

7994 122
ATTESTATION PAPER

No. 418335

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION

(ANSWERS)

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

Joseph Mareau
Folieto
Octavien Mareau
Folieto 16 Rue
25 May - 1893
Labour Man
non
oui
non
non
oui
oui
Joseph Mareau (Signature of Man.)
A. Boucher (Signature of Witness.)

Folieto
P.O.
Folieto
P.O.
F.O.B.

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Joseph Mareau*, 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 *13 Oct* 1915. *Joseph Mareau* (Signature of Recruit.)
A. Boucher (Signature of Witness.)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Joseph Mareau*, 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 *13 Oct* 1915. *Joseph Mareau* (Signature of Recruit.)
A. Boucher (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 *Folieto* this *13* day of *Oct* 1915.

J. Theleau (Signature of Justice.)

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

S. 1200/100 (Approving Officer.)

Local
O.C. 57th Bn C.E.F.

DESCRIPTION OF Joseph Moreau ON ENLISTMENT.

Apparent Age 18 years 3 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. 6 1/2 ins.

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

Complexion Light Brown

Eyes Brown

Hair Brown

Religious Denominations { Church of England
 Presbyterian
 Methodist
 Baptist or Congregationalist
 Other Protestants (Denomination to be stated.)
 Roman Catholic none
 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 13 Sept 1915

Place Joliet

[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

Joseph Moreau 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.

[Signature] (Signature of Officer.)

Date 6 Sept 1915

[Signature]

[Handwritten note] O.C. 57th Bn C.E.W.

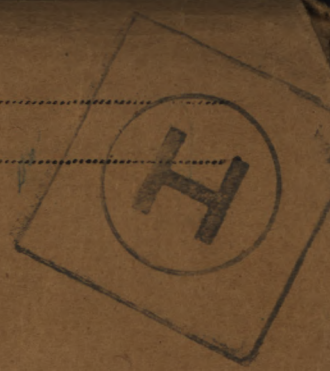
NH-19-11-18

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

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.



Attestation Papers..... 3 1/2

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..... 1

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

Name MOREAU JOSEPH

Regt. No. 416335 Rank Plt.

Corps 22nd Bn (57th Bn.)

