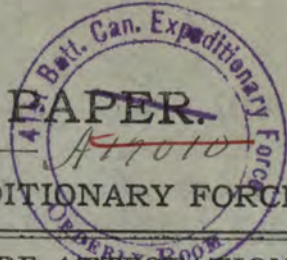


ATTESTATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.



A17010
No. ~~307~~
Folio. ~~11110~~

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS).

1. What is your name?..... *Joseph Lauzon*
2. In what Town, Township or Parish, and in what Country were you born?..... *Hull P. Quebec*
3. What is the name of your next-of-kin?..... *Bte Lauzon*
4. What is the address of your next-of-kin?..... *29 Argenteuil St Hull P.Q.*
5. What is the date of your birth?..... *24th December 1893*
6. What is your Trade or Calling?..... *Labour*
7. Are you married?..... *Single*
8. Are you willing to be vaccinated or re-vaccinated?..... *Yes*
9. Do you now belong to the Active Militia?..... *90th Regt Hull P.Q.*
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*

Joseph Lauzon.....(Signature of Man).
Lt J. Houture.....(Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Joseph Lauzon*....., 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 Lauzon.....(Signature of Recruit)
Date *24th March*.....1915 *Lt J. Houture*.....(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Joseph Lauzon*....., 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 Lauzon.....(Signature of Recruit)
Date *24th March*.....1915 *Lt J. Houture*.....(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 *Hull P. Que* this *24th* day of *March*.....1915

Major Jos. O. Deslaurier.....(Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.
.....(Approving Officer)

M. F. W. 23.
150 M.-12-14.
H.Q. 1772-39-841

Dead
Heart disease
at F. G. Valcartier Camp
5.00 a. m. 16-7-15
Dr. J. G. L. 26-12-17 B.C.F.

Description of Joseph Lauzon on Enlistment.

Apparent Age.....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 6 1/2 ins.

Chest measurement { Girth when fully expanded.....36 ins.
 Range of expansion.....2 ins.

Complexion.....fair

Eyes.....Brown

Hair.....Brown

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

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 24th March 1915

Place Hull P Quebec

D. P. Chevalier
 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.

W. H. B. B. B. (Signature of Officer)

Date.....1915

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
 Attestation Papers..... 3
 Declaration of change of name.....
 Authority for special enlistments.....
 Documents of re-enlisted men.....
 Regimental Conduct Sheet.....
 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.....

DISCHARGE DOCUMENTS

R. O. No.

H. Q. No.

Name Lauzon, Joseph.
 Regt. No. 41010 Rank Pte.
 Corps 41st Bn.

Deceased.



