

5th PIONEER BATTALION

ATTESTATION PAPER.

No. 1078192

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

U. E. F.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Panton*
- 1a. What are your Christian names? *Arthur*
- 1b. What is your present address? *721 Adam St. Mississauga, Ont. Can Eng*
2. In what Town, Township or Parish, and in what Country were you born? *County Kent (Lewisham) Eng*
3. What is the name of your next-of-kin? *William James Panton*
4. What is the address of your next-of-kin? *87 Woodington Road NE London Eng*
- 4a. What is the relationship of your next-of-kin? *Brother*
5. What is the date of your birth? *24th May 1881*
6. What is your Trade or Calling? *Stager*
7. Are you married? *Yes Separated 18 years not dependent*
8. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes*
9. Do you now belong to the Active Militia? *4 Field Co C.E.*
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*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Arthur Panton*, 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.

Arthur Panton (Signature of Recruit)

Date *May 31* 1916 *J. Platt* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Arthur Panton*, 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.

Arthur Panton (Signature of Recruit)

Date *31st May* 1916 *J. Platt* (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at *Montreal* this *31st* day of *May* 1916.

R. M. B. Lyle (Signature of Justice)

Commissioner Superior Court
District of Montreal.

M. P. W. 28.
809M.-2-14.
H. Q. 1772-1914.

*clearly checked
10/2/17*

Description of Arthur Panton on Enlistment.

Apparent Age 35 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 8 1/2 ft. ins.

Chest measurement. { Girth when fully expanded 36 ins.
 Range of expansion 3 ins.

Complexion

Eyes

Hair

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

*Appendicitis seen
 Scar on right eye*

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 May 31 1916

Place Montreal Que

[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.

Arthur Panton having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

Date 31st May 1916

[Signature] (Signature of Officer)
 Lieut. Colonel
 Officer Commanding
 5th Overseas Pioneer Battalion C.E.F.

DISCHARGE DOCUMENTS

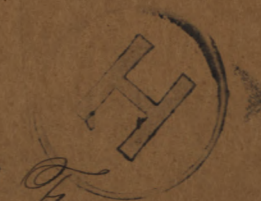
R. O. No.

H. Q. No.

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... *2*
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet..... *1*
- Compulsory Stoppages.....
- Casualty Forms..... *1*
- Proceedings on discharge..... *1*
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet.....
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet..... *1*
- Clothing Transfer Certificate.....
- Inventory of Kit..... *1*
- Last Pay Certificate.....



Name *Panton, Arthur*
 Regt. No. *1048/92* Rank *Private*
 Corps *5th Pioneer's Battalion. C. E. F.*



