

3200  
 3, 1, 16  
 19-5-16  
 Original

ATTESTATION PAPER.

No. 503200

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? *Morrison Morrison*
- 1a. What are your Christian names? *Lachlin (Lachlin)*
- 1b. What is your present address? *Cardinal*
- 2. In what Town, Township or Parish, and in what Country were you born? *Edinburgh Scotland*
- 3. What is the name of your next-of-kin? *Mrs. L. Morrison*
- 4. What is the address of your next-of-kin? *Cardinal M.*
- 4a. What is the relationship of your next-of-kin? *Wife*
- 5. What is the date of your birth? *Jan. 12 1888*
- 6. What is your Trade or Calling? *Locomotive Engineer & mechanic*
- 7. Are you married? *yes*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? *yes*
- 9. Do you now belong to the Active Militia? *yes*
- 10. Have you ever served in any Military Force? *yes. 1 yr. canal patrol*  
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, *Lachlin Morrison*, 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.

*Lachlin Morrison* (Signature of Recruit)

Date *14/2* 1916. *H. Brown Lieut.* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Lachlin Morrison*, 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.

*Lachlin Morrison* (Signature of Recruit)

Date *14/2* 1916. *H. Brown Lieut.* (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 *Ottawa* this *6<sup>th</sup>* day of *March* 1916.

*M. M. M. M. M.* (Signature of Justice)

*O. C. Eng. Trg. Depot.*

Description of Lachlan Morrison on Enlistment.

Apparent Age 28 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. 9 1/2 ins.

Chest measurement { Girth when fully expanded ..... 37 ins.  
 Range of expansion ..... 3 1/2 ins.

Complexion ..... Medium dark

Eyes ..... Blue

Hair ..... Black

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

*Part of third finger of left hand has been lost.*

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 ..... Feb. 18th 1916

Place ..... Cardinal out

J. Locke  
 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:—

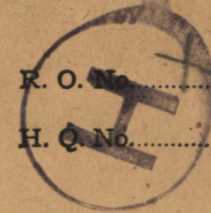
CERTIFICATE OF OFFICER COMMANDING UNIT.

Lachlan Morrison ..... 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 ..... 6/2/16 191 .....

W. Morrison ..... (Signature of Officer)  
 O. O. Eng. Trg. Depot

DISCHARGE DOCUMENTS



#

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.....

