

2nd DEPOT BN. 2nd QUEBEC REGT.

ATTESTATION PAPER.

No. 31565

Folio.

TRIPPLICATE

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- | | |
|---------------------------------------------------------------------------------------------------|----------------------------------|
| 1. What is your surname?..... | Lasante |
| 1a. What are your Christian names?..... | Hermidas |
| 1b. What is your present address?..... | St. Prospero Co. Champlain, Que. |
| 2. In what Town, Township or Parish, and in what Country were you born?..... | St Prospero Co. Champlain, Que |
| 3. What is the name of your next-of kin?..... | Zotique Lasante |
| 4. What is the address of your next-of-kin?..... | St Prospero Co. Champlain, Que |
| 4a. What is the relationship of your next-of-kin?..... | Father |
| 5. What is the date of your birth?..... | 17th September 1882 |
| 6. What is your Trade or Calling?..... | Laborer |
| 7. Are you married?..... | Single |
| 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... | 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 H L |
| 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 |
| 13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. | NO |
| 14. If so, what was the nature of the disability?..... | NIL |
| 15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?..... | NO |
| 16. If so, what was the reason?..... | NIL |

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Lasante, Hermidas, do solemnly declare that the above are answers made by me to the above questions and that they 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.

Hermidas Lasante (Signature of Recruit)

Date February 16th 1918. H. Gauhin (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Lasante, Hermidas, 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.

Hermidas Lasante (Signature of Recruit)

Date February 16th 1918. H. Gauhin (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, Que this 20th day of February 1918.

M. Dubouché Capt. (Signature of Justice)

Description of Lasante, Hermidas on Enlistment.

Apparent Age.....35 years5 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. 6 ins.

Chest measurement { Girth when fully expanded.....40 ins.
 Range of expansion.....3 ins.

Complexion.....Clear

Eyes.....Blue

Hair.....Brown

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

R. D. =	<u>20</u>
L. D. =	<u>30</u>
R. EAR	
L. EAR	<u>OK</u>

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.

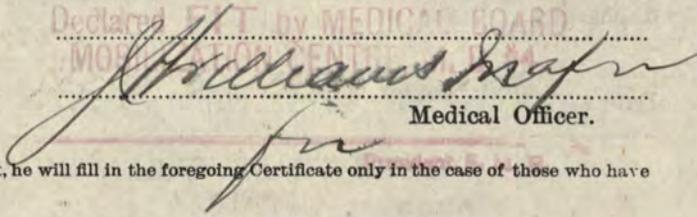
I consider him*.....for the **Canadian Over-Seas Expeditionary Force.**

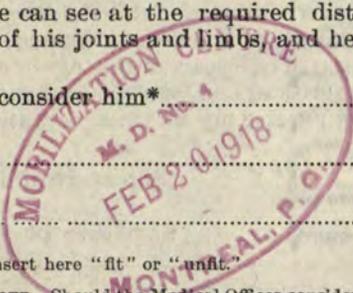
Date.....1918

Place.....

*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:—

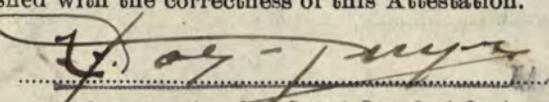
Declared **FIT** by MEDICAL BOARD
 MOBILE MEDICAL SERVICE

 Medical Officer.



"A" Fit for General Service

CERTIFICATE OF OFFICER COMMANDING UNIT.

.....Lasante, Hermidas.....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)
 Commanding 2nd Depot Bn., 2nd Quebec Regt

Date.....February 16th.....1918.

REGIMENTAL DOCUMENTS

NAME

Rasante

REGT. NO.

