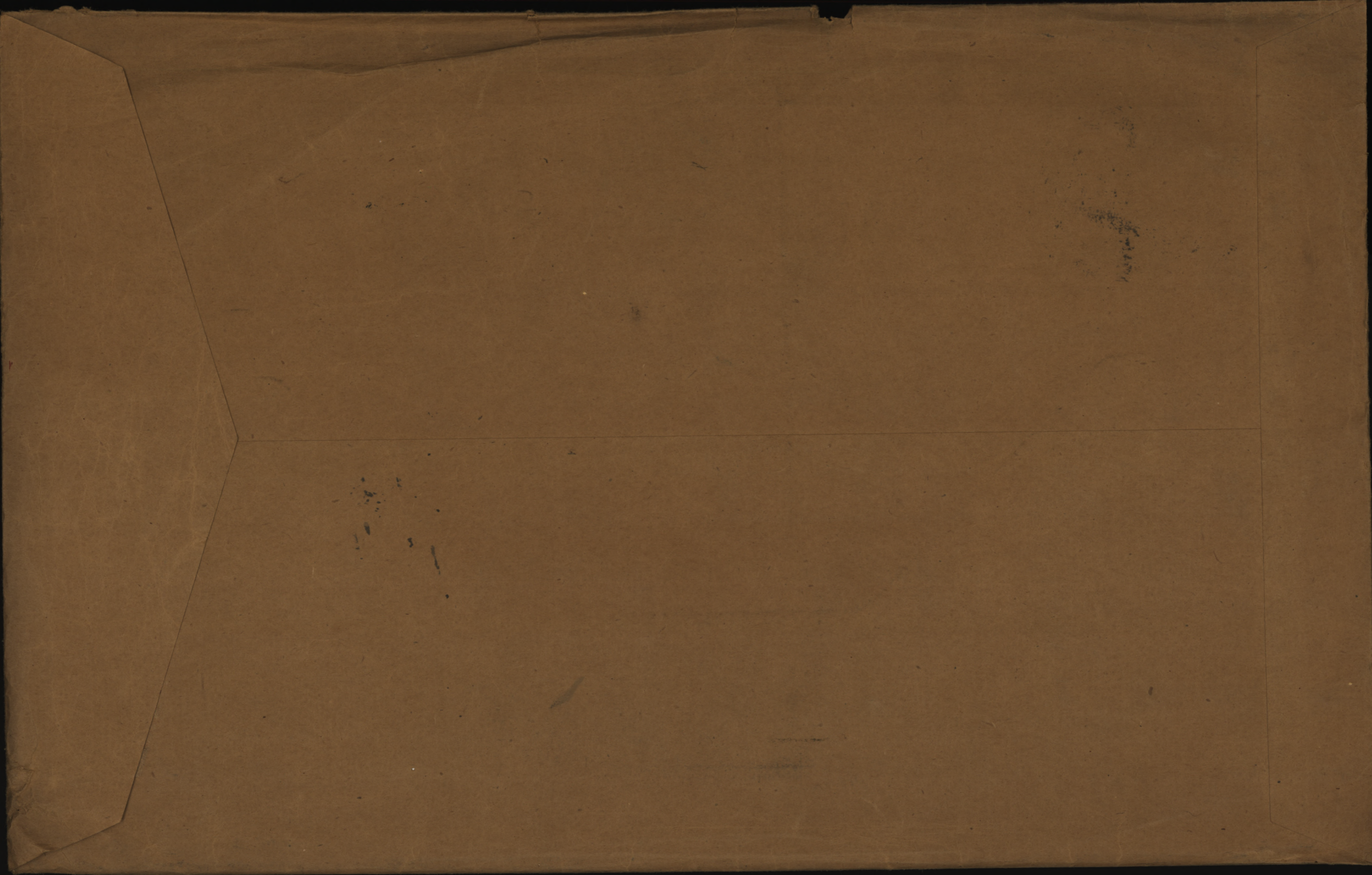
H. Q. No. 649-M-9471



M



43-7  
31-7  
17



No. 132 RANK *Pli.*  
448616 (Jan)