5436



1-20
1-20

Paycard PERSONNEL
 RECORDS CENTRE

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

CENTRE des
 DOCUMENTS du PERSONNEL

J. H.

17010
I.D. number
No. d'identification

LAUZON
Surname
Nom de famille

JOSEPH
Given names
Prénoms

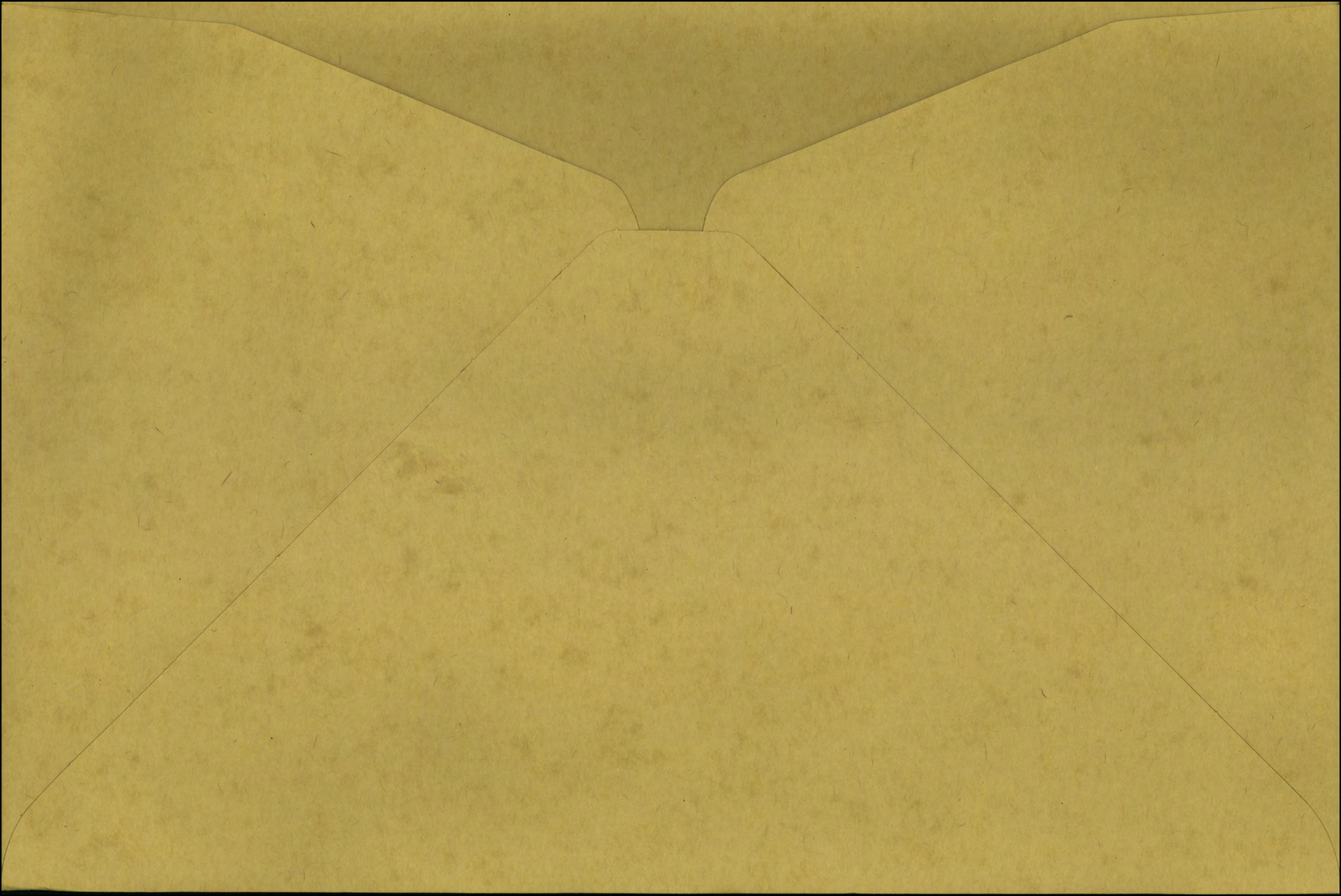
**NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL**

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

Location
Lieu

5436

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



No. 299 RANK *pte*
 17010 (April Paylist)

NAME *Lanyon Joseph.*

T. C. S.

UNIT *41st Battalion, 3rd Cont
 (Hull Det)*

M. D. *5-*

PAID FROM	PAID TO	SIG OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i>	<i>1915</i>			
<i>Mar. 20</i>	<i>Mar. 31</i>	<i>✓</i>		
<i>April</i>		<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>		
<i>July 1.</i>	<i>July 16.</i>	<i>n.</i>	<i>Died at Hd. Amb. Valcartier ¹⁴/₁₅</i>	<i>50.109 of 16-7-15.</i>
<i>Aug.</i>	<i>no dates.</i>	<i>n.</i>		

UNIT SAILED
 OCT 18 1915

acc closed by Payment. n.



LEDGER No.

²
46. 1107

SERIAL No.

REG. No.

~~216705~~

NAME

Langon J

RANK

Pte

CORPS

41

AGE

19

SERVICE

HOSPITALS

DATE OF ADMISSION

1

Camp Hosp Valenciennes

10/7/15

2

3

DIAGNOSIS

In. Endocarditis

TRANSFERRED TO

DISPOSITION

(Died 5.0. a.m.) 16/7/15

CATEGORY

M.F.W. 2558.