156369

UNIT

H. Q. FILE NO.

(H)

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

DEATH

Category

DISCHARGE

Category

DESERTION

10795

(53418)

(1)

27-16

25-17

3-18

1

(H)

(S)

2

*M. X.
28-2-20*

3156369

I.D. number

No. d'identification

LASANTE

Surname

Nom de famille

HERMIDAS

Given names

Prénoms

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

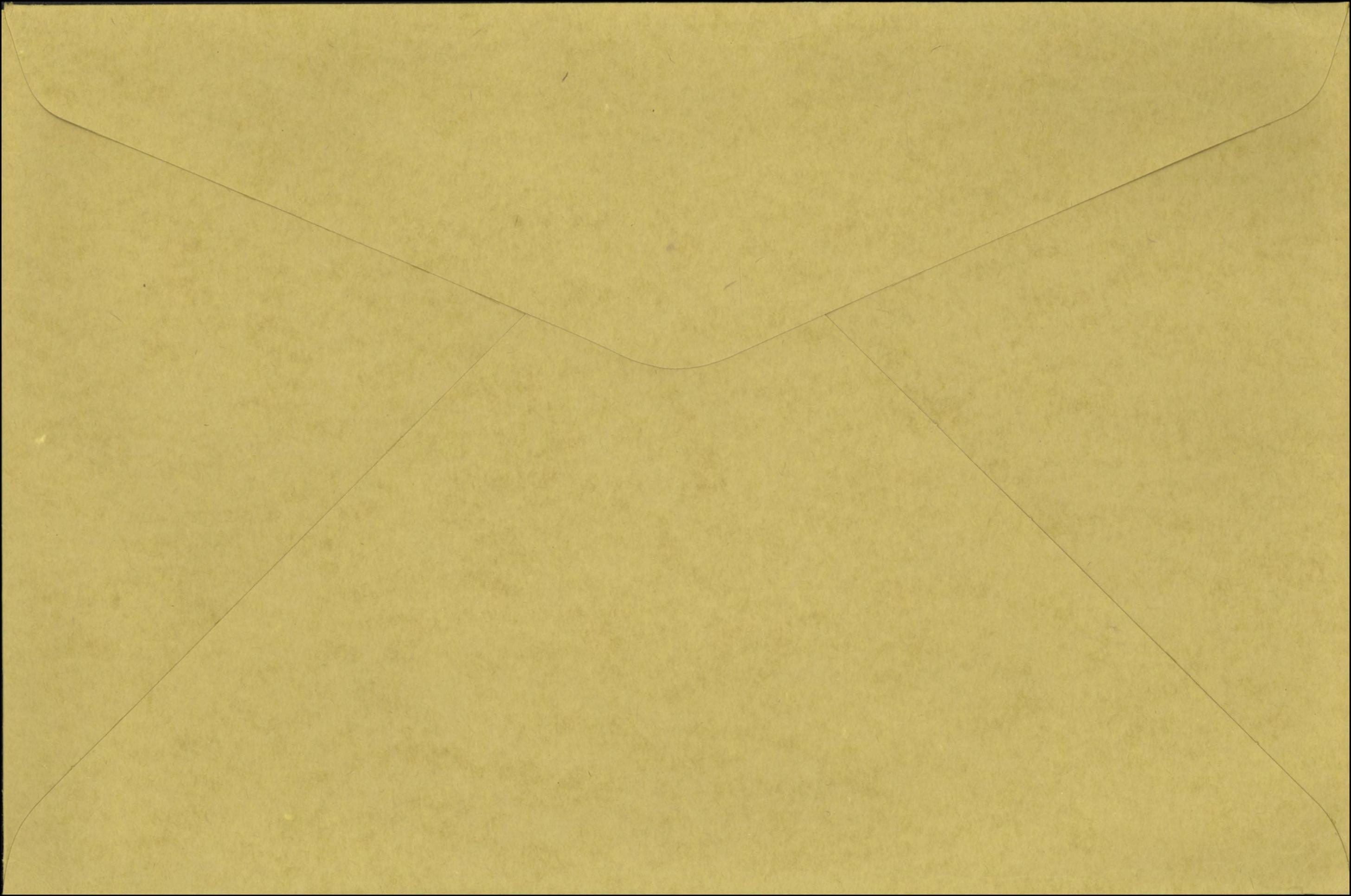
**PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL**