Name *Morrison Lochlin*

Regt. No. *503200* Rank *Spr*

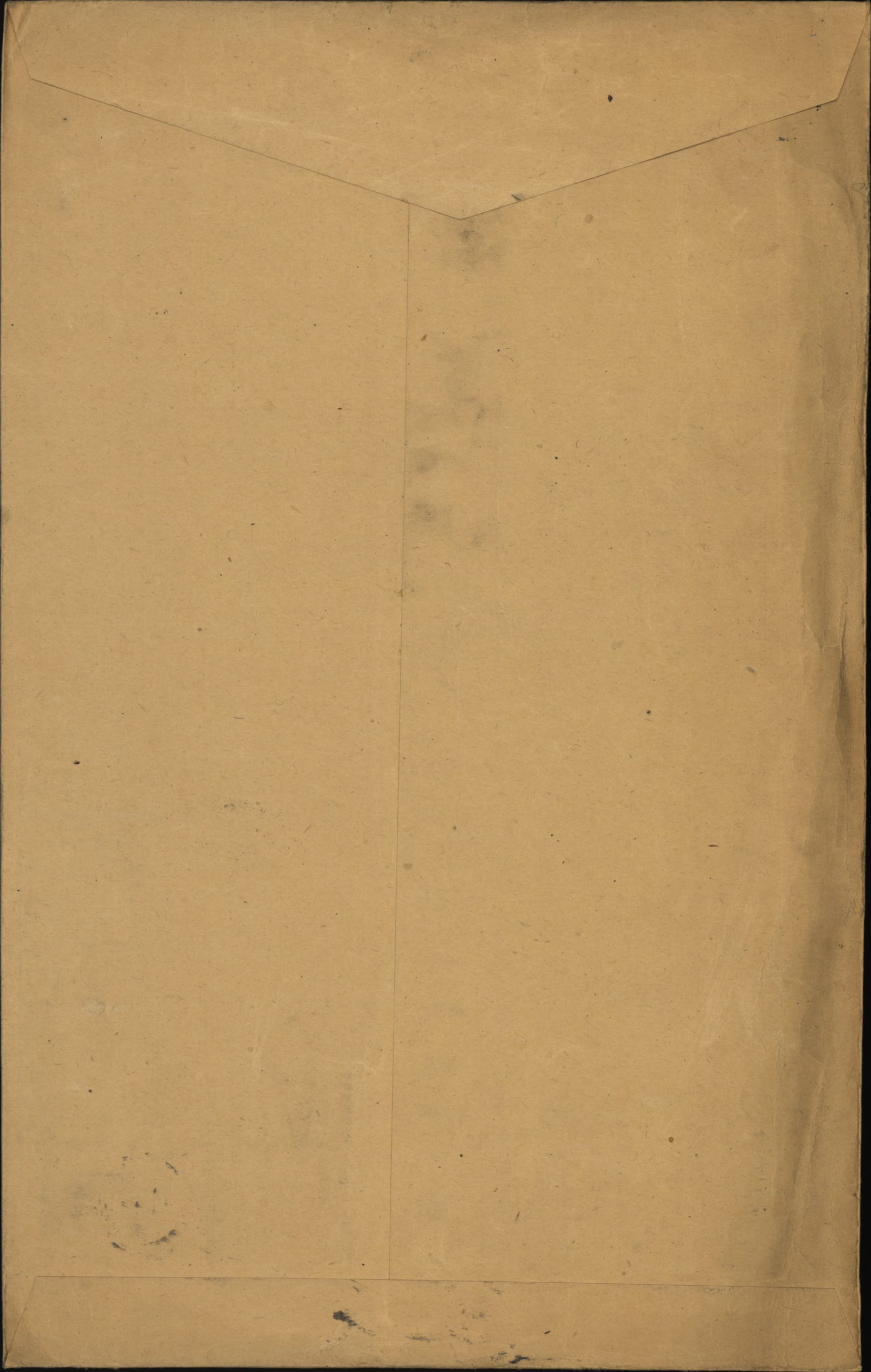
Corps *Eng. Inq. Depot.*

*Medically Unfit.*

3445A



*Miller*



CARD NO.

SURNAME.

*Morrison**649-M-6461*

CHRISTIAN NAMES

*Lochlin*

FOLL.

*506 Dis. 25-7-16 J.  
B.F.*

REGL. NO.

*503 200*

RANK

*Spr.*

UNIT

*Can. Eng. Training Depot.*

FORMER CORPS

*1 yr. Canal Patrol.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Morrison, Mrs. L.*

RELATIONSHIP TO SOLDIER

*Wife.*

ADDRESS

*Cardinal, Ont.*

COUNTRY OF BIRTH

*Scotland. Edinburgh.*

DATE

*Jan. 12<sup>th</sup>. 1888*

PLACE OF ATTESTATION

*Ottawa, Ont.*

DATE

*Mar. 6<sup>th</sup>. 1916.*

MARRIED

yes

SINGLE

WIDOWER

TRADE OR CALLING

Locomotive  
Engineer & mechanic

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

28 YEARS

— MONTHS

HEIGHT

5' FEET

9 1/2 INCHES

CHEST MEASUREMENT

37 INCHES

EXPANSION

3 1/2 INCHES

COMPLEXION

medium Dark

EYES

Blue

HAIR

Black

DISTINGUISHING MARKS

Part of third finger of left hand  
has been lost.

MEDICAL EXAMINATION.

PLACE

Cardinal, Ont.

DATE

Feb. 18<sup>th</sup>, 1916

Present address.

Cardinal, Ont.

19.2.16

MILITIA AND DEFENCE

157

M. F. W. 11.  
20m.—11-15.  
H. Q. 1772-39-818.

## SEPARATION ALLOWANCE

Name *Mrs. L. Morrison*Name of Soldier *Morrison L.*Address *Cardinal  
out*Regtl. No. *503200*Rank *Spr.*Corps *Can Engrs*

Relation to Soldier

To what Corps belonging

wife, child or mother

*wife.*

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		<i>M78529</i>	<i>28 - 28</i>	

ACCOUNT CLOSED  
DATE.....PER.....  
PHOTO 4, 11





MILITIA AND DEFENCE  
SEPARATION ALLOWANCE

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

OVERSEAS CONTINGENTS

Sheet No. 2.

