

<sup>4</sup>  
11025

**I.D. number**  
**No. d'identification**

CARLETON

**Surname**  
**Nom de famille**

LIONEL GRANVILLE

**Given names**  
**Prénoms**

*Killed in Action 3/4 April 1916*

**PERSONNEL RECORDS CENTRE**  
**CENTRE DES DOCUMENTS DU**  
**PERSONNEL**

**Location**

**Lieu**

1490

OPEN  
ATIA







26-8-18  
AB

DISCHARGE DOCUMENTS

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

6971

(4)

(S)

38

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 23
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet..... 2
- 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..... 1
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

Name, **CARLETON M. MONEL** **MONEL** **by GRANVILLE**  
 Regt, No, **4.11025** Rank, **1st Lt.**  
 Corps, **P. P. L. I. D.**  
*Killed in Action 2/4-6-18*

(P)

- Part II Order Card... 1
- Change of Address Card...
- Honour & Award Card .....

Box #  
1490

2  
12-23  
12-23  
7 23  
2

A. T. B. 178 — 2  
Passcard  
misc — 2

copy of paye  
copy of misc



ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

38111

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?}

*Louis G Carleton*  
*Nelom, Westmeath, Ireland*  
*Charlotte Carleton "Mother"*  
*344 Mount St Montreal*  
*1st Feb 1889*  
*Fireman G. S. P.*  
*No*  
*Yes*  
*No*  
*Duke of York & C. Engineers*  
*Yes*  
*Yes*  
*L. G. Carleton (Signature of Man).*  
*H. B. Dawson (Signature of Witness).*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *L. G. Carleton*, 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.

*L. G. Carleton* (Signature of Recruit)

Date *January 13* 1915 *H. B. Dawson* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *L. G. Carleton*, 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.

*L. G. Carleton* (Signature of Recruit)

Date *Jan 13<sup>th</sup>* 1915 *H. B. Dawson* (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 *Port Arthur* this *13<sup>th</sup>* day of *January* 1915

*[Signature]* (Signature of Justice)

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

*[Signature]* (Approving Officer)



Description of L G Carlsson on Enlistment.

Apparent Age 25 years 11 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 6 ft. 0 1/2 ins.

Chest measurement { Girth when fully expanded 42 ins.  
 Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Light Brown

None

- Religious denominations.
- Church of England
  - Presbyterian
  - Wesleyan
  - Baptist or Congregationalist
  - Other Protestants (Denomination to be stated.)
  - Roman Catholic
  - 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 January 13 1915

Place Port Arthur

G. Brown  
 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.

Lionel Glanville Carlsson 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 Jan 13<sup>th</sup> 1915

[Signature] (Signature of Officer)



Rank \_\_\_\_\_ Name **CARLETON Lionel Glenville** Reg'l No. **A 11025**  
 Unit **P.P.C.L.I.** If in perm. Corps, What Unit? \_\_\_\_\_ Married or Single **Single. 4**  
 Place and Date of Enlistment **Montreal.P.Q. 29th March.1915.** Place of Birth **Co West Maeth.Ire.**  
 Name and Address, Next-of-Kin **Mrs C.M.Carleton, 377,Mance Street, Montreal.**

*M.L.  
3/11/2017*

Assigned Pay Monthly \$ \_\_\_\_\_ Payable to \_\_\_\_\_ Relationship \_\_\_\_\_  
 Separation Allowance \$ \_\_\_\_\_ Payable to **M** \_\_\_\_\_ Relationship \_\_\_\_\_

N/E, R.B. No.	
File R.L.	31
Category	KA

Discharge, Date and Place **Killed in Action** Reason **2-1/2 6/1916** Character \_\_\_\_\_  
 Relationship **N E, R B Serial No 4**

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				
31. 7. 15	O.C.P.P.C.L.I.	Taken on strength P.P.C.L.I.	Braune	17. 7. 15	Part II Or. 32
24. 7. 15	D.O.	Adm No 1 Gen Hosp.	Etretat.	21. 7. 15	Gas List 148.
31. 7. 15	D.O.	To No 13 Stationary Hqpt. <sup>Germany</sup>	Boulogne.	6. 8. 15	" " 153.
6. 8. 15	D.O.	2nd <sup>Synovite's R. Hosp.</sup> Brompton War Hqpt.	Northfield	12. 8. 15	" " 158
6. 8. 15		To England.			Part II. # 24 war.
18. 9. 15	W.O.	Disch. to duty	Monza Horton	16. 9. 15	C. L. 190 & 3016
23. 9. 15	W.O.	adm. Can. Con. Hosp	" "	15. 9. 15	" " 194
17. 9. 15	Ob 11	Taken on strength	Showcliffe	17. 9. 15	Part II 1856
19. 11. 15	Ob 11	A.H.L. Insults. 8 dep 31. #2	"	19. 11. 15	" 2547





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				
24.11.15	Ob 11.	Trans. to P.P.C.H. 2.	Overseas	24.11.15	Pt II 02603
7.4.16	P.P.C.H. 2.	Forfeit 1 days pay for leaving time neglect Smoke Helmet 21.3.16.	In the field	21.3.16.	Pt II 0.15 Mar.
14.6.16	Ob 11.	Killed in Action		2.4.16	Pt II 24.
14.6.16				6/1916	6.4.16 O.N.
8-11-20	List 568	Correct date death	3/4-6	16	





# ORIGINAL MEDICAL HISTORY SHEET. #A11025

Surname Carlton Christian Name Lionel Gaville

Examined { on 29 day of March 1915 at Montreal Approved by W.S. Shannon Capt.