31052

1 card

22

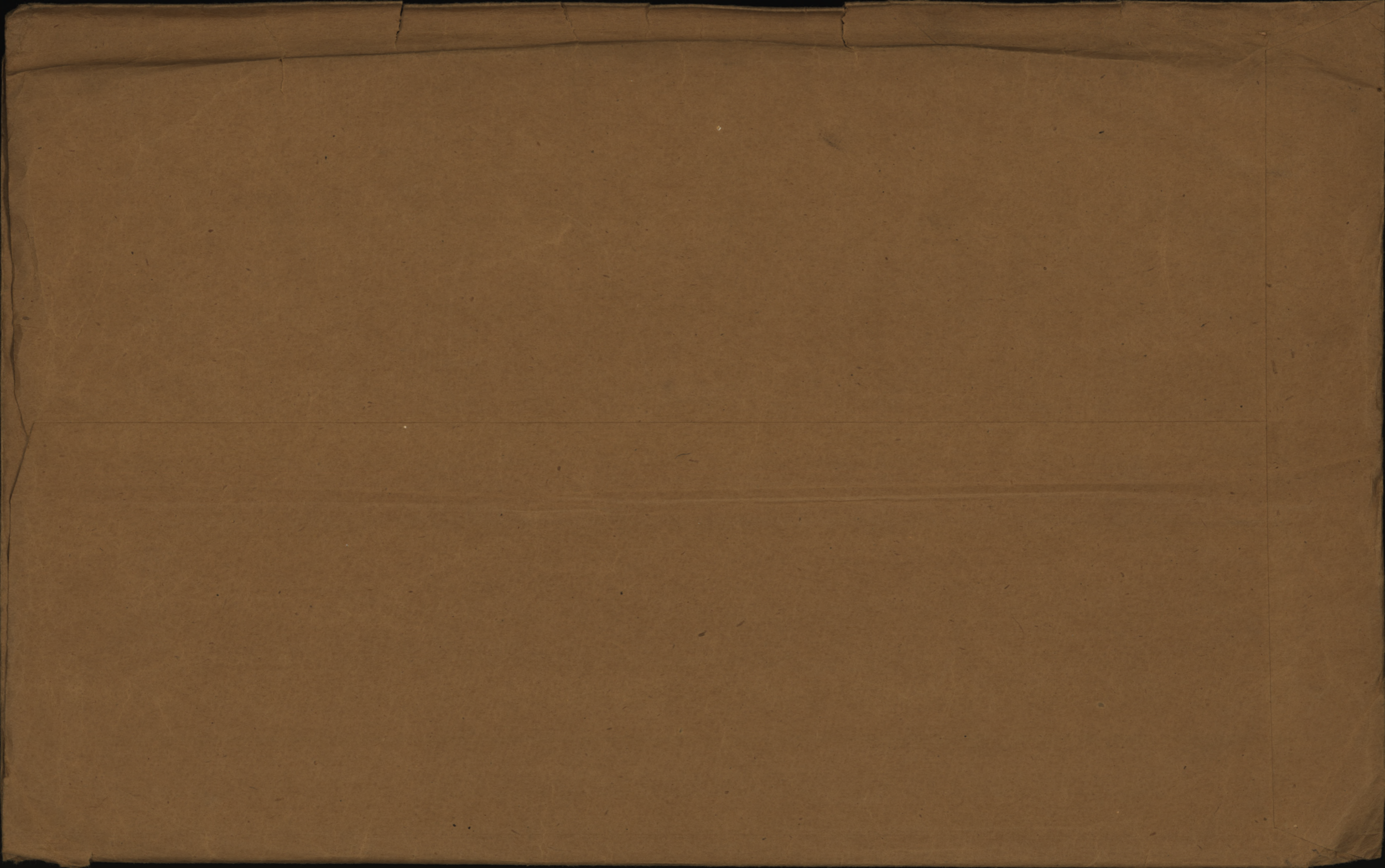
Dead of Wounds
15-6-16

(U)
32-21
16 21
12-22

1 report
R-137-1
1 page

MX 15 4/30





Our records show the mans no. as 416335. ok.

MOREAU, J. ^{Joseph} PTE.

~~#416385~~ *416335

22nd. BN.

not elig. for 14/15 Star.

MEDALS & DECORATIONS.

Brother- O. Moreau,
Joliette, P.Q.

7680

P. & S. Brother- as above.

(Serial no. 768793.)

C. of S. nil

JAN 20 1921

Scroll Desp. _____ Reqn. No. 711551

APR 19 1922

Plague Desp. _____ Reqn. No. P35688

Plaque rel'd 26-5.22

NAME *Moreau Joseph*REGT'L No. *416335*RANK AND CORPS *Pte**22 Batt. (Form 41st)*

CABLE

NATURE OF CASUALTY

NO.

DATE

NO.	DATE	NATURE OF CASUALTY
<i>M8812</i>	<i>20-6-16</i>	<i>Died of wounds, No 1 Can. Fld. Ambul., June 15, 1916.</i>
<i>Army form B2099a</i>	<i>21-6-16</i>	<i>Died of wounds received in action, at Advanced Dressing Station <i>June 15, 1916.</i> <i>No 1 Canadian Field Ambulance.</i></i>

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A252

No. 1 Can. Fd. Amb. Reports 15-6-16

Died of Wounds.

98P
M

Number. 416335 Rank. : Pte

Surname. MOREAU

Christian Name. Joseph

Units 22nd. Bn, Can. Inf. Theatre of War. France

Date of Service. 7-6-16

Remarks. Brothers

Latest Address Mr. J. Moreau
Joliette, P.Q.

