

5th M. D. Depot Battalion Second Quebec Regiment

Regtl. No. 3293719

# PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class 000)

*From  
6-11-18*



1. Surname Roberts

2. Christian name Jean Charles

3. Present address 303 Commercial, St. -<sup>1</sup>arnold, Co. Lewis, Canada.

4. Military Service Act letter and number  
(If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension, or surrender)

5. Date of birth 15th. October 1889

6. Place of birth St. -<sup>1</sup>arnold, Lewis Co., P.O., Canada.  
(town, township or county and country)

7. Married, widower or single Single

8. Religion Roman Catholic

9. Trade or calling Laborer

10. Name of next-of-kin Louis Alphonse Roberts

11. Relationship of next-of-kin Father

12. Address of next-of-kin St. -<sup>1</sup>arnold, Lewis Co., P.O., Canada.

13. Whether at present a member of the Active Militia No

14. Particulars of previous military or naval service, if any Nil

15. Medical Examination under Military Service Act :-  
(a) Place Quebec. (b) Date 9-9-18 (c) Category

## DECLARATION OF RECRUIT

I, Jean Charles Roberts, do solemnly declare that the above particulars refer to me, and are true.

*Witness: Jos Carson* Jean Charles <sup>24</sup> Roberts (Signature of Recruit)

## DESCRIPTION ON CALLING UP

Apparent age 30 yrs. 7 mths.

Height 5 ft. 10 ins.

Chest measurement } fully expanded 40 ins.  
                                  } range of expansion 3 ins.

Complexion Dark

Eyes Blue

Hair Black

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

O. C. \_\_\_\_\_ Depot Btin. \_\_\_\_\_ Regt.

Place 2-111 Hall, Quebec Date 9-9-18

*12. 20  
2-2-18  
X 408*

# PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917

Class \_\_\_\_\_

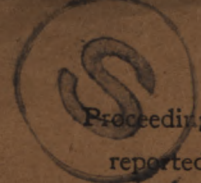
1. Name of recruit	_____
2. Age	_____
3. Height	_____
4. Complexion	_____
5. Eyes	_____
6. Hair	_____
7. Build	_____
8. Occupation	_____
9. Education	_____
10. Date of birth	_____
11. Place of birth	_____
12. Name of father	_____
13. Name of mother	_____
14. Name of spouse	_____
15. Name of children	_____
16. Name of next of kin	_____
17. Address of next of kin	_____
18. Name of commanding officer	_____
19. Name of recruiting officer	_____
20. Name of medical officer	_____

## DECLARATION OF RECRUIT

I, \_\_\_\_\_, do hereby declare that the above particulars are true and correct to the best of my knowledge and belief, and that I am not a member of any other force, and that I am not a member of any other force, and that I am not a member of any other force.

## DESCRIPTION OF SERVICE

I, \_\_\_\_\_, do hereby declare that I am a member of the \_\_\_\_\_, and that I am a member of the \_\_\_\_\_, and that I am a member of the \_\_\_\_\_, and that I am a member of the \_\_\_\_\_, and that I am a member of the \_\_\_\_\_.



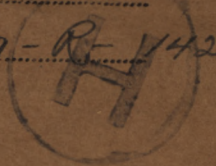
7-11-18

Deceased

DISCHARGE DOCUMENTS

R. O. No. ....

H. Q. No. 649-R-14234



- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers.....
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms.....
- 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.....
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

4 - 1 to M.D.#5 12/1/18 20

Name **ROBERGE GEAN. CHARLES**

Regt. No. 3293719 Rank *Pte*

Corps *1st Depot-Bn 2nd Que Regt*

*S.O.S. 9-10-18*

*M.D.5*

*James*



14719



1  
2-1  
2-1

*H.  
R.  
g.*

*Doc S.F. #10- 1*



9  
10  
18

H. Q. 649-R-14234

M. D. No. 5

Surname Roberge T. O. S. 19

Christian names Jean Charles D. O. Pt. II of

Regtl. No. 3293719 Rank Pte S. O. S. 9-10 1918

Unit 2nd Que Regt 1st Hqs Bn Reason deceased

Auth W.O. 283 of 10-10-18  
1-2 Q.R.

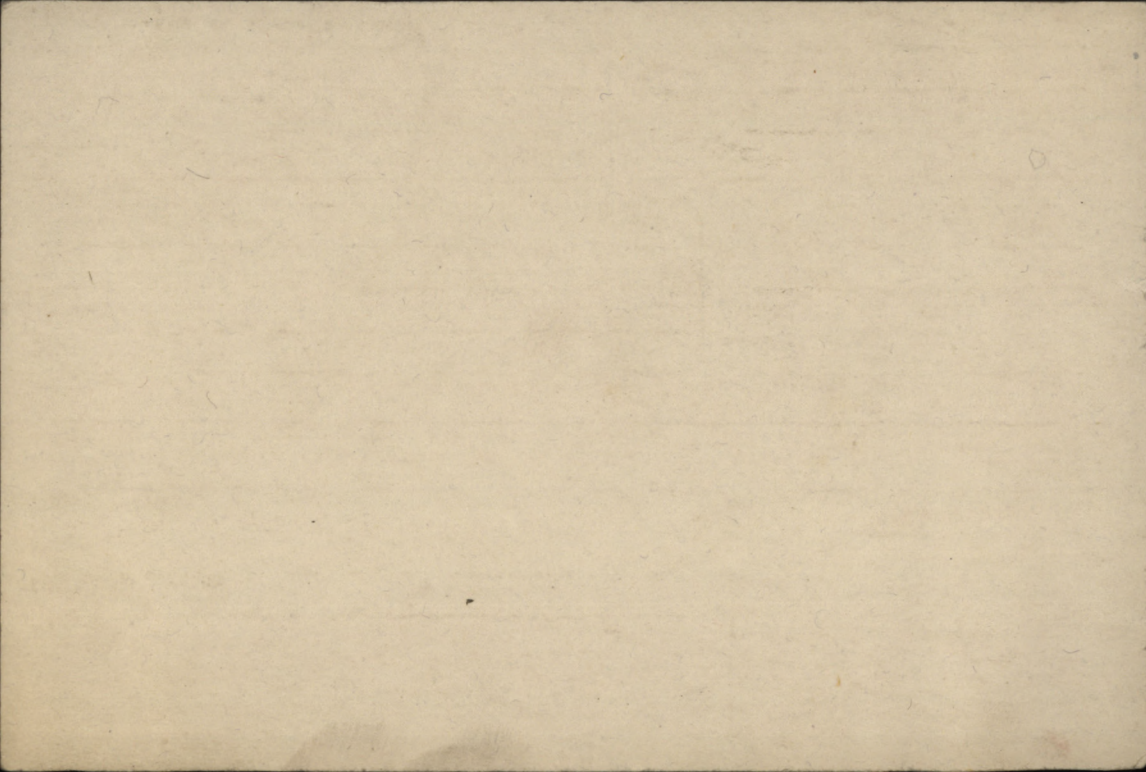
Next of kin Roberge Louis Alphonse Relationship Father