Medically Unfit

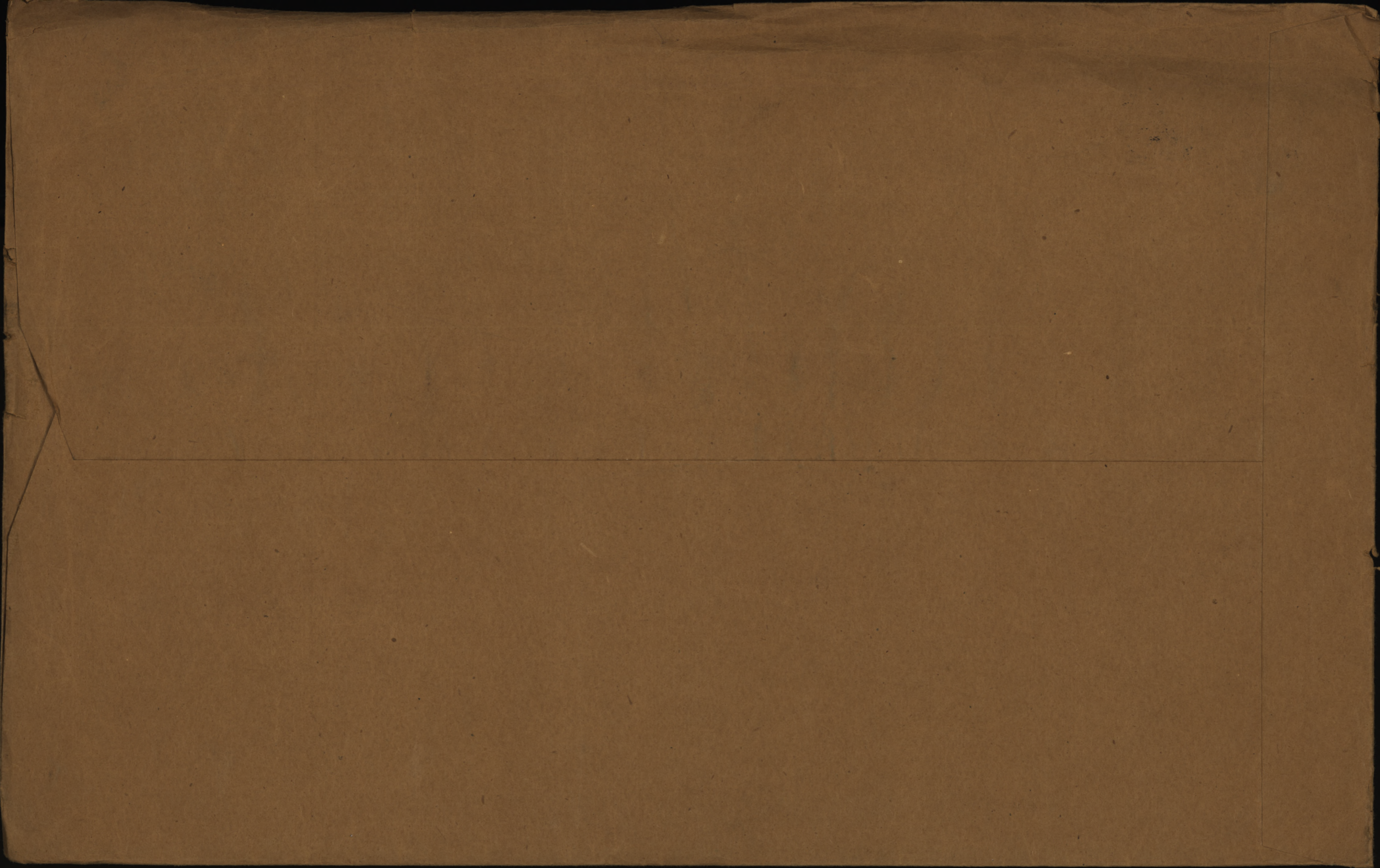
1853

B.P.C.
6-4-20
Spec - 307

Papers



M.C.



m/n.
SURNAME.

Panton

(649-P-2232)

CHRISTIAN NAMES

Arthur

S.O.S. Dis 28-1-17. H

REGL. NO. 1078192

RANK

Pioneer

UNIT

5th Pioneer

Bn.

FORMER CORPS

4th Fld. Eng.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Panton, William James.

RELATIONSHIP TO SOLDIER

Brother

ADDRESS

87 Worthington Rd. N.E. London Eng.

COUNTRY OF BIRTH

England. Lewisham Co. Kent.

DATE

May 24th 1881.

PLACE OF ATTESTATION

Montreal. P.Q.

DATE

May 31st. 1916.

MARRIED

yes.

SINGLE

WIDOWER

TRADE OR CALLING

Stager

RELIGION

Church of England.

DESCRIPTION.

APPARENT AGE

35 YEARS

MONTHS

HEIGHT

5 FEET

8 1/2 INCHES

CHEST MEASUREMENT

36 INCHES

EXPANSION

3 INCHES

COMPLEXION

—

EYES

—

HAIR

—

DISTINGUISHING MARKS

Appendicitis scar, Scar on R. eye.

MEDICAL EXAMINATION.

PLACE

Montreal P.Q.

DATE

May. 31st. 1916.

Present Address

721 Adam St., Maisonneuve,

P.Q.

No. 1078192 RANK

PE

NAME

Panton A.

