

File A

Original 162 Workman

120453

ATTESTATION PAPER.

No. 120453

69th O. BN. C. E. F.

Folio. V

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *John Lavalliere*
2. In what Town, Township or Parish, and in what Country were you born?..... *Montreal Que. Lavalliere*
3. What is the name of your next-of-kin?..... *Hermine Royce (wife)*
4. What is the address of your next-of-kin?..... *162 Workman St. Anse-aux-Loupes Montreal Que. Canada*
5. What is the date of your birth?..... *5<sup>th</sup> August 1878*
6. What is your Trade or Calling?..... *Store Keeper*
7. Are you married?..... *Yes*
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?.. *Yes 6<sup>th</sup> Company P.C.R. Infantry Quebec*  
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*

*John Lavalliere* (Signature of Man).  
*E.E. Brunelle* (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *John Lavalliere*, 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.

*John Lavalliere* (Signature of Recruit)  
*E.E. Brunelle* (Signature of Witness)

Date *August 16<sup>th</sup>* 1915

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John Lavalliere*, 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.

*John Lavalliere* (Signature of Recruit)  
*E.E. Brunelle* (Signature of Witness)

Date *August 16* 1915

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 *seventeenth* August 1915

*W. O'Farrell* (Signature of Justice)

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

*W. O'Farrell* (Approving Officer)

# Description of *John Savalliere* on Enlistment.

Apparent Age 37 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. 5 1/2 ins.

Chest measurement { Girth when fully expanded ..... 35 ins.  
 Range of expansion ..... 3 1/4 ins.

Complexion ..... Robust

Eyes ..... Brown

Hair ..... Brown

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

*1 scar left arm*  
*5 tattoo left forearm*  
*(J. L.)*  
*4 tattoo right forearm*  
*1 Birth mark left hip.*

## 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 August 15 1915

Place Montreal

*[Signature]*  
 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.

*John Savalliere* 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]* (Signature of Officer)

*St. Col.*

Date DEC 2 1915

C.E.F. REGIMENTAL DOCUMENTS  
WAR SERVICE RECORDS D.V.A.

LAVALLIERE JOHN

120453

12260

KILLED IN ACTION





Surname Lavalliere Christian Name or Names J. Reg. No. 120453

Rank Pte. Unit 22nd Bn. Que. R. Co. Troop Batty

Hospital 3 Can. G.H. Boulogne Date of Admission 4.9.16

Transferred Hosp. Milly St. Trent Bridge natts. Moore Barracks 2/2 Lon. F. Amb. Hosp. 17-9-16. Hosp. 8.10.16 Hosp. 29.4.18

Diagnosis

- (1) Myalgia
(2) Trench Fever
(3) P.W.O.

Additional Diagnosis: if more than one state present

Carbuncle neck. a.t.
R. F. B. Killed in action 9-10-189.

DISPOSITION

C.L. 13.9.16 A322 Disc. 10-11-16 Date
Dis: by New Disease supervening 3-5-18

Table with columns for date, unit/number, and remarks. Includes entries like '21-9-16 B166', '14-10-16 B185', '13-11-16 B210', '7-5-18 A207', '11-5-18 A2112', '14-5-18 A213', '17-5-18 A216', '20-5-18 A218(12)', '7-6-18 A234', '19-10-18 A349'.

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

Sup card in box for entry A213

Dr

# EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.	22 G. P. Cameron	5.5.18.
2.	6 Conv. Depot. Etaples 13 Casual. Trarville	9.5.18 11.5.18
3.		
4.		
5.		
6.		
7.		

<sup>9</sup>/<sub>10</sub>/<sub>19</sub>  
SURNAME. *Savalliere* 649-2-12570

CARD NO. ✓

CHRISTIAN NAMES

*John*

FOLL.

REGL. NO.

*120453.*

RANK

*Pte.*

UNIT

*69<sup>th</sup>*

*Bn.*

FORMER CORPS

*5<sup>th</sup> Co.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Savalliere, Mrs Hermina*

RELATIONSHIP TO SOLDIER

*Wife*

ADD

~~*4 Rue St Remi 162 Workman St.*~~  
~~*St Henri - Montreal*~~

*See p. 8/2/18. S. a. a. P. 20-5-18 Letter undelivered.*

COUNTRY OF BIRTH

*Canada, Montreal P.Q.*

DATE

*Aug 5<sup>th</sup> 1878*

PLACE OF ATTESTATION

*Montreal P.Q.*

DATE

*Aug 17<sup>th</sup> 1915*

*Sailed from St John's*

*S.S. "Scandinavian" 17-4-16*

MARRIED *Yes* SINGLE WIDOWER  
TRADE OR CALLING *Storekeeper* RELIGION *Roman Catholic*

DESCRIPTION.

APPARENT AGE *37* YEARS — MONTHS  
HEIGHT *5* FEET *5 1/2* INCHES  
CHEST MEASUREMENT *35* INCHES EXPANSION *3* INCHES

COMPLEXION *Robust* EYES *Brown* HAIR *Brown*

DISTINGUISHING MARKS *1 scar left arm. 5 tattoos on left forearm  
4 tattoos on rt. forearm. 1 Birth mark - left hip*

MEDICAL EXAMINATION. PLACE *Montreal PQ.* DATE *Aug 16th 1915-*



John.

Name **Lavalliere.** Rank **Pte**Reg. No. **120453.**Unit **22nd. Batt.**Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<b>1916.</b>						
<b>4 9</b>	<b>3. Can. Gen. Hosp. Boulogne.</b>		<b>Myalgia.</b>	<b>A322.</b>		
<b>17.9.</b>	<b>Mil. Hosp. Trent Bridge. Nottingham</b>	<b>do</b>		<b>B166.</b>		
<b>8-10</b>	<b>Moore Barracks Can. H. Shorncliffe</b>					
			<b>Trench Fever</b>	<b>B185</b>		
<b>10-11</b>	<b>Discharged</b>		<b>do</b>	<b>B210</b>		



JOHN

L.3057

Name LAVALLIERE Rank Pte

Reg. No. 120453

Unit 22<sup>nd</sup> Bn Hermina Boyce LavalliereNext of Kin Canada 162. Workman St.  
amegonde. Montreal P.Q.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
29	H 2/2 London Fld Amb		P.U.O.	H 207		17599
3	5 Dis by New disease Supervening		"	H 211		17793
5	5 229th Garrison	Amegonde		H 213		1160/10
9	5 6 <sup>th</sup> Hon Dep 8 Staples			H 216		1228/12
11	5 136 <sup>th</sup> Trawville			A 218		1794/7
2	6 Discharged to King 8 Staples			H 234		1778/9
9	10 Killed in Action Pte 102			H 369	H 410	4244
		141018				



NAME

RANK AND CORPS

CABLE

No.

DATE

NATURE OF CASUALTY

REGT'L NO

H. Q. FILE NO. 649-

FOLLOWS

No.

FOLLOWS

120453

Cavalliere, John  
Pte.

22nd. Bn. f

69th Bn

No.	DATE	NATURE OF CASUALTY
No 19 undel #410	30-10 20-10-18	Cavalliere, Mrs Hermine (Wife) 162 Workman St Montreal P Q. K in A. Oct 9th/18

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a322	No.3 Can. Gen. Boulogne	4-9-16	Myalgia
B166	Mil. Trent Bridge Nottingham	17-9-16	"
B185	Do more Bks. Can. Shornce.	8-10-16	Trench Fever
B210	Discharged	10-11-16	" "
A207-1	2/2 <sup>nd</sup> Im. Fld. Amb.	29-4-18	p.u.o. <u>One Regt</u>
A211 <sup>(2)</sup>	Disch. by new disease <sup>superimposed</sup>	3-5-18	P. U. D.
A213-2	No 22 Gen Hannes Comms	5-5-18	Carbuncle neck
A216-2	No 6 Conv Depot Etaples	9-5-18	" "
a218 <sup>2</sup>	13 conv Dep. Trouville	11-5-18	carbuncle neck
A234-3	Disch to Reinforcement Etaples	2-6-18	" "
A349 <sup>(11)</sup>	Rep from Base	9-10-18	K. m. a.