Birthplace { City or Town Delow Rank \_\_\_\_\_ M.O. County C. Westmeath Ireland

Apparent age 26 yrs 2 mths Date \_\_\_\_\_ Fit or Unfit \_\_\_\_\_ EXAMINED FOR RE-ENGAGEMENT.

Trade or occupation Railroading M.O.

Height 6 Feet 0 1/2 Inches. M.O.

Weight \_\_\_\_\_ Lbs. M.O.

Chest Measurement { Minimum 42 inches. M.O. Maximum expansion 46 inches. M.O.

Physical development \_\_\_\_\_ M.O.

Small-Pox Marks \_\_\_\_\_ M.O.

Vaccination Marks { Arm Right Left Date Result VACCINATIONS Number \_\_\_\_\_

When Vaccinated last \_\_\_\_\_ M.O.

(a) Marks indicating congenital peculiarities or previous disease \_\_\_\_\_ M.O.

(b) Slight defects but not sufficient to cause rejection Date Result ANTI-TYPHOID INOCULATIONS, ETC. 7/5/15 M.O. 11/5/15 M.O. 22/5/15 M.O.

Enlisted on 29 day of March 1915 at Montreal

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>38<sup>th</sup> Battn C.A.</u>			
Transferred to.....	<u>PPCLI A11025</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.

Entries in Red Ink made from Attestation Sheets. R.M. Shaw for D. D. M. S.   
 adi 15/9/15  
 AVG 10/9/15



A 11025

Surname

Carleton

Christian Name

Rowell Braxwell

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
2 <sup>nd</sup> Bham War Hospital CANADIAN CONVALESCENT HOSPITAL MONKS HORTON, NEAR HYTHE, KENT.		6	8	15	15	9	15	Sprain <sup>R</sup> Knee 41	41	Still done weabruen & equine iodine & massage. At Rest Camp Boulogne 2/8/15. * 2 Genl. H. Boulogne (8 days) * 13 Clearing H. Boulogne (4 days) * 2 War H. Birmingham (6 wks) (massage) * C.C. H. Monks Horton Discharged to unit.	RL Warner Capt 9/3
		15	9	15	16	9	15				

Duplicate Medical History Sheet  
posted to here.  
Medical Registrar  
Record Office.



MACHINE GUN SECTION  
88th BATTALION C. E. F.

# ATTESTATION PAPER.

No. A-11,025

Folio. 0 L

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? *Lionel Clarence Carleton*
  2. In what Town, Township or Parish, and in what Country were you born? *Belton Co. Westmeath Ireland*
  3. What is the name of your next-of-kin? *Mrs. C. M. Carleton*
  4. What is the address of your next-of-kin? *377 Avenue St. Joseph Montreal*
  5. What is the date of your birth? *1st July 1885*
  6. What is your Trade or Calling? *Railroad Eng.*
  7. Are you married? *no*
  8. Are you willing to be vaccinated or re-vaccinated? *no*
  9. Do you now belong to the Active Militia? *yes*
  10. Have you ever served in any Military Force? If so, state particulars of former Service. *yes Fort Wm 44552 Bat*  
*yes Fort Wm 44557 Bat*
  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*
- Lionel C. Carleton* (Signature of Man).  
*E. W. Duggan* (Signature of Witness).

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

I, *Lionel Clarence Carleton*, 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 *March 29* 1915 *Lionel C. Carleton* (Signature of Recruit)  
*E. W. Duggan* (Signature of Witness)

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

I, *Lionel Clarence Carleton*, 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 *March 29* *Lionel Clarence Carleton* (Signature of Recruit)  
*E. W. Duggan* (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 *29th* day of *March* 1915.

*Gregor Barclay* (Signature of Justice)

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

*Gregor Barclay* (Approving Officer)

*Lionel C. Carleton*



# Description of Luvel Glanville Carleton on Enlistment.

Apparent Age 26 years 2 months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenial 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 6 ft.  $\frac{1}{2}$  ins.

Chest measurement { Girth when fully expanded 42 ins.  
 Range of expansion 4 ins.

Complexion Fair

Eyes Blue

Hair Brown

Religious denominations. { Church of England   
 Presbyterian  
 Wesleyan  
 Baptist or Congregationalist  
 Other Protestants  
(Denomination to be stated.)  
 Roman Catholic  
 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 Mar. 29<sup>th</sup> 1915

Place Montreal

J. W. Harvey  
 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.

Luvel Glanville Carleton 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.

J. W. Harvey (Signature of Officer)

Lt.-Colonel

Date ..... 1915



22/9/16.  
The Handwriting in the attached will has been compared with the signature in the deceased's Pay-book and has been found similar.  
For Lieut  
Officer i/c Estates III.

# 411025  
P.L. G. K. K. K.

June 15/15  
P.P.C.S.  
#411025  
Private No 11025  
H. B. K. K. K.  
K. K. K.  
K. K. K.  
K. K. K.  
579 Prince St.  
Mr. J. K. K. K.  
I give the whole of my  
property & effects to  
in the country my work  
WILL  
14

CANADA  
H.O. 649  
OCT 4 1916  
DEPT MILITIA & DEFENCE  
3200

P.P.C.L. # 36

HEADQUARTERS  
H.P.  
9 - FEB 1916  
PAYMASTER,  
CANADIANS.



