

ATTESTATION PAPER.

No. ✓

Folio. ✓ 0

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

C

1. What is your name? *Dion Ovila*
 2. In what Town, Township or Parish, and in what Country were you born? *Wotton P 2*
 3. What is the name of your next-of-kin? *John Dion*
 4. What is the address of your next-of-kin? *North Hatley P 2*
 5. What is the date of your birth? *June 4 1881*
 6. What is your Trade or Calling? *Laborer*
 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?..
If so, state particulars of former Service. *No*
 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*
- Ovila Dion* (Signature of Man).
John Dion (Signature of Witness).

41st BATTALION

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Ovila Dion*, 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.

Ovila Dion (Signature of Recruit)

Date *Feb 26* 1915 *John Dion* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Ovila Dion*, 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.

Ovila Dion (Signature of Recruit)

Date *FEB 27 1915* 1915 *John Dion* (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 *FEB 27 1915* day of 1914.

John Dion (Signature of Justice)

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

John Dion (Approving Officer)

Description of Deon Oveila on Enlistment.

Apparent Age 33 years 8 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. 7 1/4 ins.

1 Vaccination left arm
1 Tattoo left forearm

Chest measurement { Girth when fully expanded 35 1/2 ins.
 Range of expansion 3 ins.

Complexion medium

Eyes Brown

Hair Light Brown

Religious denominations. { Church of England.....
 Presbyterian.....
 Wesleyan.....
 Baptist or Congregationalist.....
 Other Protestants.....
 (Denomination to be stated.)
 Roman Catholic R.C.
 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 Feb 27 1915

H. J. [Signature]
C. M. S.
 Medical Officer.

Place Montreal

*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.

Oveila Deon 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.

Edmond [Signature] H. Col. (Signature of Officer)

Co. 41st Bat: F.C.

Date MAR 2 1915 1914.

u 13 7/10/18

- 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.....

(M)

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.

(H)

Name Dion Ovila
 Regt. No. 416490 Rank Pte
 Corps 23rd Res Bn

17397

Killed in action 13.6.18

(H)