No. 120453 RANK

Jte

NAME

Lavallière John

T. O. S.

UNIT

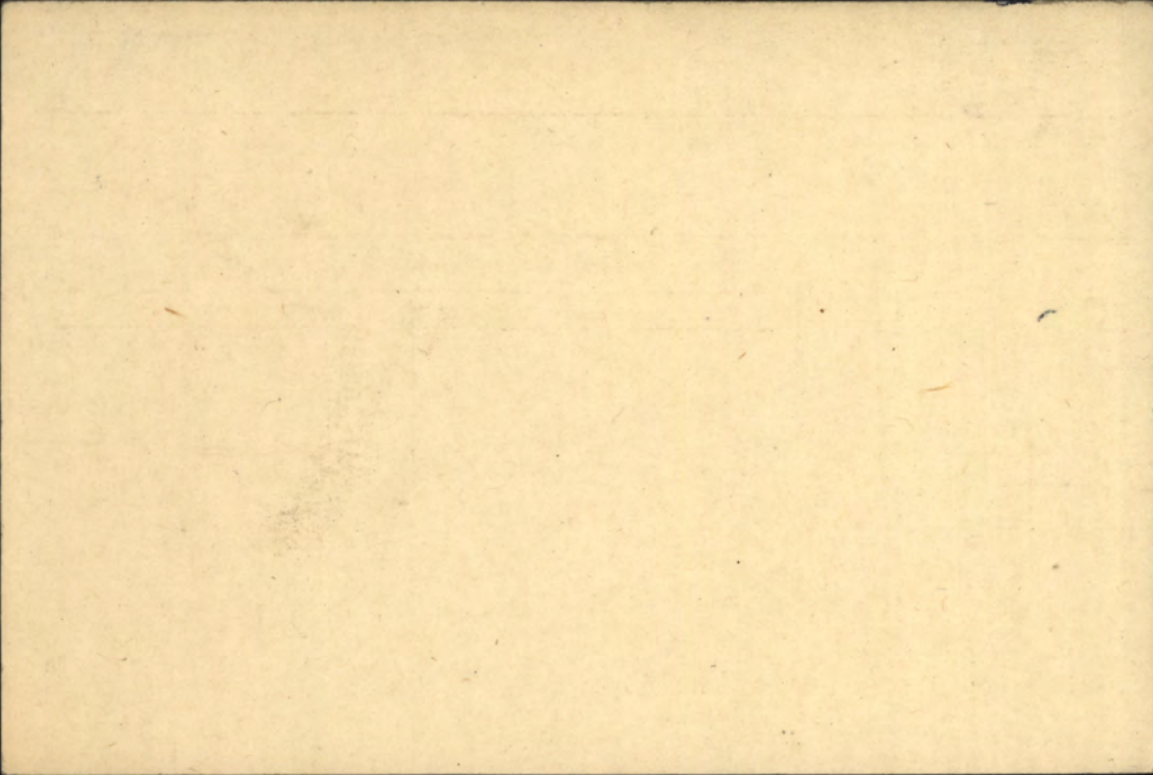
69<sup>th</sup> Battalion

M. D. Val.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 aug 1	1915 aug 31	✓		
	Sept	✓		
	Oct	✓	compl. Oct. 9.	
	Nov	✓	fin'd 11 days pay.	Oct payroll
			To be a/sat. pay.	D.O. 66 8-11-15
			" " Platoon pay 14-11-15	Nov payroll.
	Dec	✓	quo rot. Dec 21.	D.O. 97 (20-12-15)
			Reverts to ranks at his	D.O. 6/9 (3-12-15)
			own request	
1916	1916	n.	for 1 day pay 28 days det. &	Jan. payroll.
	Jan.	✓	reverts to ranks.	
	Feb.	✓		
	Mar.	✓		
	Apr.	n.	7 days C.B.	D.O. 193-3-4-16.

UNIT SAILED

APR 17 1916





m64

Number. . . 120.453 . . . . . Rank . A / Corp. B

Surname. . . L. A. V. A. L. L. I. E. R. E. . . . . K

Christian Name. . . . . John . . . . .

Unit. 22 Bu. Can. Inf. . Theatre of War France

Date of Service. . . . . 28-6-18 . . . . . D . . . . .

Remarks. . . . .

Latest Address . Mde. Hermine Lavalliere <sup>(w)</sup>

. . . . . 162 Workman St. . . . .

Roll No. B. Page 5064 Montreal P.Q.

9a3223yam

AUG 20 1921

Lavalliere Pt John #120453 22nd 649-L-125-70  
Name & Address of Legatee 120453 mat. Register for 1914-15 Star. 314

Mde. Herminia Lavalliere (widow)  
162 Workman st. m. tw.  
Montreal Que.

Name & Address of Next of Kin 00300  
Gunn

Serial No. 468073 P+S

Name & Address of Female Next of Kin  
widow as above P+S.  
mother dead

unsub. Resp. 27<sup>3</sup>/<sub>10</sub> C 3604  
Evan

Scroll Desp. JAN 18 1921 Reqn. No.

210528

Plague Desp. DEC 10 1921 Reqn. No.

P20114

M

ORIGINAL

File A C  
4

MEDICAL HISTORY SHEET/20453

Surname LAVALLIERE Christian Name JOHN

Examined { on 17th day of August 1915  
at Montreal

Approved by K. TESSIER Capt.

Birthplace { City or Town Montreal  
County Quebec

Rank M.O.

Apparent age 37  
Trade or occupation Store Keeper

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT
		<u>22 SEP 1916</u>
		<u>27 SEP 1917</u>

Height 5 Feet 5 1/2 Inches.  
Weight 150 Lbs.

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

Chest measurement { Minimum 35 inches.  
Maximum expansion 32 inches.

Physical development normal  
Small-Pox Marks none

Naunus B. Chy  
Lieut.-Col.  
In Charge of Records  
Canadian Contingent.

Vaccination Marks { Arm Right Left X  
Number 1

Date.	Result.	VACCINATIONS.
<u>19/5/14</u>	<u>good</u>	<u>measles</u>

When Vaccinated last 1908  
(a) Marks indicating congenital peculiarities or previous disease none

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
<u>8.2.16</u>	<u>Good</u>	<u>g s e</u>
<u>13.2.16</u>	<u>Good</u>	<u>g s e</u>
<u>17/5/17</u>	<u>TA03</u>	<u>off</u>
<u>25/7/17</u>	<u>TA03</u>	<u>off</u>

(b) Slight defects but not sufficient to cause rejection

Enlisted on 17th day of August 1915 at Montreal

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>19th Batt C Coy</u>	<u>20453</u>	<u>Good</u>	<u>Aug. 17/15</u>
Transferred to	<u>22nd " "</u>			<u>June 28/16</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>C.C.A.C.</u>	<u>Nov. 13/16</u>	<u>French fever</u>	<u>6 weeks P.S.</u> <u>Anti Chol. Serum 1/4 c</u> <u>Pres. Am. 100-</u>

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.

CANADIAN

Surname **LAVALLIERES** Christian Name **JOHN**

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				
MILITARY HOSPITAL, TRENT BRIDGE NOTTINGHAM.		17	9	16	7	10	16	Trench Fever	21	Shivering attacks - end of Aug 16. with temp 101 1/2 Taken to Hosp.  Admitted North Br. Mil Hosp. with diagnosis Trench Fever No symptoms - Constipation  Oct 6. Disch -	<i>[Signature]</i>
Moore Barracks Hpl, Shorncliffe.		7	10	16	10	11	16	Trench fever.	25	fully recovered. Has remained Urine normal. No evidence of any organic disease. Discharged to duty  Duplicate Medical History Sheet posted to here. <i>F.S.</i>	<i>W.W. Massey</i> <i>St. John's</i>

MAR

MEDICAL CASE SHEET.\*

15

C.5

No. in Admission and Discharge Book. 75 Year 1916 C. French	Regimental No.	Rank.	Surname.	Christian Name.
	120453	Pte	Lavalliere	J
	Unit.	Age.	Service.	
	22 <sup>d</sup> Can	38.	1 1/2.	

Station and Date.  
MILITARY HOSPITAL, TRENT BRIDGE  
NOTTINGHAM.

Disease

About end of August-16 while on march, was seized with shivering attacks, with pains in limbs. He had a temp of 101 & was taken to C.S. Was there 10 days & then was taken to 3<sup>rd</sup> Canadian Gen. Hosp. at Boulogne -

Since admission, constipation, but no symptoms.

\*The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.  
(J 3521.) Wt. W 5606-2621. 2,000,000. 7/15. D & S.

Station  
and Date.

