

ORIGINAL.

65867

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... *Adrian St. Marie*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Montreal P.O.*
- 3. What is the name of your next-of-kin?..... *Mrs D. St. Marie*
- 4. What is the address of your next-of-kin?..... *72. Beauchemin St. Stee*
- 5. What is the date of your birth?..... *July 5/1895*
- 6. What is your Trade or Calling?..... *Clerk*
- 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*

Adrian St. Marie (Signature of Man).
J. Hawford (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Adrian St. Marie*, 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.

Adrian St. Marie (Signature of Recruit)
 Date..... *NOV 3 - 1914* 1914. *J. Hawford* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Adrian St. Marie*, 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.

Adrian St. Marie (Signature of Recruit)
 Date..... *NOV 3 - 1914* 1914. *J. Hawford* (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 *Montreal* this *3rd* day of *Nov* 1914.

Wm. J. Bay (Signature of Justice)

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

.....(Approving Officer)

Description of Adrien St. Pierre on Enlistment.

Apparent Age.....19.....years.....5.....months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height.....5 ft. 5 ins.

Chest measurement. { Girth when fully expanded.....34 ins.
 Range of expansion.....3 1/2 ins.

Complexion.....sallow

Eyes.....brown

Hair.....black

Religious denominations. { Church of England.....
 Presbyterian.....
 Wesleyan.....
 Baptist or Congregationalist.....
 Other Protestants.....
 (Denomination to be stated.)
 Roman Catholic.....
 Jewish.....

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.)

1 scar L upper arm -
circular scar L elbow
semi circular scar L cheek.

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-Sea Expeditionary Force.

Date.....NOV 3 - 1914.....1914.

Place.....Montreal

[Signature]
Capt. A. M. C.
 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.

.....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 of Officer)

Date.....1914.

APB 27/6/18

M

R. O. No.
H. Q. No.

DISCHARGE DOCUMENTS

Name St. Marie Adrian
Regt. No. 65864 Rank Pte
Corps 24th Bn. V.R.
Killed in action 1-12-15.

00885

~~Cards. 1 Part II~~
~~1 Casualty~~

~~Medals B 10 90~~

8599

H

3
35-21
12-21
3-21
3

- 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.....

A. P. B. 122-1
Med case sheet
cas card
P122

M. F. W. 62.
100m.-6-17.
H. Q. 1772-39-935.

S

APB 11/6/18

2



65867

ST. Marie

Adnan

I.D. number

Surname

Given names

No. d'identification

Nom de famille

Prénoms

KIA 01/12/15

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location

Lieu

Box: 8599

«CONTENTS CONFIDENTIAL»
«CONTENU CONFIDENTIEL»



No. 237 RANK Pte.
65867 Nov. Paylist.