Roll No. B Page 7214

B
Y
A

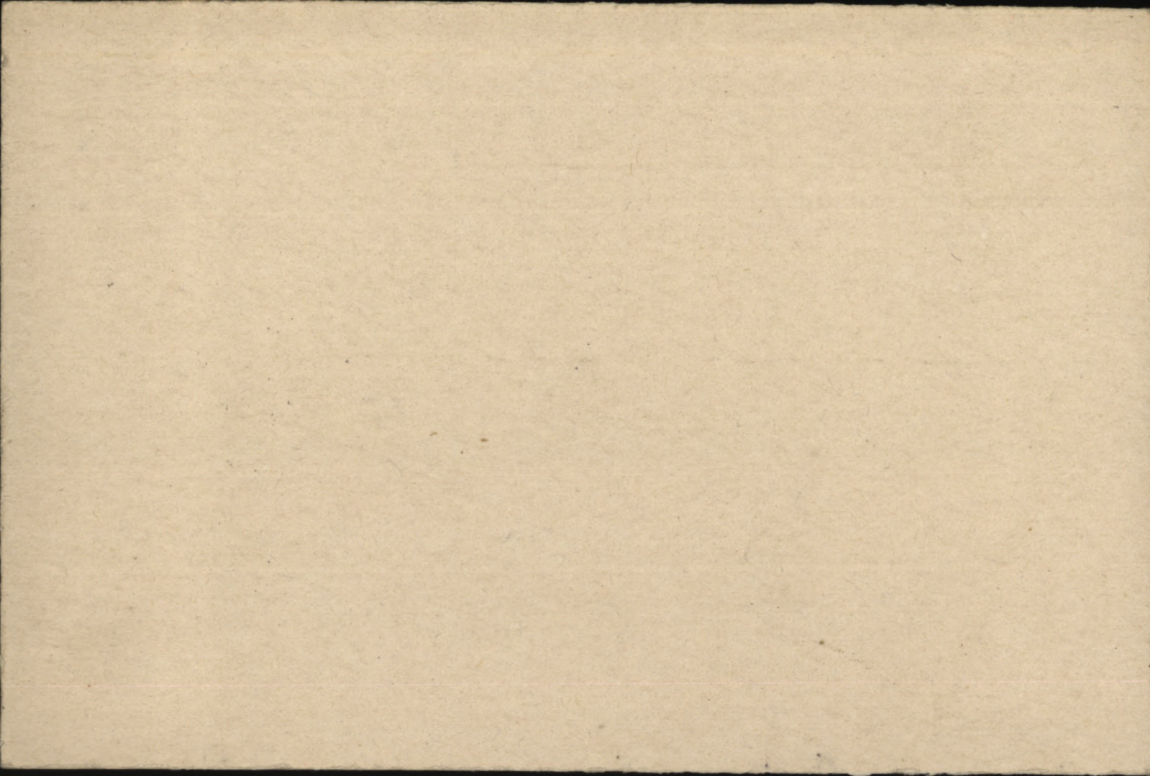
DESP. DEC 7 1921

REGN. NO. GA 63715

Surname *Moreau* H. Q.
Christian names *Joseph* M. D. No.
Regtl. No. *416335* Rank *Pte* T. O. S. 19...
Unit *41st Bn* D. O. Pt. II of
S. O. S. 19...
Reason
Auth.

Next of kin Relationship
Address Also notify:
.....
.....
.....

BORN—Place Date
ATTESTED—Place Date
O/S *18/10/15239* R/C.



Joseph

Name **M**oreau

Rank Pte.

Reg. No. 416335

Unit 22nd. Batt.

RL. 25. No. 1762

Next of Kin Canada

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
15-6	No. 1 Can. Fld. Amb. DIED OF WOUNDS Note Correcting Name Burial Report Made Out			A252 A268	M 8512	21-6