MEDICAL CASE SHEET

NO. 1



**Casualty Form - Active Service.**

Regiment or Corps. *22<sup>nd</sup> Canadian Bn.*

Rank. *Pte* Surname. *Lavalliere* Christian Name. *J.*

Religion. Age on Enlistment. years months

Enlisted (a) Terms of Service (a) Service reckons from (a)

Date of promotion to present rank. Date of appointment to lance rank.

Extended { } Re-engaged { } Qualification (b) or Corps Trade and rate.

Occupation. Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked..			
	C. B. D.	ARRIVED C. B. D.	FRANCE <i>7/17</i>	N. R. D. <i>7/17</i>	
				PART II ORDERS No. <i>100</i> D. <i>25/17</i>	
<i>26/9/17.</i>	C. B. D.	LEFT C. B. D. FOR	<i>C&amp;C Camp.</i>	<i>26/9/17.</i>	N. R. D.
<i>27-9-17</i>	<i>O.C. Bn.</i>	ARRIVED	<i>C&amp;C Camp.</i>	<i>27-9</i>	B. 213 D.
<i>1-DEC 1917</i>	<i>O.C. 22 Bn</i>	JOINED UNIT	<i>Field</i>	<i>24 NOV 1917</i>	B 213.
<i>8.12.14</i>	<i>102</i>	Attached to	<i>182nd Signalling Coy R.E.</i>	<i>1.12.14</i>	<i>B 213</i>
<i>29.12.14</i>	<i>102</i>	Rejoined from	<i>182nd Signalling Coy R.E.</i>	<i>20.12.14</i>	<i>B 213</i>
<i>1-5-18.</i>	<i>2/2 London F.A.</i>	<i>Adm.</i>	<i>2/2 London F.A.</i>	<i>19-4-18</i>	<i>E 8731.</i>
<i>5-5-18.</i>	<i>22 Genl.</i>	<i>Carbuncle Neck.</i>	<i>Adm. 22 Genl.</i>	<i>5-5-18</i>	<i>E 9808.</i>
<i>4-5-18.</i>	<i>42 London F.A.</i>	<i>52</i>	<i>50 57 ccs.</i>	<i>25-18</i>	<i>F 18</i>

(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.

120453 Pte Lavalliere f.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Report Taken from B.213, Army Form A. 36, or other official documents.
Date	From whom received				
4-5-18.	2/2 Indm. f.a.	Old New Disease supervising	2/2 Indm. f.a.	4-5-18	F 18.
5-5-18.	42 C.C.S.	barbuncle neck. Adm.	42 C.C.S.	5-5-18.	} F 181.
5-5-18.	5-5-18.	5-5-18. 20	37 a. f.	5-5-18	
9-5-18.	22 Senu.	5-5-18. 20	6 Cont. Dep.	9-5-18	F 762.
9-5-18.	6 Cont. Dep.	5-5-18. Adm.	6 5-5-18	9-5-18	F 909
10-5-18.	5-5-18.	5-5-18. 20	13 5-5-18	10-5-18	F 1232.
11-5-18.	13 5-5-18.	5-5-18. Adm.	13 5-5-18	11-5-18	F 1424.
2-6-18.	13 5-5-18.	Classified Active 20	Base.	2-6-18.	S 002 F.
5-6-18.	6 I. S. Dep.	Arrived 'A' from 13 C. Dep.	6 I. S. Dep.	5-6-18.	N.R. 1345.
23.6.18	" "	Left for C.C.R.C.	Field	23.6.18	NR. 1281
23.6.18	C.C.R.C.	Arrived C.C.R.C. 2	"	23.6.18	NR. 958
26-8-18	do	In confi			
26.8.18.	5-5-18.	In Confinement awaiting trial, from 3-8-18 to 21-8-18.			
		Tried and Convicted by F.C.M. in the Field, 21-8-18.			
		for when on ops: Drunkenness, in that he, in the			F 2069.
		Field, on 3 <sup>rd</sup> August 1918, was drunk. Found			P.T.O. 88/1918
		guilty and sentenced to 21 days F.P.No.1. 21-8-18-			
		Confirmed by Colonel W. H. Holmes D.S.O.			
		Commanding C.C.B. 21-8-18.			
31-8-18	Do	Left for <del>the</del> Unit	Field	31-8-18	NR. 21508.
6.9.18	22 <sup>ND</sup> Bn.	JOINED UNIT	Do.	1-9-18	13213.

3<sup>rd</sup> Sheet.

B. 103.

Regimental Number 120453

Casualty Form - Active Service.

Regiment or Corps 22<sup>nd</sup> Bdw. Batta

Rank Private Surname Lavalliere Christian Name John

Religion Age on Enlistment years months

Enlisted (a) 16/8/15 Terms of Service (a) 1<sup>st</sup> of war Service reckons from (a) 16-8-15

Date of promotion to present rank Date of appointment to lance rank

Extended Re-engaged Qualification (b) Storekeeper or Corps Trade and Rate

Occupation Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
10-10-18	22 <sup>nd</sup> Bdw.	Killed in Action	Field	9-10-18	C/25 N.2.17-1182 P.O. 102/1918
	Whogan	Major for Lt.-Col., A.A.G.			
		Canadian Section. G. H. O. 3rd Echelon. B.E.F.			

(a) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered. (17591.) Wt. W 1887-P 1124. 1,000,000. 6/18. D & S. Form B.103. (E. 1256.)

[P.T.O.]



20606

MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
Year	Unit.		Age.	Service.
20606 7-10-16	12045-3	Plt.	Lavellier	Jan
Station and Date.	Disease <u>Trench fever.</u>			
MOORE BARRACKS, CANADIAN HOSPITAL, SHORNCLIFFE.				
Complaint.	Trench fever.			
Duration	Since August - 15 <sup>th</sup> 1916 -			
P.H.	Had Typhoid in 1906			
F.H.	Negative -			
History of Present Illness	Up to August - 15 <sup>th</sup> was feeling well - was shuttled in trench. End was shuttled in ill - fever. Cold sweat, joint in back. legs in arms and hands - feeling some better - in night -			
Physical Examination	Patient is a well developed muscular man weighing <sup>162</sup> 165 lbs. He is about his normal weight now. Neck & hump are normal. Abdomen is prominent on the left. There is a feeling of fullness in left loin, but Jan not sure whether or no. Eyes react very sluggishly to light. Knee joints are active. Complaints of tenderness over both tibiae & calf muscles.			
Treatment	Inst. Sod. Sol. & Linnis.			

CANADIAN CASUALTY ASSEMBLY CENTRE

10 NOV 1916

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

Station  
and Date.

5-11-16

I can find no evidence of any organic disease  
in this man. His urine is normal, Wassermann is  
negative, & I thus leave for duty.

P. G. Murray Capt

# FORM OF WILL.

Name in full.

I John Lavalliere

Regimental Number 120453 serving in 10th Can Res. Batt'n.  
of the Canadian Expeditionary Force do hereby revoke all former Wills  
made by me and declare this to be my last Will.

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

I DEVISE and BEQUEATH all my real estate unto

Nil

absolutely, and my personal estate I bequeath to my wife

Name & Address of  
persons or person  
to receive personal  
estate (see Note 1.)

Mrs. Hermine Lavalliere

162 Workman Street

Montreal

P. Q.

Fill in Date and  
Year.

IN WITNESS WHEREOF I have hereunto set my hand this 26th  
day of August A.D. 1917.

John Lavalliere

(Signature)

Signed by the said Testator as his last Will and Testament, the same  
having been read over and explained to him, in the presence of us both  
present at the same time who at his request and in his presence and in  
the presence of each other have subscribed our names as witnesses.

Name of Witness Hector LeBlanc

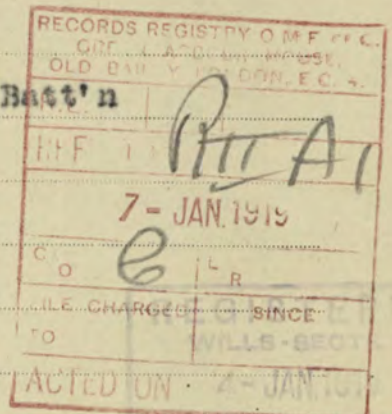
Address of Witness 10th Can. Res. Batt'n

Occupation of Witness Sgt.

Name of Witness Louis Carriere

Address of Witness 10th Res. Bn.

Occupation of Witness



N.B.—Personal Estate includes pay, effects, money in Bank, insurance policy,  
in fact everything except real Estate.