Location

Lieu

5418

**« CONTENTS CONFIDENTIAL »
« CONTENU CONFIDENTIEL »**



Lasante Pl. Hermidas # *3156369-22nd Am*
Name & Address of Legatee

M

Di
Pl

Name & Address of Next of Kin

P.S.
109

Name & Address of Female Next of Kin

Plaque Desp. Regn. No. *1253*
JAN 20 1921
Scroll Desp. Regn. No. *11508*
JAN 20 1921

Lasanté Pte H. ^{Herminidas} 3156369 649-L-15741
Not eligible for 1914-15 star ^{2nd Rev} 300

medals + dec Mother -
as trustee of father's will -
Mrs. C. C. Lasanté
of J. A. Mireault
Esq. N. P.
St. Prosper
Champlain Co. P. Q.

M

P. & S. Mother - as above
Serial No. 468061
00347

C. & S. Mother as above
not mentioned

Desp MAY 5 1920 66554

Evans

80

a. m. m.
MJ

3
X

Number. 3156369 Rank . Plt

Surname. LASANTE

Christian Name. Hermidas

Unit 2nd Bn. Can. Inf. Theatre of War. France

Date of Service. 13 - 8 - 18 D

Remarks.

Latest Address . . . Mrs. C. C. Lasante

. P. O. J. A. Mireault, Esq. M. P.

Roll No. B Page 4686
St. Prosper
Champlain Co. P. Q.

QV 46870 DM

AUG 26 1921

Hermidas ✓ L. 2839. 5 ✓

Name LASANTE

Rank Plt ✓

Reg. No 315 6369.

Unit 22 Bn ✓

Next of Kin ~~Zotique~~ Lasante, St Prosper Co.

ZOTIQUE ✓

Champlain, ✓

Quebec, Can ✓

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
29-8	42 b.b. St	SW	DIED OF WOUNDS Abdomen	A318	(4-9)	P136676 H 276
	Correct Reg No to read	315	6369	A330		Reeds