*Mrs. L. Morrison*  
*wife*

*Wife*  
PAYMENTS.

Name of Soldier

*Morrison, L.*  
*Apr*

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	H 3028	20	20
May		U 914	20	20
June		G 3393	20	20
July		F 11036	20	20
Aug.		<del>G 13419</del>	<del>20</del>	<del>20</del> (G 13419 cancelled) Dis 25/7/16 Pm 29/7/16
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				

ACCOUNT CLOSED  
DATE.....PER.....

*Pension granted 26/7/16.*  
*W. P. 9/3/17.*

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**

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.				

# MEDICAL HISTORY SHEET.

503200

Surname Morrison Christian Name Lachlin

Examined { on 18th day of February 1916  
 at Cardinal Out.  
 Birthplace { City or Town Edinburgh  
 County Scotland

Approved by J. A. Locke  
 Rank \_\_\_\_\_ M.O.

Apparent age 28 yrs  
 Trade or occupation Locomotive Engineer  
 Height 5 Feet 4 1/2 Inches  
 Weight 150 Lbs.  
 Chest measurement { Minimum 33 1/2 inches  
 Maximum expansion 3 1/2 inches  
 Physical development Normal  
 Small-Pox Marks None

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,

Vaccination Marks { Arm Right Left yes  
 Number Four  
 When Vaccinated last In childhood  
 (a) Marks indicating congenital peculiarities or previous disease None

Date	Result	VACCINATIONS.

(b) Slight defects but not sufficient to cause rejection  
Last and part of second phalanx of third finger of left hand lost.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.

Enlisted on 14<sup>th</sup> day of Feb 1916, at Cardinal Ontario

CORPS.	REG'TL NUMBER.	HABITS.	DATE.
<u>Canadian Engineers</u>	<u>503200</u>		<u>14 - 2 - 1916</u>
Joined on enlistment			
Transferred to.. ..			

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>Valcartier</u>	<u>12/16</u>	<u>Subacute Tuberculosis</u>	<u>Discharged unfit</u>
		<u>with Arsenic and Santalium</u>	<u>for A.S.M.S.</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.



Number., 503200  
Rank., Sapper  
Name., L. Morrison  
Unit., Engineer Training Depot

CERTIFICATE.

I, *Lachlan Morrison* . . . . . HEREBY CERTIFY THAT I AM  
UNWILLING TO AVAIL MYSELF OF THE PRIVILEGES OF ~~SANITARIUM, OPERATIVE~~  
~~HOSPITAL, OR VALEDCENT HOME~~ TREATMENT, RECOMMENDED BY THE MEDICAL  
BOARD IN MY CASE, AND HEREBY RELEASE THE DEPARTMENT OF MILITIA  
AND DEFENCE FROM ALL RESULTS THAT MAY ENSUE FROM MY REFUSAL.

*Lachlan Morrison* . . . . .

Witness. *W. A. Johnson* . . . . .  
*P. W. F. T. D.* . . . . .

Dated at Valcartier Camp, Que..  
. 20<sup>th</sup> . . . day of *July* . . . . . 1916.

X Delete words as necessary.



503200  
209900  
L. Morrison  
Engineer Training Depot

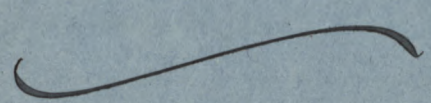
SATURDAY

WORLD  
WIDE



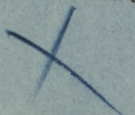
# Proceedings on Discharge.

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

No.	503200		
Rank	Sapper		
Name	Morrison, Kathleen		
	<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>		
Corps (Squadron, Battery or Company)	Engineer Training Dept.		
Date of Discharge	25 <del>th</del> July 1916		
Place of Discharge	Valcarlos Camp P. O.		
1. DESCRIPTION AT THE TIME OF DISCHARGE.			
Age	28	years	months.
Height	5	feet	9 1/2 inches.
Complexion	medium		
Eyes	blue		
Hair	black		
Trade	Locomotive Engineer & Mechanic		
Intended place of residence.	Descriptive Marks. Part of third finger of left hand has been lost		
(To be given as fully as practicable.)			
2. The above-named man is discharged in consequence of			
<p style="font-size: 1.5em; margin: 0;">Medically unfit</p> <p style="font-size: 1.5em; margin: 0;">(V.C. C-1-2-E)</p>			
<small>N.B.—The causes 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.</small>			
3. Conduct and character while in the service have been, according to the records, etc.			
Very Good			
<small>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.</small>			
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)			
			

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

*Grant*  
10-8-16  
*MS.*



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.....

