

ATTESTATION PAPER.

No. 931538

2. Construction Bn.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? *Lane*
- 1a. What are your Christian names? *John James*
- 1b. What is your present address? *279 Bellard Ave St. Catharines, Ont.*
- 2. In what Town, Township or Parish, and in what Country were you born? *St. Catharines, Ont.*
- 3. What is the name of your next-of-kin? *Elvie Lane*
- 4. What is the address of your next-of-kin? *279 Bellard Ave. St. Catharines*
- 4a. What is the relationship of your next-of-kin? *Mother, 19 Ont.*
- 5. What is the date of your birth? *18th June, 1898, Can.*
- 6. What is your Trade or Calling? *Labourer*
- 7. Are you married? *No.*
- 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? *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, *John James Lane*, 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.

Date *Sept 26* 1916. *John James Lane* (Signature of Recruit)
W. J. Keating (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John James Lane*, 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.

Date *Sept 26* 1916. *John James Lane* (Signature of Recruit)
W. J. Keating (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 *St. Catharines* this *26* day of *Sept* 1916

W. J. Keating (Signature of Justice)

Description of John James Lane on Enlistment.

Apparent Age... 18 years 3 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. 9 ins.
 Chest measurement { Girth when fully expanded..... 35 ins.
 Range of expansion..... 2 ins.
 Complexion..... Colored
 Eyes..... Brown
 Hair..... Black

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

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..... 26 September 1916

Place..... St. Catharines, C.

John J. Jory
 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 James Lane..... 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.

C. H. Reis Capt..... (Signature of Officer)

Date..... Sept 26 1916.

REGIMENTAL DOCUMENTS

Pte. NAME Wane John James

REGT. NO. 931.538 UNIT 2nd Bn H. Q. FILE NO. _____

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

M

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

1. 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)

1. 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)

2. 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)

1. 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)

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

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

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

1. W.M.S. 1375

1. Form. C. W. 3.

1. C.A.W.C. 5009a.

2. Misc papers.

DEATH
Category

DISCHARGE

Category

Memor

06825

DESERTION

H

(2)

3-12

22-12

26 12

407290

Box
5365

SURNÁME

CHRISTIAN NAME OR NAMES

REG. No.

Sane
RANK
V. E.
HOSPITAL

UNIT

2 Com R. S. Depot

J. J.

TROOP

931538

BATTY.

DATE OF ADMISSION

1.

59. Gas Lt Station
Costa Rica

HOSP.

13. 8. 18
24-8-18

2.

9. Cav Gen. H. Kimmel

HOSP.

Ph. 4. 1. 19

3.

HOSP.

4.

HOSP.

DIAGNOSIS

1.

Wd. L.
Lac. Finger Acc.

2.

Lac Wd Penis.

3.

DISPOSITION

Dis. 27. 8. 18 DATE

REMARKS

Dis. 21. 2. 19.

Ad. 19. 8. 18 A 295. 2
31-8-18 A 306-2
5. 9. 18 A 310-2
14. 3. 19 C. 463
" "

A.M.D. 2 Dept.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.	
2.	
3.	
4.	
5.	
6.	
7.	

No. 931 538 RANK *Pte.*

NAME *Lane John James*

T. O. S. *29-9-16*
D.O. 41-3-10-16

UNIT *No 2. Construction Battalion.*

M. D. *6*

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

PAID
FROM

PAID
TO

SIG.
OR
REC'T

<i>1916</i>	<i>1916</i>	
<i>Sept 29</i>	<i>Oct. 31</i>	<i>n.</i>
<i>Nov.</i>		<i>✓</i>
<i>Dec.</i>		<i>✓</i>
<i>1917</i>	<i>Jan 1917</i>	<i>✓</i>
<i>Feb.</i>		<i>✓</i>
<i>Mar.</i>		<i>n.</i>



John. JAMES.

Name LANE

Rank

PTEReg. No. 931538Unit 2nd C.C.C.W.R.D.Next of Kin CANADA.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
13-8	59, Las. Co. S.T. 4	Lac. Bungen (Acc.)		A 195	11/13	34855
24-8	65 S. T. Regiment	Lac. W. Bungen L.		A 310	11/13	3527-2
27-8	Disch'd to duty	-	-	A 310		3693-7
4-1-19	9. B. Gen. Kimmel	Pk. Lac. va. Penis		C 46	J	7696
21-2-19	Discharged			C 46	J	79137
		(J.M.A.)				
			L/H			7-3-19

NAME Lane John James
RANK AND CORPS Pte Can Construction Co

REGT'L. No. 931538
H. Q. FILE No. 649

FOLLOWS
NO.
FOLLOWS

CABLE		NATURE OF CASUALTY
NO.	DATE	
Mrs Elvie Lane (Mother) 279 Welland Ave St Catherine Ont		
2495 ¹⁰⁻⁴ (also #La 306-2)	2-9-18	Adm to Stat H Prevent Aug 24 th /18 Lac wd finger accid

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
a 295	59 b. b. s	13-8-18	Lac finger. accid
D310 ^r	6 Stal Mevent.	27-8-18	" wd. s. finger acc. Disch
C463.	H 9 Con. Gen. Kinniel Park	4/1/9	Lac. und. penis,
C463.	L Desi.	21/2/9	Lac. und. penis

SURNAME

Lane,

CARD No. *92*

Sold Dis 30-3-19

demob 101 of 11-4-19

42nd

Br.

CHRISTIAN NAMES

John James

REGL. No.

931538

RANK

Pte.

UNIT

No. 2. Construction.

FORMER CORPS

Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Lane, Mrs. Elvie

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

*279 Welland Ave.
St. Catharines, Ont.*

COUNTRY OF BIRTH

Canada, St. Catharines, Ont.

DATE

June 15th 1898.

PLACE OF ATTESTATION

St. Catharines, Ont.

DATE

Sept. 26th 1916.

R/C 27-3-19 $\frac{292}{48}$ Pte.

0/828-3-17

From Halifax per S.S. "Southland" 28/3/17.

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Labourer.

RELIGION

Baptist.

DESCRIPTION.

APPARENT AGE

18.

YEARS

3.

MONTHS

HEIGHT

5.

FEET

9.

INCHES

CHEST MEASUREMENT

35.

INCHES

EXPANSION

2.

