OFFICERS'

DISCHARGE DOCUMENTS

R. O. No. X6542

H. Q. No.

Name ATTO. HAROLD, LYNN.

Regt. No. — Rank Lieut.

Corps 5th " 6 M.R.

Demob.

Documents Desp. to M.D 4 on M4/W2505
Ref. 4 321 d/20.2.19

Proceedings of Court of Inquiry or on men Reported Missing on Active Service.....

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet..... 1

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..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet..... 1. C

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate..... 1

AFW-3212-1
1 Pay Cert

AFB-1218-1

AFW-192-1

2 cards

AFI-1237-2
AFB-181-1

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

4
4-18
4-18
5-18
4

ATTESTATION PAPER.

No. 110013

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... Harold Lyons Atto
2. In what Town, Township or Parish, and in what Country were you born?..... Lyons Dane Canada
3. What is the name of your next-of-kin?..... Mrs H. Ellen Lyons Atto Wife
4. What is the address of your next-of-kin?..... P.O. Box 17 Lennoxville Que
5. What is the date of your birth?..... Dec 27th 1895
6. What is your Trade or Calling?..... Clerk
7. Are you married?..... No
8. Are you willing to be vaccinated or re-vaccinated?..... Yes
9. Do you now belong to the Active Militia?..... No
10. Have you ever served in any Military Force?.. 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

H Lyons Atto .....(Signature of Man).

R E Mackenzie .....(Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, H L Atto., 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.

H L Lyons Atto .....(Signature of Recruit)

Date 8th April 1915 R E Mackenzie .....(Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, H. L. Atto, 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.

H L Lyons Atto .....(Signature of Recruit)

Date 8th April 1915 R E Mackenzie .....(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 Sherbrooke this 8th day of April 1915.

L. Gill J.P. .....(Signature of Justice)

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

L. Gill Capt. .....(Approving Officer)

200 M.—8-14.
H. Q. 1772-1-13.

Description of Harold Lyan Atto on Enlistment.

Apparent Age 19 years 4 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. 10 ins.

Chest measurement { Girth when fully expanded ..... 35½ ins.
Range of expansion ..... 1½ ins.

Complexion .....

Eyes .....

Hair .....

Religious denominations { Church of England .....
Presbyterian .....
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 Apr 4th 1916 .....

Place Shorncliffe ..... G. McInnes .....
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.

H L Atto .....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.

G W Baker Lt. Colonel .....(Signature of Officer)
O. C., 5th CANADIAN MOUNTED RIFLES

Date April 4 1916.

5th

ATTESTATION PAPER.

No. 5173.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

	(ANSWERS).
1. What is your name?	Harold Ryan Atto
2. In what Town, Township or Parish, and in what Country were you born?	Levis Que
3. What is the name of your next-of-kin?	Mrs H Ellen Louise Atto Mother
4. What is the address of your next-of-kin?	P.O. Box 47 Lennoxville P.Q.
5. What is the date of your birth?	24th December 1895
6. What is your Trade or Calling?	Clerk
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
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

H Lyon Atto (Signature of Man).

R Chamberlain (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, H R Atto, 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.

H Lyon Atto (Signature of Recruit)

Date 4 April 1915 R Chamberlain (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, H R Atto, 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.

H Lyon Atto (Signature of Recruit)

Date 4th April 1915 R Chamberlain (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 Sherbrooke this 4th day of April 1914.

C. Gill J.P. (Signature of Justice)

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

C. Gill Capt. (Approving Officer)

200 M.—8-14.
H.Q. 1772-1-13.

Description of Harold Lyon Atto on Enlistment.

Apparent Age 19 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 10 ins.

Chest measurement { Girth when fully expanded ..... 35½ ins.
Range of expansion ..... 1½ ins.

Complexion .....

Eyes .....

Hair .....

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

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).

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 Sherbrooke 1914.

Place Agr Hm

R. J. McKenzie
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.

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

.....(Signature of Officer)
Lt. Colonel
O. C., 5th CANADIAN MOUNTED RIFLES

Date April 4th 1914.

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

J.C.T.-4-36.

H.C.

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Lieutenant

(Name in full) Harold Lyon ATTO H.C.

