

Bugle Band

ORIGINAL 138211

Original 138211

ATTESTATION PAPER.

No.

75th BATTALION C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... George Robert Lawson.....
- 2. In what Town, Township or Parish, and in what Country were you born?..... Dunganon, Co. Tyrone, Ireland.....
- 3. What is the name of your next-of-kin?..... Father, William John Lawson.....
- 4. What is the address of your next-of-kin?..... Dunganon, Co. Tyrone, Ireland.....
- 5. What is the date of your birth?..... 23rd March, 1893.....
- 6. What is your Trade or Calling?..... Grocery Packer.....
- 7. Are you married?..... No.....
- 8. Are you willing to be vaccinated or re-vaccinated? or inoculated..... Yes.....
- 9. Do you now belong to the Active Militia?..... No.....
- 10. Have you ever served in any Military Force?..... Yes, Ulster Volunteers, 1 year.....  
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.....

*George Robert Lawson* (Signature of Man).  
*J. Power* (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Robert Lawson, 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.

*George Robert Lawson* (Signature of Recruit)  
*J. Power* (Signature of Witness)

Date 9th September 1915

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Robert Lawson, 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.

*George Robert Lawson* (Signature of Recruit)  
*J. Power* (Signature of Witness)

Date 9th September 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 Toronto this 9th day of September 1915.

*[Signature]* (Signature of Justice)

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

*[Signature]* (Approving Officer)

Description of George Robert Lawson on Enlistment.

Apparent Age 22 years 5 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 7 1/2 ins.

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

Birthmark on right side.

Complexion Fair

Eyes Blue

Hair Dr. Brown

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

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 9th September 1915 191 .

Place Toronto

*Jas. W. Bartley*  
 Captain  
 Medical Officer.  
 II Id. C.C.C.

\*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.

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

*W. Beckwith* (Signature of Officer)

Date Sept 9th 1915

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

**DISCHARGE DOCUMENTS**

R. O. No.....

H. Q. No.....



Name Lawson Geo. Robert.

Regt. No. 138211 Rank pte.

Corps 75th Bn.