Killed in Action, 9-10-18. 25-L-2579

Transferred, 19-12-18.

Private J. LaValliere, 120453, 22nd Bn.

24 DEC 1918

CANADIAN 34510

McC.

*Certified as true copy of the original will for the said Estates.*

FORM OF WILL



1st Sheet

CERTIFIED CORRECT.  
Canadian Record Office,  
Westminster House,  
M. F. W. 53, (A. F. B. 103.)  
7, William St.  
250 M. - 1-16,  
H. Q. 1772-39-920.

Fill in Only.—Unit, Number, Rank and Name.  
**Casualty Form—Active Service.**

J.T. Oml ✓  
26665.

Unit, Regiment or Corps "G" Coy 69th Battalion (F-C)

Regimental No. 120453 Rank Private Name Lavalliere, John  
C. E. F.

Enlisted (a) 16/8/15 Terms of Service (a) duration of war Service reckons from (a) 16/8/15

Date of promotion to present rank. } Date of appointment to lance rank. } Numerical position on roll of N. C. Os. }

Re-engaged. } Re-engaged. } Qualification (b) Storekeeper

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 38, 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. 38, or other official documents.
Date	From whom received				
		Embarked	Canada	17/4/16	
		Arrived	England	27/4/16 ✓	
28/6/16	6669	Transferred to 22nd Bn	France	28/6/16	J. de Strubbe Capt. P.T.O. 152.
29-6-16	C.B.D.	Reinf. from 69th Bn. Taken on strength 22nd Bn.		29-6-16	N. Roll. P.T.O. 27.
12-7-16	"	Left C.B.D.		12-7-16	" 157-22-7-16
14-7-16	O.C. Bn	Joined Unit	Field	13-7-16	B 213 do
4 <sup>9</sup> / <sub>16</sub>	3 Can Genl	myalgia		4 <sup>9</sup> / <sub>16</sub>	W3034
16 <sup>4</sup> / <sub>16</sub>	HS Jan	15 Engl unit		16 <sup>4</sup> / <sub>16</sub>	W3034
	Brydel	"		"	W3034
16 <sup>4</sup> / <sub>16</sub>	3 Can Genl	"			Pt II O.42 d/26-9-16 ✓

Whogan  
Captain  
for Lt. Col. A. A. G.

150671 REGD

(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. [P.T.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				
		Taken on strength C.C.A.C. Pt. II D.O. No. 414 ✓ 23/9/16			
6.12.16		ATTACHED TRANSFERRED FROM C.C.A.C. TO <u>C.C.D.</u>			PART II D.O. No. 563 ✓ <i>W. Greenwood Capt</i> <i>O.C. C.C.C.</i>
3/17		Discharged from 3rd. C.C.D. <u>St Leonards</u> , to 10th Res Bn.			PART II D.O. No. 19 11/3/17 ✓ <i>W. Greenwood</i> for Adjutant, 3rd Canadian Command Depot for 6 to 66
9-3-17	O.C. 10th Res Bn	Taken on strength from C.C.D.	Shoreham	8-3-17	D.O.P. 2. 54 ✓
18-5-17	O.C. 10th Res Bn	Appointed a/cpl.	Shoreham	17-5-17	D.O.P. 2. 118 ✓
2-6-17	O.C. 10th Res Bn	Reverts to his permanent grade	Shoreham	31-5-17	D.O.P. 2. 132
6-9-17	O.C. 10th Res. Bn.	Transf. to 22nd. Bn. C. E. F.	Shoreham	6-9-17	D. P. II. O. 222
13/3/17	6666	SOS on trans of 2nd 2 R.	Hastings	10-3-17	Part of Order 119.
19/3/17	2nd 2 R.D.	SOT. " " from 6666.	Shoreham	10-3-17	" " " 10.

CLAIMED CORRECT  
 14 SEP 17  
 RECORDS COMBAT

*J. Seybold* Lieut.  
 CAPT.  
 FOR LT: COL: I/C RECORDS, C.O.M.F

345-10

149407

18.6

**FORM OF WILL.**

Name in full.

I John Lavalliere

Regimental Number 120453 serving in 10<sup>th</sup> Can. Res. Batt'n

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

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

I DEVISE and BEQUEATH all my real estate unto

Nil

Name & Address of persons or person to receive personal estate (see Note 1.)

absolutely, and my personal estate I bequeath to My wife

Mrs Hermine Lavalliere

162 Workman Street

Montreal

Fill in Date and Year.

IN WITNESS WHEREOF I have hereunto set my hand this 26<sup>th</sup> day of August A.D. 1917.

John Lavalliere  
(Signature)

Signed by the said Testator as his last Will and Testament, the same having been read over and explained to him, in the presence of us both present at the same time who at his request and in his presence and in the presence of each other have subscribed our names as witnesses.

Name of Witness Hector LeBlanc

Address of Witness 10<sup>th</sup> Can. Res Batt'n

Occupation of Witness 2<sup>nd</sup> Lt.

Name of Witness Louis Gariel

Address of Witness 10<sup>th</sup> Res. Bn.

Occupation of Witness

N.B.—Personal Estate includes pay, effects, money in Bank, insurance policy, in fact everything except real Estate.

ESTATES BRANCH  
JAN 20 1919  
MILITIA DEPT.

FORM OF WILL

1880

I, the undersigned, of the County of \_\_\_\_\_ State of \_\_\_\_\_ do hereby certify that the within and foregoing is a true and correct copy of the original of the within and foregoing will of \_\_\_\_\_ of the County of \_\_\_\_\_ State of \_\_\_\_\_ as the same appears from the records of the \_\_\_\_\_ Court of the County of \_\_\_\_\_ State of \_\_\_\_\_

Witness my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_ 1880

IN WITNESS WHEREOF, I have hereunto set my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_ 1880

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

A.G.R. Rank Name LAVALLIERE, John. Reg'l No. 120453  
 Unit 69th Bn. If in perm. Corps, }  
 What Unit? } Married or Single Married.  
 Place and Date of Enlistment Montreal, 16th August, 1915. Place of Birth Montreal, Que.  
 Name and Address, Next-of-Kin Hermina Boyce Lavalliere,  
 162 Workman St., Amegonde, Montreal, P.Q., Relationship Wife.  
 Assigned Pay Monthly \$ Payable to Relationship Canada.  
 Separation Allowance \$ Payable to Relationship  
 Discharge, Date and Place Reason Character 56



05.12.20  
 R.120453  
 N.E. R.B. No. 14444  
 File R.L. 23/305  
**KILLED IN ACTION**  
 Category

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.			
29.4.16	H.2.	Arrived in England.	Bramshott	28.4.16 Dis. O. 1586
28.6.16	69 <sup>th</sup>	Trans to 22 <sup>nd</sup> Bn	O'Leary	28.6.16 Pt. 11. 152
7.7.16	22 <sup>nd</sup>	T.O.S. from 69 <sup>th</sup>	"	29.6.16 " 27
13.9.16	"	Adm 3 Can. Gen. Hosp.	Bonlogue	4.9.16 A 322 Myalgia
21.9.16	"	" Mil. Hosp. Trent Bridge	Nottingham	17.9.16 B166 "
26.9.16	"	Sick trans to 66 <sup>th</sup> Bn. Folkestone	In the field	16.9.16 R.M. 42. S
23.9.16	c.e.t.c.	Taken on strength.	Selone	17.9.16 P.M.O. 414
21-12-16	G.C.A.C.	On Command to Comm. Depot	Hast	19-12-16 - 563
13.3.17	G.C.A.C.	S.O.S. on transfer to 2 <sup>nd</sup> Quebec Regiment	Hastings	10.3.17 Pt. 11 D.C. 119
19/3/17	2 <sup>nd</sup> Quebec Bn	T.O.S. FROM CCAC.	Shoreham	10-3-17 Pt. 2-0 10 + P.M.O. #54 2/9.3.17 10 Re 10.