Enlisted in 5th Battalion, C.M.R. as No 110017 (Private)

CANADIAN EXPEDITIONARY FORCE, on the Fourth

day of April 191 5 AND WAS APPOINTED to COMMISSIONED RANK

in 5th Battalion, C.M.R.

CANADIAN EXPEDITIONARY FORCE on the Twentieth day

of February 191 7.

He SERVED in CANADA, England and France with the 5th

Battalion, C.M.R., and Quebec Regimental Depot.

and was STRUCK OFF THE STRENGTH on the Fourth day

of February 191 9 by reason of General Demobilization

Dated at Ottawa, this Ninth day

of December 191 9

Awarded-Military Cross, L.G., No 30507 dated 4-2-18.

for Director of Personal Services.

M. F. W. 2618a.

30m.—4-19.
1772-39-1428.

(Y.M.)

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1133 (D.P. 250M-12-18.
1772-39-903.

LAST PAY CERTIFICATE

Regimental No..... Rank....Lieut..... Name....ATTO.Harold.I.....
(Surname first)

Unit .....who was* .....D.C.S.....
Inf.Regt.

On .....191....., to.....
4-2-19 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from.....1-2-19....to ....4-2-19.....191...
the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month		
Regimental Pay....4...days at $....2..c.00		8.00
Field Allowance....4...days at $....1..c.00		4.00
Separation Allowance		
Clothing Allowance		
Post Discharge Pay		93.00
*Other Credits ....4 days subs.@1.70		6.80
Advances		
Separation Allowance and Assigned Pay Cheque No.		
*Other Charges		
Balance on transfer or on discharge, cheque No...83119	111.80	
Total	111.80	111.80

*Give particulars.

A monthly stoppage of $.....20.00.....(†) has.....(‡) been paid on account of

Assigned Pay for the month of.....Jan...191.9....
and Separation Allce. for month of.....nil...191.....

(to) Assignee Mrs.C.L.Atto
Lennoxville.QUE.

(Address) .....

(†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

Outfit Allowance of $.....has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment.....4-2-15.....married or single.....

(2) Separation Allowance, entitled or not.....nil.....(3) Reason for discharge.....D.C.G.42/4.....

(4) Authority for discharge or transfer.....D.D.4.28-Off-505.....

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date .....

Place .....

.....
Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
(B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
(C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
(D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

CREDITS, ADVANCES, Etc.

Credits, Advances, Forfeitures, Issues on Repayment, etc., since issue of this L.P.C. are to be entered hereunder:

Date	Place	Cheque No. A.R. No. or Other Particulars.	AMOUNT		Signature of Officer Making Payment.
			Dr.	Cr.	
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
		Lieut	Otto	Harold Lynn
Year 1918	Unit. 5 Cmk.		Age. 22	Service. CANADA 3 / FRANCE 39 / TOTAL 42

Station and Date.

Disease G.S.W. neck & Chest T + T. Severe.

ONSET. 9. 8. 18 WHERE. France.

HISTORY OF DISABILITY. M-G. bullet wd as above. Entrance R. side of neck Exit left side of spine in dorsal region. Evac to P of W. Hosp. 1. 9. 18. Haemothorax. 14. 9. 18 Operation & Z xxd from L. pleural Cavity Subsequent recovery uneventful.

CANADIAN CONVALESCENT HOSPITAL 27 SEP 1916 MATLOCK BATH

PERSONAL AND FAMILY HISTORY. Neg.

PRESENT CONDITION. Fairly good

DIGESTIVE SYSTEM.

CIRCULATORY SYSTEM.

RESPIRATORY SYSTEM. } O.K.

NERVOUS SYSTEM.

G.U. SYSTEM.

LOCAL CONDITION. Wds healed No special disability

Tonic treatment P.T. Occupation hours

3. 10. 18 About ready for M.B.

4-10-18 Boarded A

W. McCullough Maj.

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

(44502) Wt.W 11203—M 1150. 1,450,000. 6/12 16. C.F.& S. Forms/I. 1237/12. (E239) P.T.O.

Station and Date.	

CONFIDENTIAL. OFFICER Army Form A. 45.