D. of W. 4-10-16.

*M*

14259

*8149  
will*

*casualty*

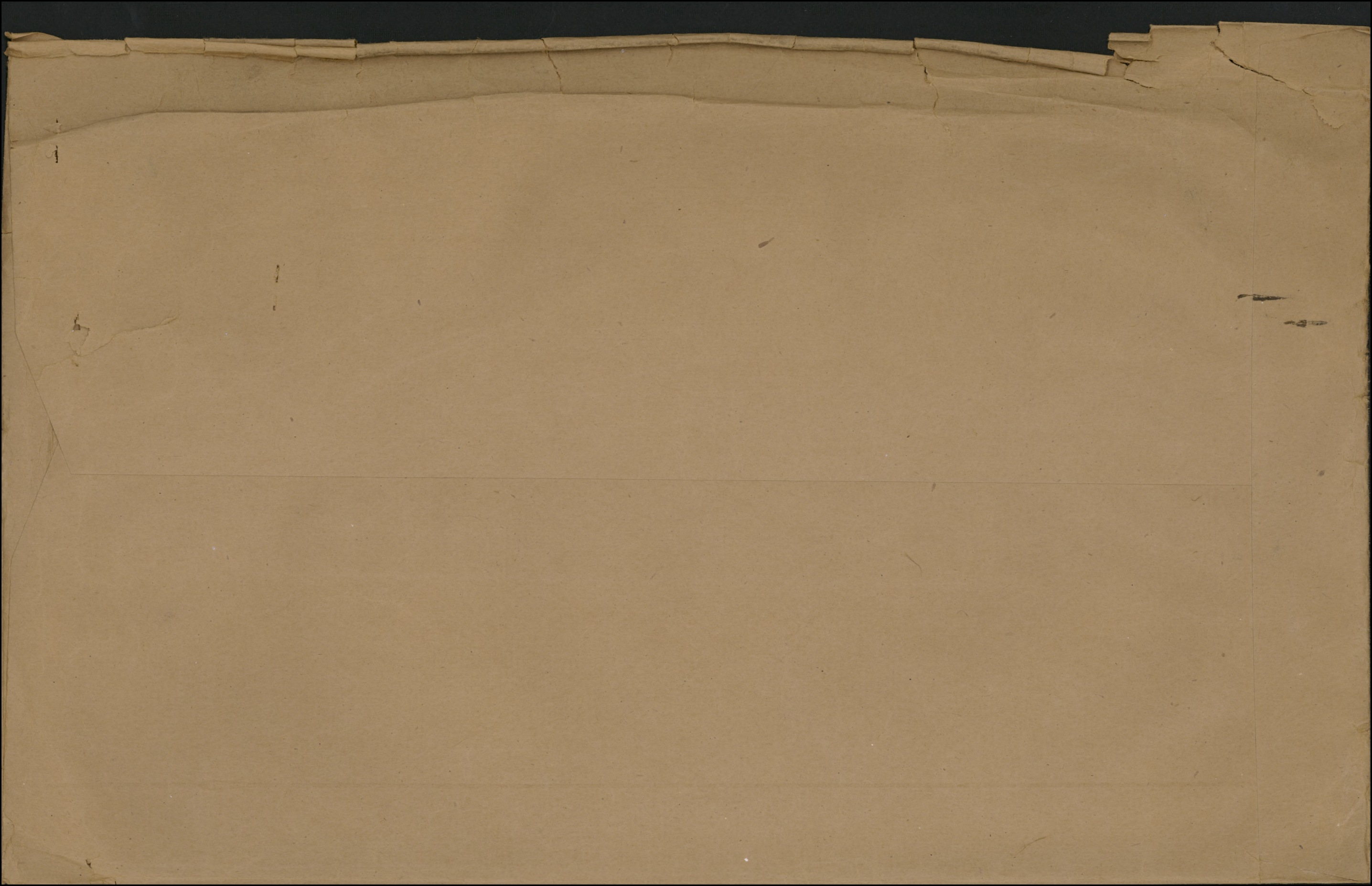
M. F. W. 62.  
50M.-9-16.  
H. Q. 1772-39-935.

*Pay card*



*30-19  
28-19*

*A*



Surname  
*J. Dawson*

Christian Name or Names  
*G. R.*

Reg. No.

*138211*

Rank

*plc*

Unit

*3rd Inf. Batt*

Co.

Troop

Batty.

Hospital

Date of Admission

Transferred *#18 Gen Carriers*

Hosp. *3. 10. 16*

Hosp.

Hosp.

Hosp.

Diagnosis

*G. S. W. Groins Scurtum*

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*Died of Wounds. H. 10. 16*

DISPOSITION

Date

*Ch. 5. 10. 16 # of 160*

*Ch. 6. 10. 16 # of 161*

REMARKS

*"Ser. ill 3. 10. 16"*

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. 138211

RANK

*P.*

NAME

*Lawson G. B.*

T. O. S. 9-10-16

D. O. 60715-10-11

UNIT

*75<sup>th</sup> Battalion C. B. F.*

M. D.

*2*

PAID

PAID

SIG.  
OR  
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

FROM

TO

PARTICULARS

AUTHORITY

*1915**1915*

<i>Oct. 9</i>	<i>Oct. 31</i>	<i>—</i>
<i>Nov.</i>		<i>—</i>
<i>Dec.</i>		<i>—</i>
<i>1916</i>		
<i>Jan.</i>		<i>—</i>
<i>Feb.</i>		<i>—</i>
<i>Mar.</i>		<i>—</i>
<i>Apr.</i>		<i>—</i>

UNIT SAILED

MAR 29 1916





No.

RANK *Pte.*

NAME

*Lawson, G.**R.*

T. O. S.

UNIT

*Toronto Recruiting Depot  
(9th Mississauga Horse)*

M. D.

*2*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1915- Sept. 9 Oct. 1</i>	<i>1915- Sept. 30 Oct. 9</i>	<i>✓ ✓</i>	<i>Transfd to 45th Bn. 9-10-15</i>	<i>Oct. payroll</i>



Name LAWSON George Robert

Rank *Private*

Reg. No.