INCHES

COMPLEXION

Coloured.

EYES

Brown.

HAIR

Black

DISTINGUISHING MARKS

Not stated.

MEDICAL EXAMINATION.

PLACE

St. Catharines, Ont.

DATE

Sept 26th 1916.

Present Address.

279 Welland Ave.

St. Catharines, Ont.

~~20~~ mmw6
Number 931538 Rank ~~Pte~~ Spr.

Surname LANE

Christian Name John James

Unit CO R C C Theatre of war France

Date of Service 17-5-17

Remarks

Latest address 279 Welland Ave

St Catharines, Ont
Can.

Roll No. "B" Page 4493

B
V

9

27761

Resp. J. J. J. J.

ORIGINAL 931538 MEDICAL HISTORY SHEET

Surname Lance Christian Name John James

Examined { on 20th day of Sept 1916 Approved by J. M. Jory
 at St. Catharines Ont.
 Birthplace { City or Town St. Catharines Ont. Rank _____ M.O.
 County Lincoln

Apparent age 18
 Trade or occupation Labourer M.O.
 Height 5 feet 8 1/2 Inches M.O.
 Weight 145 lbs. M.O.
 Chest measurement { Minimum 33 inches M.O.
 { Maximum expansion 35 inches M.O.
 Physical development Good M.O.
 Small-pox Marks none M.O.

Vaccination Marks { Arm Right Left
 { Number — —
 When Vaccinated last 12/17 1916 L. G. R. J. S. Shepley M.O.
 (a) Marks indicating congenital peculiarities or previous disease _____ M.O.

(b) Slight defects but not sufficient to cause rejection
L. Eye 20/60 24/17 1916 L. G. R. H. Kent-Moyn M.O.
R. Eye 20/200 8/3/17 1916 L. G. R. Dan Murray M.O.
16/3/17 1916 L. G. R. Dan Murray M.O.

Enlisted on 20th day of September 1916 at St. Catharines Ont.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
No. 2 CONSTRUCTION, B'n. C.E.F.		<u>931538</u>		<u>26 Sept, 1916</u>
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Windsor, Ont.</u> <u>S. B. Bueck</u> Major, A. M. C.	<u>JAN 30 1917</u>	<u>on enlistment</u> <u>Murray Major</u> Capt., A. M. C.	<u>Fit</u> <u>Thompson</u> <u>Capt. C. M. C.</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.

931538

Surname *Jane* Christian Name *John James*

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 KIRKEL PARK, RMT		4	1	19	21	2	19	Ulcer on root of penis non venereal	49	Discharged to unit	<i>R. C. Mumford</i> <i>Ch. M. B.</i>

931538

DUPLICATE

To be made out in duplicate.

H.Q. 51-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

No. 2 CONSTRUCTION, B'n. C.E.F.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number..... 931538

(3) Full Name of Soldier..... John James Lane

(4) Place of Birth..... St. Catharines Ont

(5) Are you married, or not?..... No

(6) If married, state,
 (a) Full name of your wife.....
 (b) Present Postal Address.....

(7) Are you a widower?.....

(8) Have you any children?.....
 If so, give number of boys and girls.....
 Also their names and ages.....

(9) Is your Father alive? yes

If so, state name and address 279 Welland Ave. St. Catharines Ont

(10) Is your Mother alive? yes

If so, state name and address Elvie Lane

279 Welland Ave St. Catharines Ont

(11) If your Mother is a widow yes ~~yes~~ No

Are you her sole support, or not? yes

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

Ten (\$10) dollars x one son who is married

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

.....
.....
.....

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

yes

(15) Are you insured? yes

If so, in what Company? Metropolitan Life Ass. Company

Have you made arrangements for payment of your Insurance premium.....

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

NOV 15 1916

Date.....

D. H. Sutherland LT. COL.

Officer Commanding
Co. Comd'g No. 2 Construction Battalion, C. E. F.

Casualty Form—Active Service.

Regiment or Corps No 2 Construction Bn C. E. F.Regimental No. 931538. Rank Plt Name Lance John James

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

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

Extended _____ Re-engaged _____ Qualification (b) _____

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
14.12.18.	N.S.R.D.	To O.S. attached to gnd b. l. D for Qns & Relations	Bishott	14.12.18	D.O. 305.
	NSRD	ON COMMAND TO <u>COD Kinmel Park Rhyt</u>	BRAMSHOTT		PART II D.O. <u>NSRD 313 27/18</u> <u>ca. Knight</u> LIEUT. OFFICER i/c RECORDS, NOVA SCOTIA REGTL. DEPOT.
		Attached C.C.C:K. P. <u>10 JAN 1919</u> Part 2 Orders pending transfer to C. E. F. Canada.			
		Ceases to be attached on transfer to C.E.F. Canada. Part 2 Orders <u>10 JAN 1919</u> <u>C. E. F.</u>			
		Lieutenant for Officer Comd'g M. D. 2. C. W. Kinmel Park Camp, Rhyt.			

(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				

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—I.
Part I.

(1)*Substantive rank *Acting rank * <small>[To be entered in pencil to facilitate alteration.]</small> (4) Surname (5) Christian Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [<i>vide</i> A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps (3) Regtl. No.
--	---

(10) Enlistment (b)	(11) Engagement (c)
(12) Service reckons from (date)	(13) Special conditions (if any) of enlistment (d)
(14) Any subsequent variations (if any) } of conditions of service }	Initials and Rank of an Officer.

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (<i>vide</i> Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin	(Place)	(Signature of
(18) Demobilizer (f)	(Date)	Posting Officer
(19) Pivotal-man (f)	or (21) Corps trade and rate	
(20) Qualifications (g)		
(22) Extended {	(23) Re-engaged {	
(24) Miscellaneous entries:—		

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [*vide* A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoing-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.
Nothing to be written in this margin.

W1889—PP.1150 IM 5/18 G.W.P.Co (34/90)

College

Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer

Attached C.G.C. Kinmel Park to
 return to Canada. Part II Order
 No. _____ Ceases to be attached
 C.G.C. Kinmel Park by embark-
 ing for Canada, Part II Order
 No. 70 Jubine 21/12/19
 for Commanding 2 Wing
 Kinmel Park Gunn

1919 O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D. O. 101

MAR 30 1919 S. O. S. (DISCHARGED FROM H. M. S.) No. 2 DIS. DEPOT, PART II D. O. 101

P. L. Hurd

Lieut.
For G. C. No. 2 District Depot.