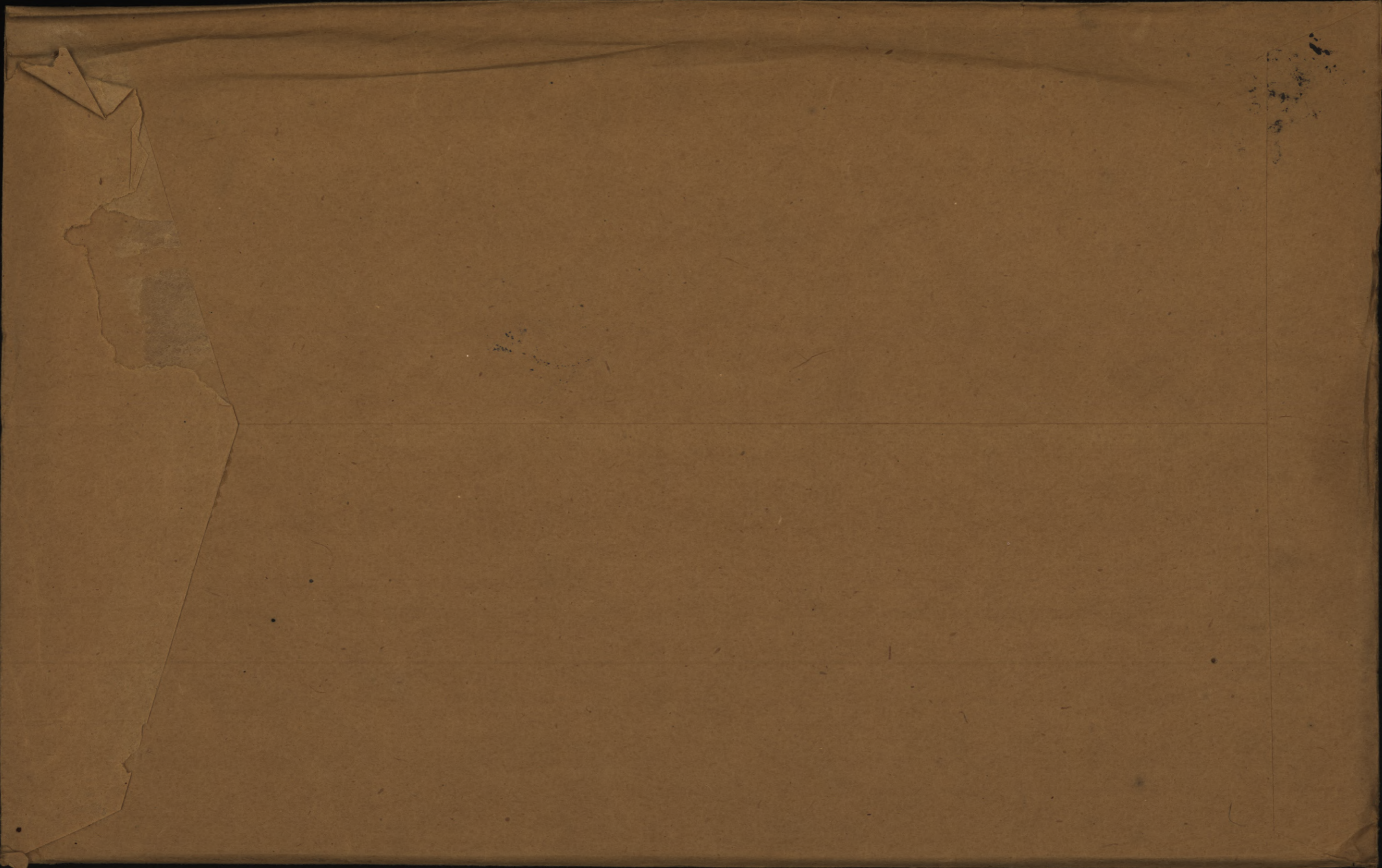
Pay Band

a PB 122-1
a PB 128-1

v/casat

2-31
23-31
28-31

2



Rank

Pte

Name DION Ovila

R/25-D-742.

Reg'l No. 4/16490

R-122.

Unit

41st Bn.

If in perm. Corps,
What Unit?

Married or Single Single

Place and Date of Enlistment Montreal 26th Feb. 1915.

Place of Birth Wotton Co. Wolfe Que.

Name and Address, Next-of-Kin John Dion North Hatley P.Q.

Relationship Father

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				
11.8.15	O.B. 23	Taken on st. 23rd	Shorncliffe	27.6.15	Pt II 188
26.8.15	- " -	Forf. 3 days PTA. 14 days No. 2 Field Pun. Absence	- " -	26.8.15	- " - 202
7.9.15	"	Proceeded to 3 rd	"	6.9.15	" 211 Pt II 31.3 rd Bn
11.10.15	6 D 181. 3 rd Bn	Not stated.	3 rd Bn Flamb	29.9.15	
18.10.15	. 187 "	"	2 "	4.10.15	Rejoined Unit
29.2.16	3 rd Bn	Sentenced to 7 days F.P. 101 for absent from billet at Falckon 7/2/16 returning at 9 a.m. 8/2/16. Forfeits 2 days pay by P.M.	France	9.2.16	A 2 O. 10
4.7.16	"	Missing believed Wounded Base		13.6.16	C.L. A 396.
21.7.16	"	to to after action	Field	13.6.16	P 2 O. 29.

mx
11/11/20m.g.



Am No 430653.

16/

REMARKS No. 15

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				
<i>le.</i>					
<i>2.2.17</i>	<i>3rd Bn.</i>	<i>Now reported killed in action</i>		<i>13.6.16</i>	<i>M 2 O. 12.</i>
<i>7.2.17</i>	<i>"</i>	<i>— do —</i>		<i>13.6.16</i>	<i>C.L. A566.</i>

226
9.1.

Casualty Form—Active Service.

416490. Regiment or Corps 23rd Reserved Batt. C.E.F.

Regimental No. A16490 Rank Pte Name Dion Avila

Enlisted (a) 20.2.15 Terms of Service (a) _____ Service reckons from (a) 20.2.15.