138211

Unit THIRD PIONEER BATTN

*R.L.*  
*25-L-957.*

Next of Kin William John Lawson, Dungannon, Co. Tyrone  
Ireland

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916						
Oct 3	No 18 Gen Hsp	Camiers	GSW Groinal & Scrotum	A160	4.10.16	
		SERIOUSLY ILL			0 2096	
Oct 4th	DIED OF WOUNDS	18 G.Hsp	GSW.Com.Fr. Femur	A161	0-2200	
					5.10.16	



SURNAME.

*Lawson*

*(649-L-3656)*

CARD NO.

CHRISTIAN NAMES

*George Robert*

**D**  
OL

REGL. NO.

*138214*

RANK

*Pte*

UNIT

*75th*

*Batt*

FORMER CORPS

*Ulster Volunteers 1 year*

NEXT OF KIN.

NAMES IN FULL

*Lawson, William John*

RELATIONSHIP TO SOLDIER

*Father*

ADDRESS

*Bungarow Co. Tipperary, Ire.*

CHANGE OF ADDRESS

*Also notify M. <sup>x</sup>  
Harwood, 136. Ellwood  
North Ave. Toronto, Ont.  
auth letter 6-10-16.*

COUNTRY OF BIRTH

*Ireland, Bungarow Co.*

DATE

*March 23rd 1893*

PLACE OF ATTESTATION

*Toronto Ont*

DATE

*Sept. 9th. 1915*

*Sailed from Halifax*

*367*

*per. S.S. "Empress of Britain"*

L. L. 94504. M. & D. 6512.

*29-3-1613*

M. F. W. 22. 250M.-2-16. H. Q. 1772-39-339.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

*Yes*  
*Grocery Packer*

RELIGION

*Presbyterian*

DESCRIPTION.

APPARENT AGE

*22* YEARS

*5* MONTHS

HEIGHT

*5* FEET

*7 3/4* INCHES

CHEST MEASUREMENT

*36* INCHES

EXPANSION

*3* INCHES

COMPLEXION

*Fair*

EYES

*Blue*

HAIR

*dk. Brown*

DISTINGUISHING MARKS

*Birthmark on right side*

MEDICAL EXAMINATION.

PLACE

*Toronto Ont.*

DATE

*Sept. 9th. 1915*

File No. 649-L-3656...

Lawson, G.R. #138211, Pte 3rd Pnr. Bn.

Medals & Decs. Mother

Mrs. Matilda Lawson,  
Milltown,  
Dungannon Co.,  
Tyrone, Ireland.

Scroll Desp. 1-2-21 Keon No 2-15799

APR - 8 1922

Piagne Desp. Keon No P 34953

P & S. Father

Mr. Wm. John Lawson,  
Address as above.

(Serial no. 774810.)

Mem. Cross Mother

Mrs. Matilda Lawson,  
Address as above.

Desp AUG 6 1920 (M 1817316)

16675

H.C.

a

516

~~SCANLAN, J., Pte. No. 828649, Can. Cav. (CLH)~~

~~TH~~  
~~MM~~

Sh. No. 4843



NAME Lawson George Robert H. Q. FILE No. 649-  
REGT'L. No. 138211.

RANK AND CORPS Pte 3rd Pns From 75th Bn

CABLE		NATURE OF CASUALTY
NO.	DATE	
02096	4-10-16	Seriously ill no 18 Gen Hosp. Camiers Oct. 3rd 1916 (Y.S.W.) groin scrotum) ✓
02200	6/10/16	Died of wounds 18th Gen. Hosp Camiers Oct 4th 1916 (Y.S.W) Compound fracture femur) ✓
a A.F.B.2090a	<sup>rowen</sup> 9-10-16	Died of wounds received in action no. 18 Gen. Hosp France Oct. 4th. 1916. (rec'd 22-1-17)

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

A 160	No 18 Gen. Leamiers	3-10-16	Y & W. Train of Scrotum seriously ill.
A 161	" " " " Died of wounds	4-10-16	Y & W. Compound frac Femur

*Blair*  
*LB*

*X*  
*X*

Number. . . 138211 . . . . . Rank . . . Pte . . .

Surname. . . . . LAWSON . . . . .

Christian Name. . . . . George Robert . . . . .