T. O. S. 31-5-16

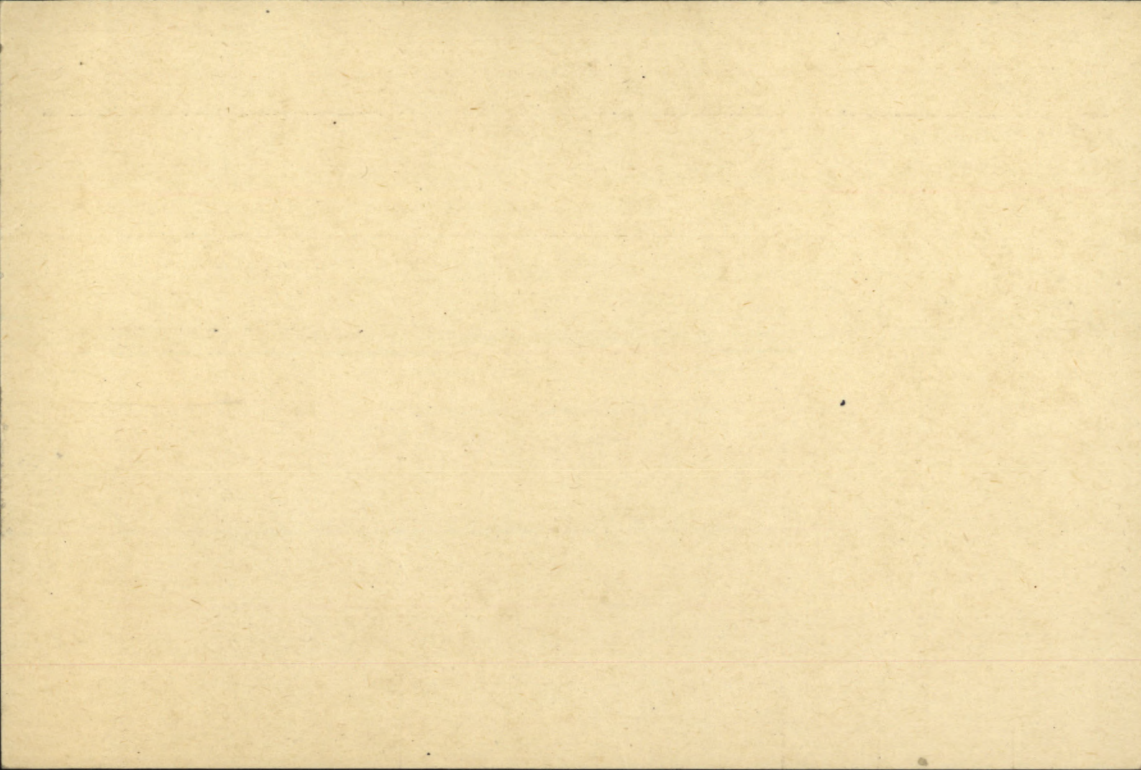
UNIT

5th Pioneer Battalion. C. & F.

(10.0.65.31-5-16)

M. D. 4.

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
1916 may 31	1916 may 31	✓		
	June	n.		
	July	n.		
aug 10	n.	n.		



DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DIVISION.....

NAME OF SOLDIER

Anthony Santoro

REGIMENT

1st Overseas Dental Battalion

No. *1078192*

DATE	No.	FILLINGS				Extracted	Anesthetic	Treated	Crowns	Cleaned	As 2 3	Pulp Removed	Put Pulp	Artificial Teeth	OPERATOR	REMARKS
		Amal.	Phosp.	G. Per.	Cement											
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RECEIVED
MAY 10 1964
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D. C.

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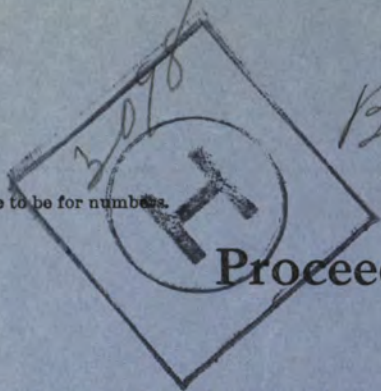
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MAY 10 1964

FEDERAL BUREAU OF INVESTIGATION

U. S. DEPARTMENT OF JUSTICE

3098



BPL 9034 No Clas.

This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No.	1078192
Rank	Private
Name	<u>Panton, Arthur</u>
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	5th Pioneers Battalion, C.E.F.
Date of Discharge	January 28th 1917.
Place of Discharge	Montreal, P.Q.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age.....35.....years.....6.....months.	Descriptive Marks Scar on right eye.
Height.....5.....feet.....8½.....inches.	
Complexion Medium	
Eyes Grey	
Hair Brown	
Trade Stager	
Intended place of residence } Laurentide Inn (To be given as fully as practicable.) } St Agathe, P.Q.	

2. The above-named man is discharged in consequence of **Medical Unfitness due to:- Tuberculosis. H.Q. Authority Dated January 3rd 1917. 4.D. 22--P--152. "Under Prov:- H.Q. 60-4-8 or Sept. 1915. "**

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

3. Conduct and character while in the service have been, according to the records, etc.

Good.

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

To continue treatment.

mm
Searched Feb. 10/2/17.

5. He is in possession of the following number of G. C. Badges:

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

Three horizontal dashed lines for listing medals and decorations.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date)..... Commanding

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) Montreal, P.Q. A Janton (Signature of Soldier.)

(Date) January 28th 1917. S. L. Wieding (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....(Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years.....days.

Total.....years.....240 days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place) Montreal, P.Q.

(Date).....

(Signature) [Signature] Captain.



Military Hospitals Commissioners Command.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

NO RESERVATIONS.

A. J. Panten

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
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N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.