No. 3156369 RANK Pte

NAME

Lasante Hermidas

T. O. S. 16-2-18

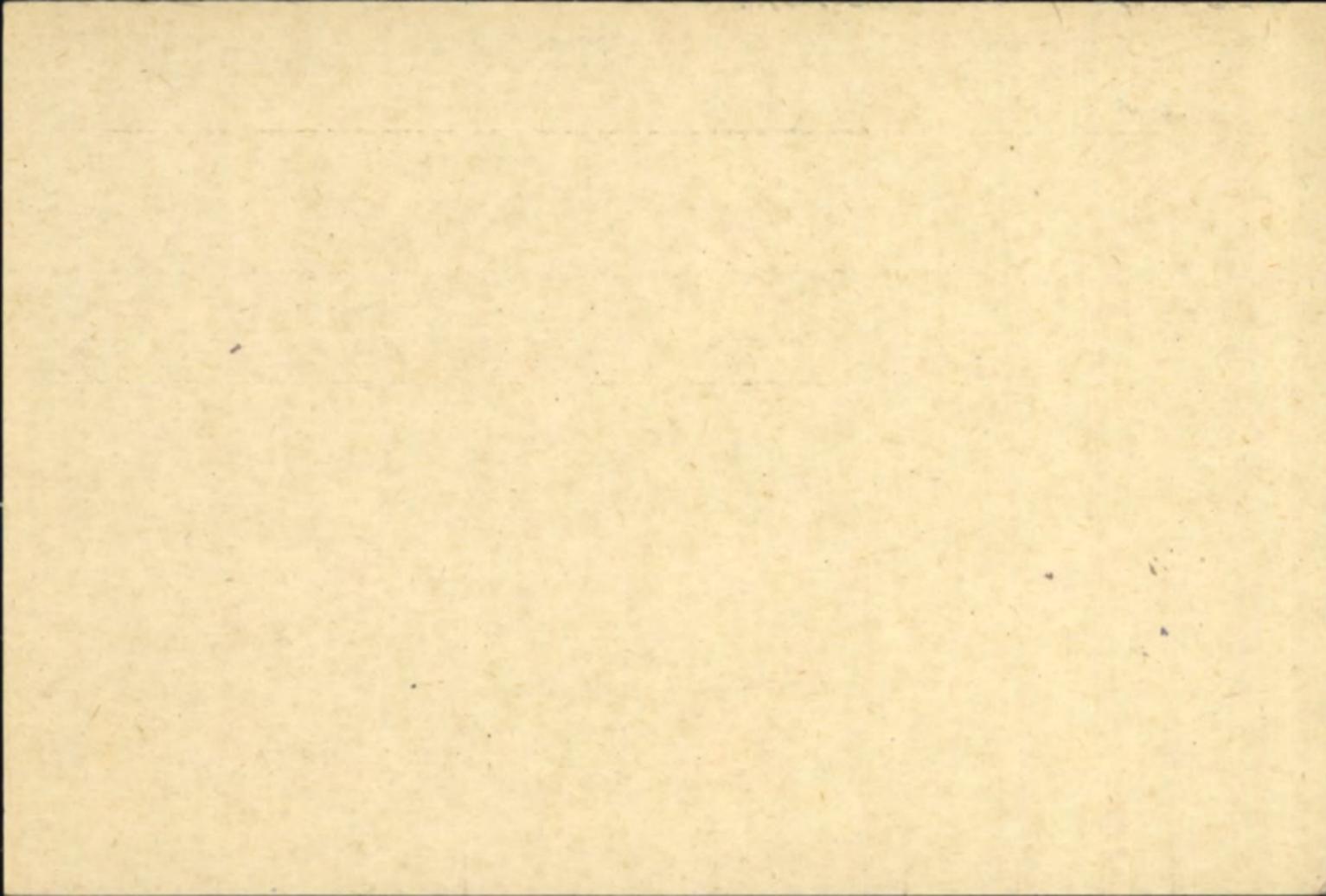
UNIT

2nd Depot Battalion 2nd Cebu Regt,

DD 52 of 2-18

M. D. 4,

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 Feb 16	1918, Feb 28 mar	c c	Overseas 21-3-18	DD 80 of 21-3-18



REGT'L. No. 3136369

H. Q. FILE NO 649

NAME Lasante Hermidas

RANK AND CORPS Pte 22nd Bn form 2nd Que Regt 2nd Dep Bn

FOLLOWS
No. 2
FOLLOWS

CABLE

NATURE OF CASUALTY

NO. DATE

NO.	DATE	NATURE OF CASUALTY
<u>84-5</u>		
<u>#294</u>	<u>6-9-18</u>	<u>D of W 42 l. b. l Aug 29th/18</u>
<u>#29310¹</u>	<u>4-9-18</u>	<u>G I W abdomen</u>

Yotique Lasante (Father) St Prosper Champlain Co P. 2

LIST No.

HOSPITAL

**DATE OF
ADMISSION**

REMARKS



SURNAME.

Lassante.

4.

CARD NO.

4

CHRISTIAN NAMES

Herminidas.

FOLL.

REGL. No.

3156369.

RANK

pte.

UNIT

T. O. S. *Feb. 21.* 1918.D.O. Part II No. *52.*

FORMER CORPS

Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

RELATIONSHIP TO SOLDIER

ADDRESS

*Lassante Botique.**Father.**St. Prosper, Champlain
Co, P.Q.*

COUNTRY OF BIRTH

Canada.

DATE

St. Prosper *Sept. 17th 1882.*

PLACE OF ATTESTATION

Montreal, P.Q.

DATE

*Feb 20th 1918.**O/S. 25-3-18 1133**H*

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M. -11-16. H. Q. 1772-39-339.