Nothing to be written in this margin.

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

aww
M. F. W. 54. (A. F. 1)
350m.—5-16
H. Q. 1772-39-920.

Casualty Form Active Service.

Unit, Regiment or Corps *The 2 Const. Batt. C.C.F.*

Regimental No. *931.538* Rank *pte* Name *John James Lane*
C. E. F.

Enlisted (a) *26-9-16* Terms of Service (a) *period of war* Service reckons from (a) *26-9-16*
76 months

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)

CERTIFIED CORRECT.
6 JUN 1917
MAY 7 1917
RECORDS - LONDON

Date	Report 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
		<i>Embarked from Canada</i>	<i>Halifax N.S.</i>	<i>25/3/17</i>	
		<i>Disembarked England</i>	<i>Liverpool</i>	<i>7/4/17</i>	
	<i>OO#2 Const Bn</i>	<i>Proceeded Overseas</i>	<i>Seaford</i>	<i>1917</i>	<i>Pl 2 L.O# St. P. Macleod Adjutant, No. 2 Construction Coy for</i>
<i>21/5/17</i>	<i>OC</i>	<i>Landed in France</i>	<i>17-5-17 NR</i>	<i>21/5/17</i>	<i>B 2069 P. 119. 25/7/17</i>
		<i> forfeits 5 days pay for making away with iron Rations</i>	<i>Sea.</i>		
<i>2.8.17</i>	<i>O.C.</i>	<i>28 Day. Y.P.#1 for making improper advances to a lady. Threatening her with a knife</i>	<i>Yield</i>	<i>1.8.17</i>	<i>B 2069 P. 131 13/11/17</i>
<i>17/11/17</i>	<i>OC</i>	<i>att to 37 Coy 67C</i>		<i>13/11/17</i>	<i>B 2113</i>
<i>4-6-18</i>	<i>OO</i>	<i>Still attached to 37 Coy</i>	<i>Sea</i>	<i>4-6-18</i>	<i>Enl. K.H. 18/11/184</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.
(b) e.g. Signaller, Shoeing Smith, etc. etc. also special qualifications in technical Corps duties. [P.T.O.]

Casualty Form - Active Service

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				
8-8-18	No 37 Coy L. F. L.	Admonished 2/8/18 for W.O.A.S. Leaving work without permission			B 2069
17-8-18	re 37 Coy	To C.C.S		13-8-18	B 213
13-8-18	59 teleb.	Lac. Jumper (Saw Cut) Admonished.		13-8-18	a 7129
20-8-18	50	Lac Jumper. Saw Cut (To 6 platy) (bwp)		24-8-18	a 7783
21-8-18	6 Platy	Lac. Wd. Jumper L. A. Admonished.		20-8-18	W1054
27-8-18	50	Lac. Wd. Jumper L. (acc) Sued.		27-8-18	W1774
31-1-8	acc	Reyama from Hospital	Sued.	27-8-18	B 213
31-10-18	acc 9 Oct 18	Granted 14 day leave	Sued	22-9-18	Letter 2-2 ref X 917-797 prop 63 of 7th 1918
12-10-18	37 Co 680	Reyama from Leave	Sued	7-10-18	B 213
21-11-18	37 Co. 670	14 days F.P.I W.O.A.S. I Refusing to work (2) Using obscene language to a W.O.	Sued	18/11/18	B. 2069. P 20. 66 69
4-12-18	62 B.D	Arrives at C. G. B.D		3-12-18	RR. 1794.
11 th 18	aaq	Trans to Eng & posted to N.S. Reg. Dep		14 th 18	KR 344 WR.

J. A. Hewett

Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, E. F.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2

Mrs Elvie Lane
(Assignee)

Name of Soldier

Lane J. J.

PAYMENTS.

*no 931538**Pte 2nd const bn*

L. L. Job 5470—Req. 6888.

15⁰⁰

Remarks.

APR 1917

Month.

Year.

Cheque No.

Amt.

April

1916

May

June

July

Aug.

Sept.

Oct.

Nov.

Dec.

Jan.

1917

Feb.

March

April

May

June

July

Aug.

Sept.

Oct.

Nov.

Dec.

Jan.

1918

Feb.

March

April

May

June

July

*6 PM credited soldier a/c with
\$30⁰⁰ for April + May
ASP P. 2, 4 23617 - 25⁰⁰/₁₇ 6620/17*~~*Z 4930 15*~~~~*K 8988 15*~~*Z 4930 Ret'd + cancelled 9⁰⁰/₁₇ 68.
K 8988 cancelled**Ac't suspended pending instructions
Re Assignee (Dec'd) 9-5-17 68.**PRB*

MILITIA AND DEFENCE
ASSIGNED PAY
 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.				