180  
7/10/16.  
SEP 9 - 1916

7-10-16 2nd

HEADQUARTERS  
H.Q.  
8 - FEB 1916  
PAYMASTER  
G. W. ANS

DEPT  
MILITARY & DEFENSE  
OCT 9 1916

PROCL

11

**RATES OF REGIMENTAL PAY.**

OFFICERS, ALL ARMS, *Per Diem.*

	Pay.	Field Allowance
Colonel.....	\$6.00	\$1.50
Lieut-Colonel.....	5.00	1.25
Major.....	4.00	1.00
Captain.....	3.00	.75
Commandant.....	2.00	.50
Company Sgt.....	3.00	.75
Platoon Sgt.....	2.00	.50
Staff Sgt.....	1.00	
Quartermaster.....	2.00	.50
Orderly.....	1.00	
Pay Sergeant.....	1.00	
Squad Leader.....	1.00	
Colour Sergeant.....	1.00	
Squad. Bat'l. or Co. Q. M. ....	1.00	
Private.....	1.00	
Corporal.....	1.00	
Bombardier.....	1.00	
Private, Gun.....	1.00	

Working Pay (including pay of recruit) shall be \$4.00 to \$6.00 per day, according to regulations, as prescribed in Articles 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100.

*Handwritten notes:*  
The 1st Battalion  
of the 1st Division  
is now at the front.

Officers & Enlisted Men  
of the 1st Division  
are now at the front.  
The 1st Battalion  
is now at the front.  
The 1st Division  
is now at the front.



Casualty Form—Active Service.

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

*HW*

Regiment or Corps *P. P. C. I.*

Regimental No. *11025* Rank *Pte* Name *Carleton L. G.*

Enlisted (a) *29-3-15* Terms of Service (a) *1 year or duration of war* Service reckons from (a) *29-3-15*

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) \_\_\_\_\_


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>Embarked</i>		<b>PRINCESS PATRICIAS CANADIAN LIGHT INF.</b>		<i>16-7-15</i>	
<i>24. 7. 15</i>	<i>2 Stry. Hp.</i>	<i>Adm: (Synovitis R knee)</i>	<i>2 Stry. Hp.</i>	<i>23. 7. 15</i>	<i>W. 3034.</i>
<i>31. 7. 15</i>	<i>2 Stry. Hp.</i>	<i>Transferred to</i>	<i>13 Stry. Hp.</i>	<i>31. 7. 15</i>	<i>W. 3034.</i>
<i>31. 7. 15</i>	<i>13 Stry. Hp.</i>	<i>Adm (Synovitis)</i>	<i>13 Stry. Hp.</i>	<i>31. 7. 15</i>	<i>W. 3034.</i>
<i>6. 8. 15</i>	<i>13 Stry. Hp.</i>	<i>Transferred to</i>	<i>England</i>	<i>6. 8. 15</i>	<i>W 3034</i>
<i>6. 8. 15</i>	<i>Hq. St. Pat.</i>	<i>admitted</i>	<i>Hq. St. Patrick</i>	<i>6. 8. 15</i>	<i>W 3034</i>
<i>25-3-16.</i>	<i>ocBattn.</i>	<i>Forfeits 1 days Pay, 21-3-16 for losing through neglect his smoke helmet.</i>		<i>21-3-16</i>	<i>B2069 Pt II orders No 15, d/- 9/16.</i>

*W. Danis*  
 OFFICER IN CHARGE  
 CANADIAN RECORDS SECTION G. H. Q.

COPIED  
 Archiv  
 over

(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, Shoering 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				
7-6-16.	oc Battn.	Killed in Action In the Field.		4 <sup>th</sup> June 1916.	File K. G. 137-82.6 Part II orders No 24 dt-14-16.
8-11-20.	List 568	Correct date death		3/4-6-16	 <i>E. M. Wright</i> Lieutenant for Lt Col. A. A. S.



Extract from List No. 569, dated November 15th, 1920.

1.

LIST OF CASUALTIES  
AND AMENDMENTS TO CASUALTIES  
CANADIAN EXPEDITIONARY FORCE.

#A11025      Pte.      CARLETON, Lionel Ganville      P.P.C.L.I.