NAME *Marcoux W.*

T. O. S.

UNIT

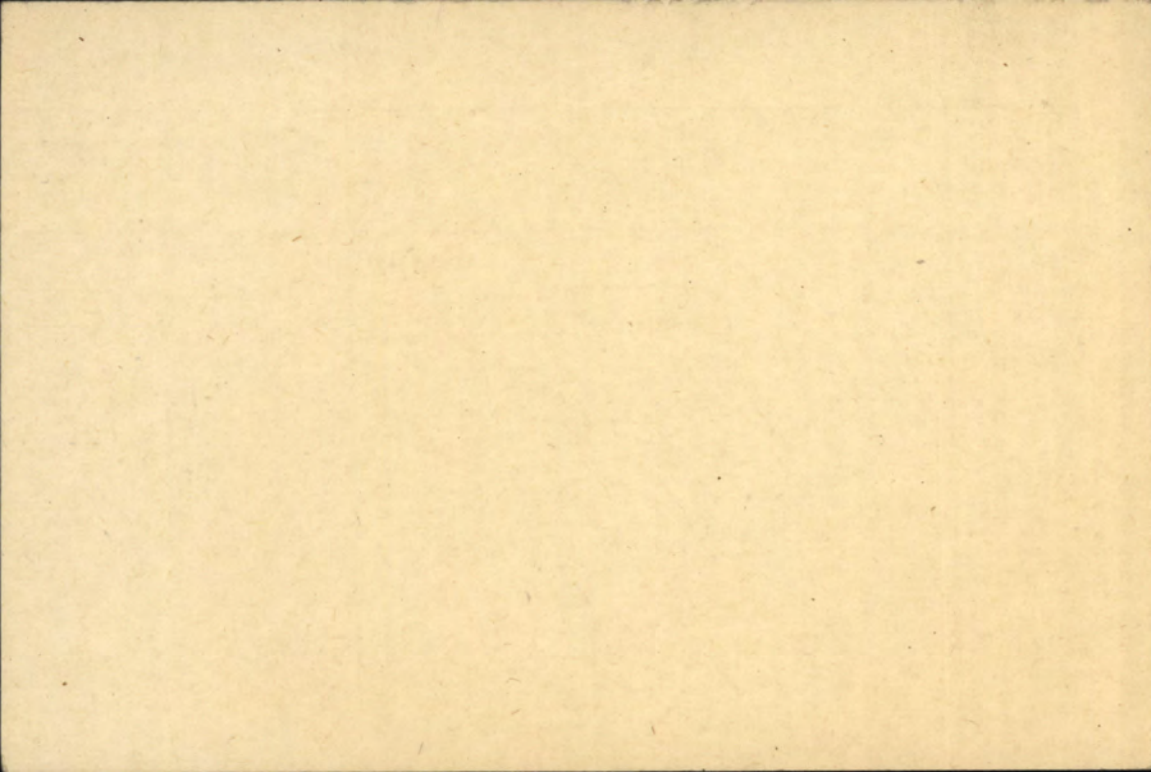
*5-7th Battalion C. E. F.*

M. D. 5-Val.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Aug 4	Aug 31	✓	3 dys absent-3 dys pay.	Sept. payroll.
Sept.		✓	abs. 9 dys 9 dys pay.	Oct. payroll.
Oct.		✓		
Nov.		✓		
Dec.		✓		
1916	1916			
Jan.		✓	5 dys pay abs. 72 hrs del.	Jan payroll.
Feb.		✓	2 dys del-6 dys pay.	Feb. payroll.
Mar.		✓	48 hrs del-1 dy. absent.	D.O. 5-5 27/3/16
Apr.		✓		
May		✓		
June		✓		
June payroll not available				

UNIT SOILED

JUN 2 1916









SURNAME.

*Marcoux*

*(649-m-9471)*

CARD NO.

*4*

CHRISTIAN NAMES

*Welfrid.*

**D**

FOLL.

REGL. NO.

*448616*

RANK

*Pte.*

UNIT *5-7th.*

*Bn.*

FORMER CORPS

*nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Marcoux, Telesphore.*

RELATIONSHIP TO SOLDIER

*Father.*

ADDRESS

*Weedon, P. Q.*

COUNTRY OF BIRTH

*Canada, Weedon, P. Q.*

DATE

*June 23rd 1886*

PLACE OF ATTESTATION

*Montreal, P. Q.*

DATE

*Aug. 4th 1915.*

*Q/S 2-6-16-445A  
9*

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Laborer

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

29

YEARS

MONTHS

HEIGHT

5-

FEET

5-1/2

INCHES

CHEST MEASUREMENT

34

INCHES

EXPANSION

2 1/2

INCHES

COMPLEXION

light brown

EYES

brown

HAIR

Black

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

Montreal, P.Q.