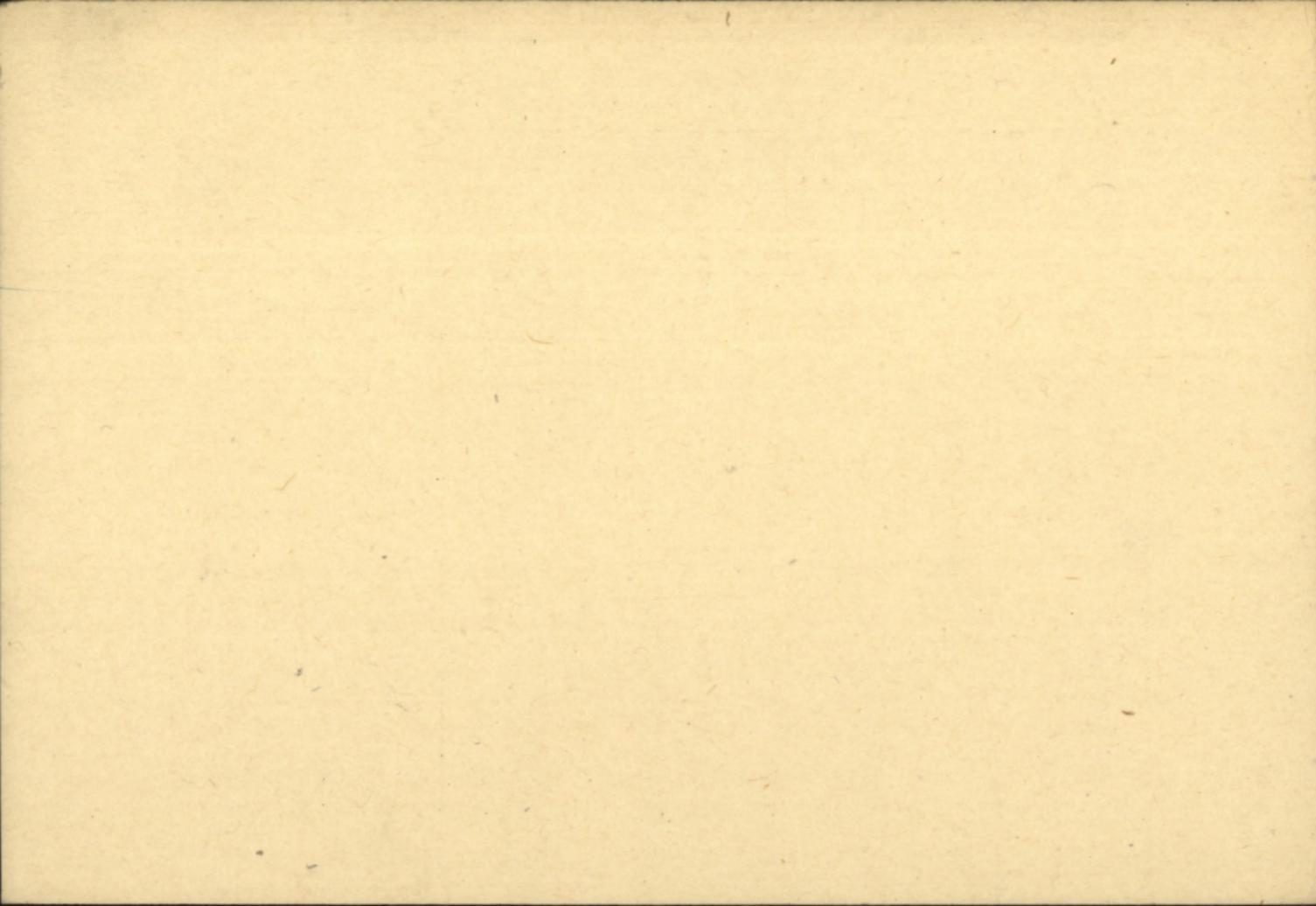
NAME St. Marie Adrian

T. O. S. 3-11-14 UNIT 24th. Battalion
Nov. Paylist.

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914 3 Nov.	1914 30 Nov.	✓		
1915 Dec.	1915 Jan.	✓		
	Feb.	✓		
	Mar.	✓		
	Apr.	✓		
	May.	✓		

UNIT SAILED
MAY 11 1915



ST. MARIE, Adrian

Pte.

24th Bn.

65867

649-S-1377

Medals

Father

Moise St.Marie

72-Beaubien-street

13-11-25/1690 Papineau street

Montreal, P.Que.

P. & S.

"

"

Memorial Cross

Mother

Mde. D. St.Marie

(as above)

770748

N.B. Temporary card - original misplaced - Mem.X and
Scroll previously despatched.

Scroll Desp. _____ Reqn. No. _____

Plague Desp. 13/11/25 Reqn. No. 1997

*Charte for 14/15 Star. H.Q. 649-S-1377.
Re. 24th Bn.*

H.A.P.

STE. MARIE, Adrian. #65867, Pte.

24th Bn.

Medal

#1078449, Moise Ste. Marie, (Father),
83 Drolet Street,
Montreal, P.Q.

Orders
Decorations
P. & S.

#1078449, Moise Ste. Marie, (Father),
Address as above.

Memorial
Cross.

Mrs. M. Ste. Marie, (Mother),
83 Drolet Street,
Montreal, P.Q.

Resp JUN 19 1920 *Enl 812613*

(2)

m.