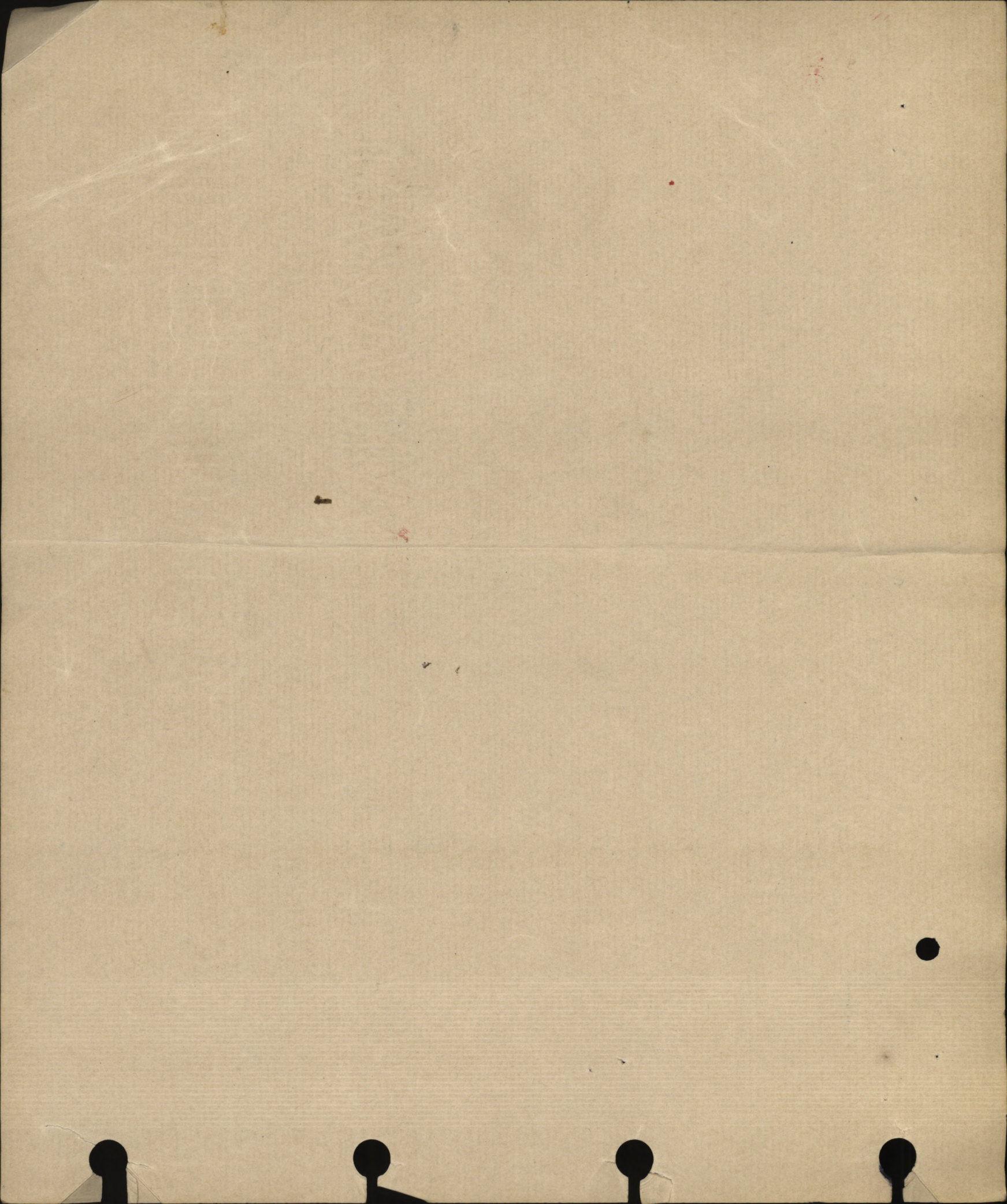
MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12
50m.—7-16
H. Q. 1772-39-819

To Whom *Mrs. Elvie Lane* By Whom Assigned *Lane J. J.*
Address *279 Welland ave.* Regtl. No. *931538*
St. Catharines Rank *Pte*
Ont. Corps *No. 2 Const. Bn.*
Rate *15⁰⁰* APR 1917

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			"Death of Assignee" Stop 1st. June 1/17 3 M 13 1/17 J. J. Lane 24/17
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			af to Stop April 1/17 -asp p 27 23617 - 23612 Feb 24/17
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



17-3-14
MILITIA AND DEFENCE

M. F. W. 11a.
50m.-6-16.
1772-39-818.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

M^{rs} Elvie Lane

W. Mother
PMENTS. Pte

Name of Soldier

Lane, John J

L. L. Job 4503.-Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		9894	40	40
May		84806	20	20 V 4806 Cancelled per address. 1.6.17RH.
June				20 No c League mother reported
July				X X dead.
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1918			40. E.S. V.
Feb.				
March				
April				
May				
June				
July				

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.				

24-3-14

SEPARATION ALLOWANCE

Name *M^{rs} Elvie Lane*
 Address *279 Welland Ave,
 St. Catharines
 Ont.*

Name of Soldier *Lane, John J*
 Regtl. No. *931538*
 Rank *Pte*
 Corps *No 2 Const Batt*

Relation to Soldier }
 wife, child or mother } *W. Mother*

To what Corps belonging }
 when called out } *✓*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 931538 (Rank) Pte

Name (in full) John James Lane enlisted in

the 5th Const. Bn.

CANADIAN EXPEDITIONARY FORCE at St. Catharines on the 26

day of Sep. 19 16

HE served in France & Belgium

and is now discharged from the service by reason of Demobilization.
Medical Unfitness.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:

Age 20

Marks or Scars

Height 5-9

None

Complexion colored

Eyes Brown

Hair Black

J. J. Lane

Signature of Soldier

M. P. O'Connell

Date of Discharge

No. 2 DISTRICT DEPOT

F. Issuing Officer

O.C. No. 2 District Depot

MAR 30 1919

Rank

TORONTO

Date MAR 30 1919 19

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE
DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. _____ (Rank) _____ (Name in full) _____
enlisted in _____ the _____
CANADIAN EXPEDITIONARY FORCE at _____ day of _____ 1919
HE served in _____
and is now discharged from the service by reason of _____
Medical Unfitness _____
The DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:
Age _____ Height _____ Complexion _____ Eyes _____ Hair _____
Marks or Scars _____
Signature of Soldier _____
Date of Discharge _____
Rank _____
Date _____ MAR 24 1919 _____
C.C. No. 2 Division _____
Posting Office _____

N.B.—As an duplicate of this Certificate will be issued, any person finding same is requested to forward it to the Registrar, Military Council, Ottawa, Canada.

DEPARTMENT OF VETERANS AFFAIRS

War Service Records

SEP 13 1963

Referred to

Charged to

Ottawa Ont

Date Sept 12/63

To Copy for H.O. FILE

Attention of

NAME LANE, John James.

SERVICE NUMBER 931538 WW1

C.P.C. No. W.V.A. No. 200702

NAVY
ARMY
R.C.A.F.

x

The DEPARTMENT has received information from

S.T.M.O. TEL MEMO, Sunnybrook Hospital Sept 11/63

(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death Sept 10/63
Cause of Death
Place of Death Sunnybrook Hospital Toronto 12, Ont.

Name and Address of next of kin (if known)

Copies to: W.S.R.
V. I.
~~RAY~~
~~D.G.~~
H.O.

Destroy form if advice of death already received.