DATE

Aug. 4th. 1915.

Present address: Not stated

REG'T L NO 448616  
H. Q. FILE NO. 649-

NAME Marcoux Wilfred

RANK AND CORPS Pte 24th Bn form. 57th Bn

FOLLOWS  
No.  
FOLLOWS

CABLE

NATURE OF CASUALTY

No.	DATE
02795	13-10-16
A & B	20-9-16
Rauen	11-10-16

Killed in action Oct. 1st 1916  
Killed in action France  
Oct. 1st 1916. Rec'd 10-3-17

LIST No

HOSPITAL

DATE OF  
ADMISSION

REMARKS

A347

Rep. from Base.

1-10-16

Killed in action

*not eligible for 14/15 Star.*

MARCOUX, W. Pte. #448616-

4923  
24th Battn.

MEDALS &  
DECORATIONS.

Father- *M* Telesphore Marcoux,  
833 Whalley Ave., New Haven  
Conn., U.S.A. ✓

P. & S. Father- as above.

*Serial No 768473*

-C. of S. nil

JAN 19 1921  
Scroll Desp.

Reqn. No

*710943*

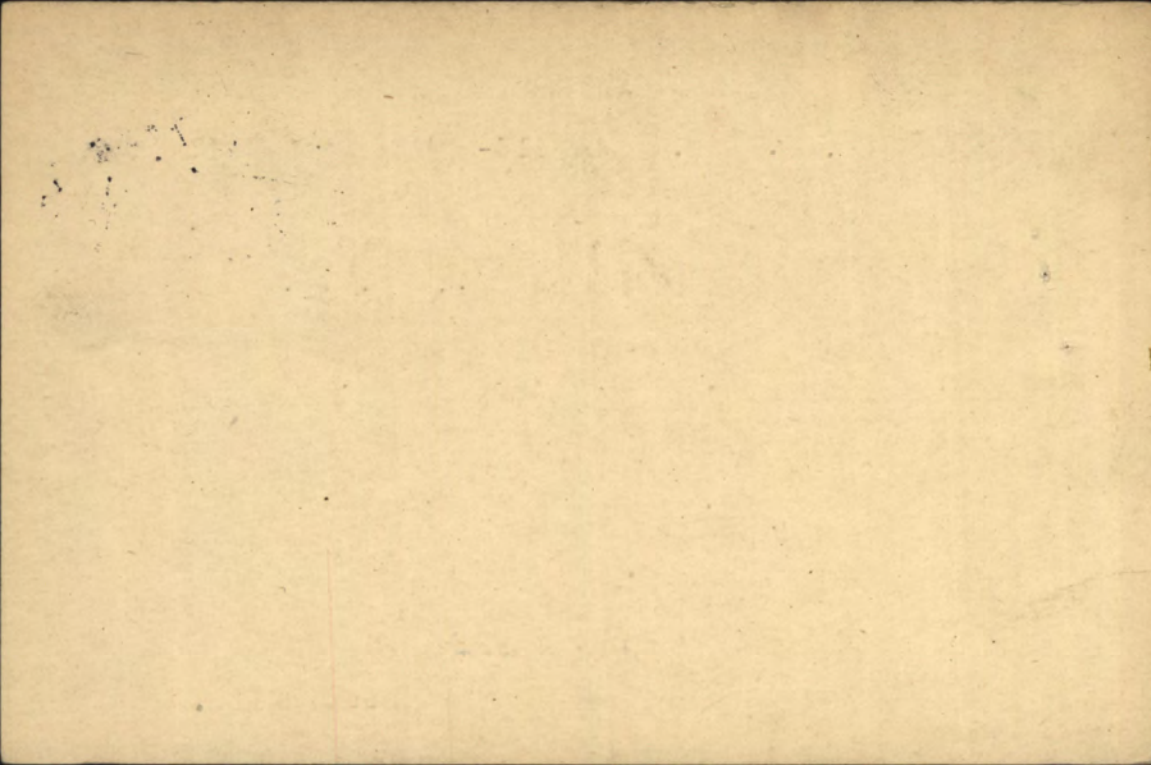
SEP 16 1922  
Plague Desp.