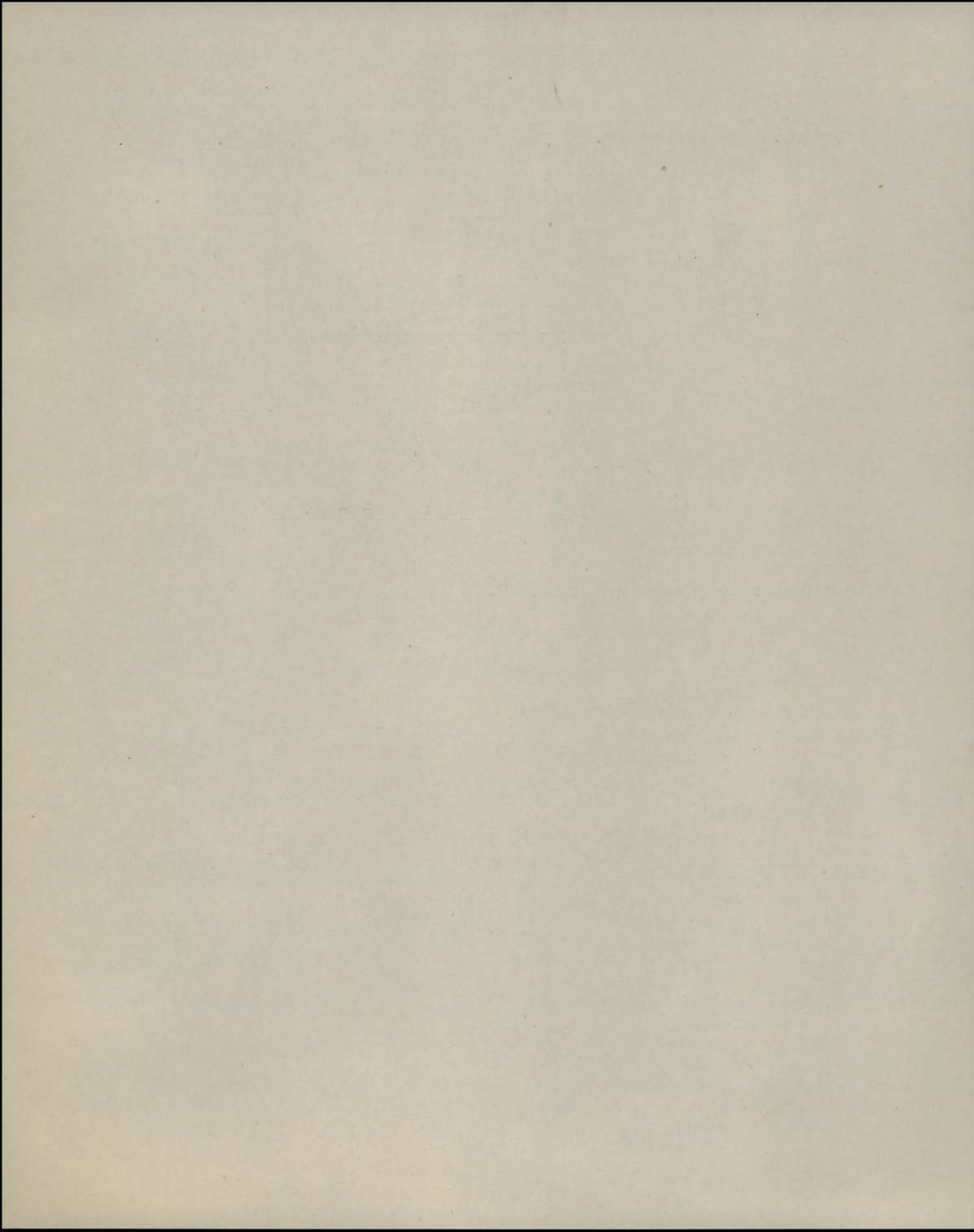
Reported on List 568, Killed in Action,  
2/4-6-16.      Correct particulars should  
read:

DIED OF WOUNDS: 3/4-6-16.

Entered on:    Casualty Form    *Noted*  
                  Casualty Card    *Noted*  
                  Record Sheet    *Noted*  
                  Index Card      *Noted.*

*Noted Pres.  
In. 17/20*







*Indexed*  
MEDICAL CASE SHEET.\*

T21(2)  
S/E

No. in Admission and Discharge Book.

Regimental No.

Rank.

Surname.

Christian Name.

11025

*Pte*

*Carlton*

*L. G.*

Unit.

Age.

Service.

Year

*P. P. C. L. I. = 11 CA.*

*26*

*11/12*

Station and Date.

Disease *Sprain of R. knee*

*Monks Horton  
Sept 15/15  
" 16*

*discharge to unit - recommendation for furlough.*

*Admitted 15/9/15 -  
Discharged 16/9/15.*

*Rest camp.*

*- Boulogne 2/8/15.*

*# 2. Genl H. Boulogne (8 days)*

*# 13 ~~clearing~~*

*clearing H. Boulogne (4 days)*

*# 2 War H. Birmingham 6 weeks - massage.*

*- C. C. H. Monks Horton*

*Discharged to unit.*

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.



Station  
and Date.

700  
21/6 17 28



Rank \_\_\_\_\_ Name **CARLETON Lionel Glenville** Reg'l No. **411025**  
 Unit **P.P.C.L.I.** If in perm. Corps, What Unit? \_\_\_\_\_ Married or Single **Single.**  
 Place and Date of Enlistment **Montreal, P.Q. 29th March, 1915.** Place of Birth **Co West Maeth. Ire.**  
 Name and Address, Next-of-Kin **Mrs C.M. Carleton, 377, Mance Street, Montreal.**

Relationship \_\_\_\_\_

Assigned Pay Monthly \$ \_\_\_\_\_ Payable to \_\_\_\_\_

Relationship \_\_\_\_\_

Separation Allowance \$ \_\_\_\_\_ Payable to \_\_\_\_\_

Relationship \_\_\_\_\_

Discharge, Date and Place **4/6/16** Reason **K.in.A.** Character **C.L. 374**



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							
July	31	31	1 <sup>00</sup>	31	31	10¢	3 10	2 05	36 15			20			20	16 15		
												20						
Aug	31	31	1 <sup>00</sup>	31	31	10¢	3 10		34 63	422		4 88				50 78		
Sept	30	30	1 <sup>00</sup>	30	30	10	3		33	468		58 39			63 27	20 51		
Oct	31	31	1 <sup>00</sup>	31	31	10	3 10		34 10	571		24 33			24 33	30 28		
Nov	30	30	1 <sup>00</sup>	30	30	10	3		33	622		14 60						
Dec	31	31	1 <sup>00</sup>	31	31	10	3 10		34 10	694		19 47		* 8	42 07	21 21	879p 11 No 2 Do. 2547	
										862		1 78						
										1542		3 49						
										1607		2 61						
1916																		
Jan	31	31	1 <sup>00</sup>	31	31	10	3 10		34 10	1664		2 61						
										1724		2 61						
Feb	29	29	1 <sup>00</sup>	29	29	10	2 90		31 90	1795		2 61						
										1865		2 62						
March	31	31	1 <sup>00</sup>	31	31	10	3 10		34 10	1932		2 62						
				275			27 50	258	30508			162621	8			17062	13446	

Stationery  
 SEP 30  
 Account rendered

Cash found in effects  
 No report

BALANCE TRANSFERRED TO NEW LEDGER  
 Suted







NAME

Carleton

Lt Col Glamville

H. Q. FILE No. 649-

REGT'L. No. A 110 25

RANK AND CORPS

Plt.