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				
7-9-15	3. G.B.D.	Draft for.	3 rd CANADIAN INF. BATTALION	7.9.15	K. 7-7-3.
19.9.15	3rd. Bn.	Joined	Unit	18.9.15	B. 213.
3/10/15	"	(To Hospital.)	3.6-7. Ambce.	29/9/15.	B.213.
3/10/15	O.C. 3rd. Ambce.	Inj. Knee. (To duty) 7/10/15.	—	29/9/15.	A. 36.
10/10/15	O.C. 3rd. Bn.	Rejoined	Unit	4/10/15.	B. 213.
10/2/16	O.C. 3rd. Bn.	Absent from Biller at Tattoo 7/2/16, returning at 9 a.m. 8/2/16.		7-2-16.	B. 2069. Part II Orders No. 10. of 29-2-16
18.6.16	" "	Sentenced to 7 days I.P. No. 1. 9/2/16. Forfeits 2 days pay by R.W. Missing, believed wounded from 15.6.16.		15.6.16.	B. 213. D.C. 378. Pt. 11. O. 39. 21.7.16.

(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, Shoening Smith, etc., etc., also special qualifications in technical Corps duties.

No. 416490. Dion, O.

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				
					<p><i>[Signature]</i> LIEUT. FOR COL. A.A.G.</p>
2.2.17.	3rd Bn.	Now, <u>Killed in Action</u>	Field	13.6.16.	Pt. II. 12. <i>W. Hooper</i> Lieut., for Lt.-Col. <i>yc</i> Records, O.M.F.C.

*Amr
Ham*

Number 416490 Rank Plt.

Surname Dion

Christian Name Orville

Units 3rd - Am. Com. of Theatre of War France

Date of Service 06-9-15 D

Remarks (Father) John Dion

Latest Address North Hatley,
P.Q.

Roll No. B page 16870

200m.-2-21.M.

(Handwritten marks: a large 'X' and other scribbles)

(This form to be filled in by all ranks on voyage to Canada.)

RANK SURNAME INITIALS UNIT

al address. (Street) (City or Town) (Province)

one person to be notified of arrival

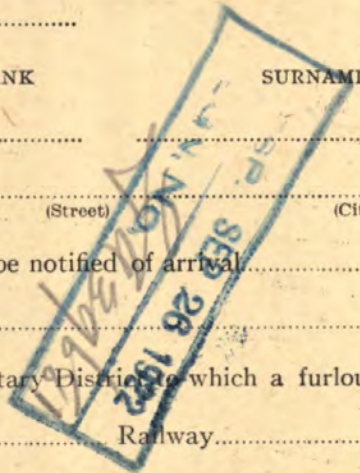
Station in Military District to which a furlough warrant is required

Railway

d, is your wife on board. Number of children on board

ination

(Sgd.)