427

3

Name **St Marie, A.** Rank **Pte.**

Reg. No. **65867.**

Unit **24th Battalion.**

R.L. 25-M-762

Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1915.						
27-10.	4 Can Fld Ambulance.		Scalp Wd	69		1880⁹/11
30-10.	Discharged to Duty.		Scalp Wd	69		
1-12-15.	O.C. Reports	KILLED IN ACTION.		97	^m 2651. 13-12-15	
	<i>See D.C.S. #56 for details</i>	<i>BC 52</i>	<i>G.S.W. BACK & Hd</i>			
	BURIAL REPORT MADE OUT.					
	G.R	"	"	"		

(649 8-1377)

CARD NO.

D

~~4~~
SURNAME. *St. Marie.*

CHRISTIAN NAMES *Adrian.*

REGL. NO. *65867.* RANK *pte.*

UNIT *24th* *Battn.*

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *St. Marie Mrs. D.*

RELATIONSHIP TO SOLDIER
ADDRESS *648 City Hall Ave.,
Montreal, P. Q.*

S.A.A.P. 7-6-17

COUNTRY OF BIRTH *Canada, Montreal, P. Q.*

DATE

PLACE OF ATTESTATION *Montreal.*

DATE *Nov. 3rd 1914.*

Sailed from Montreal Per. S.S. Cameronia 11-8-15⁷³/17.

MARRIED

SINGLE

yes.

WIDOWER

TRADE OR CALLING

clerk

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

19 YEARS

5 MONTHS

HEIGHT

5 FEET

5 INCHES

CHEST MEASUREMENT

34 INCHES

EXPANSION

3½ INCHES

COMPLEXION

Sallow

EYES

Brown

HAIR

Black

DISTINGUISHING MARKS

1 Trace L upper arm circular
Scar L elbow semi circular scar L
cheek

MEDICAL EXAMINATION.

PLACE

Montreal PQ

DATE

Nov. 3rd 1914

NAME

Ste Marie, Adrian

H. Q. FILE No. 649-

REGT'L. No.

65867.

RANK AND CORPS

Pte. 24th. Batt.

NO.

19

CABLE

NO.

DATE.

NATURE OF CASUALTY

FOLL.

M1880

8-11-18

Admitted to 4 fld. Amb. Oct 24
(Scalp wound) ✓

NO.

M.2651

13.12.15

Killed in action 1st Dec

FOLL.

27B

2090a

Killed in action Dec 1st 1915

Reven

11/12-15

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

✓ 69	4th Can. Fld. Amb.	27-10-15	Scalp wound.
✓ 69.	Discharged to Duty.	29-10-15	Scalp Wound.
97	O.C. Batt. Reporlō.		Killed in Action. 1-12-15

R.R. *S*

13

Number *65867* Rank *Plé*

Surname *ST MARIE*

Christian Names *adrian*

Unit *24th Bn Can Inf* Theatre of War *France*

Date of Service *15-9-15*

Remarks *Unable to trace NIK 7¹²/₂₃*

Latest Address *[Signature]*

Roll No. *B Page 2298* *24th Bn*

Faint, illegible text, possibly bleed-through from the reverse side of the page.

1

1

2

2

Temp. cl.

Number 65867 Rank Pte.

Surname St Marie

Christian Name Adrian

Units 24th Bn. Theatre of War France.

Date of Service 15-9-15

Remarks

Latest Address Mr. Moise St. Marie (#)

1690 Papineau St.,
Montreal, P.Q.

Roll No. Roll B 2298

5m-7-23. (M95).

DESP. NOV 17 1925

REGN. NO. 18177

Surname **St. Marie.** Christian Name or Names **A.** Reg. No. **65867.**
 Rank **Pte.** Unit **24th. Battn.** Co. Troop Batty.
 Hospital **4th Can. Hd. Amb.** Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

Scalp wound(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION

Brick. to Duty 29.10.15
KILLED IN ACTION:-

Date

1-12-15.

C.L. 8-11-15 69.

C.L. 13-12-15. 97.

REMARKS

O.C. Battn. reports as
above.A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Casualty Form—Active Service.

Regiment or Corps 9th Victoria Rifles (C.E.F.)

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

Regimental No. 65864 Rank Private Name St. Marie, A.
 Enlisted (a) 3rd Nov 14 Terms of Service (a) War. Service reckons from (a) Enlistment.

