

# ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

No.

Folio.

57th Reg't. C. F.

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

1. What is your name? VIAU..... JOSEPH.....
2. In what Town, Township or Parish, and in what Country were you born?..... Valleyfield.....
3. What is the name of your next-of-kin?..... Adelard Viau (father).....
4. What is the address of your next-of-kin?..... Rue Ste Anne Valleyfield, Que.....
5. What is the date of your birth?..... Dec. 21 st 1894.....
6. What is your Trade or Calling?..... Labourer.....
7. Are you married?..... No.....
8. Are you willing to be vaccinated or re-vaccinated?..... er ineculate d..... 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 } Yes.....  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

Joseph Viau (Signature of Man.)  
Jos. J. Serrault (Signature of Witness.)

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Viau Joseph....., 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.

Joseph Viau..... (Signature of Recruit)  
Jos. J. Serrault..... (Signature of Witness)

Date..... Dec. 10 th 1915.

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Viau Joseph....., 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.

Joseph Viau..... (Signature of Recruit)  
Jos. J. Serrault..... (Signature of Witness)

Date..... Dec. 10th '91 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..... 10th..... day of..... Dec..... 1915.

[Signature]..... (Signature of Justice)

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

.....(Approving Officer)



Description of VI AU JOSEPH on Enlistment.

Apparent Age 20 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. 9 1/2 ins.

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

Complexion ..... Light

Eyes ..... Grey

Hair ..... Brown

Religious denominations. { Church of England .....  
 Presbyterian .....  
Wesleyan 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\* ..... for the Canadian Over-Seas Expeditionary Force.

Date ..... Dec. 10th ..... 191 5

Place ..... Montreal ..... 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:—

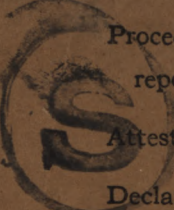
CERTIFICATE OF OFFICER COMMANDING UNIT.

.....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 ..... Dec. 10th ..... 191 5





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

Attestation Papers..... 4

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..... 2

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

# DISCHARGE DOCUMENTS

R. O. No. ....

H. Q. No. ....

Name *Viau, Joseph*

Regt. No. *1184* Rank *Pte.*

Corps *57th. Rgt. C. I. Battalion*

CANADIAN FORCES  
RECORDS CENTER  
PERSONNEL CENTER  
ROOM 1111  
H

*Discharge  
20.11.61*

PUBLIC ARCHIVE  
RECORDS CENTER  
64699

*Box  
483663*

*Handwritten signature*



Box  
9941



# MEDICAL HISTORY SHEET.

57th Reg't. C. F.

Surname VIAU Christian Name JOSEPH

Examined	on <u>10th</u> day of <u>Dec.</u> 191 <u>5</u>	Approved by	
	at <u>Montreal</u>		
Birthplace	City or Town <u>Valleyfield</u>	Rank	M.O.
	County <u>Beauharnois, Que.</u>		
Apparent age	<u>20</u>		
Trade or occupation	<u>Laborer</u>		M.O.
Height	<u>5</u> Feet <u>9 1/2</u> Inches.		M.O.
Weight	<u>156</u> Lbs.		M.O.
Chest measurement	Minimum <u>35</u> inches.		M.O.
	Maximum expansion <u>37</u> inches.		M.O.
Physical development	<u>Good</u>		M.O.
Small-Pox Marks	<u>No</u>		M.O.
Vaccination Marks	Arm Right Left	Date	Result
	Number <u>never was</u>		VACCINATIONS.
When Vaccinated last			M.O.
(a) Marks indicating congenital peculiarities or previous disease	<u>very marked congenital phthisis</u>		M.O.
(b) Slight defects but not sufficient to cause rejection	<u>Dental Corps</u>		M.O.
			M.O.
			M.O.

Enlisted on 10th day of Dec 191 5 at Montreal

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment				
Transferred to.. ..				

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISCASE.	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.







#

1184

Vian

Joseph

**RETURN THESE DOCUMENTS  
TO WAR SERVICE RECORDS  
DEPT. OF VETERANS AFFAIRS**

Deceased

20-5-61

AS  
25-9-52















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

M. F. W. 54. (A. F. B. 109.)

500M.—9-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps. 57<sup>th</sup> Battalion  
 Regimental No. 1184 Rank Plt. Name VIAU, Joseph  
 Enlisted (a) 10.12.15 Terms of Service (a) 5 Years Service reckons from (a) 10.12.15  
 Date of promotion to } Date of appointment } Numerical position on }  
 present rank } to lance rank } 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				
		<u>Died of Disease.</u> <u>(Pneumonia)</u>	<u>Montreal</u>	<u>24<sup>th</sup></u> <u>16.</u>	<u>H. Q. 649. V. 124.</u>

(1) 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.  
 (2) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.