MEDICAL BOARD REPORT ON A DISABLED OFFICER.

(ALSO TO BE USED FOR DISABLED NURSES.)

Station C.C.O.H.MATLOCK BATH.DERBYS.

Date 4-10-18.

1. Rank and Name LIEUT. ATTO: HAROLD, LYNN,
2. Unit 5th C.M.R. 1st Quebec R.D. Bramshott.Hants.
3. Age 22 4. Total Service 42 Mos. War Service { (a) at home 3 Mos. (b) abroad France 34 Mos.
5. Address 31 Mount Gold Rd. Plymouth.

STATEMENT OF CASE

NOTE.—In answering the following questions the Board will carefully discriminate between the officer's statements and evidence recorded in his medical documents. When possible, a statement by his medical attendant should be attached.

6. Disability G.S.W. NECK & CHEST. T.&.T. (PENETRATING).
7. Date of origin of disability 9-8-18.
8. Place of origin of disability France.
9. Give concisely the essential facts bearing on the history of the disability (personal and family history, etc.) :—

NOTE.—Boards subsequent to the first should record here the progress of the case since the officer's last appearance.

Wound of entrance Right median line of neck anterior and exit Left of Dorsal spine level with inferior angle of scapula.Evac., to No.8 General Hospital, France, 11-8-18. To Prince of Wales Hospital, 1-9-18. Aspiration of Left pleural cavity 14-9-18 - Oz.XXV fluid withdrawn. Good recovery. To C.C.O.H., 27-9-18. On admission, lungs clear. Wounds all healed.

I concur in the findings of the Board of Medical Officers here recorded.

OPINION OF THE MEDICAL BOARD

NOTES.-(i) **The Board will on no account inform the officer of its opinion on any of the following questions.**

(ii.) Clear and decisive answers should be filled in by the Board to enable the Ministry of Pensions to come to a reliable decision on the officer's claim to pension, etc.

(iii.) Expressions such as "may," "might," "probably" should be avoided, if possible.

(iv.) When there is more than one disability the replies will distinguish between them.

For D.M.S. Canadian Contingent.

10. Was the disability contracted (a) before entering the service? No.
(b) in the service? Yes.
11. Was it attributable to military service? Yes.
If so, to what specific military conditions is it attributed? Bullet wound.

[Enteric Fever, Dysentery, Malaria, &c., contracted on service in countries where there is a special liability to the disease are to be regarded as attributable to military service.]

12. If not attributable to, was it aggravated by, military service? N.A.
If so, by what specific military conditions? N.A.

13. Is it attributable to, or aggravated by, the officer's own negligence or misconduct? If so, in what way, and to what extent? No.

[P.T.O.

14. What is the officer's present condition? Generally good. Heart sound. Lungs and pleural cavity clear. Eats and sleeps well. No disability from wound now and no contra-indication to G.S.

15. To what degree is the officer disabled at the present time? ----------

(Degrees of disablement should be expressed in the following percentages—100, 80, 70, 60, 50, 40, 30, 20, under 20, or nil.)

16. Is the disability permanent? No.

17. If not permanent, how soon is re-examination recommended? -------- months.

18. Is it necessary that the officer should be re-examined by the same Board? No.

19. What treatment is the officer receiving, and where, and from whom? Baths at Canadian Convalescent Officers' Hospital, Matlock Bath, Derbys.

20. Is the officer in need of special medical treatment of any kind, and, if so, of what nature? No.

21. Does the officer require the constant attendance of another person? No.

22. Officers will be classified by the Medical Board under one of the following categories, the probable period of unfitness for the higher categories being stated. Explanation of these categories is in para. 5 of A.C.I. 158/1918. In case of nurses, omit B. and (i) and (ii) of E.

A.—Fit for general service — Yes.

B.—Fit for service in a garrison or labour unit abroad — N.A.

C.—Fit for home service:—

(i) Active duty with troops — N.A.

(ii) Sedentary employment only — N.A.

D.—For admission to a command depot — N.A.

E.—Requiring indoor hospital treatment:—

(i) In an officers' military or auxiliary convalescent hospital — N.A.

(ii) In an officers' hospital — N.A.