No. 16490 RANK Pte

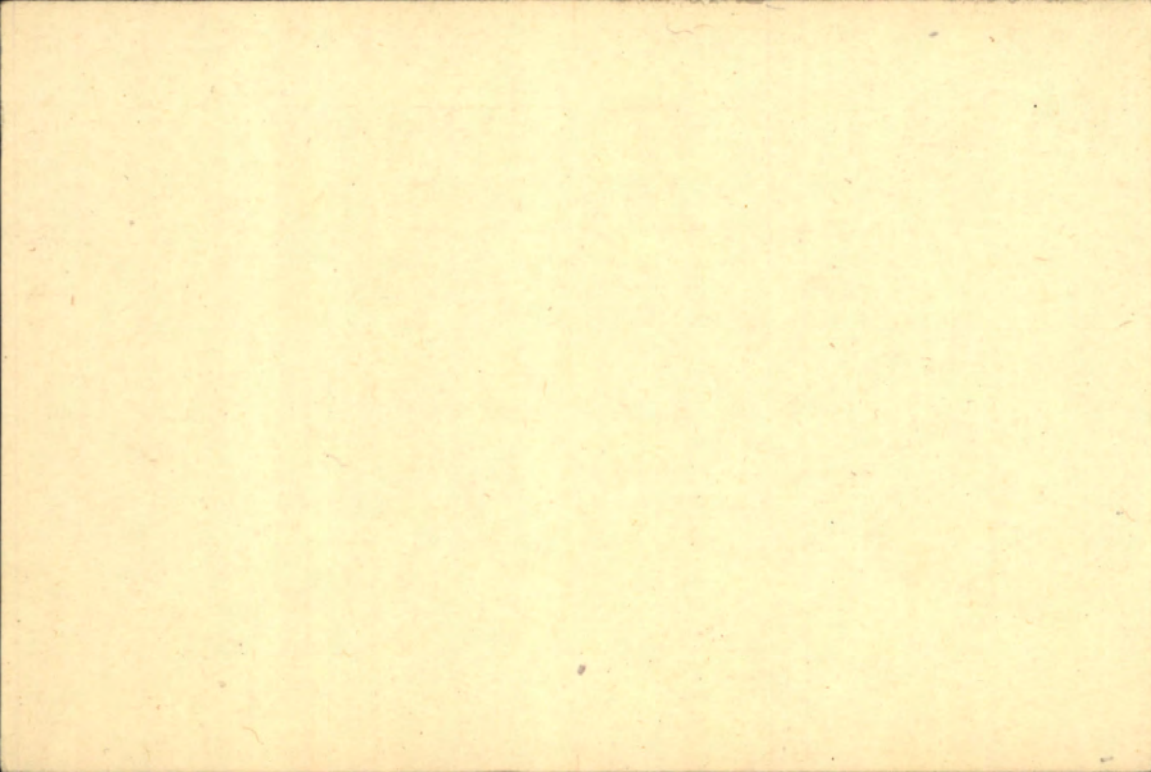
NAME Dion O'Neil

T. O. S. 27-2-15 - UNIT 41st Bn. (Montreal Det)
April Paylist

M. D. J-

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 Feb. 27	1915 Feb. 28	✓		
Mar. 1	Mar. 13	✓		
" 14	" 31	✓	168 Lrs. Det. Mar. 26th	D.O. 14 of March. 14th.
April		✓		
May		✓		
June		✓	O/A 17-6-15.	SO. 85 of 18-6-15.

UNIT SAILED
OCT 18 1915



Name Dion, O. *vila* Rank Pte. Reg. No. 416490

Unit 3rd Battalion. File R.L.25-D-742

Next of Kin CANADA.

Date	Movement	Place	Casualty	List No.	Notified N/K.O.	W.O. List
1915						
29 9	3 C.F.A.		Not stated	181		
4 10	<i>Rejoined unit</i>			<i>187</i>	<i>11</i>	
13-6-16	<i>Reported missing</i>	<i>Believe Wounded</i>		<i>1396</i>	<i>9229</i>	
13-6-16	Now reported	Killed in Action		A566	08512	7-2

649-D-837

CARD NO.

D

SURNAME.

Lion.

CHRISTIAN NAMES

Ovila.

REGL. NO. ~~A. 16490~~ 4.16490. RANK

Pte.

UNIT

~~1st (1st P. D) 23rd 3rd~~

Bn.

FORMER CORPS

Nil.

NEXT OF KIN.

NAMES IN FULL

Lion. John.

RELATIONSHIP TO SOLDIER

ADDRESS

North Hatley P. Q.

Also Notify Mrs. S. Duchesne (sister)
18 Ball St., Shebrooke P. Q.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada, Kotton P. Q.

DATE

PLACE OF ATTESTATION

Montreal P. Q.

DATE

Feb. 27th. 1915.

 $\frac{1}{5}$ 17-6-15, 124A
2.

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

Surname *Dion* Christian Name or Names *O.* Reg. No. *416490*
 Rank *Pte* Unit *3rd Batten* Co. Troop Batty.

Hospital *No. 2. Can. Fld. Amb.* Date of Admission

Transferred *# 3rd Can Fld. Amb* Hosp. *39-9-15*

Hosp.
 Hosp.
 Hosp.

Diagnosis *Not stated*

- (1) Later Diagnosis (if changed)
- (2)
- (3)

Additional Diagnoses: If more than one state present

now killed in action 13.6.16

DISPOSITION

Rejoined unit. 4/10/15
 Date

Ch. 11-10-15 #181⁽¹⁾ 187
C.L. 18/10/15
" 4.7.16. #396.
7.2.17 4566.

missing. believed wounded
13.6.16
 REMARKS

A.M.D. 2 DEPT.

Off. of D.G.M.S. & M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 13
20m.—5-15.
H. Q. 1772-39-819.