Reqn. No

*846070*

Sheet #3129.

*Bmm* (2)



*Handwritten initials*

*Handwritten 'B' and 'V' in blue and red ink*

Number. 448616 . . . . . Rank. Pte

Surname. . . . . MARCOUX

Christian Name. . . . . Wilfred

Units 24th BN. CAN. INF. . . . . Theatre of War. France

Date of Service. . . . . 17-8-16

Remarks. . . . .

Latest Address. . . . . Telephone. *Marcoux* (7)

. . . . . 833 Shalley Ave.  
New Haven.

Roll No. "B" Page 5304 Conn. U.S.A

No.

RANK

NAME

T. O. S.

UNIT

M. D.

PAID  
FROMPAID  
TOSIG.  
OR  
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

4240237  
SEP 19 1921



Surname

Christian Name or Names

Reg. No.

*Marcoux*

*W.*

*448616*

Rank

Unit

Co.

Troop

Batty

*Pte.*

*24<sup>th</sup> Batt.*

Hospital

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)  
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*Killed in action 1. 10. 16*

DISPOSITION

Date

*62. 14. 10. 16 A347.*

REMARKS

*Rpt. from Base*

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

*R*

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm

1.

2.

3.

4.

5.

6.

7.

495

CERTIFIED CORRECT.  
22 AUG 1916  
CAN. RECORDS, LONDON.

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

M. F. W. 54. (A. F. B. 103.)  
250M.—1-16,  
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 57th Battalion, C.O.E.F.

Regimental No. 448616 Rank Pte Name Marcous Wilfred  
C. E. F.

Enlisted (a) 4-8-15 Terms of Service (a) Duration of war Service reckons from (a) 4-8-15

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) 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				

		Embarked	Canada	2-6-16	
		Arrived	England	2-6-16	
		<del>Transferred to 69th Batt</del>	<del>Orterpool</del>	<del>8-6-16</del>	
		<del>2nd Batt C.E.F. B.O 2678</del>	<del>Lewis Dibatate</del>	<del>12-7-16</del>	
		<del>Taken on strength</del>	<del>Dibatate</del>	<del>13-7-16</del>	<del>pt. II ord. 165 (pt II 164-69th)</del>
		<del>Drafted overseas to 24th Can Bn</del>			
		<del>18-8-16 Bn O. 193</del>			
18.8.16.	C. B. Dep.	Reinforcements	C. B. Dep.	18.8.16.	N.R.
27.8.16.	"	Left join 2nd Can. En. Bn	In the Field	27.8.16.	N.R.
29.8.16.	2nd C.E. Bn.	Joined	"	29.8.16.	N.R.
17.9.16.	"	Left join 74th Bn.	"	17.9.16.	N.R.
22.9.16	74th Bn	Joined 74th Bn	"	17.9.16	B 213 235 dt. 7/10/16
5.10.16	"	Killed in action	"	1.10.16	KI. 137/1645 2374. 11/10/16 PT II O's 62 dt. 11/10/16.

W. Hogan Capt.  
For Officer i/c Can. Records,

(a) In the case of a man who has re-engaged for, or enlisted into Section 15, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
(b) e.g. Signaller, Shoering Smith, etc., etc., also special qualifications in technical Corps duties.

Canadian Section  
G.H.Q. 3rd Echelon.

I.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				

LTR

Rank

Name MARCOUX, Wilfred

Reg'l No. 448616

Unit

57TH TO 69TH

If in perm. Corps, }  
What Unit? }

Married or Single

Place and Date of Enlistment

Montreal Aug. 4<sup>th</sup> 1915

Place of Birth

Wedon, Que.

Name and Address, Next-of-Kin

Telephore Marcoux,  
Wedon, Que.

Relationship

father

Assigned Pay Monthly \$

Payable to

Separation Allowance \$

Payable to

Relationship

Relationship

Discharge, Date and Place

Reason

Character

H. W. &amp; V., Ltd.—7165-16.

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.				
					W.H. by
		Arrived in England.	s/s olympic	8-16	
9-6-16	OC 69 <sup>2</sup>	Taken on strength.	61 Kipool	8-16	PT 11 136
13-7-16	23.	Taken on strength	Diggle	13-7-16	165 F 11. 164 69 <sup>th</sup>
17-8-16	"	Trans to 24 <sup>th</sup> Bu	"	17-8-16	PT 11. 195.
31-8-16	24 <sup>th</sup> Bu	T.O.S. from 23 <sup>rd</sup>	"	18-8-16	" 34
14-10-16	" "	Killed in Action	"	1.10.16	C LA 347. O.N.
11.10.16	" "	do	"	1.10.16	RT 62.