E.C. Richards

for
Chief, Central Registry

1950

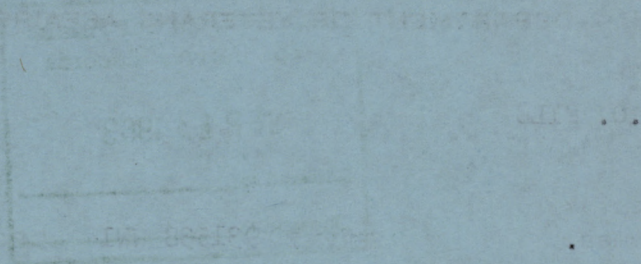
1951

1952

1953

1954

1955



1956



1957

1958

1959

1960

1961

1962

1963

1964

1965

MADE IN CANADA

1966

1967

1968

1969

1970

1971

1972

DEPARTMENT OF VETERANS AFFAIRS

To ● W.S.R.

Date 10 Oct 1963

Attention of

NAME LANE, John James

SERVICE C.E.F.
NUMBER 931538

C.P.C. No.
W.V.A. No.

NAVY
ARMY ✓
R.C.A.F.

The DEPARTMENT has received information from
District Solicitor Dept of Veterans Affairs, Toronto, Ont
.....
(State authority and source of information of death)

regarding the death of the above mentioned veteran.

Particulars are as follows:

Date of Death not recorded
Cause of Death not recorded
Place of Death not recorded

Name and Address of next of kin (if known) NIK
.....
.....

Copies to: W.S.R.
V. I.
PAY
D.O.
H.O.

} Destroy form if advice of death already received.

for
R. Greenie
~~Chief, Central Registry~~
Head, Reference Section

IN CANADA

Date

To
Attention of

NAVY
ARMY
ROCAF

C.P.C. No.
W.V.A. No.

SERVICE
NUMBER

NAME

The Department has received information from

(State authority and source of information of death)

regarding the death of the above mentioned veteran

Information is as follows

Date of death
Place of death
Cause of death

WSE
V 1
PBY
RO
RO

P. 559
MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

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

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED

DATE DISCHARGED

V. OR A.

NAME OF HOSPITAL

REG'L No. 931538 RANK

NAME Lane John James

IF IN PERMT. CORPS
WHAT UNIT

UNIT 2nd Bn Bn,

TRANSFERRED TO

DATE

AUTHORITY

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

DATE

AUTHORITY

PLACE OF ATTESTATION

St Catharines, Ont.

TRANSFERRED TO

DATE

AUTHORITY

DATE OF ATTESTATION

26th Sept 1916

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$

15.00

DATE EFFECTIVE

1-4-17

PAYABLE TO

Mrs John Lane, 279 Welland Ave St Catharines Ont

RELATIONSHIP

Mother

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE)

19/5/17.

EFFECTIVE 1st June '17

REASON Assignee dead.

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS				
	No OF DAYS	RATE	AMOUNT \$ c.	No. OF DAYS	RATE	AMOUNT \$ c.				No. OF DAYS	RATE	AMOUNT \$ c.	1 No. DATE	2 No. DATE	3 No. DATE	4 No. DATE	1				2	3				4	CREDIT	DEBIT	
								5 56	5 56																				
Apr 30	30	1.10	33 00						33 00											15		15 -			23 56			Bal from Canada	
MAY 1-31	31	-	34 10					30 00	64 10	47 1/5				9 73						15		29 59		30 00	28 07			Other credit 20.00 April 1917 and pay made letter A.P. 10606-J-8. 19-5-17. Assignee dead.	
June 1-30	30	-	33 00						33 00	75 14/5				4 87						-		4 87		45 -	41 20				
July 1-31	31	-	34 10						34 10											-	5 50	5 50		60 -	54 80			Infants 5 do pay. 21-5-17 20.119. 25-7-17.	
Aug	-	-	34 10						34 10											-		3 57		75 -	70 33				
Sep 1-30	30	-	33 -						33											-									
			201 20					35 56	236 86					19 46		17 84				30 -	5 50	7 280		164 06					
MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. SER. RED. ALLOE. PAY ENO.																			
Sep	Bal								164 06																				
Oct	P.P.								30 80																				
									3 57																				
									3 56																				
									7 13																				
									30 80																				
									160 23																				

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:- <i>LANE John James F</i>
EFFECTIVE DATE:-		EFFECTIVE DATE:-		NUMBER:- <i>931538</i>
AMOUNT:-		AMOUNT:-		PARTICULARS OF RANK OR APPOINTMENT

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.	AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
				<i>Pte.</i>

UNIT AND TRANSFERS			
ORIGINAL UNIT:- <i>2 Construction Bn</i>			
DATE ACCOUNT FIRST OPENED:- <i>1 APR 1917</i>			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'F'D	UNIT TRANSFERRED TO
<i>Ref 19</i>			<i>Can Det</i>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS (UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK)

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>20/11/18</i>		<i>14 Days F.P. 3180</i>	<i>15 40</i>				
<i>18/12 3581</i>		<i>B.R.D.G. £2</i>	<i>9 75</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1</i>	<i>-</i>	<i>10</i>	
				<i>Ledger Bal 349 76</i>
				<i>L.P.C. 324 63</i>

PARTICULARS OF RENDERING NON-EFFECTIVE:- *Dis Com 31/12/18 Dubt NR161 d/27/12/18 B'Shott*