\_\_\_\_\_

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) *Valcarlos P.Q.*

*H. M. M. M. M. M.*

(Date) *25-7-16*

Lt. Colonel C. E. O. C. Engineer Training Depot.

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) *Valcarlos, P.Q.* *L. M. M. M. M.* (Signature of Soldier.)

(Date) *25-7-16* *[Signature]* (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.....days.

11. Confirmation of Discharge.

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

(Place) *Valcarlos P.Q.*

*H. M. M. M. M.*

(Date) *25-7-16*

(Signature) ..... Lt. Colonel C. E. O. C. Engineer Training Depot.



**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.)

*Nil*

*L. Morrison*

## List of Discharge Documents.

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<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>Settlement of Man's Account on          Transfer and Last Pay Cer-          tificate, " 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> <hr/> <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.*

# MEDICAL HISTORY OF AN INVALID.

1. Station. **Valcartier Camp**
2. Regiment or Corps. **Can. Eng. Corps**
3. Regimental No. and Rank. **503200**  
**Sapper**
4. Name. **Lachlin Morrison**
5. Age last Birthday. **29**
6. Enlisted on **Feb. 14/16**  
at **Cardinal, Ont.**
7. Former Trade or Occupation. **Locomotive Engineer**  
Date. **July 12/16**
8. General remarks on his :—  
(a) Conduct. **Good**  
(b) Habits. **Good**  
(c) Temperance. **Good**

DEPT  
MILITIA & DEFENCE  
**SEP 2 1916**  
*Cela M 6461*  
CANADA  
  
DEPT  
MILITIA & DEFENCE  
**OCT 19 1916**  
CANADA

9. Service.	Years. <b>150</b>	Days.
	PERIODS.	
	FROM.	TO.
<b>Canadian Engineers Depot</b>	<b>Feb. 14/16</b>	<b>July 12/16</b>

10. (a) Disease or disability. **T.B.C?**
- (b) Date of origin. **March 1916.**
- (c) Place of origin. **Ottawa**
- (d) Cause. **Pleurisy & Pneumonia**

11. Present Condition. (Most Important)  
(To include full description of present disabling condition or conditions.) **History of attack of pleurisy and pneumonia in March, 1916. Previous health good. Expansion of chest rather poor. Increased vocal fremitus on left side front. Resonance impaired in left upper lobe front and back. Breathing harsher with coarse rales over latter region. Weakness, loss of flesh, loss of appetite, night sweats, cough and expectoration.**

12. (a) Is the disability the result of service or climate? **Result of service**
- (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.)

Part of second phalanx of third finger of left hand lost.

(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

Sanatorium

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?

One year

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

100% during treatment

cannot find work?

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

Unfit for service

*James Capt. Carr*

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 :

The Board having met and examined Lachlin Merrison concur in the above report and recommend that he be sent to a sanatorium for treatment.

Signatures :—

*J. M. ...* President.

*R. J. ...* Capt. amc

Members.

Station. **Valcartier Camp,**

Date. **July 12/16**

*D. R. Wark,* capt. amc.

Date. *14/7/16*

*Walter ...* Ass. Director of Medical Services.

Approved.

Date.

*5.9.16 Cancelled for ...*  
*25/7/16*  
*W. Oscar A. Cannon* Capt  
 Director-General of Medical Services.

5 As-

4.9.16

072-91/6/2-5

SEP 4 - 1916

(At Station or Hospital where finally disposed of.)

Station and Hospital

Arrived from

Date

If admitted. 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 Depot.

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Date of final Medical Board or decision.

Administrative Medical Officer.

DETAILED MEDICAL HISTORY OF INVALID.

Militia Form B. 227.

150 m-5-16.  
H. Q. 1772-89-117.

Station	Corps	Regimental No.	Rank
Name	Disability	Date	Hospital or Station transferred to for final disposal.
Date	Date of final disposal	How finally disposed of	

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