Unit. *Brd. Coy. Prov. Bn.* . . . . Theatre of War. *France*

Date of Service. *16-6-16* . . . . . *D*

Remarks. . . . . *Mother*

Latest Address *Mrs. Matilda Lawson*  
*Milntown*

Roll No. *B. Page 545* *Mungannon Co*  
*Tyrone, Ireland.*

GU 45304 Dec 19.8.21

# ORIGINAL ORIGINAL MEDICAL HISTORY SHEET.

138211

Surname Lawson 75 Bn. C.E.F. Christian Name Geo Robert.

Examined { on <u>9th</u> day of <u>September 1915</u> at <u>Toronto</u> Birthplace { City or Town <u>Dunganon</u> County <u>Co. Tyrone, Ireland</u> Apparent age <u>22 Years, 5 months</u> Trade or occupation <u>Grocery Packer</u> Height <u>5</u> Feet <u>7 3/4</u> Inches. Weight <u>122 1/2</u> Lbs. Chest measurement { Minimum <u>33</u> inches. Maximum expansion <u>36</u> inches. Physical development <u>Good</u> Small-Pox Marks <u>Nil</u> Vaccination Marks { Arm Right Left <u>2</u> Number <u>2</u> When Vaccinated last <u>1900</u> (a) Marks indicating congenital peculiarities or previous disease <u>nil</u> (b) Slight defects but not sufficient to cause rejection <u>nil</u>	Approved by <u>Jas. V. Barton</u> Rank <u>Captain M.C.</u> II Fld. Co. C.E.F. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Date</th> <th>Fit or Unfit</th> <th>EXAMINED FOR RE-ENGAGEMENT,</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Date</th> <th>Result</th> <th>VACCINATIONS.</th> </tr> </thead> <tbody> <tr> <td><u>23/9/15</u></td> <td><u>Low</u></td> <td><u>General measles</u></td> </tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Date</th> <th>Result</th> <th>ANTI-TYPHOID INOCULATIONS, ETC.</th> </tr> </thead> <tbody> <tr> <td><u>20/9/15</u></td> <td><u>Low</u></td> <td><u>General measles</u></td> </tr> <tr> <td><u>28/9/15</u></td> <td><u>..</u></td> <td><u>General measles</u></td> </tr> <tr> <td><u>1/10/15</u></td> <td><u>..</u></td> <td><u>General measles</u></td> </tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> </tbody> </table>	Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,			M.O.			M.O.			M.O.			M.O.			M.O.			M.O.			M.O.	Date	Result	VACCINATIONS.	<u>23/9/15</u>	<u>Low</u>	<u>General measles</u>			M.O.			M.O.			M.O.	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.	<u>20/9/15</u>	<u>Low</u>	<u>General measles</u>	<u>28/9/15</u>	<u>..</u>	<u>General measles</u>	<u>1/10/15</u>	<u>..</u>	<u>General measles</u>			M.O.			M.O.			M.O.
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Enlisted on 9th day of September 1915 191 at Toronto

	CORPS.	REG'TL NUMBER.	RANK.	DATE.
Joined on enlistment	<u>9th. M. H.</u>			
Transferred to..	<u>75th BATTALION C.E.F.</u> <u>TORONTO, ONT.</u> <u>Pioneer. Bn.</u>	<u>138211</u>	<u>Good.</u>	<u>9.9.15</u>

**EXAMINED OR DISCHARGED BY A MEDICAL BOARD.**

STATION.	DATE.	DISEASE.	RESULT.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.



TLH. Rank **Name** **LAWSON George Robert.** Reg'l No. **138211.**  
 Unit **75th. Battn.** **If in perm. Corps, What Unit?** Married or Single **Single.**  
 Place and Date of Enlistment **Toronto, 9th. September 1915.** Place of Birth **Danganon, Co. Tyrone Ireland**  
 Name and Address, Next-of-Kin **William John Lawson, Dungannon, Co. Tyrone, Ireland.** Relationship **Father.**