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.				
10.3.17	3.C.C.U.	Cause to be Attached	S' Leonard	8.3.17	PH 20 #17
17.5.17	10 Res	To Be Appl	S' Hen	17.5.17	- 118
2.6.17	-	Reduced to ranks for AWL	-	31.5.17	- 132
6.9.17	-	SOS to 22 Pm	-	305 P.M. 103 6.9.17	915 111.07 22 Pm 222
10-9-18	22 Pm	In confinement awaiting trial from 3.8.18 to 21.8.18 tried & convicted by S. G. C. M., in the field; dismissed in that he in the field, on 3 <sup>rd</sup> August 1918 was deemed found guilty & sentenced to 21 days F.P. Conformed by Col W. J. H. Holmes, D.S.O. Commanding Cde Cps Reinforcement camp, 21/8/18. Atty of 2nd Divl Wing C.C.P.C. 713. 2069. 24/9/18			WD 88
14.10.18	22 <sup>nd</sup> Bn	Killed in Action	At Field	9.10.18	- 102

A.F.B. 103 CHECKED

12 SEP 1917

MILITIA AND DEFENCE  
**ASSIGNED PAY**

M. F. W. 12a.  
 50m.-4-16.  
 1772-39-819.

OVERSEAS CONTINGENTS

Sheet No. 2.

*a*  
Hermina Savallieres

Name of Soldier

*a*  
Savallieres Jos

L. L. Job 310.—Req. 6574.

PAYMENTS.

120453

Pte

69<sup>th</sup> Bn

'6'60

Month.	Year.	Cheque No.	Amt.	Remarks.
				20 <sup>00</sup>
April	1916	8806	20.	
May		X 5658	20.	
June		X 9815	20 -	
July		X 11688	20	
Aug.		X 14557	20	
Sept.		X 18214	20	
Oct.		X 23378	20	
Nov.		X 24727	20	
Dec.		Qm 33945	20	33945 Cancelled 11 <sup>th</sup> 1917.
Jan.	1917	X 34587	20	
Feb.		X 44272	20	
March		P 51359	20	20 P.
April		Q 2880	20	20 B.
May		M 9025	20	
June		L 15667	20	Bn
July		N 23074	20	W.
Aug.		X 28418	20	
Sept.		Q 36710	20	D
Oct.		Z 44802	20	Canadian Patriotic Fund
Nov.		X 48486	20	420
Dec.		Q 49220	20	Canadian Patriotic Fund a trust Mrs Hermina Savallieres wife of soldier, Ruling Mr O'Brien 11-10-17. File 10736-J-55. 16-10-17/1918
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				



*Canadian Patriotic Fund*  
 MILITIA AND DEFENCE  
 ASSIGNED PAY  
 OVERSEAS CONTINGENTS

M. F. W. 12.  
 15m.-3-16.  
 H. Q. 1772-39-819.

*Ruling 5-73  
 16-10-17  
 7/12*

*in Trust for*  
 Mrs *Wife*  
 To Whom *Hermine B. Lavalliere* By Whom Assigned *Lavalliere Jos.*  
 Address ~~162 Workman St~~ Montreal P. Q.  
 Regtl. No. 120 453  
 Rank Pte  
 Corps 69th Bn. C.E.F. "C" Co  
 Rate \$ 20.00

*184 Com. Led*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April		<del>1806</del> - 20 =		APR 1916
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



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# MILITIA AND DEFENCE

# SEPARATION ALLOWANCE

M. F. W. 11a.  
60m.—12-15.  
1772-39-818.

OVERSEAS CONTINGENTS

Sheet No. 2. Emma B. Lavalliere Wife  
**PAYMENTS.**

Name of Soldier: Lavalliere John Plc

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Amt.	Remarks.
April	1916	G 1885	20	20	
May		E 1822	20	20	
June		H 4164	20	20	
July		O 10655	20	20	
Aug.		C 13780	20	20	
Sept.		V 16179	20	20	
Oct.		L 20001	20	20	
Nov.		R 23115	20	20	
Dec.		R 25896	20	20	
Jan.	1917	X 29138	20	20	
Feb.		X 32140	20	20	
March		X 35455	20	20	
April		y 1489	20	20	
May		X 4917	20	20	
June		y 5072	20	20	
July		X 11177	20	20	<del>X 11175</del> <del>Good</del> <del>C. G. 9</del>
Aug.		I 14633	20	20	
Sept.		L 18066	20	20	
Oct.		S 20574	20	20	
Nov.		F 24776	20	20	
Dec.		S 25944	20	20	
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

Brought down

569-

All Cheques to  
McPherson Park Fund, Montreal (du titre)  
for Anniversary  
A. G. P. & L. L. L. & L. L. L. & L. L. L.  
4/11/1936-2-53  
97-4 12-10-17

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

**PAYMENTS.**

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.				

17. 8. 15

*Go Canadian Pat. Fund*

MILITIA AND DEFENCE

*In trust for*

### SEPARATION ALLOWANCE

Name *Mrs Ermina B. Lavalliere*

Name of Soldier *Lavalliere John*

Address ~~152 Workman~~  
*Montreal*

Regtl. No. *120453*

Rank *Pte*

Corps *69<sup>th</sup> Batt*

Relation to Soldier

wife, child or mother

} *wife*

To what Corps belonging

when called out

} ✓ ✓

### PAYMENTS

4229 M. CO.

Month	Year	Cheque No.	Amt.		REMARKS
Aug.	1914				
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1915				
Feb.					
March					
Apl.					
May					
June					
July					
Aug.					
Sept.		<i>216006</i>	<i>29</i>	<i>29</i>	
Oct.		<i>819456</i>	<i>20</i>	<i>20</i>	
Nov.		<i>422967</i>	<i>20</i>	<i>20</i>	
Dec.		<i>9 19855</i>	<i>20</i>	<i>20</i>	
Jan.		<i>1916 M 18287</i>	<i>20</i>	<i>20</i>	
Feb.		<i>204419</i>	<i>20</i>	<i>20</i>	
March		<i>8 31770</i>	<i>20</i>	<i>20</i>	



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WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No.

10736-J-53

Register No. DL 481

Reg'tl No. 120453 Name John Lavalliere  
(Christian Name) (Surname)  
Unit 22nd Bw Rank Pte Date of enlistment.....  
Date of casualty 9-10-1918 B.P.C. File No. 50707  
Was service performed overseas? yes

DEPENDENT

Name Mrs Hermine Lavalliere Relationship Widow  
Address 162 Workman St  
Montreal

Amount of Special Pension Bonus \$ 80 Abstracted by J Maher

Eligible for Gratuity ..... \$ 180<sup>00</sup>  
Less amount of Special Pension Bonus paid..... \$ 80<sup>00</sup>  
Less Debit Balance of S. A. or A.P..... \$ .....

Total deductions \$ 80<sup>00</sup>

Balance due \$ 100<sup>00</sup>

Cheque No. 91896074 Date issued 27-7-20

Clerk Amiel

REMARKS :  
.....  
.....  
.....  
.....

Audited by  
J. H. Kent  
Date 9/19/20

M.F.W. 2652  
25M-6-20.  
H.Q. 1772-89-1473

*meb*

# 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		

M. F. W. 127  
3000M-1-19  
1772-30-1140

Remarks:



MARRIED OR SINGLE *M.*

PLACE OF BIRTH *Montreal*

NAME AND ADDRESS OF NEXT OF KIN *Mrs. Hermine Laralliere*  
*162 Workman Street Montreal - Can.*

RELATIONSHIP OF NEXT OF KIN *Wife.*

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>a/cpl</i>	<i>17-5-17</i>	<i>70118 1951</i>