No. 411335 RANK *Pvt.*

NAME *Morreau. Joseph.*

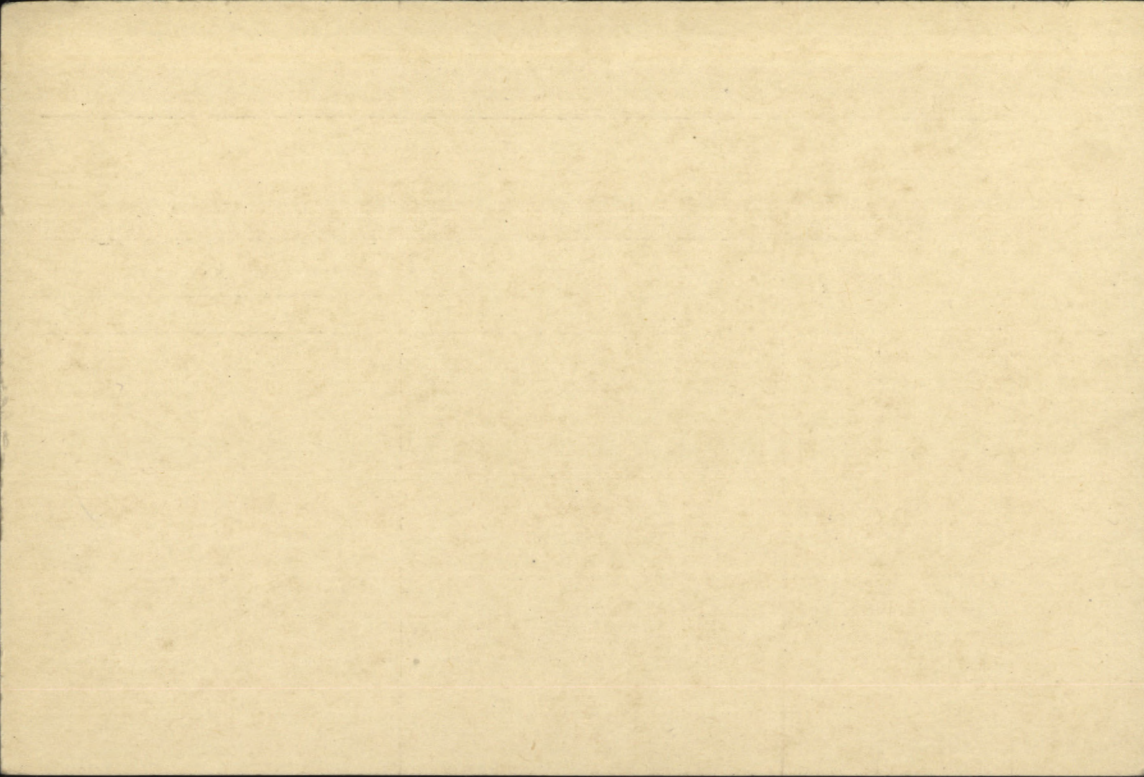
T. O. S.

UNIT *41st Battalion C. O. I. I.*

M. D. *5.*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915 Nov. 1.</i>	<i>1915 Nov. 30.</i>	<i>n.</i>		

UNIT SAILED
OCT 18 1915



412888
 5005 ORIGINAL

43

MEDICAL HISTORY SHEET.

Surname Morreau Christian Name Joseph

Examined { on 13th day of August 1915
 at Joliette
 Birthplace { City or Town Joliette
 County Joliette

Approved by [Signature]
 Rank _____ M.O.

Apparent age 18 years
 Trade or occupation Driver of teams
 Height 5 Feet 6 1/2 Inches.
 Weight 176 Lbs.
 Chest measurement { Minimum 32 inches
 Maximum expansion 34 1/2 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.

Vaccination Marks { Arm Right Left
 Number no one
 When Vaccinated last 1913
 (a) Marks indicating congenital peculiarities or previous disease none

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

(b) Slight defects but not sufficient to cause rejection
Two teeth missing

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>30/8/15</u>	<u>Good</u>	<u>A. G. Galloway Capt</u>
<u>9/9/15</u>	<u>"</u>	<u>"</u>
		M.O.
		M.O.
		M.O.

Enlisted on 13th day of August 1915 at Joliette P.Q.

	CORPS	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment		<u>46333</u>		<u>13 Aug '15</u>
Transferred to.. ..	<u>41st Batta</u>	<u>42855</u>		<u>13-10-15</u>
	<u>C. E. Batt.</u> <u>22nd 57th Reg't. C. F.</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.

Rank **Pte** Name **MOREAU. Joseph**

Reg'l No. **416335**

Unit **41st Bn**

If in perm. Corps,
What Unit?

Married or Single **Single**

Place and Date of Enlistment **Joliett, Aug 13th 1915**

Place of Birth **Joliett.**

Name and Address, Next-of-Kin **Octavier Moreau,**

Joliett, Co., Joliett, P.Q. Canada.