1918 MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>MAR</i>	<i>Bal Ford</i>								<i>279 03</i>	<i>163</i>	
<i>Apr</i>	<i>P. Pay</i>	<i>33</i>		<i>AR 34 10/4 - 376 C.F.C.</i>	<i>5 35</i>						
		<i>33</i>		<i>AR 77 26 - " - "</i>	<i>2 68</i>				<i>304 -</i>	<i>148</i>	
		<i>33</i>			<i>8 03</i>						
<i>May</i>	<i>P.P.</i>	<i>34 10</i>		<i>AR 117 16 - " - "</i>	<i>2 68</i>				<i>335 47</i>	<i>203</i>	
		<i>34 10</i>			<i>2 68</i>						
<i>June</i>	<i>P.P.</i>	<i>33</i>		<i>AR 159 29/5 376 C.F.C.</i>	<i>2 68</i>						
				<i>AR 183 15/6</i>	<i>4 46</i>					<i>218</i>	
		<i>33</i>		<i>v 240 29/6</i>	<i>4 46</i>				<i>356 82</i>		
		<i>33</i>			<i>11 60</i>						
<i>July</i>	<i>PP.</i>	<i>34 10</i>		<i>AR 280 17/7 376 C.F.C.</i>	<i>4 46</i>					<i>233</i>	
		<i>34 10</i>		<i>AR 329 27/7</i>	<i>4 46</i>				<i>382 00</i>		
		<i>34 10</i>			<i>8 92</i>						
<i>Aug</i>	<i>PP.</i>	<i>34 10</i>		<i>AR 435 31/8 C.F.C 376</i>	<i>4 46</i>				<i>411 64</i>	<i>248</i>	
		<i>34 10</i>			<i>4 46</i>						
<i>Sep</i>	<i>PP.</i>	<i>33</i>		<i>AR 480 13/9 376 C.F.C.</i>	<i>4 46</i>						
				<i>CP 38818 27/9 L.N.</i>	<i>48 67</i>						
				<i>AR 4909 21/9 376 C.F.C.</i>	<i>97 33</i>						
				<i>CP 39977 30/9 L.N.</i>	<i>24 33</i>						
		<i>33</i>		<i>AR 543 27/9 376 C.F.C.</i>	<i>6 25</i>				<i>2 6360</i>	<i>763</i>	
		<i>33</i>			<i>181 04</i>						
<i>Oct</i>	<i>✓</i>	<i>34 10</i>		<i>G.P. 42452 10/10 Low</i>	<i>2 43</i>						
				<i>599 11/10 376</i>	<i>4 66</i>						
				<i>657 30/10 376</i>	<i>4 66</i>				<i>28 595</i>	<i>478</i>	
		<i>34 10</i>			<i>11 75</i>						

no large amount

COMPILED BY *McArthur*
CHECKED BY *Bevan*

copy

NUMBER	RANK	NAME		PARTICULARS				BALANCE	DEFERRED	SEPARATION
MONTH	PARTICULARS	CR. 1.	CR. 2.	DR. 1	DR. 2	DR. 3.	DR. 4.			
Nov	pp n/d	67/0		Cap n/d				28595	278	
				787 26/11 37526	834					
				6101 8/17 6800	933					
Dec	Ltd on Def P.	14 43		3581 18/15 6800	773			349	76	315
				1444 3/1 21/18 669 10/12 6800		1540		324	63	
		81 53			2748	1540				
				4324 29/1 2/1 6800	243					
				4327 14/2 90 5/1 6800	243			319	77	
					486					
				30						
				Letan 2/31/19						
				Ph 29 n/d						
				3603						
				32463						
				1540						

WAR SERVICE BADGE CLASS A 15E292

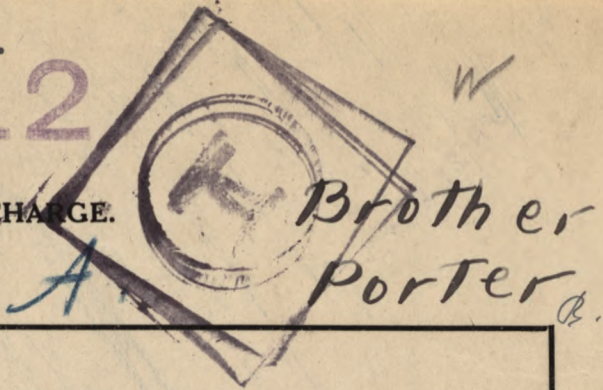
M.D.2

SERVICE GROUP 28 SHORT FORM.



PROCEEDINGS ON DISCHARGE.

OCCUPATIONAL GROUP 4 (Demobilization.)



1. No. 931538

2 Rank. Pte

3. Name. Lane John James

4. Unit. 2. Can. Bn. N. S. P. D.

5 Date of Discharge MAR 30 1919 Place TORONTO, ONT.

6 Reason for Discharge DEMOBILIZATION

7. Authority. No. 2, D.D., Part II, D.O. No. 101

8. Proposed Residence after Discharge. TORONTO
279, Welland Ave.
St. Catharines, Ont., Canada.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.
I hereby acknowledge that at the undernoted place and date I received my discharge Certificate
M. F. W.?

John James Lane
Signature of Soldier.

10. CONFIRMATION.
The discharge of the above named man is hereby confirmed.

Place. TORONTO, ONT.
Date. MAR 30 1919

Signature. J. O. Pallen
(Of Or Discharging Unit.)
O.C. No. 2 District Depot

APR 25 1919

SHORT FORM
PROCEEDINGS ON DISCHARGE
(Demobilization)



1. No.	
2. Rank	
3. Name	
4. Unit	
5. Date of Discharge	
6. Reason for Discharge	
7. Remarks	
8. Place of Discharge	
<p>CERTIFICATE TO BE RETURNED BY SOLDIER</p> <p>I hereby acknowledge that at the undersigned place and date I received my discharge Certificate</p> <p>M. E. W.</p> <p>Signature of Soldier</p>	
<p>CONFIRMATION</p> <p>The discharge of the above named man is hereby confirmed.</p> <p>TORONTO, ONT.</p> <p>MAR 20 1919</p> <p>Place</p> <p>Date</p> <p>Signature of Discharging Unit</p>	

U

H



RECEIVED BY THE OFFICE OF THE ADJUTANT GENERAL

LIST OF DISCHARGE DOCUMENTS

Medical Form W. 27	Attestation Paper, Triplicate
Medical Form W. 136	or Particulars of Record
Medical Form W. 178 or A. P. R. 12	Field Conduct Sheet
Medical Form W. 24 or A. P. R. 100	Casualty Form
Medical Form W. 11	Post Test Certificate
	Certificate that missing documents are unobtainable
Medical Form W. 113 or A. P. R. 112	Medical History Sheet
Medical Form W. 108 or A. P. R. 111	Proceedings of Medical Board
Medical Form W. 103	Dental History Sheet
M. T. W. 122 or D. M. S. 122	Medical Report
Medical Form W. 282	Regimental Conduct Sheet
Medical Form W. 282	Company Conduct Sheet

[Faint handwritten notes or signatures]

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....	Militia Form W. 23
or Particulars of Recruit.....	Militia Form W. 133
Field Conduct Sheet.....	Militia Form W. 178 or A.F.B. 122
Casualty Form.....	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate.....	Militia Form W. 44
Certificate that missing documents are unobtainable.....	
Medical History Sheet.....	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board.....	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet.....	Militia Form B. 465
Medical Report.....	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet.....	Militia Form B. 263
Company Conduct Sheet.....	Militia Form B. 263a

Group..... *A*
 Checked by No..... *20 71*
 Date..... *MAR 1918*

**Medical Examination upon leaving the Service
of an Officer fit for general service or a Soldier fit for duty.**

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank Pte. Name Lane G. J. Surname
 Unit or Corps 2nd Con. Coy. (If a soldier) Regt. No. 931538
 Born at Ontario on, date June 18/98
 Signature (for identification) J. Lane

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. no

Weight 145 lbs.
 Height 5 ft. 10 ins.