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

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				
16/9/15	24 CAN BN	Disembarked Boulogne SCALP WOUND. (A36. 30/10/15) " " " " (A36. 30/10/15) RETURNED TO DUTY (B213 29/10/15) KILLED IN ACTION. (B213) SHELL FRAGMENTS IN BACK & HEAD } KILLED IN ACTION. (M.S)	4 CAN FO. AMB	16.9.15	Home Roll.
30/10/15	NO 4 CAN F. AMB		UNIT.	27.10.15	
"	" " " "		"	29.10.15	
29/10/15	24 CAN. BN		"	29.10.15	
3/12/15	" " "		IN THE FIELD	1.12.15	
4/12/15	" " "	" " "	1.12.15	134/Am/24/10	

C. V. Murch
 Lieut
 for Lt. Col. D. A. A. B.

(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.]

410

MEDICAL CASE SHEET.*

MOFF BRKS

ST. J. CLIFFE

No. in Admission and Discharge Book. 410 Year	Regimental No.	Rank.	Surname.	Christian Name.
	65867	Pte	St. Marie	A.
	Unit.	Age.	Service.	
	24th Battalion	19	7/1 ✓	

Station and Date.

Disease Gonorrhoea.

Complaint: Discharge from penis and pain in urinating.

History: - Exposed March 12th and noticed discharge May 27, 1915. First attack

Examination: True urethral discharge: pain in urinating

Diagnosis: Ac Gon.

Treatment:

May 25. 15	1st cloudy: 2nd cloudy	Sl. disch	Kmno 4
" 26	Onerine "	No disch	Kmno 4
" 27	1st 3. Stubs 2nd Clear	No. disch	Kmno 4
" 28	" " cloudy: 2nd "	" "	Kmno 4
" 29	Both clear	No disch	Kmno 4
" 30	1st hazy: 2nd clear	No disch.	Kmno 4
" 31	" clear " clear	" "	Kmno 4

Transferred to field post
at Macaulay Capt.

Rank _____ Name **St MARIE. Adrian** Reg'l No. **65867.**
 Unit **3rd Nov. 1914.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Montreal. 3rd Nov. 1914.** Place of Birth **Montreal P.Q.**
 Name and Address, Next-of-Kin **Mrs D St Marie. 72 Beaubieu St. Montreal.**
 Relationship _____

Assigned Pay Monthly \$ _____ Payable to _____
 Relationship _____

Separation Allowance \$ _____ Payable to _____
 Relationship _____

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. Cameronia		20.5.15	
14.6.15	Off. auth.	ed. in. Hosp. <u>Veneral.</u>	East Landing	4.6.15	Pr. II O. # 205
14.6.15	do	Disch. fr. Hosp.	do	11.6.15	Pr. II O # 214.
19.9.15		Embarked for France.	Folkestone.	15.9.15	Emb. Memo. # 288.
8.11.15	WO	Adm 4 th Ban Field Amb	France	27.10.15	"Scalp Wound" Gas Rep # 69
8.11.15	W.O.	Discharged to Duty	"	29.10.15	"Scalp Wound" Gas Rep # 69
13.12.15	W.O.	Killed in Action	France	1.12.15	Gas Rep. 97 O.N. + P. 20-11
15.12.15	Chap. S. of B. Co	Interred at 24 th Batta. Cemetery Ref Map 1/40,000 Sheet No 28	France	1.12.15	W3314 15.11.15 Gas from Gas Sheet 50