To Whom *John Dion,*
Address *298 W. Jeff, St.
Montreal; PQ*

By Whom Assigned *Dion Ovila*
Regtl. No. *416490.*
Rank *Pte.*
Corps *41st. Battalion*
1st-Draft

Rate *\$10.00* JUL 1915

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 2px solid black; padding: 5px; display: inline-block;"> <i>Casualties</i> </div>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July		<i>Q4788</i>	<i>10 00</i>	
Aug.		<i>S 1341</i>	<i>10 -</i>	<i>Missing June 13/16 C-L 4/7/16 JB</i>
Sept.		<i>V 2451</i>	<i>10 00</i>	
Oct.		<i>W 1203</i>	<i>10 00</i>	<i>Now killed in action 13 June 1916</i>
Nov.		<i>Q 4210</i>	<i>10 -</i>	
Dec.		<i>Z 6083</i>	<i>10 -</i>	
Jan.	1915	<i>Z 11059</i>	<i>10</i>	
Feb.		<i>K 14158</i>	<i>10 -</i>	
March		<i>S 16304</i>	<i>10</i>	
			<u><i>90 00</i></u>	

[Faint, illegible handwritten text]

21 1000

21 1000

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 60m.-12-15.
 1772-39-819.

132

Sheet No. 2.

John Dion

Name of Soldier

Dion Orila

41st Battr 1st Dft.

L. I. Job 8002.—Req. 6216

PAYMENTS.

Alb. R. B.

Month.	Year.	Cheque No.	Amt.	Remarks.
			90	\$10 ⁰⁰
April	1916	P 1131	10	<i>Subsistence</i>
May		P 3900	10	
June		P 1116	10	
July		S 7015	10	
Aug.		L 12072	10	Account to close Aug 31/16
Sept.				Account closed Chq
Oct.				Stop 1/16 3 PM 4/16.
Nov.				Missing. 21/9/16 D.M.B.
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

F.V. Rend: L. *Kala* 140⁰⁰
 E.F.X. " *Dup* 19.7.12 *KUP*

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.				

N. A. Q.

DION, Pte. Ovila, #416490, 3rd Bn. H.Q. 649-D-837.

M. & D. (Father) John Dion,
North Hatley, P.Q.

P. & S. " Ditto.
(Ser # 785950)
Mem. C. Nil.

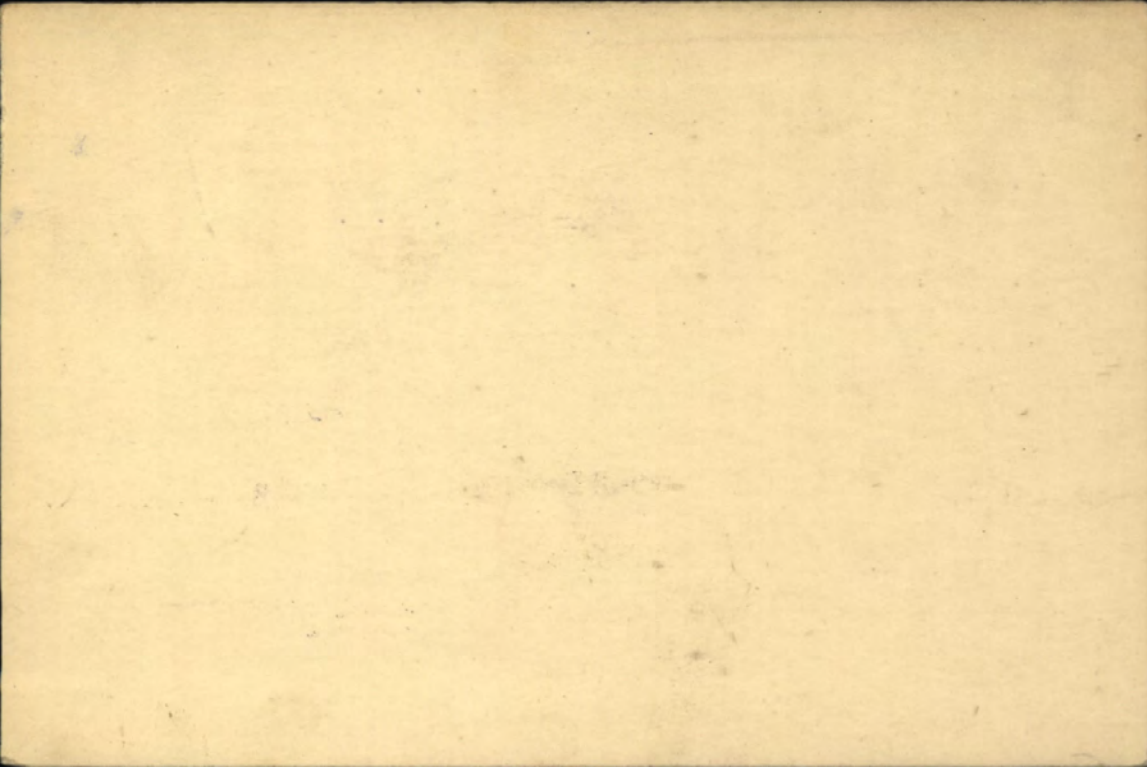
scroll Dec. 1 - 1921 Regn. No. 24185

Plague Des. JUL 5 - 1922 Regn. No. P41629

French

31954

Elig. for star Pte. 3rd Bn.
" " Y.M.
Mf. " B.W.M.