Relationship

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

15/6/16

Reason **D. & W.**

Character

B. O. 25' 21/6/16



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						
1915																	
Nov. 1	30	30	1.00	30	30	10	3		33	30		973			2920	380	
Dec 1	31	31	1.00	31	31	10	3 10		34 10	93		1944			2434	1356	
1916										142		487					
Jan 1	31	31	1.00	31	31	10	3 10		34 10	194		1944			1946	2820	
Feb 1	29	29	1.00	29	29	10	2 90		31 90	288		973			2920	3090	
Mar 1	31	31		31	31		3 10		34 10	335		730			1460	5040	
										422		730					
										455		730					

CANADIAN
ASSIGNED PAY AUDITED
J. H. Brown
AUDIT CLERK
DATE **MAY 22 1919**

Checked *HW*
Stiles

Cash found in effects **no Rep**

Statement of
NOV 7 1916
Account rendered

BALANCE TRANSFERRED TO NEW LEDGER.

152 1520 16720 11680 11680 50 40

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

97
 M. F. W. 12.
 50m.-4-16.
 H. Q. 1772-39-819.

To Whom *Octavien Moreau,*
 Address *Joliette,*
Que.

By Whom Assigned *Moreau Joseph*
 Regtl. No. *416335*
 Rank *Pte.*
 Corps *41st Bu. C. Co.*

Rate *15⁰⁰ May '16*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 2px solid red; padding: 10px; display: inline-block;"> <i>Casualties</i> </div> <p><i>Died of wounds, 18 June '16 @ 22-6-16</i></p> <p><i>Also 3 M. Aug 22/16</i> <i>J.M.</i></p>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

14 230

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

98

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

Sheet No. 2. *Octavien Moreau*

Name of Soldier *Moreau, Joseph*
#416335, Ote., 4th Bn. C. Co.

L. L. Job 310.—Req. 6374.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
				<i>15⁰⁰ May '16 DMF.</i>
April	1916			
May		<i>06581</i>	<i>15</i>	
June		<i>134729</i>	<i>15</i>	<i>ac closed. cas</i>
July				
Aug.				
Sept.				<i>30⁰⁰ 7 X 27/12/16 4408</i>
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

cas

Casualties

CANADIAN
 ASSIGNED PAY AUDITED
J. H. Brown
 AUDIT CLERK
 DATE MAY 22 1919

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.				

MARRIED OR SINGLE *S.*

PLACE OF BIRTH *Joliet P. Q. Canada*

NAME AND ADDRESS OF NEXT OF KIN *Octavien Moreau Joliet P. Q. Canada*

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

ADJUSTMENT OF A.P. FROM OTTAWA
 Authority *H.Q. 649-M-1988*
 Amount *15⁰⁰* Reason *credit*
July/16 not paid

Statement 17

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Died of Wounds</i>	<i>15.6.16</i>	<i>B.O. 25:21.6.16</i>

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL
---------------	-----------------	----------	------------------

REG'L. No. *416335* RANK *Mt*

IF IN PERM. CORPS WHAT UNIT

PERMANENT FORCE ALLOWANCES

PLACE OF ATTESTATION *Joliette*

DATE OF ATTESTATION *12/8/15*

ASSIGNED PAY MONTHLY \$ *15* DATE EFFECTIVE *15/76*

PAYABLE TO *Octavien Moreau Joliette Prov Justice* RELATIONSHIP

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *27/1/16* EFFECTIVE *1/8/16*

DISCHARGE DATE AND PLACE *Died of Wounds 15.6.16* REASON AND AUTHORITY *B.O. 25:21.6.16*

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *16.6.16*

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

NAME *Moreau Joseph* *X O*
 UNIT *41st Batt* TRANSFERRED TO *22nd Batt* DATE *20/4/16* AUTHORITY *D.O. 96*
 TRANSFERRED TO *22B* DATE *16/7/16* AUTHORITY *20132*
 TRANSFERRED TO _____ DATE _____ AUTHORITY _____
 TRANSFERRED TO _____ DATE _____ AUTHORITY _____