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

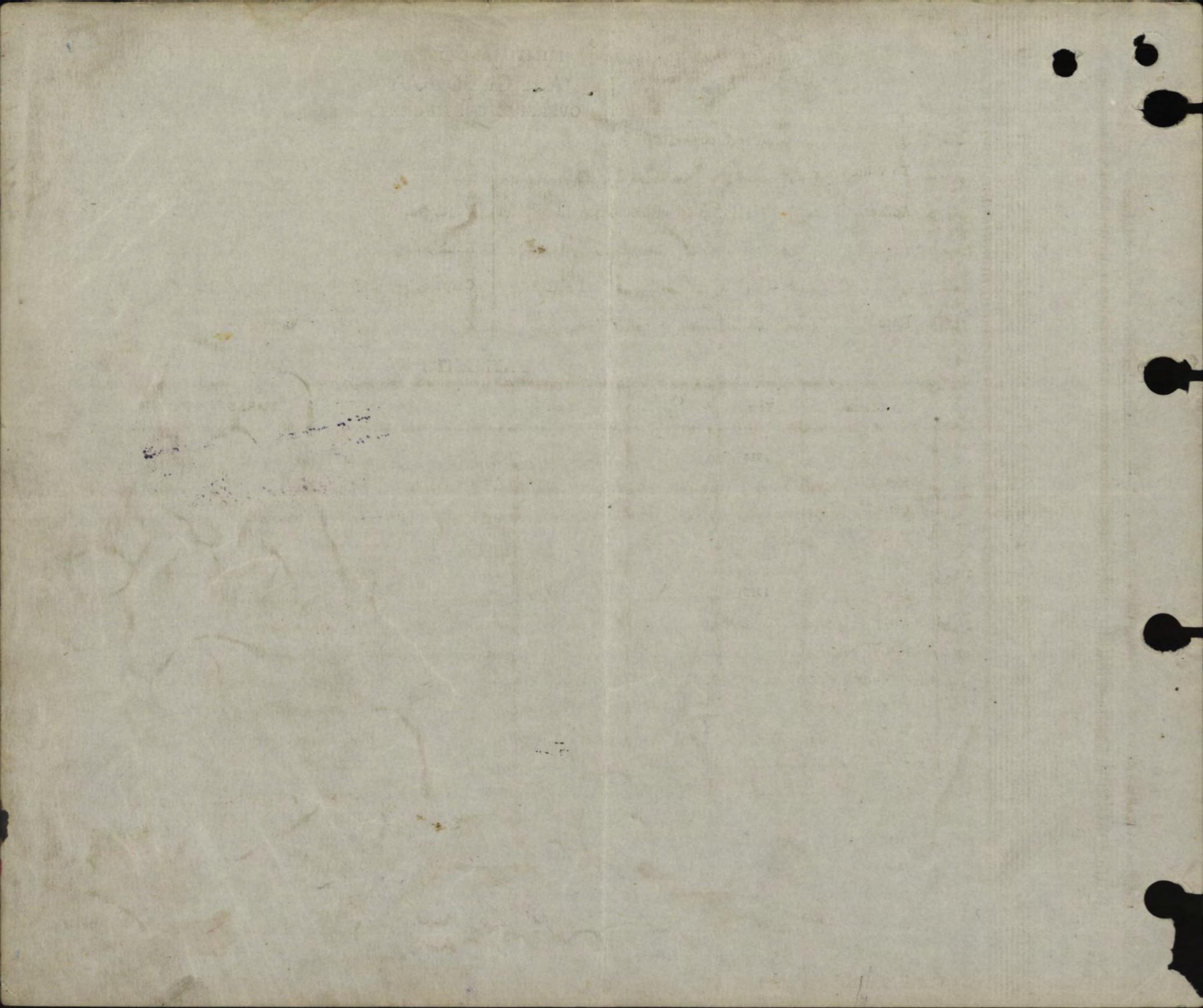
289

To Whom *M^r. D. S^t. Marie*
 Address ~~*42. Beaubien Street*~~
Montreal, Que
684 City Hall Ave
montreal
 Rate *\$10⁰⁰* **MAY 1 1915** *7-6-17*
 By Whom Assigned *S^t. Marie, A.*
 Regtl. No. *237* (*65867*)
 Rank *Pte*
 Corps *A. Co. 24th Bn. P.M.*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <i>Casualties</i> </div>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			<div style="border: 1px solid purple; padding: 5px; display: inline-block;"> CANADIAN ASSIGNED PAY AUDITED <i>Spencer</i> AUDIT CLERK DATE <i>20-6-19</i> </div>
Feb.				
March				
Apr.				
May		<i>P135</i>	<i>10</i>	
June		<i>N1900</i>	<i>10</i>	
July		<i>V. 13248</i>	<i>10</i> —	
Aug.		<i>O6328</i>	<i>10</i> —	
Sept.		<i>Q6755</i>	<i>10</i> —	
Oct.		<i>S6610</i>	<i>10</i> —	
Nov.	<i>T8444</i>	<i>10</i> —		
Dec.	<i>W10031</i>	<i>10</i> —		
Jan.	1916			<i>80</i> <i>Acct closed Killed in Action Dec 1.</i> <i>C. L. Dec. 14 - DM</i>
Feb.				
March				

JB.