NAME

Dion Ovila

RANK AND CORPS

Pvt 3rd. Batt. (1st. Cav. Div.) (Form 41...)

CABLE

NO.

DATE

"C"

NATURE OF CASUALTY

NO.

923

FOLL.

M9229 3-7-16

Reported missing believed
wounded June 13th/16.

08512 6-2-17

Prev. rep. missing believed wounded now
killed in action June 13th 1916. ✓A.S.B. 2090^aKilled in action June 13th 1916.

Rouen 2-2-17.

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

187.	Rejoined unit	4-10-15	Not stated.
R396	Rept'd from the Base,	13-6-16	Missing, believed wounded
a566.	Crew. rept. missing	13-6-16	believed wounded now rept. killed in action.

DUPLICATE.

Army Form B. 178.

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 DION, Christian Name Ovila.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Watton County Wolfe, Que.

Examined ... { on 27th day of February 1915.
at Montreal.

Declared Age ... 33 years 8 months days.

Trade or Occupation ... Labourer.

Height ... 5 feet, 7½ inches.

Weight ... lbs.

Chest Measurement { Girth when fully Expanded. 35½ inches.

{ Range of Expansion 3 inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left
Number 1

When Vaccinated ...

Vision ... { R.E.—V= Anti-Typhoid Inoculations etc.,
L.E.—V= 6-3- 14-3-

(a) Marks indicating congenital peculiarities or previous disease ... { (a) Tattoo left fore-arm.

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

Approved by (Signature) R. Tessier,

(Rank) Captain. A.M.C. Medical Officer.

Enlisted ... { at Montreal.
on 27th day of February 1915.

Joined on Enlistment ...	Corps.	Regtl. No.
Transferred to ...	<u>23rd Res. Battn:</u>	<u>416490.</u>
	<u>3rd Battn:</u>	

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 on 191 day of

(Signature) W. R. WARD,
(Rank) Officer in Charge of Records,
Canadian Contingents.

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

List in the case of Warrant Officers treated in quarters.

Records 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

Rank

Name

DION Ovila

Reg'l No.

A/16490

R-56

Unit

1st Bn.

If in perm. Corps,
What Unit?

Married or Single

Single

Place and Date of Enlistment

Montreal 26th Feb. 1915.

Place of Birth Wotton Co. Wolfe Que.

Name and Address, Next-of-Kin

John Dion North Hatley P.Q.

Relationship

Father

Assigned Pay Monthly \$

10.00 1/7/15

Payable to

John Dion

298 Wolf. St. Montreal P.Q.

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Killed in Action 13-6-16 bda 566

Reason

Character

4-2-17



Statement of
MAY 4 1917
Account rendered

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						
July 1	31	31	1	31	31	10	3 10			263,340	20	10	30	4 10	
Aug 1	31	31	1	31	31	10	3 10	4 10	53	263,340	9 73	10	19 73	4 63	
Sept 1	30	30	1	30	30	10	3	19 00		52 00		10	10	42 00	Sept 30/15 Dues 15 3 = Batt.
" 10	31/10	31	1	31	31	10	3 10			34 10		7 08	17 08	59 02	
" 11	30/11	30	1	30	30		3			33		5 34	15 34	76 68	
" 12	31/12	31	1	31	31		3 10			34 10		19 65	29 65	81 13	
1916 " 11	31/11	31	1	31	31		3 10			34 10		5 24	15 24	99 99	
" 12	29/12	29	1	29	29		2 90			31 90		5 22	25 12	106 77	7 days of C. No. 10/10 2 C. No. 7/11 3/2/10
" 13	31/3	31	1	31	31		3 10			34 10		5 23	15 23	125 64	
				275			27 50			53 303 03		77 49 96	9 90	177 39 125 64	

Checked *St. Lawrence*

Cash effects N. R.

BALANCE TRANSFERRED TO NEW LEGER