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

Relationship

N/E, R.B. No. **3176**  
 File R.L. ....  
 Category **DW.**

Relationship

Discharge, Date and Place

Reason **25-L-957.**

Character

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.							
10/4/16	S.R.O. 594	<i>Arrived in England</i>	<i>SS Empress of Britain</i>	<i>25.4.16</i>	<i>9 APR 1916</i>			
28.4.16	<i>9c 75<sup>th</sup> Bn</i>					<i>absent from M.N. 25.4.16</i>	<i>Branchett</i>	<i>Pt II 150. 94</i>
29.4.16	"					<i>Returned 9AM 29.4.16</i>	"	<i>Pt II 150. 95</i>
15/6/16	"					<i>S.O.S. on trans to 3 Pioneer Bn</i>	"	<i>15.6.16</i> <i>✓ ✓ 138</i>
21.6.16	<i>3<sup>rd</sup> Pion</i>	<i>L. O. Strength</i>	<i>Field</i>	<i>16.6.16</i>	<i>Pt II O. 14.</i>			
5-10-16	<i>do</i>	<i>18 General Hosp</i>	<i>Cambridge</i>	<i>3.10-16</i>	<i>CL 160. G.S.W. from 9 Serotum</i>			
6-10-16	<i>do</i>	<i>Died of Wounds</i>	<i>do</i>	<i>4-10-16</i>	<i>CL 161. ONKN.</i>			
9-10-16	<i>do</i>	"	"	<i>4-10-16</i>	<i>Pt II O. 56.</i>			





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

CERTIFIED CORRECT.  
Canadian Record Office  
Westminster House,  
7, M.C. 172, S.W.

# Casualty Form—Active Service.

Unit, Regiment or Corps 75 Bn. C.F.  
 Regimental No. 138211 Rank Pte Name Lawsen, George Robert  
 Enlisted (a) Sep. 9, 1915 Terms of Service (a) Duration of War Service reckons from (a) Sep. 9, 1915  
 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) Guercy Packer

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				
<u>29/3/16</u> <u>9/4/16</u>		<u>Embarked Canada</u> <u>disembarked England</u> <u>Proceeded Overseas for service</u>	<u>Halifax</u> <u>Liverpool</u> <u>60th Bn</u>	<u>29/3/16</u> <u>9/4/16</u> <u>15/6/16</u>	<u>H.M.S. Empress of Britain</u> <u>LT. COL.</u> <u>O.C. 75th C.F. Bn.</u> <u>INFANTRY BATTAL</u>
<u>16.6.16.</u>	<u>C.B.D.</u>	<u>Arrived in France and taken on strength 3rd C.F. Bn.</u>	<u>C.B.D. Havre</u>	<u>16.6.16.</u>	<u>Part II Ord. No. 14. 21.6.16.</u>
<u>17.6.16.</u>	<u>"</u>	<u>Left Base for Unit</u>	<u>In the Field</u>	<u>17.6.16.</u>	<u>Nom. Roll Rein: 16.6.16.</u>
<u>24.6.16.</u>	<u>O.C. Unit</u>	<u>Unit Arrived at Unit</u>	<u>"</u>	<u>20.6.16.</u>	<u>B. 23. 24.6.16.</u>
<u>4.10.16.</u>	<u>18. Gen.</u>	<u>Died of Wounds (GSW Compound fracture of Femur, R) 1.5.a.m. 4.10.16.</u>	<u>18. General.</u>	<u>4.10.16.</u>	<u>AFB. 213. d/4.10.16. Ref. File A.A.G. Can. Sec. 3rd. Ech. GHQ. 137-1625.</u> <u>Part II Ord. 56. 9.10.16.</u>
			<u>for</u>	<u>Lieut.</u> <u>Lieut. Col. A.A.G.</u>	

(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



3rd Pioneer Bn

138211

Drummer G R. Lawson

~~75 Battalion C E F~~

Military Will.

the  
In event of my. death, I  
give the whole of my.  
property, or anything I may  
own to My Mother.

Mrs Matilda Lawson

Milltown

Dungannon

Co. Tyrone.

Ireland.

G. R. Lawson

Drummer 75 Batts CEF

June 10<sup>th</sup> 1916

NOTE:- Taken from Living, 14/3/17.

Extracted from Pay Book, Page 20.

Holograph.