Rank

Name

St MARIE, Adrian

Reg'l No. 65867.

Unit

24th BnIf in perm. Corps,
What Unit?Married or Single **Single.**

Place and Date of Enlistment

Montreal, 3rd Nov. 1914.

Place of Birth Montreal P.Q.

Name and Address, Next-of-Kin

Mrs D St Marie, 72 Beaubien St. Montreal.

Relationship

Assigned Pay Monthly \$ 10

Can. 1-1-16

Payable to *Heat of Honor*

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Killed in Action
1-12-15

Reason B.O.# 11, 11-12-15

Character

C.L.# 97

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							
1 June	30 June	30	1 ⁰⁰	30	30	10	3	12 10	45 10			27 50	10		37 50	7 60	\$12 ¹⁰ from May.	
1 July	31 July	31	1 ⁰⁰	31	31	10	3 10	34 10	34 10			32 50	10	1 50	44 00	2 30	Adjusted (V) 10 days 15	
Adjustment of Exchange									1 60							70		
1 Aug	31 Aug	31	1 ⁰⁰	31	31	10	3 10	34 10	34 10			19 47	10		29 47	3 93		
1 Sep	30 Sep	30		30	30		3	33	33			5 35	10		15 35	21 58		
1 Oct	31 Oct	31		31	31		3 10	34 10	34 10			2 62	10		12 62	43 06		
1 Nov	30 Nov	30		30	30		3	33	163 00			5 30	10		178 94	60 76		
1 Dec	1 Dec	1		1	1		10	10	1 10			11 60	10		21 60	40 26	Ship stop & new 16/12/15 leave 1/1/16.	
n. s. June/16									2 37							42 63	42 63	Killed in action 1/12/15 B.O. 11-11/15 C.L. 97
Dent 46												42 63				42 63	nil	
n. s. Sept/17									10 65							10 65		To Ottawa for Sect 24/11/16 Returned from Ottawa for English 1.7.21 Ch in full 15718-2/1/17 7.221
												10 65				10 65		

Statement of
JUL 10 1916
Account rendered

Sch 131
Cash found in
effects \$2.37

CANADIAN
ASSIGNED PAY AUDITED

AUDIT CLERK

DATE

20.6.19



To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname ST. M A R I E Christian Name Adrian

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Montreal County Que. Canada.

Examined ... (on 2nd day of November 1914.
at Montreal Canada.

Declared Age ... 19 years ... days.

Trade or Occupation ... Clerk

Height ... 5 feet, 5 1/2 inches.

Weight ... lbs.

Chest Measurement { Girth when fully Expanded. 34 1/2 inches.
Range of Expansion 2 inches.

Physical Development ... Good

Vaccination Marks { Arm ... Right Left
Number 1 Large

When Vaccinated ... Infancy

Vision ... { R.E.—V=
L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ...

(b) Slight defects but not sufficient to cause rejection ... { 1" scar left elbow outer joint
Round scar middle left cheek

Approved by (Signature) signed for H.L. Laney
(Rank) Capt. Medical Officer.

Enlisted ... { at Montreal
on 2nd day of November 1914.

Table with 2 columns: Corps, Regtl. No. Corps: 24th Battn. Regtl. No.: 6 5 8 6 7

Became non-effective by

on ... day of ... 191

(Signature)
(Rank)

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

I certify the foregoing to be a true copy of a original entry on a Medical History Sheet of this man. C.A.M.C. for the Officer in Charge of Records Canadian Contingents.

MONTREAL, *Nov. 3rd* 1914

I consent to the enlistment of my ~~husband~~ **son**
..... in the Militia
of Canada for Active Service in Canada or
abroad.

(SIGNATURE) *m. St. Martin*

Nov 27 - 1891

I received the amount of \$100.00

from the sale of the land

of the State of Texas

and

for the same I have