Address St. Romuald, Lewis Co Also notify:  
P.Q.

BORN—Place Canada St. Romuald P.Q. Date Oct 19th 1889

ATTESTED—Place Quebec P.Q. Date Sept 9th 1918

O/S ..... R/C.....



649-R-14234

FRENCH

✓  
✓  
✓  
ROBERGE, Jean Charles

✓  
✓  
(Pte.) No. 3293719 1st Que. Rgt

*Dps Br*  
*2nd.*

Medals and Decorations(Father) L.A. Roberge, Esq.  
St. Romuald,  
303 rue Commerciale  
Lévis, P. Qué.

Plaques and Scroll(Father) L.A. Roberge,  
address as above.

*(Ser. # 808373.)*

*# 5*

Memorial Cross. (NIL) *MAY 7 - 1921* Reqn. No. *2-41967*

Plaque Desp. *JAN 24 1922* Reqn. No. *B - p 26342*

*Canada only*

*no more*

14  
5/11/11



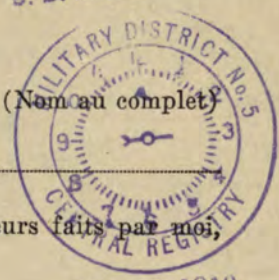
# FORMULE DE TESTAMENT

Je, Jean Charles Roberge (Nom au complet)

Numéro régimentaire \_\_\_\_\_ en service dans \_\_\_\_\_

la force expéditionnaire canadienne, annule tous les testaments antérieurs faits par moi,

et déclare que celui-ci exprime mes dernières volontés.



OCT 11 1918

Je lègue tous mes immeubles à

<u>Louis Alphonse Roberge</u>	} Noms et adresses de la personne ou des personnes à qui le leg est fait.
<u>303 Rue Commerciale</u>	
<u>St-Romuald .Levis. P.Q.</u>	

entièrement, et mes biens meubles, je lègue à

<u>Louis Alphonse Roberge</u>	} Noms et adresses de la personne ou des personnes à qui le leg est fait* (voir remarque.)
<u>303 Rue Commerciale</u>	
<u>St-Romuald Devis. P.Q.</u>	

**AVIS IMPORTANT** le 9th jour de October, A.D. 1918.

Le tout doit être signé et daté par le **SOLDAT LUI-MEME.** Jean Charles Roberge Signature du soldat.

\*N.B.—La masse des biens meubles comprend le salaire, les effets, l'argent en banque, les polices d'assurance, c'est-à-dire tout, excepté les biens immeubles.

Signé et reconnu par le testateur comme étant ses dernières volontés, en présence de deux témoins, qui, en présence du testateur, et, à sa demande, ont signé comme témoins.

Signature du premier témoin [Signature]

Adresse du témoin Drill Hall Quebec P.Q. Canada

Occupation du témoin Clerk.

Signature du second témoin [Signature]

Adresse du témoin Drill Hall Quebec P.Q. Canada

Occupation du témoin Clerk,

LES DEUX TEMOINS DOIVENT SIGNER ICI.

ESTATES



Formule W 82a. 100M-5-16. 1772-39-983.



# MOBILIZATION CENTRE M. D. 5

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

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

500M.—9-16

H. Q. 1772-30-920.

## Casualty Form—Active Service.

Unit, Regiment or Corps. *1st Depot Bn 2nd Que Regt*

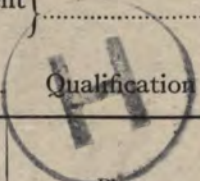
Regimental No. *3293719* Rank *Private* Name *Roberge Jean Charles*

C. E. F.

Enlisted (a) *9-9-18* Terms of Service (a) *Can. Exp. Force* Service reckons from (a) *9-9-18*

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

Extended. Re-engaged. Qualification (b) *Laborer*

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
<i>10-10-18</i>	<i>1/2 R.R.</i>	<i>S.O.S. Deceased</i>  <i>Pneumonia</i>	<i>Quebec</i>	<i>9-10-18</i>	<i>283</i>
<div style="position: absolute; left: 50%; top: 50%; transform: translate(-50%, -50%); opacity: 0.5;">  </div>					

(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.

I.P.T.O.



Army Form B-213 - Active Service

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				