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS						
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3		
			\$	C.			\$	C.			\$	C.				No.	DATE	No.	DATE	No.	DATE	No.
<i>1916</i>																						
<i>April 30</i>													<i>13 40</i>	<i>13 40</i>								
<i>May 1 to 31</i>	<i>31</i>	<i>1.00</i>	<i>31 00</i>		<i>31</i>	<i>10</i>	<i>3 10</i>							<i>34 10</i>								
<i>Checked L. Newton June 1 to 28</i>	<i>28</i>	<i>"</i>	<i>28 00</i>		<i>28</i>	<i>"</i>	<i>2 80</i>							<i>30 80</i>	<i>73 2-6-16</i>				<i>156 23-6-16</i>	<i>114 16-6-16</i>		
<i>29/6-31/7</i>	<i>33</i>	<i>"</i>	<i>33</i>		<i>33</i>	<i>"</i>	<i>3 30</i>							<i>36 30</i>	<i>1081 2/1</i>							
<i>1/9. 8</i>	<i>31</i>	<i>"</i>	<i>31</i>		<i>31</i>	<i>"</i>	<i>3 10</i>							<i>24 10</i>	<i>112 2/1</i>							
<i>Checked W. Ward 1. 20/9</i>	<i>30</i>	<i>1.00</i>	<i>30 -</i>		<i>30</i>	<i>10</i>	<i>3</i>							<i>33 -</i>								
<i>Oct. 1-31.</i>	<i>31</i>	<i>"</i>	<i>31 00</i>		<i>31</i>	<i>10</i>	<i>3 10</i>							<i>34 10</i>								<i>1951 7/13/14/</i>
<i>Nov</i>	<i>30</i>	<i>"</i>	<i>30</i>		<i>30</i>	<i>"</i>	<i>3</i>							<i>33</i>	<i>8779. 11/6</i> <i>51327. 18/4</i> <i>1423 Shov. 8/11</i> <i>1682 12/14/15</i> <i>1581 H. 6/12</i>							
<i>Dec. 1-31</i>	<i>31</i>	<i>"</i>	<i>31</i>		<i>31</i>	<i>10</i>	<i>3 10</i>							<i>34 10</i>								
			<i>24 50</i>																			
<i>Jan</i>	<i>31</i>	<i>1.00</i>	<i>34 10</i>											<i>34 10</i>	<i>4192 CCA 23-2 4309 CCA 9-1 1090 26 Bm 13/13 Ca</i>							
<i>Feb</i>	<i>28</i>	<i>"</i>	<i>30 80</i>											<i>30 80</i>								
<i>Mar</i>	<i>31</i>	<i>"</i>	<i>34 10</i>											<i>34 10</i>	<i>CCP 5335 12/1</i> <i>CCP 5723 28/2</i> <i>1099 2</i>				<i>369 16/3</i> <i>10 Kes</i> <i>478 29/3</i>			
<i>Apr</i>	<i>30</i>	<i>"</i>	<i>33</i>											<i>33</i>								
			<i>401 50</i>											<i>13 40</i>	<i>414 90</i>							

MOTIONS, &c.

EFFECTIVE DATE	AUTHORITY
17-5-17	70118 19/5/17 10 hrs

REG'L. No. 120453 RANK *Private* NAME *Lavalliere John.*  
 IF IN PERMT. CORPS } UNIT *69th Batta.* TRANSFERRED TO *22nd Bn.* DATE *28-6-16* AUTHORITY *BO-152*  
 WHAT UNIT }  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO *COTE* DATE *1-10/16* AUTHORITY *21/9/16*  
 PLACE OF ATTESTATION *Montreal* TRANSFERRED TO *10th Res. Bn.* DATE *11.8.17* AUTHORITY *AR*  
 DATE OF ATTESTATION *16-8-15* TRANSFERRED TO *22 Bn* DATE *1/3/18* AUTHORITY *AD*

ASSIGNED PAY MONTHLY \$ *20<sup>00</sup>* DATE EFFECTIVE *July 1<sup>st</sup> 1916*  
 PAYABLE TO *Mrs. Hermine Lavalliere* 162 Workman St. Montreal *Que.* RELATIONSHIP *wife*

HOSPITAL, &c.

NAME OF HOSPITAL

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE  
 PAYABLE TO RELATIONSHIP  
 STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON  
 DISCHARGE DATE AND PLACE REASON AND AUTHORITY  
 ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)  
 ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ACQUITTANCE ROLLS

2		3		4	
No.	DATE	No.	DATE	No.	DATE

CASH PAYMENTS						ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1	2	3	4	CREDIT	DEBIT								
									13 40				Balance from Canada.
	5 00					20 00		25 00	22 50				500 paid in bar. Gen. on doct.
		156 23-6-16		4 87									
		114 16-6-16		4 86		20 00		39 46	13 84				
681 2/1				761		40		22 61	27 53				
				762		70		22 62	39 01				
						20		20	52 01				
		1951 7/13 H/14/10		122		20 00		21 22	64 89				Y'd to beal 1-10/16
						20		24 86	73 03				Bethy L.P. 166
8779. 11/16						20		27 30	79 83				2 2/9
1327. 18/16						20							
682 12/16						20		90 75	23 18				
581 11. 6/16						20	5 50	25 50	28 48				550 - 5 days 2F.P. drink BOSS CCD. 23/12/16
						20		44 45	18 13				
						20		24 87	26 26				
						3936	65 87	23 31	14 60	240	5 50	388 64	



ohn

MENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			
23	31	14 60	240	5 50	388 64	26 26			
			20	20		39 26			
						40 36			
9	73								Reduced to Rank for 2 days 7P# Ans L 30 5.17 630 rem to 9 Am 31/5/07 D 5 132. 15 Res 2/19 9010 <sup>th</sup> Resku 11/8
7	30	20	240	46 73	26 63				
7	30	20		20	40 73				
		20		20	31 73				
				17 03	37 80				
44	64	14 60	340	49 20	21 60				

CR.1	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE
		12 49			20	27 59
		1 78				25 81
		14 27			20	
84	10.					
34	10					
	1185 <sup>24</sup> / <sub>18</sub> 22 Am					

\* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-	1-5-16	EFFECTIVE DATE:-	
AMOUNT:-	20 <sup>00</sup> .	AMOUNT:-	
NAME, ADDRESS, RELATIONSHIP & AUTHORITY		WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.	
<p><i>My</i></p> <p>Mrs. Hermine Lavalliere 162. Workman St. Wife. Montreal. Can</p>			

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT

PARTICULARS OF RENDERING NON-EFFECTIVE:-

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS
1918				
Mar 31.	Bal Fwd,			
apl				AR 14. 22 Bns 5/4/18
				" 92 " 26/4
				ap ban
	P P	33		
		33		
MAY	"			ap ban
	P. P	34 10		
		34 10		
JUN	do	33		ap ban
				AR 727 6.9.22 6/6
				" 1400 13 bon Dep 25/5
				" 939 6.9.22 21/6
		33		
JUL	do	34 10		ban ap.
				AR 1170 2 D Wing 9
				" 1408 " "
		34 10		
AUG	do	34 10		ap. Can
		34 10		
SEP	do	33		ap. Can
				In cont. J. 8. 18 to 21. 8. 18 J+C.
				24.0M 21. 8. 18 for wood Drums
				Jan 16 21. 8. 18 3P. (10. 9. 18)
				50 P. 22 Bn 10. 9. 18
				Woolg JOK. 2 D W Wing 2. 9
		33		
OCT	ol	34 10		AP
		34 10		
Feb	App of 17 5/7 to 17 15/4 e 10	4 5		
		1 50		
	n/d on Red week to Kant 5 3/5/19 w/c/19	10		
	1 day as Cpl	1 50		
				AP Bal to Can 10/31/19

9-10-18 cha

1918

SEPARATION ALLOWANCE. ENGLAND or CANADA.

NAME:- **LAVALLIERE John.**  
 NUMBER:- **120.453.**

EFFECTIVE DATE:-  
 AMOUNT:-  
 WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>PTO.</i>

UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK.

UNIT AND TRANSFERS			
ORIGINAL UNIT:- <b>69 B<sup>m</sup>.</b>			
DATE ACCOUNT FIRST OPENED:- <b>1-5-16</b>			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
	<i>1/11/18</i>	<i>26/11/18</i>	<b>22 B<sup>m</sup></b> <i>PTO</i>

DATE OF PAYMENT	NUMBER OF A/R	UNIT PAID BY	AMOUNT

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
<i>PAY BOOK CHECKED</i> <i>Date: 16-11-18</i>	<b>1 00</b>	<b>10</b>		

CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
							<b>25 81</b>		
		AR 14. 22 Bm 5/4/18	1 78				<b>24 03</b>		
		" 92 " 26/4	3 57				<b>20 46</b>		
		ap ban				20	<b>46</b>		
33							<b>33 46</b>		
33			<b>5 35</b>			20			
		ap ban				20	<b>13 46</b>		
34 10							<b>47 56</b>		
34 10						20			
33		ap ban				20	<b>60 56</b>		
		AR 727 6 S B D 6/6	8 92				<b>51 64</b>		
		" 1400 13 bon Dep 25/5	1 78				<b>49 86</b>		
		" 939 6 S B D 21/6	4 46				<b>45 40</b>		
33			<b>15 16</b>			20			
34 10		ban ap.				20	<b>59 50</b>		
		AR 1170 2 D Wing 9/7	4 46				<b>55 04</b>		
		" 1408 " 19/7	3 57				<b>51 47</b>		
32 10			<b>8 03</b>			20			
34 10		ap. Can				20	<b>65 57</b>		
34 10						20			
33		ap. Can				20	<b>48 57</b>		
		In cont. 21. 8. 18 to 21. 8. 18 J+C. 6m 24.0m 21. 8. 18 for wood trunk Jan 21 to 21. 8. 18 J.P. (10. 9. 18) 50 Pp 22 Bm 10. 9. 18				52 90	<b>35 67</b>		
		Woolg Jor. 2 D W Wing 2. 9. 18	57				<b>35 10</b>		
33			<b>57 42 90</b>			20			
34 10		AP				20	<b>49 20</b>		
34 10						20			
4 5							<b>50 80</b>		
1 50							<b>50 70</b>		
10		DR Bal to Can 26/3/19	<b>50 10</b>				<b>50 70</b>		
1 50			<b>50 70</b>				<b>50 70</b>		