MARRIED

SINGLE

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

ORIGINAL

3156369

ORIGINAL

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet which will be handed to him, must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Lasante Christian name Hermidas
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule.....
3. Consecutive number on schedule of men reporting for service (if he appears) on it).....
4. Address (including street and number, if any)..... St. Prospere Co. Champlain Que

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the _____ day of _____ 1917, by the undersigned medical board sitting at _____

5. Age as stated 35 Years 5 Months. 6. Apparent age _____ Years _____ Months
7. Height 5 Feet 6 Inches. 8. Weight 146 Pounds.
9. Chest measurement { Minimum 37 Ins. 10. Complexion Clear Eyes Blue
Maximum 40 Ins. Hair Brown
11. Physical development. Good { Good Fair Poor 12. Smallpox marks None
13. Number of vaccination marks { Right arm _____ 14. When vaccinated last Child
Left arm 1 MONTREAL, P. Q. FEB 20 1918

16. Slight defects but not sufficient to cause rejection
The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis
(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2
17. (a) Vision R. 20 L. 30
(b) Hearing. R. normal
H. H. H. H. President.
H. H. H. H. Member. H. H. H. H. Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>2/2/18</u>		<u>E. Palanch Ph M.O.</u>	<u>2/2/18</u>	<u>TBS</u>	<u>E. Palanch Ph M.O.</u>
		<u>M.O.</u>	<u>2/3/18</u>	<u>TBS</u>	<u>E. Palanch Ph M.O.</u>
		<u>M.O.</u>	<u>2/3/18</u>	<u>TBS</u>	<u>E. Palanch Ph M.O.</u>

Joined 8 day of February 1918 at Montreal, Que

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>2nd DEPOT BN. 2nd QUEBEC REGT.</u>	<u>3256369</u>		<u>16-2-18</u>
Transferred to.....	<u>22 BN</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
	<u>12 1918</u>		<u>FIT</u>
	<u>MAR 19 1918</u>		<u>FIT</u>

N. B.—This sheet is 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.

Signature of Man H. Hermidas Lasante

CR. Rank **4th Dft. 2nd En** Name **LASANTE, Hermidas.** Reg'l No. **3106369.**
 Unit **QUE** If in perm. Corps, }
 What Unit? } Married or Single **Single.**

Place and Date of Enlistment **Montreal, Feb. 16th. 1918.** Place of Birth **St. Prosper, Que.**

Name and Address, Next-of-Kin **Zotique Lasante,**
St. Prosper, Co. Champlain, Que., Canada. Relationship **Father.**

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

NJE R.G. No. **13413**
 File No. **254-2839/289/18**
DIED OF WOUNDS
 Category

Discharge, Date and Place Reason Character

H. W. & V., Ltd.—9546-16.

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	3-4-18	S/S G-AMPIAN	
16-4-18	10 Res.	J. O. S.	Beholt	13-4-18	D.O. 87.
12-8-18	-	sent to 22 Bn	P/O "	12-8-18	189 + 100 82 = 308 82
4-9-18	22 Bn	Died of Wounds	Quid	29-8-18	Quid 854 Que bld 30 d/4 9/8



in only.—Unit, Number, Rank and Name.

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

500M.—9-16

H. Q. 1772-39-910.

Casualty Form—Active Service.

Unit, Regiment or Corps. *4th Bn* **2nd DEPOT BN. 2nd QUEBEC REG'T.**

Regimental No. **3156369**

Rank. **Private**

Name. **LASANTE Hermidas**

C. E. F.

Enlisted (a) **16-2-18**

Terms of Service (a) **GEF. 10 of Ch.**

Service reckons from (a) **16-2-18**

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) **Labour**

Report Date	From whom received	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
-------------	--------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------	------	-----------------------------------------------------------------------------------

Embarked
Arrived

Canada
England

24/1/18

3.4.18

3/4/18

11-8-18

10th. Can. Res. Battn.