15/16 By 26/16 1025/16 22nd

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		NO. OF DAYS	RATE	AMOUNT					1	2	3	4	1	2	3	4				CREDIT	DEBIT										
<i>1916</i>																																						
<i>1-3.5-16</i>	<i>31</i>	<i>31</i>	<i>31</i>		<i>31</i>	<i>31</i>	<i>31</i>								<i>34/0</i>						<i>488 10/16</i>	<i>730</i>																
<i>1-5-6</i>	<i>15</i>	<i>15</i>	<i>15</i>		<i>15</i>	<i>15</i>	<i>15</i>								<i>1650</i>						<i>2244285</i>	<i>720</i>																
<i>16-3/1/16</i>																					<i>218123.5 2071 25.4</i>	<i>975 974</i>	<i>10-</i>															
<i>Dec 16</i>																																						
<i>Feb 17</i>																																						

Statement of
 NOV 7 1916
 Account rendered

Cash found in
 effects *no Rep*

CANADIAN
 ASSIGNED PAY AUDITED
J. H. Brown
 AUDIT CLERK
 DATE MAY 22 1919

*Ottawa for Sett of pay
 54.93 redt li adjust
 15⁰⁰ see stamp
 69.93 paid by Ottawa*

IR. 452

DUPLICATE.

To be used (a) for recruits enlisting direct into the Regular Army and (b) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY ofSurname M O R E A U, Christian Name Joseph

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Joliette. County Joliette.Examined... { on 13th day of August, 1915
at Joliette.Declared Age ... 18 years ... days.Trade or occupation ... Driver of Teams.Height ... 5 feet 6½ inches.Weight ... 126 lbs.Chest Measurement { Girth when fully Expanded 34½ inches.
Range of Expansion 2½ inches.Physical Development ... GoodVaccination { Arm ... Right ... Left 1
Marks { Number ... 1When Vaccinated ... 1913.Vision ... { R.E.—V=
L.E.—V=(a) Marks indicating congenital peculiarities or previous disease ... { (a) None

(b) Slight defects but not sufficient to cause rejection ... { (b)

Approved by (Signature) J.P. Laporte,

(Rank) _____

*Medical Officer.*Enlisted ... { at JOLIETTE,
on 13th day of August, 1915.

Joined on Enlistment ...	57th Reg't. Corps.	Regtl. No. •
	41st Battn.	416335
Transferred to ...	22 nd Batt.	

Became non-effective by _____

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

(Signature)

(Rank)

Lieut.-Col.

Casualty Form—Active Service.

CERTIFICATE CORPUS
 Canadian Army Form B. 103.
 Westminster House,
 7, Millbank, S.W.

Trans to 23rd
 Regiment or Corps 41st Bn C.O.E.

Regimental No. 416335 Rank Private Name Moran Joseph

Enlisted (a) 13-8-15 Terms of Service (a) 10 of W Service reckons from (a) 13-8-15

Date of promotion } Date of appointment } Numerical position on }
 to present rank } to lance rank } roll of N.C.Os. }

Extended _____ Re-engaged _____ Qualification (b) Labourer

Date	Report		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
	From whom received	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 noted in each case.			
					<u>P. de V. Perron</u> CAPT. Adjutant <u>23rd</u> Canadian Inf. Bn.
<u>7-6-16</u>	<u>C B D</u>	<u>Reinf. from 23rd Res. Bn</u>		<u>7-6-16</u>	<u>Nom. Roll</u>
<u>8-6-16</u>	<u>"</u>	<u>Taken on strength 22nd Bn</u>		<u>8-6-16</u>	<u>"</u> <u>139/22-6-16</u>
<u>16-6-16</u>	<u>O.C. Bn</u>	<u>Left C B D</u>		<u>"</u>	<u>B 213</u> <u>do</u>
		<u>Joined Unit</u>			
<u>18 6/16</u>	<u>1st Con</u> <u>fld Amb.</u>	<u>Died of wounds (advanced</u> <u>Dressing Stn.)</u>	<u>Field</u>	<u>15 6/16</u>	<u>Teleg. F.A. 378.</u> <u>37-/18 6/16</u> <u>Pt F.O. 25/21 6/16</u>
			<u>Whogau</u>		<u>Capt. for Lt.-Col., A. A. G.</u> <u>Canadian Section, G. H. Q. 3rd Echelon, B. E. F.</u>

(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, Shoing 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				