P. P. C. L. I. / Form 38<sup>th</sup> Bat

CABLE

NO.

DATE

NATURE OF CASUALTY

NO. 388

FOLL.

M8027

13-6-16.

Killed in action between June 2nd and June 11th

Rouen

22090a

14-6-16

" " " 2nd &amp; 4th - 6-16

Mach List

568

Correct date of Death

4 8-11-20.

3/4 - 6-16.



LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
✓ 148	No. 2 Stat. Boulogne	24-7-15	Synovitis, R. Knee
✓ 153	No. 2 Stat. Boulogne To No 13		
	Stat. Boulogne	31-7-15	Synovitis, R. Knee
158	2 <sup>nd</sup> Birmingham War. Northfield	6-8-15	Synovitis, Knee
194.	Cav. Corp. Monks Horton	15-9-15	Ipsae. of knee
190.	Cav. Corp. Monks Horton	16-9-15	Rise to unit for duty
2374	D. C. Bu. Depto	2/4-6-16	Killed in Action.



MARRIED

SINGLE

*Yes.*

WIDOWER

TRADE OR CALLING

*Railroading*

RELIGION

*Church of Eng*

DESCRIPTION.

APPARENT AGE

*26*

YEARS

*2*

MONTHS

HEIGHT

*6*

FEET

*1/2*

INCHES

CHEST MEASUREMENT .

*42.*

INCHES

EXPANSION

*4*

INCHES

COMPLEXION

*Fair*

EYES

*Blue*

HAIR

*Brown*

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

DATE



SURNAME. *Cauleton* (649-C.-3200) CARD NO. *649-6-17559*  
CHRISTIAN NAMES *Lionel Glamville*  
REGL. No. *A 11025* RANK *Pte.*  
UNIT ~~*38th 1st Reinforcement Draft Bn. P.P.C.L.I.*~~  
FORMER CORPS *Fort William 44852 Battalion*

D  $\frac{3}{4}$   
FOLL.  $\frac{6}{16}$

NEXT OF KIN.  
NAMES IN FULL *Cauleton Mrs C.M.*

CHANGE OF ADDRESS

RELATIONSHIP TO SOLDIER  
ADDRESS *377 Mance St. Montreal*

*Also notify Capt. P.G. Can.*

COUNTRY OF BIRTH *Ireland Devlin Co. Westmeath 1/2/1889*

PLACE OF ATTESTATION *Montreal* DATE *March 29/15.*

*Prev attest in 52<sup>d</sup> Bn # A 38111 Pte at Port Arthur 13/1/1915*

*6/8 29-5-15 93*



No.