2. **NUTRITION AND DIATHESIS?** good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?** no

4. **RESPIRATORY SYSTEM.** no

5. **HEART?**

Abnormal Sounds? no
 Abnormal Size? no
 Pulse Rate? 65 Intermittence or irregularity? no

6. **ARTERIES.**—Any hardening? no

7. **DIGESTIVE SYSTEM?** no

8. **GENITO-URINARY SYSTEM?** no

Urinalysis—s.g.? 1000 Reaction? ac Albumen? no Sugar? no

9. **SKIN, MIDDLE EAR, EYE**
 or any other part? no

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no

11. Opinion as to the health and physical condition of the one examined? good

Examined at Kinross Signed Stephens Cap M.O.
 Date Dec 28/1915 Signed McCurry Cap M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

Medical Examination upon leaving the service
of an Officer fit for general service or a Soldier fit for duty

951238
18/98

Wm. J. ...
...

Weight
175
Height
10

4. NUTRITION AND DIETARY

5. NERVOUS SYSTEM

6. RESPIRATORY SYSTEM

7. HEART

8. URINARY SYSTEM

9. DIGESTIVE SYSTEM

10. GENITOURINARY SYSTEM

11. SKIN, NAILS AND HAIR

120

Wm. J. ...
...

18

CANADIAN ARMY DENTAL CORPS, O.M.F.C.
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

**DIRECTIONS TO
DENTAL OFFICERS**

NAME OF SOLDIER (Block Letters) LANE, J. J MD2

REGIMENT 2ND CONSTN. BN RANK PTE No. 931538

Date of Examination in England 30/12/18 Date of Examination in France _____

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS 12
2. EXTRACTIONS _____
3. CROWNS _____
4. DENTURES
 - (a) Full Upper _____
 - (b) Part Upper _____
 - (c) Full Lower _____
 - (d) Part Lower _____

HAS HE EVER REFUSED DENTAL TREATMENT? _____

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada _____
- (b) In England _____
- (c) In France _____

**KINMEL PARK,
NORTH WALES.**

Signature of Dental Officer _____

J. H. Reid
Capt.

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

LANE 77
RTE. 80
MORNING

10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

- 1. Name
- 2. Location
- 3. Section
- 4. Township
- 5. Range
- 6. Containing
- 7. Acres
- 8. Containing
- 9. Acres
- 10. Containing
- 11. Acres
- 12. Containing
- 13. Acres
- 14. Containing
- 15. Acres
- 16. Containing
- 17. Acres
- 18. Containing
- 19. Acres
- 20. Containing
- 21. Acres
- 22. Containing
- 23. Acres
- 24. Containing
- 25. Acres
- 26. Containing
- 27. Acres
- 28. Containing
- 29. Acres
- 30. Containing
- 31. Acres
- 32. Containing
- 33. Acres
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- 72. Containing
- 73. Acres
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- 75. Acres
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- 81. Acres
- 82. Containing
- 83. Acres
- 84. Containing
- 85. Acres
- 86. Containing
- 87. Acres
- 88. Containing
- 89. Acres
- 90. Containing
- 91. Acres
- 92. Containing
- 93. Acres
- 94. Containing
- 95. Acres
- 96. Containing
- 97. Acres
- 98. Containing
- 99. Acres
- 100. Containing

Special Agent in Charge
Bureau of Land Management
Washington, D.C.

JM

Rank _____ Name **LANE, John James.** Reg'l No. **931538**
 Unit **No. 1 Const. Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **St. Catharines. 26th Sept 1916.** Place of Birth **St. Catharines, Ont.**
 Name and Address, Next-of-Kin **Elvie Lane.**
279 Welland Ave., St. Catharines, Ont., Canada Relationship **Mother.**

Assigned Pay Monthly \$ _____ Payable to _____
 Separation Allowance \$ **I** Payable to _____ Relationship _____
Pfe Relationship _____
 Discharge, Date and Place _____ Reason _____ Character _____

N/E. R. B. No. **11383**
 File R.L. _____
 Category **ORIGAN**

N/E. R. B. No. **1500**
 File R.L. _____
 N/E. R. B. No. _____
 Category _____
 File R.L. _____
 Category **ORIGAN**

H. W. & V., Ld.—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.				
6					
		Arrived in England ss "Southland"		7-4-17	<i>Qu. W. W.</i>
14.6.17	2nd Lt. B. B. C.	Landed in France	Field	17.5.17	Pl. No. 115
16.12.18	NSRD	To S from 2nd Coy	Stg Bshpt	14.12.18	+ 305 + 71 d/19-12-18 2nd Coy
27.12.18	NSRD	To 6 Coy. Rly	r	27.12.18	50.33
		sailing no. 29. date 19.3.19			
		Dis area. I. Gmb Roll 7.			
24.3.19	^{No 2} M. D. W.	Lost to C. & Canada M.D.	Rly	19.3.19	- 70 - NSRD PLD 158 d/9/7/19.