*9-10-18 cha*

*PTO.*

**69 B<sup>m</sup>.**

**1-5-16**

**22 B<sup>m</sup>**  
*PTO*

**1 00** **10**

**25 81**  
**24 03**  
**20 46**  
**46**  
**33 46**  
**5 35** **20**  
**13 46**  
**47 56**  
**20**  
**60 56**  
**51 64**  
**49 86**  
**45 40**  
**15 16** **20**  
**59 50**  
**55 04**  
**51 47**  
**8 03** **20**  
**65 57**  
**20**  
**48 57**  
**52 90** **35 67**  
**35 10**  
**57 42 90** **20**  
**49 20**  
**20**  
**50 80** **25/2**  
**50 70** **50 70**  
**50 10**







20 E. unit

# MEDICAL HISTORY OF AN INVALID.

1. Station. **Valcartier Camp**
2. Regiment or Corps. **249th Bn. C.E.F.**
3. Regimental No. and Rank. **1069538**  
**Private**
4. Name. **John Baptiste Lavallier**
5. Age last Birthday. **36 years**
6. Enlisted on **21st Feb. 1916**  
at **Indian Head, Sask.**
7. Former Trade or Occupation. **Farmer**
8. General remarks on his :—  
(a) Conduct. **Good**  
(b) Habits. **Good**  
(c) Temperance. **Temperate**
- (For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)
- Date. **20th Sept. 1917**

DEPT. MILITIA & DEFENCE  
SEP 30 1917  
H.Q. CANADA

9. Service.	Years.	Days.
	<b>1</b>	<b>212</b>
	PERIODS.	
	FROM.	To.
<b>217th Bn.</b>	<b>21.2.16</b>	<b>April, 1917</b>
<b>Spl. Service, Regina.</b>	<b>Apl. 1917</b>	<b>26.5.17</b>
<b>249th Bn.</b>	<b>26.5.17</b>	<b>20.9.17</b>

10. (a) Disease or disability. **Pulmonary Tuberculosis**  
(b) Date of origin. **July, 1917**  
(c) Place of origin. **Valcartier Camp**  
(d) Cause. **Infection**
11. Present Condition. (Most Important). **Thin, rather poorly nourished man, with cough; worse at nights. Limited expansion over both lungs, and an area of diminished resonance on right side below sixth rib, back and front, diminished breath sounds over this area. No rales or other adventitious sounds. Other systems normal, except progressive loss of flesh and strength.**  
(To include full description of present disabling condition or conditions.)
12. (a) Is the disability the result of service or climate? **Yes**  
(b) Has it been aggravated by intemperance, vice or misconduct? **No**

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

One vaccination on each arm. Scar on  
inside of right elbow

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held?

Not applicable

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not applicable

14. Treatment Valcartier Camp Hosp. 17th July to date.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

Not applicable

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

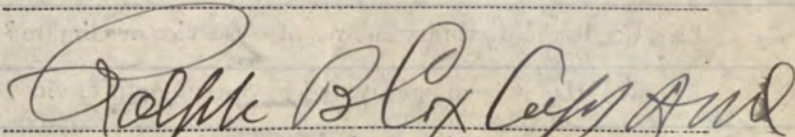
Six months with Sanitarium treatment, after that  
nil. Without treatment, gradually growing worse.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions.

100% for six months, after that probably  
nil

18. State if for discharge on account of unfitness for Service.

Yes

  
Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. Yes

11. Yes

12. Yes

15. Yes

16. Yes

17. Yes

18 Is he unfit for Military Service. Yes

Recommendations : That he be sent to Sanitarium for treatment of Tuberculosis, to which he consents.

Signatures :—

*W. Ross Capt MC* President.

*John H. Mason Capt MC*

Station. Valcartier Camp

Date. 22nd Sept. 1917

*W. Scully* Members

Date. SFP 26 1917

*Edwin L. L. L.*  
Asst. Director of Medical Services.

Approved.

Date.

Director-General of Medical Services.

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

Index No.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

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.....

Date of final Medical Board or decision. } Administrative Medical Officer.

Militia Form B. 227. 150 m-5-16. H. Q. 1772-89-117.	
<b>DETAILED MEDICAL HISTORY OF INVALID.</b>	
Station	
Corps	
Regimental No.	Rank
Name	
Disability	
Date	
Hospital or Station transferred to for final disposal.	
Date of final disposal	
How finally disposed of	

The original Report is invariably to accompany the discharge documents of Invalids.

*Def 26665*  
*414 23/9/16*

# PROCEEDINGS OF A MEDICAL BOARD.

Dated at Shouham Nov 13 1916.

No. 120453 Rank P6- Name Lavalliere Jan

Local Unit..... Overseas Unit 22 Batt Age 34

Examination held at Can

DISABILITY  
Overseas—Local.  
(scratch one out)  
Trench Foot

### PRESENT CONDITION.

Man in Trench 3 months. - Return and  
gaps in amount of Trench Foot - have Bunch  
Boys signs. He is too brittle but still supports  
with pain only - amon. (magnolia). Constipation  
by marching, some pains in feet.

### BOARD RECOMMENDS:—

- 1. Fit for Duty..... -
- 2. Fit for duty after..... 6.....weeks' physical training.
- 3. Fit for Temporary Base Duty..... -.....weeks.
- 4. Fit for Permanent Base Duty..... -
- 5. Discharge..... -

Signatures:—

Robt. Hammett President.

Members

W. S. ... Capt

APPROVED

Dated at Shouham 1916.

D. J. M. Dwyer

13 NOV 1916

Captain, C.A.M.C.  
for A.D.M.S., Canadians, London

# PROCEEDINGS OF A MEDICAL BOARD

..... Dated at ..... 1918

..... No. Rank Name

..... Local Unit Overseas Unit Age

..... Examination held at

DISABILITY  
 Overseas-Local  
 (attach one out)

## PRESENT CONDITION

## BOARD RECOMMENDS --

1. Fit for Duty .....
2. Fit for duty after ..... weeks' physical training
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures --

..... President

Members

APPROVED

For A.D.M.S.

..... Dated at ..... 1918

130  
 1019  
 1918  
 1019  
 130

Ref.No..

Moore Barracks Canadian Hospital,  
Shorncliffe 7.11.16

From-  
Officer 1/c Medical Division.  
To-  
Officer 1/c Hospital.

Lavellers J.Pte.  
120453 22nd Batt.

Re marginally noted  
man who was admitted into Hospital  
7.10.16 with a diagnosis of Trench  
Fever which he contracted in Aug.1916.  
This patient has recovered.

Urine normal.  
W.A. Negative.  
He is discharged to  
the C.C.A.C. as fit for duty.

*Squaclay*

MAJOR C.A.M.C.  
Officer 1/c Medical Division

AJMcK/HGM.

To-  
O.C. C.C.A.C.  
Shornham

For your information please.

*WMS*

COLONEL C.A.M.C.  
Officer 1/c Hospital.

Faint, illegible text at the top of the page.

Faint, illegible text in the upper middle section.

Faint, illegible text below the upper middle section.

Large block of faint, illegible text on the left side of the page.

Handwritten signature or name in cursive script.

Faint, illegible text in the middle section.



Faint, illegible text below the circular stamp.

Faint, illegible text in the lower middle section.

Handwritten initials or signature in the lower middle section.

Faint, illegible text at the bottom of the page.



Regtl. No., Rank and Name Pte Lavelliere Corps 22<sup>nd</sup> Batt.  
 Disease French Fever. Hospital None Barracks Canadian  
 To Officer i/c Laboratory. Ward 15.

Please carry out an examination of the accompanying specimen of Blood  
 with special regard to Wasserman.

Date 16<sup>th</sup> October 1916. A.G. Drummy Capt  
 O. i/c Ward.