A.F.B. 103 CHECKED  
21 AUG 1916  
1916



448616  
44813  
~~50008~~

# ORIGINAL

## MEDICAL HISTORY SHEET.

448616

Surname MARCOUX Christian Name WILFRID

Examined { on 4th day of Aug. 1915  
 at Montreal  
 Birthplace { City or Town Weedon, Que.  
 County \_\_\_\_\_

Approved by Jachabotcaptamb.  
 Rank XX.F.A. M.O.

Apparent age 29  
 Trade or occupation Laborer  
 Height 5 Feet 5½ Inches.  
 Weight 135 Lbs.  
 Chest measurement { Minimum 31½ inches  
 Maximum expansion 34 inches.  
 Physical development Good  
 Small-Pox Marks No

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 \_\_\_\_\_  
 When Vaccinated last never took  
 (a) Marks indicating congenital peculiarities or previous disease \_\_\_\_\_

Date	Result	VACCINATIONS.
<u>2/5/16</u>	<u>good</u>	<u>Paul Kasse</u>

(b) Slight defects but not sufficient to cause rejection \_\_\_\_\_

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>27/8/16</u>	<u>good</u>	<u>Gaboury Capt.</u>
<u>24/4/16</u>	<u>"</u>	<u>Raul Gassi Capt.</u>
<u>5/5/16</u>	<u>"</u>	<u>"</u>

Enlisted on 4th day of Aug. 1915 at Montreal

	CORPS	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>57th Batt C.F.</u>	<u>448616</u>		<u>4-8-16</u>
Transferred to.. ..	<u>69th Batt</u>			<u>8-6-16</u>
	<u>23rd Batt</u>			<u>13-13-7-16</u>
	<u>24th Bn</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.





P. 959  
MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Killed in Action	1-10-16	CLA 347 14/16

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L No. **448616** RANK **Private** NAME **Marcoux William Wilfid**  
 IF IN PERM. CORPS) UNIT **57th Battrn** TRANSFERRED TO **69th Battrn** DATE **8-6-16** AUTHORITY **DD 136**  
 WHAT UNIT)  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO **23rd Bu** DATE **16-8-16** AUTHORITY **DD 166**  
 PLACE OF ATTESTATION **Montreal** TRANSFERRED TO **24th Bu** DATE **1-9-16** AUTHORITY **DD 195**  
 DATE OF ATTESTATION **4-8-16** TRANSFERRED TO **W.E.** DATE **2-10-16** AUTHORITY **CLA 347**  
 ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO RELATIONSHIP  
 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) **9-11-16 Effective 2-10-16**  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

*Entered on N.E. Card Index*  
*Checked by [Signature]*

COMPILED BY [Signature]  
CHECKED BY [Signature]



DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS										
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE				AMOUNT		1	2	3	4	1	2				3	4				CREDIT	DEBIT								
			\$	c.						\$	c.																	No.	DATE	No.	DATE	No.	DATE	No.	DATE
1916																																			
May 31									8 09																							Balance from Canada			
June 16/30	30	100	30 00		30	10	3 00		33 00	143	16-6-16			4 87																					
July 31	31		31 00		31		3 10		34 10		190 11/7/16			4 86																					
Aug 16/15	15		15 00		15		1 50		16 50										24		1 94													244 Issue on Repayment 84005-162-10-8-16	
Sept 1/16	16		16		16		1 60		17 60		347 2996 19/8			9 73	7 30				24		17 03													Trans to 24th Batt 1/9/16 B.D. 195	
Sept 1	30	30	30		30		3 -		33 00										1 46		15 44													1/16 Issue on repayment 1/2 24005	
Oct 1-1	1		1 -		1 -		10		1 10										1 16															Trans to 24th Batt 2/10/16	
									143 39																										
N.E. Br. July 1917																																			To Ottawa for Settlement 4.30/6/17.1917