RANK

*pte*

NAME

*Carleton L.*T. O. S. 16-3-15 D. O. 15 31-3-15 UNIT *5<sup>2</sup>nd. Battalion*

M. D. 10

## PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PAID  
FROMPAID  
TOSIG.  
OR  
REC'T

PARTICULARS

AUTHORITY

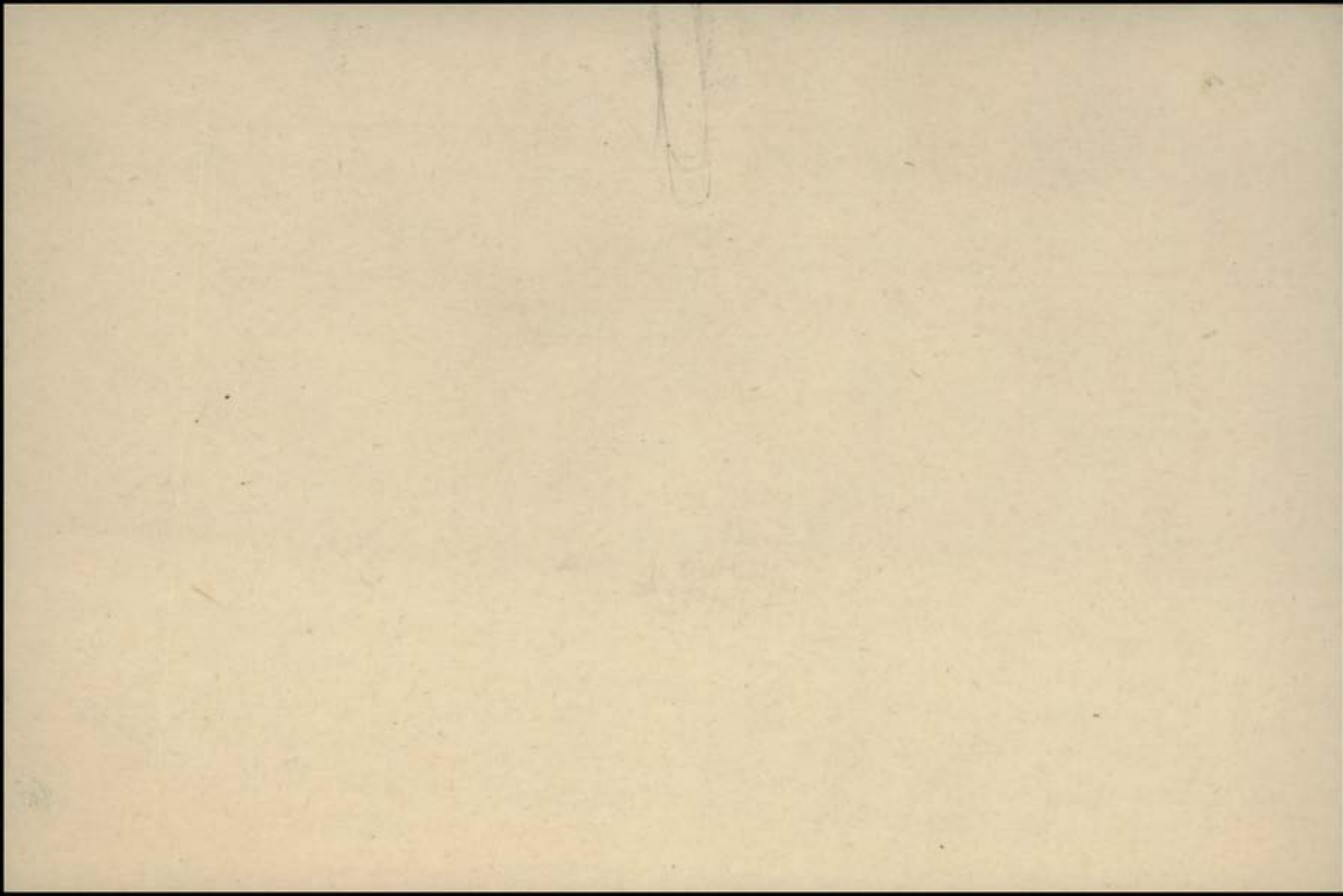
*1915  
Mar 16<sup>th</sup>**1915  
Mar. 25<sup>th</sup>**O.S.**Dischgd 25-3-14 on his own  
request.**No. 8 25-3-14.*