No. 138211 - Drar. Lawson, G.R. - 75th Battn.

M



183

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

M. F. W. 12.  
20m.—11-15.  
H. Q. 1772-39-819.

To Whom Mrs. Matilda Lawson By Whom Assigned Lawson G. P.  
Address Milltown, Dungannon Regtl. No. 138211  
Lyrone Ireland Rank "Pte"  
Corps 45<sup>th</sup> Bn. C.E.F.  
Rate \$15-00 APR 1 1916  
5

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			"Duplicate sent to England."
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			Stop payment 1 <sup>11</sup> / <sub>16</sub>
Feb.				Died of wounds Oct-4/16
March				C. 21(33) Oct-6/16 B.M.M.
April				3 M Oct 26/16
May				J. N. 6/2/16
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

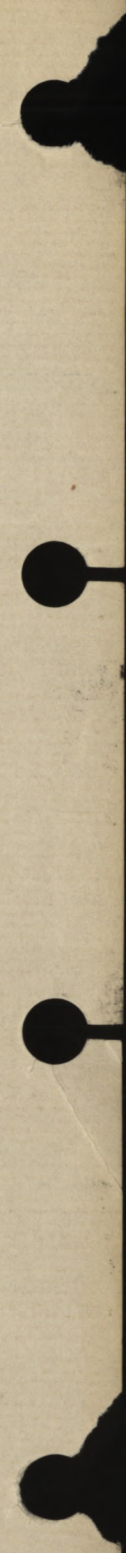
Casualties

1917

RECEIVED  
OFFICE OF THE  
COMMISSIONER OF  
THE GENERAL LAND OFFICE

THIS RECEIPT IS VALID  
FOR THE PAYMENT OF  
TAXES ON LANDS  
AND INTEREST THEREON

RECEIVED



MARRIED OR SINGLE *S*

PLACE OF BIRTH *Dungannon, Co. Dyronne, Ireland*

NAME AND ADDRESS OF NEXT OF KIN *W. John Lawson,  
Dungannon, Co. Dyronne, Ire.*

RELATIONSHIP OF NEXT OF KIN *Father*

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 *Died of wounds.*

EFFECTIVE DATE *4-10-16*

AUTHORITY *B.O. 56. Oct 9/16*

*10  
N/10  
6/10/16*

REG'L. No. *138211.* RANK *Pte.* NAME *Lawson, George Robert.*

IF IN PERM. CORPS | UNIT *75th Bn* TRANSFERRED TO *3rd Bn P.W.* DATE *16.6.16* AUTHORITY *B.O. 138*

PERMANENT FORCE ALLOWANCES TRANSFERRED TO *N.E. Br.* DATE *9-11-16* AUTHORITY *B.O. 56. Oct 9/16*

PLACE OF ATTESTATION *Toronto* TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION *9th Sept 1915* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *15.* DATE EFFECTIVE

PAYABLE TO *Matilda Lawson, Dungannon, Dyronne, Ireland.* RELATIONSHIP

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *23-10-16* EFFECTIVE *1-11-16* REASON *Died of wounds Recd in Action 4-10-16 B.O. 56. Oct 9/16.*

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *Died of wounds 4-10-16. B.O. 56. Oct 9/16.*