13th/18

15th/18

W. T. Crampian

D. O. P. 11 87.

D. P. 11. O. 189

Ass-Adj.

A 124 P 20 82 of 30.8.18

NR. 1549.

CERTIFIED CORRECT.
 16/4/18
 12-8/18
 AUG. 1918
 REGTS. LONDON.

13.8.18
13.8.18

G. I. B. D.

C. I. B. D.

C. C. Rein. C.

22nd Bn.

Arrived & T. O. S. 22nd Bn.

Left for C.C. Rein. C.

Arrived.

Left for Unit

Arrived

France

Field

Field

Field

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

932

M

10.13.
~~RECOPY~~

FORM OF WILL

I, Lasante, Hermidas (Name in full)
Regimental Number 3156369 2nd Depot Bn^o 2nd Quebec Regiment
serving in

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I devise all my real estate unto

Zotique Lasante
St. Prospere Co. Champlain, Que.
Canada

Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

Zotique Lasante
St. Prospere Co. Champlain, Que.
Canada

Name and Address
of person or
persons to receive
personal estate*
(See note).

NOTE

This space for the
appointment of
Executor if
necessary.

IMPORTANT NOTE

This must be signed
and Dated by
THE SOLDIER
HIMSELF.

this 21 day of Levrier A.D. 1918

Hermidas Lasante Signature of Soldier.

*N.B. Personal estate includes property, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness Pache Alfred Montreal

Address of Witness Peel Street Barracks

THE TWO
WITNESSES

Occupation of Witness Soldier

MUST
SIGN HERE

Signature of Second Witness P. Demin

Address of Witness Peel St Barracks Montreal

Occupation of Witness Soldier

FORM OF WILL

Registration Number

of the Canadian Expeditionary Force to hereby revoke all former Wills by me made

and to declare this to be my last Will.

I desire all my real estate

to be divided equally among my children

and my personal effects to be divided

equally among my children

and my personal effects to be divided

equally among my children

and my personal effects to be divided

equally among my children

and my personal effects to be divided

equally among my children

and my personal effects to be divided

equally among my children

and my personal effects to be divided

equally among my children

and my personal effects to be divided

equally among my children

and my personal effects to be divided

Date of Enlistment *16.2.18.*

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

2347

Apr. 1, 1918.

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>10. 00.</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *3156369*
 Rank *Plé* Promoted Reverted Discharge
 Soldier's Name *Hormidas Lasante*
 Battalion *2nd Depot Bn., 2nd Quebec Rgt., 4th Draft.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name
 Address
 Change of Address
 1 T. TESSIER,
 158 MONTCALM ST.,
 MONTREAL, QUE. 10 10.00
 2 % 3156369 PTE HORMIDAS LASANTE
 3 TEN DOLLARS
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Apr Y</i>	<i>10014</i>		<i>10</i>	<i>10</i>	<i>✓</i>
<i>May L</i>	<i>14436</i>		<i>10</i>	<i>10</i>	<i>✓</i>
<i>June 7</i>	<i>20127</i>		<i>10</i>	<i>10</i>	<i>✓</i>
<i>July P</i>	<i>31362</i>		<i>10</i>	<i>10</i>	<i>✓</i>
<i>Aug J</i>	<i>35967</i>		<i>10</i>	<i>10</i>	<i>✓</i>
<i>Sept K</i>	<i>46317</i>		<i>10</i>	<i>10</i>	<i>✓</i>
			<i>60 -</i>	<i>60 -</i>	

10695-H-9.
At. Stop 30th Ch # 795. L.Rh.
Died of Wounds 29th 18
Destroy Ord 8782 13th 18, L.Rh.

AUTHORITY FOR NEW ACC'T.

M. F. W. 128
 FORM 67 (1-17-23)
 L. L. 22340 - M. & D. 1893

AUTHORITY FOR NEW ACC'T. } *M. B. M. D. H. B. 2.*
 *M. J. Hollander.*
23.4.18.