UNIT SAILED

NOV 23 1915

*a/c closed by payment (-\$)*







No

RANK

*Plt.*

NAME

*Carleton, L.*

T. O. S.

UNIT *44<sup>th</sup> Battalion, C. E. F.*M. D. *10.*

## PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

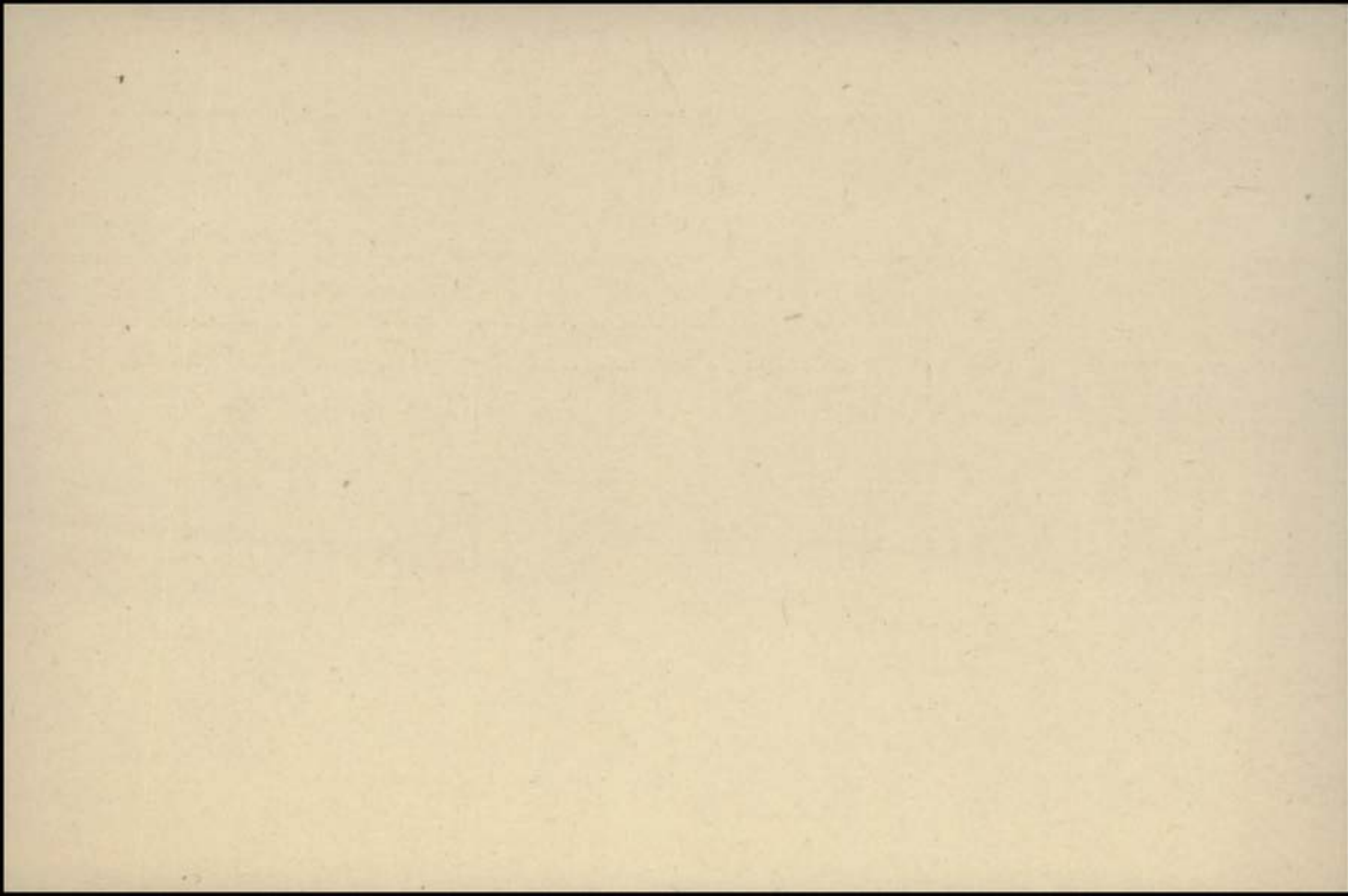
AUTHORITY

PAID  
FROMPAID  
TOSIG.  
OR  
REC'T*1915**1915**Mar. 1**Mar. 15*

✓

UNIT SAILED  
OCT 23 1915







No. 1125 RANK *Pte*  
 a 11025 april payroll

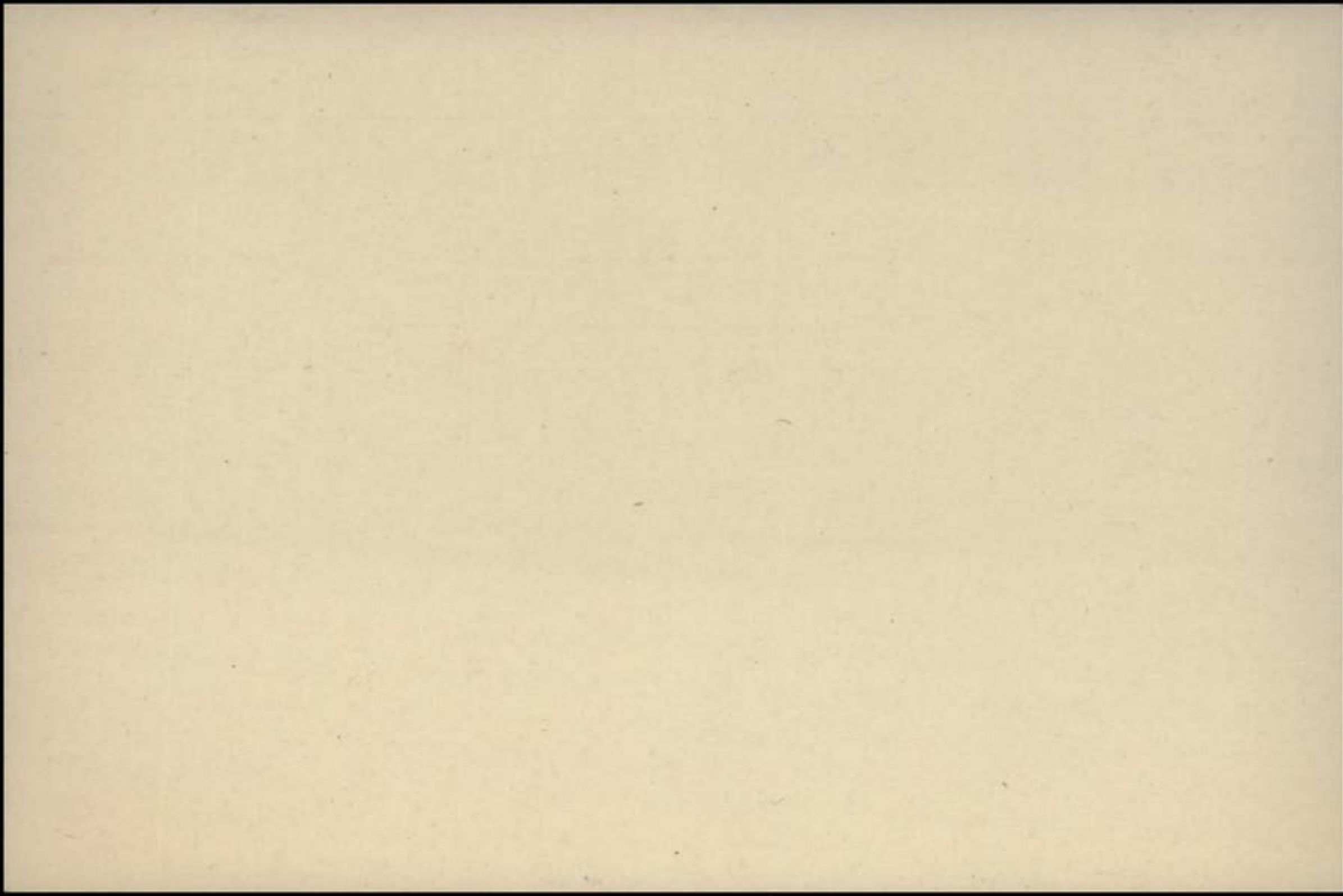
NAME *Carlton L G*

T.O.S. *29/3/15*  
*Mar payroll* UNIT *38th* *Battalion*

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i>	<i>1915</i>			
<i>Mar 29</i>	<i>Mar 31</i>	<i>✓</i>		
<i>April 1</i>	<i>April 8</i>	<i>✓</i>	<i>Proceeded to Ottawa 8-4-15</i>	<i>April payroll "D" Coy</i>
<i>April 8</i>	<i>April 30</i>	<i>✓</i>		
<i>May 1</i>	<i>May 24</i>	<i>✓</i>	<i>Trans. to "D" Coy. Mc Gill University Niagara-on-the-Lake Camp. Ont - 24-5-15</i>	<i>D.O. 73 of 26-5-15.</i>







~~M&H~~

Number

44025

Rank

Pte

Surname

CARLETON

Christian Name

Lionel Glenville

Units

P.P.C.L.D.