**LABORATORY REPORT.**

**NEGATIVE**



A.G. Drummy  
 Capt O.C.  
 No. 2 Canadian Mobile Laboratory,  
 FOLKESTONE.

Date of Examination \_\_\_\_\_

O. i/c Laboratory.

Regt. No., Rank and Name \_\_\_\_\_  
 Corps \_\_\_\_\_  
 Disease \_\_\_\_\_  
 Hospital \_\_\_\_\_  
 To Officer in Laboratory \_\_\_\_\_  
 Ward \_\_\_\_\_  
 Please carry out an examination of the accompanying specimen of \_\_\_\_\_  
 with special regard to \_\_\_\_\_  
 Date \_\_\_\_\_  
 Ward \_\_\_\_\_

LABORATORY REPORT.

*[Faint handwritten signature]*

Date of Examination \_\_\_\_\_  
 O. in Laboratory \_\_\_\_\_

# PROCEEDINGS OF A MEDICAL BOARD.

*C.*

Dated at St Leonards Mch 2<sup>nd</sup> 1917.

No. 120453 Rank Pte Name Cavalliere J.

Local Unit..... Overseas Unit 22 Bn Age 38

Examination held at 3rd C. I. D.

DISABILITY: Overseas ~~Local~~  
(scratch one out). Trench fever

## PRESENT CONDITION.

### BOARD RECOMMENDS:-

- 1. Fit for Duty..... Yes
- 2. Fit for duty after..... weeks' physical training.
- 3. Fit for Temporary Base Duty ..... weeks.
- 4. Fit for Permanent Base Duty.....
- 5. Discharge .....

### Signatures:-

Members { AS Bell ..... President.

APPROVED

Dated..... 1917.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at \_\_\_\_\_ 1917

No. \_\_\_\_\_ Rank \_\_\_\_\_ Name \_\_\_\_\_

Local Unit \_\_\_\_\_ Overseas Unit \_\_\_\_\_ Age \_\_\_\_\_

Examination held at \_\_\_\_\_

DISABILITY.  
Overseas-Local  
and for one year.

PRESENT CONDITION.

BOARD RECOMMENDS-

- 1. Fit for Duty
- 2. Fit for duty after \_\_\_\_\_ weeks' physical training
- 3. Fit for Temporary Base Duty \_\_\_\_\_ weeks
- 4. Fit for Permanent Base Duty
- 5. Discharge

Signatures

President \_\_\_\_\_

Members \_\_\_\_\_

APPROVED

Dated \_\_\_\_\_ 1917

CLINICAL CHART.

Army Form B. 181.

Corps 22 Batt

(To be attached to Case Sheet.)

Military Hospital \_\_\_\_\_

No. 120453

Rank and Name Pte Lavellin John

Age 38

Service 19/17

Disease Trach Fever

Date of admission Oct 7/11

Date of discharge \_\_\_\_\_

Result Cured

Dates of Observation	Days of Disease																													
	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3		
Temperature, Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	
	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	A.M.P.M.	
R 107°																														
106°																														
105°																														
104°																														
103°																														
102°																														
101°																														
100°																														
99°																														
98°																														
97°																														
Pulse per Minute		68	72	76	80	76				80											78	70	70	70				76		
Respirations per Minute		20	20	20	20	20				20												20	20	20	20				20	
Motions per 24 Hours																														

Mildly checked

ward 15  
C.C.C.C.

Signature A. J. Murray Capt In charge of case.

CHART

No. 10043

Date of admission

Date of discharge

Initials

Label of Observation

Rate of Respiration

Temperature

107  
106  
105  
104  
103  
102  
101  
100  
99  
98  
97

Rate per Minute

Respirations per Minute

Motion of Heart

98  
98

98  
98

In charge of case

Signature

W. 2601-511, 150,000, S.P. D. A. P. 10000, 10000

## REQUISITION

DATE Oct 11

Reg. NUMBER 120452

NAME Lavelle

UNIT 22 Batt

WARD 15

DIAGNOSIS Pleurisy

EXAM. REQUIRED. Routine

## REPORT

COLOUR Lt. amber

S.G. 1.012

REACTION acid

SUGAR neg

ALBUMIN neg

MICROSCOPIC

Chas. P. Jentsch Capt.  
MEDICAL OFFICER

C. L. Douglas  
Capt. C. A. M. C.  
Officer i/c Laboratory.

REPORT  
COLOR  
S. S.  
IN OTION  
SUGAR  
ALBUMIN  
MICROSCOPIC

EXAMINATION  
DATE  
No. NUMBER  
NAME  
UNIT  
WARD  
DIAGNOSIS

PHYSICIAN

*Wm. H. ...*  
MEDICAL CENTER

Office of Laboratory  
No. 10, A. H. C.



REQUISITION *Urinalysis.*  
DATE *Oct 13*  
Reg. NUMBER *20453*  
NAME *Pt. McQuaid Lowell*  
UNIT *2<sup>nd</sup> Bath*  
WARD *15-*  
DIAGNOSIS *French Fever*  
EXAM. REQUIRED. *Complete*

REPORT  
COLOUR *lt. Amber*  
S.G. *1020*  
REACTION *acid*  
SUGAR *neg*  
ALBUMIN *neg*  
MICROSCOPIC

MEDICAL OFFICER  
*H. G. Murray Capt*

*C. Douglas*  
Capt. C.A.M.C.  
Officer i/c Laboratory.

*as y.*

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Office & Laboratory  
Albany, N.Y.

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ALBANY  
ALBANY

Date of Enlistment

17/9/13

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

# L

2714

Apr 2/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	\$ 25.00		
	1-12-17		
	P.O. 3257		

RATE OF ASSIGNMENT

20			
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5th York

PARTICULARS OF SEPARATION ALLOWANCE

No. 120453  
 Rank Pte Promoted Reverted Discharge  
 Soldier's Name John Lavalliere  
 Battalion 69th Batta M.F.W. 7554  
 Beneficiary Mrs. Hermina B. Lavalliere Noled 24/11/18  
 Relationship wife  
 Address 162 Workman St. Montreal Que  
 Montreal Q

PARTICULARS OF ASSIGNMENT

Name Mrs Hermina Lavalliere <sup>Wife</sup>  
 Address 162 Workman St. Montreal Que  
 Change of Address  
 1 40 Canadian Pat Fund in trust for.  
 2 4 St Remy St-Hervey Montreal  
 3 40 Canadian Pat Fund in trust for  
 +4 4 St Remy, St-Hervey, Montreal (14-2-18) P 2ue

Date	Cheque No.	Amount S/A	Amount A/P	Total
1917				
Dec. 31		569	420	989
Jan	71245 X	30		30
Jan	66759 F		20	20
Feb	75878 P	25	20	45
Mar	91045 J	25	20	45
Apr	14863 G	25	20	45
May	14784 L	25	20	45
June	205797	25	20	45
July	31720 P	25	20	45
Aug	36342 J	25	20	45
Sept	46721 K	25	20	45
Oct	51569 P	25	20	45
		824	620	1444
Mar	219 Y	10		10

10736-9-53

REMARKS

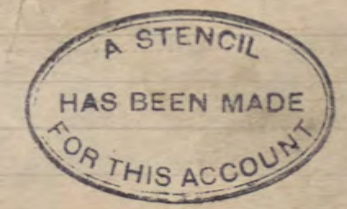
MRO 165/18.

Jan 1918 a Pecheque was paid on separate A/P acct account consolidated File 10736-j-53

KILLED IN ACTION	DATE 9-10-18.
DIED OF WOUNDS	DATE 2-24-10-18.
C. L. No. 3417d2	DATE 30-10-18.
M.R.O. 16140	TO DESTROY RENDERED 30-10-18.
B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE	
CLERK [Signature]	DATE 30-10-18.

Pension granted eff 1-11-18, B.P.C. a.e.o 16383 To adj increase in la. for Sept & Oct. Filed 7/1/19

M. F. W. 128  
6000-6-17-1772-38-1141  
L. L. 22220-M. & D. 7888.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. \_\_\_\_\_

Rank \_\_\_\_\_ Promoted \_\_\_\_\_ Reverted \_\_\_\_\_ Discharge \_\_\_\_\_

Soldier's Name \_\_\_\_\_

Battalion \_\_\_\_\_

Beneficiary \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Change of Address \_\_\_\_\_

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

*10/17*

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
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M. F. W. 128  
 400M-6-17-1772-38-1141  
 L. L. 22320-M. & D. 7988.