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



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								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS				
	NO. OF DAYS	RATE		AMOUNT		NO. OF DAYS	RATE		AMOUNT		NO. OF DAYS	RATE				AMOUNT		1		2		3		4		1	2				3	4				CREDIT	DEBIT		
		\$	C.	\$	C.		\$	C.	\$	C.		No.				DATE	No.	DATE	No.	DATE	No.	DATE																	
<i>1/3/16</i>															<i>14 10</i>															<i>14 10</i>									
<i>1-20/4/16</i>	<i>30</i>	<i>1.</i>	<i>30</i>		<i>30</i>	<i>10</i>	<i>3</i>						<i>33</i>		<i>28 15 4/16</i>			<i>14 60</i>					<i>15.</i>		<i>29 60</i>			<i>17 50</i>					<i>20 880</i>		<i>18 53</i>			<i>18 59</i>	<i>20 93. 8 days fine.</i>
<i>1-31/5/16</i>	<i>31</i>	<i>1</i>	<i>31</i>		<i>31</i>	<i>10</i>	<i>3 10</i>						<i>34 10</i>		<i>14 2 10 5/16</i>	<i>19 2 31 5/16</i>			<i>7 30</i>		<i>7 30</i>			<i>15</i>		<i>29 60</i>	<i>22.</i>												
<i>Checked 1-15/6/16</i>	<i>15</i>	<i>1</i>	<i>15</i>		<i>15</i>	<i>10</i>	<i>1 20</i>						<i>16. 50</i>		<i>15 4/16</i>								<i>15</i>		<i>15.</i>	<i>23 50</i>													
<i>1/6/30-6</i>	<i>15</i>	<i>1 00</i>	<i>15 00</i>		<i>15</i>	<i>10</i>	<i>1 50</i>						<i>16 50.</i>												<i>40 00</i>	<i>40 00</i>													
<i>1/31/7</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>243</i>	<i>272</i>	<i>244 15 7/16</i>			<i>2 55</i>	<i>2 62</i>	<i>2 43</i>			<i>15</i>		<i>22 60</i>	<i>51 50</i>												
<i>1/31-8</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>358 29/17</i>				<i>2 62</i>					<i>15 -</i>		<i>17 62</i>	<i>67 98</i>													
<i>1/30/9</i>	<i>30</i>		<i>30</i>		<i>30</i>		<i>3</i>						<i>33.</i>	<i>441 30 8/16</i>	<i>488 17/9</i>			<i>5 23</i>	<i>2 62</i>				<i>15 -</i>		<i>22 85</i>	<i>78 13.</i>													
<i>Checked 1.4.10</i>	<i>4</i>		<i>4</i>		<i>4</i>		<i>40</i>						<i>4 40.</i>	<i>528 30 9/16</i>				<i>2 62</i>					<i>15. 11</i>		<i>17 62.</i>	<i>64 91.</i>								<i>Died of wounds 4-10-16 B.O. 56. Oct 9/16.</i>					
																									<i>Balance transferred to N. E. Branch.</i>	<i>64 91</i>													
															<i>2 62</i>	<i>2 62</i>										<i>67 53</i>													
																										<i>67 53</i>		<i>0</i>						<i>Or 262 CIE SCH 532.</i>					
																										<i>67 53</i>								<i>Paid in full cheque #7991 July 2/17 NE voucher 3/6</i>					

Statement of  
JUN 8 1917  
Account rendered

*A.P.L.*





15381

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

M. F. W. 12.  
20m.—11-15.  
H. Q. 1772-39-819.

*"Duplicate"*

*Stop!*  
Mrs. Matilda Lawson  
To Whom  
Address Milltown,  
Sungannon, Tyrone  
Ireland

By Whom Assigned Lawson G. R.  
Regtl. No. 138 211  
Rank "Pte"  
Corps 75<sup>th</sup> Battrn. C. E. F.

Rate 8 15<sup>00</sup>  
**APR 1 1916**

*new Bodley St*

PAYMENTS

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

RECEIVED FROM  
MAY 1 1916  
OTTAWA

FILE

ASSIGNED PAY.

By whom assigned

*Lawson G.R.*

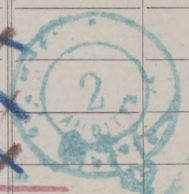
Regtl. No.

*138211*

*Pte.*

*75<sup>th</sup> Batt C.E.F.*

Month	Year	Cheque No.	Amt.	Pay Sheet	REMARKS.
Jan.	1916				
Feb.					
March					
Apl.		<i>23913</i>	<i>15</i>		
May.		<i>45611</i>	<i>15</i>		
June		<i>66806</i>	<i>15</i>		
July		<i>101296</i>	<i>15</i>		
Aug.		<i>135298</i>	<i>15</i>		
Sept.		<i>169872</i>	<i>15</i>		
Oct		<i>216492</i>	<i>15</i>		
Nov.					
Dec.			<i>\$105</i>		
Jan.	1917				
Feb.					
March					
Apl.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					



*Pay October  
26.10.16 24h.  
D of wds.*

Payment Stopped  
A. 3 M. Form.