Theatre of War

France

Date of Service

17-7-15 D

Remarks

Mrs. Charlotte Carleton (mother)

Latest Address

374 Mansfield  
Montreal, Que.

Roll No.

*(Handwritten scribble)*

200m. - 6-21

Page 20079



# GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. NO.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA

DEPT. NOV 9 1922  
REG. NO. 48982



*Page*

649-C-3200.

Carleton, Lionel G. #A11025, <sup>pte</sup> P.P.C.L.I.

*Elig. for star Pte. P. P. C. L. I.*

Med. & Dec. (Mother)

Mrs. Charlotte M. Carleton,  
377 Mance Street,  
Montreal.

*M*

P. & S.  
*(Serial no. 760778.)*  
Mem. Cross.

Scroll Desp. **DEC 14 1920** Reqn. No. *74832*

**SEP 7 1921**

Plague Desp. \_\_\_\_\_ Reqn. No. *P5684*

*12*

*mf.*

*Desp 11. 11. 20. (m) @ 30163*



896

W



Name <sup>E</sup>CARLTON, L.G. Rank Pte.

Reg. No. A.11025

Unit Lionel Glenville.  
P.P.C.L.I.

R.L.25-C-1115.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
24-7-15	No. 2 Stal. Hos.	Boulogne.	Synovitis knee	148.		
31-7	No. 13. St.	"	" R. "	153.		
6-8	2nd Birmingham War	Northfield	" "	158.		
16-9	Can. Con Home	W. Toronto	Dist Unit	190		
15-9	" " "	" " "	Fract R. Knee	194		
16-9	Discharged to Unit			190		
2/4-6	O C Battery reports:-			A	M	
3/4-6	Killed in Action			374	8027.17/6/16	
	Corrected date - auth list #568			of 8-11-20.		

R.L.25.C.1115.



Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List



Surname

Christian Name or Names

Reg. No.

Carlton, L.

G.

211025

Rank  
Pte.

Unit  
P.P.C.H.I.

Co.

Troop

Batty.

Hospital

Date of Admission

#2 Sta. Boulogne

24. 7. 15

Transferred

#13 Sta. Boulogne

Hosp.

31. 7. 15

Northfield 2<sup>nd</sup> Birmingham War  
Monks Horton

Hosp.

6-8-15

Hosp.

15-9-15

Hosp.

Diagnosis

(1) Later Diagnosis (if changed)

(1)

(2)

(3)

Synovitis R. Knee. (fract)

Additional Diagnoses, if more than one state present

Knee in action 2/4. 6. 16  
of Bu reports

DISPOSITION

Date

Dis to unit For duty 16. 9. 15

C.L. 31. 7. 15 #148

C.L. 6. 8. 15 153

C.L. 18. 9. 15 190

Ch. 12. 8. 15 #158

Ch. 23. 9. 15 #194

Ch. 14. 6. 16 #21374

REMARKS

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

R



# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.







**Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.**

Date	Brief details, and signature
7;5;15 11.5.15 22.5.15	Typhoid Innoc;

**Table IV.—Service Table.**

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

**DUPLICATE.**

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only, Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

**MEDICAL HISTORY of**

Surname Garleton Christian Name Lionel Granville

**TABLE I.—GENERAL TABLE.**

Birthplace ... Parish Delow County Co. Westmeath Ireland

Examined ... { on 29th day of March 1915.  
at Montreal

Declared Age ... 26 years 2 months days.

Trade or Occupation ... Railroading

Height ... 6 feet,  $\frac{1}{2}$  inches.

Weight ... lbs.

Chest Measurement. { Girth when fully Expanded. ... inches.  
Range of Expansion. 45 inches.

Physical Development ... 4

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

When Vaccinated ...

Vision ... { R.E.—V=  
L.E.—V=

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

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

Approved by (Signature) W. S. Shannon  
(Rank) Capt.  
Medical Officer.

Enlisted ... { at Montreal  
on 29 day of March 1915.

Joined on Enlistment ...	<u>38th Battalion Cons. C.E.A.</u>	Regtl. No.
Transferred to ...	<u>P.P.C.L.I.</u>	<u>7 11025</u>

Became non-effective by ...  
on ... day of ... 191...

(Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_

This Medical History Sheet of all men proceeding overseas, must be returned by the Officer commanding their unit to the Record Office when they leave England.

W.F. WARD, Chief of Records, Canadian Consuls, London.



Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
2nd. B'ham War Hospital	6	8	15	15	9	15	Sprained r. knee	41	Still some weakness and requires Iodine and massage	E.L. Warner, Capt.
Can. Conv. Hosp. Monks Horton, Hythe	15	9	15	16	9	15			At Rest Camp, Boulogne 2/8/15 2nd. Genl. Hosp. Boulogne (8 days) 13 Clearing Hosp. Boulogne (4 days) 2 War Hosp. Birmingham (6 weeks) Massage C. C. Hosp. Monks Horton.  Discharged to unit	