1126-D.P.-50M-12-18.

1772-39-1882.

P.T.O.

ma
go

Register No. 10 L 74

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 2-789
10726-877

Reg't No. 17010 Name Joseph Laugon
(Christian Name) (Surname)
Unit 41st Bn Rank Pte Date of enlistment
Date of casualty July 16th 1915 B.P.C. File No. 2896
Was service performed overseas? no

DEPENDENT

Name Elise Laugon Relationship Mother
Address 35 City Hall Ave.
Hull Lue

M.F.W. 2652
25M-6-20
H.Q. 1772-39-1473

Amount of Special Pension Bonus \$ 44.00 Abstracted by M. L. Duran

m.l.

Eligible for Gratuity \$
Less amount of Special Pension Bonus paid \$
Less Debit Balance of S. A. or A.P. \$

Total deductions \$

Balance due \$

Cheque No. Date issued

REMARKS To S.O. acc. dependent
not eligible

Clerk R. J. Leuer

Audited by
[Signature]
Date 14/27/20

7 pm

noted
DA 18
14-7-20

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name

Surname

Christian Name

Regimental Number

Rank

Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay \$ _____ per diem; Field Allowance \$ _____ per diem. Separation Allowance \$ _____ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

M. F. W. 127
 300M-1-19
 1772-39-1140

A 17010

217010 D

MEDICAL HISTORY SHEET.

Surname Lanyon Christian Name Joseph

Examined	{ on <u>24</u> day of <u>Mass</u> 191 <u>5</u> at <u>Hull</u>	Approved by	
Birthplace	{ City or Town <u>Hull Que.</u> County <u>Canada</u>	Rank	M.O.
Apparent age	<u>23 am</u>	Date	
Trade or occupation	<u>Laborer</u>	Fit or Unfit	
Height	<u>5</u> Feet <u>6 1/2</u> Inches.	EXAMINED FOR RE-ENGAGEMENT,	
Weight			M.O.
Chest measurement	Minimum <u>34</u> inches.		M.O.
	Maximum expansion <u>36</u> inches		M.O.
Physical development			M.O.
Small-Pox Marks			M.O.
Vaccination Marks	{ Arm Right Left <u>XX</u> Number	Date	Result
			VACCINATIONS.
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.
			M.O.
			M.O.
			M.O.

Enlisted on 24 day of Mass 1915 at Hull

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment		<u>Dead</u>		
Transferred to.. ..		<u>Heart disease</u>		
		<u>at F. A. Valerius' camp</u>		
		<u>5th a.m. 16-7-15</u>		

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.

Surname..... Christian Name

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				
Valcartier Searny Hospital Valcartier		10	7	15	16	7	15	Valvular Heart Disease (Aortic Regurg) Valvular Heart Disease.	6	Died at 5 a.m July 16 th /15; suddenly, of heart failure.	H. A. Eyles.

Original not available

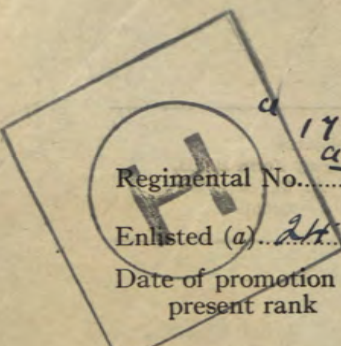
Fill in only.—Unit, Number, Rank and Name.

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

500M.—9-16

H. Q. 1772-39-920.

Casualty Form—Active Service.



17010. Unit, Regiment or Corps. H 1st Batt.
 Regimental No. 307 Rank Pvt Name Langon Joseph
 Enlisted (a) 24-3-15 Terms of Service (a) D of W. Service reckons from (a) 24-3-15
 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				
16.7.15.	H 1 st	S.O.S. Deceased.	Valcartier	16.7.15	D.O P. II 109.

D. Guthrie
Joseph Langon

[Handwritten scribble]

(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.