A.F.B. 103 CHECKED
29 MAR 1917

Yasif

"CEDRIC" 27-3-19

DISPERSAL "I" 1421

AUDITOR PAYMASTER

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 931533

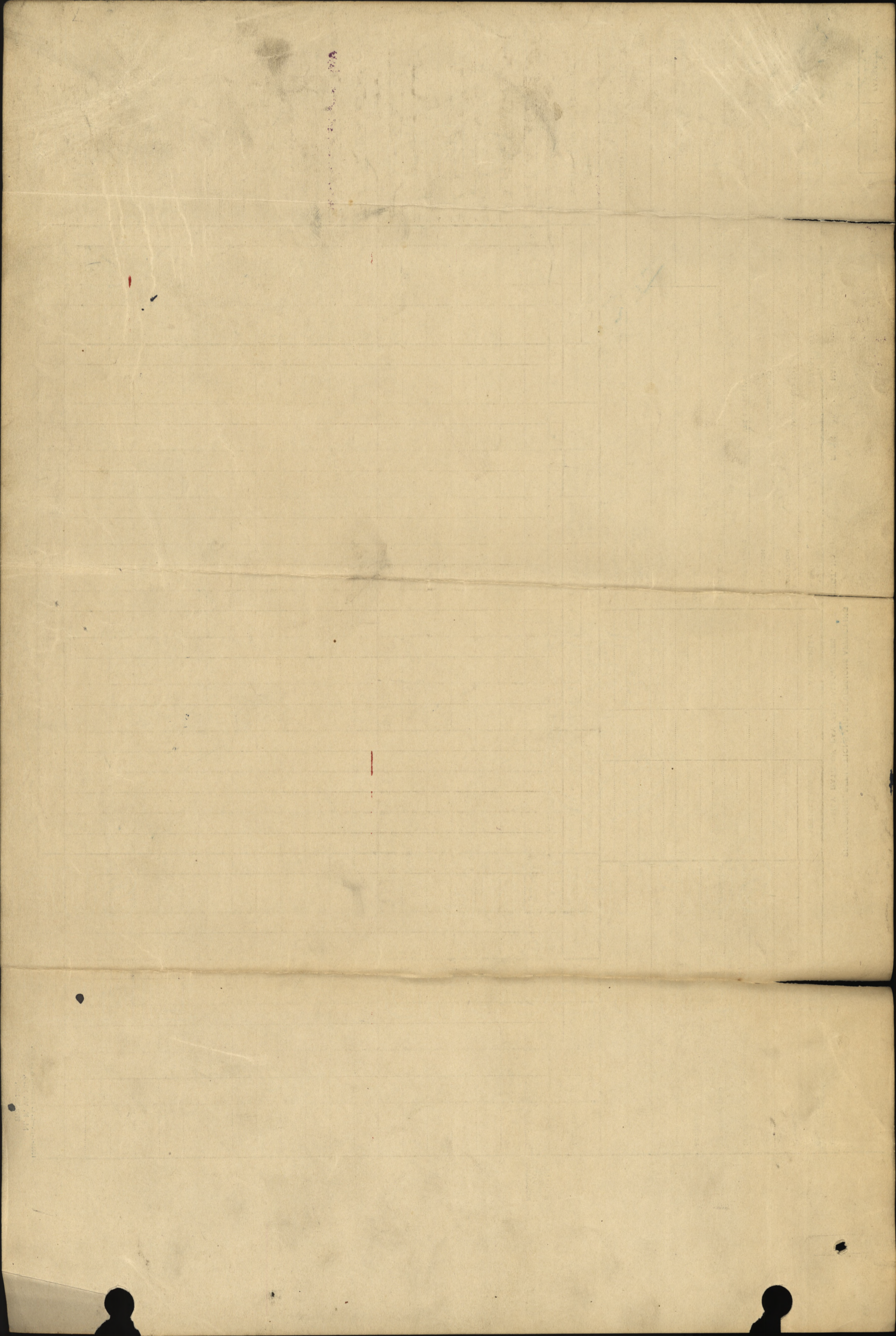
RANK Pte. NAME (IN FULL)

LANE, J.J.

30

M. OR S.	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
NEXT OF KIN					2' Bn (Inf)	G.P.A. St. Catharines Ont.	
ADDRESS					Sept. 26/16	279 Welland Ave.	
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$	DATE EFFECTIVE	
	Closed - 30.4.17				15.00	Closed 30.4.17	
TO WHOM PAID	RELATIONSHIP	"Death of Assignee"			PAYABLE TO	RELATIONSHIP	ANY CHANGE IN ASSIGNEE OR ADDRESS
Mrs. E. Lane - W. Mochen					Same		
ADDRESS					ADDRESS		
279 Welland Ave							691 Ferry St
St. Catharines, Ont.							Niagara Falls Ont.
					STOP PAYMENT FORM RENDERED, DATE	EFFECTIVE	
					DISCHARGED	PLACE	DATE
						Toronto	30-3-19
							REASON
							Demob
							AUTHORITY
							DU 101
							IF ENTITLED TO POST DISCHARGE PAY
							Yes.

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT		CREDIT
31.12.18				32463												32463	T.O.S. 19/3/19 D.O. 101	
1916 3/4 93	110		102 30														SUBS TO D.O. 101	
			3500														486 (admission)	
			7000														486 (admission)	
				20730				487	500								53193-0-0	
																	7000	
																	440	
153	Dys		35000														Due Sol.	
				35000													7440	
																	27560	
																	14000	
																	210	
																	140	
																	210	
																	280	
																	70	
																	350	
																	280	
																	140	
																	440	
																	440	
																	440	



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

7 25 21 A.D.
●-3-17

RATE OF SEPARATION ALLOWANCE

<i>28</i>	<i>1/2/17</i>		
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PC 3257

RATE OF ASSIGNMENT

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PARTICULARS OF SEPARATION ALLOWANCE

No. *931538*
 Rank *Pl-* Promoted Reverted Discharge
 Soldier's Name *John J. Lane*
 Battalion *No 2 Const Batta*
 Beneficiary *Mrs. Elvie Lane*
 Relationship *Widowed Mother*
 Address *279 Welland Ave. St. Catharines Ont*

PARTICULARS OF ASSIGNMENT

Name
 Address
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					
<i>Dec. 31.</i>	<i>9894</i>	<i>40</i>	<i>—</i>	<i>40</i>	<i>Last S.A. cheque Apr 1917 for \$40. E.S. 13/1/17. Issue no cheques Mother reported dead</i>
<i>1918 Jan</i>		<i>20</i>		<i>20</i>	

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque No.

Amount S/A

Amount A/P

Total

REMARKS

M. F. W. 128
 400M-6-17-1772-89-1141
 L. L. 22320-M. & D. 7693.