F.—Permanently unfit for any further military service — N.A.

23. In the case of officers suffering from neurasthenia found permanently unfit, has A.C.I. 307 of 1918 been complied with? — N.A.

W.J.McAlister, Major. C.A.M.C. President.
E.C.Whitehouse, Capt. C.A.M.C.
D.J.Millar, Capt. C.A.M.C. } Members.

"C".

343 W3035/1166. 49. 6. 18. Wh. P. [redacted] E.3410.

A

ORIGINAL OFFICER

MEDICAL HISTORY SHEET.

Surname Atto ✓ *Christian Name* H.L.

FOR YOUR INFORMATION.

Please dispose of this M.H.S. in accordance to Army Council Instruction No 479 of 1918 para 19.

Enlisted on the 25th day of May 1915

Height 5 Feet 10 Inches.

Trade e, P.Q.

Last Employer w,

Address P.Q.

Trade or Calling rapher

Weight 155 Lbs.

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

Physical development

Small-Pox Marks

Vision 5/5

Vaccination Marks { Arm Right. Left. / Number 2 on left arm

When Vaccinated last

(*a*) Marks indicating congenital peculiarities or previous disease

(*b*) Slight defects but not sufficient to cause rejection

Approved by J. R. Goodall

Rank Captain M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
2-7-15.	Capt. J. R. Goodall	M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
17-5-15	Capt. J. R. Goodall	M.O.
26-5-15	" " "	M.O.
12-6-15	" " "	M.O.

CANADIAN

Enlisted on 4th. *day of* April *191*5 *at* Sherbrooke, P.Q.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	5th. C.M.R.	[redacted]		
Transferred to..		LIEUT		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Imperial Hotel	4-10-15	G.S.W. neck & chest	A Officer Invalided Home.

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.

M. F. B. 313.

100M.—1-15.
H. Q. 1772-39-439.

A

ORIGINAL OFFICER

MEDICAL HISTORY SHEET.

Surname Atto *Christian Name* H.L.

ined	on 25th day of May 1915 at Sherbrooke, P.Q.
place	City or Town Hadlow, County P.Q.
arent age	19 years
le or occupation	Stenographer
ght	5 Feet 10 Inches.
Weight	155 Lbs.
Chest measurement	Minimum 32 inches. Maximum expansion 35 inches.
Physical development	
Small-Pox Marks	
Vision 5/5	
Vaccination Marks	Arm Right. Left. Number 2 on left arm
When Vaccinated last	
(*a*) Marks indicating congenital peculiarities or previous disease	
(*b*) Slight defects but not sufficient to cause rejection	

Approved by J. R. Goodall

Rank Captain M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
2-7-15.	Capt. J. R. Goodall	M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
17-5-15	Capt. J. R. Goodall	M.O.
26-5-15	" " "	M.O.
12-6-15	" " "	M.O.

Enlisted on 4th. *day of* April 1915 *at* Sherbrooke, P.Q.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	5th. C.M.R.	[illegible]		
Transferred to..		LIEUT		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Montreal Barracks	4-10-15	G.S.W. neck & chest	A Objects Militia Service.

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.

M. F. B. 313.

100M.—1-15.
H. Q. 1772-39-439.

CANADIAN

Surname..... Christian Name.....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.
THE PRINCE OF WALES' HOSPITAL, FOR OFFICERS, MARYLEBONE, N.W. 1		1-	9.	18	27.	9-	18	Gsw. Chest. (penetrating)		Patient had a left haemothorax which was tapped in France. He has signs of some pleural thickening & friction below the left of H.A.B. Air entry is fairness, good on this side.	+ A.Rose. Lieut. Capt. R.A.M.C.
C.C.S.T. Masons Bath	27	9	18	10	10	18	do	13	Chest Clear. No mil. tubercle now.		To present at Med.

GARRATT

E

R—122.

Rank Name ATTO, Harold Lynn Reg'l No. 110017

Unit 5th C.M.R. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Sherbrooke, 4th April, 1915. Place of Birth Quebec.

C

Name and Address, Next-of-Kin Mrs. H. Ellen Louise Atto, P.O. Box 77, Lennoxville, P.Q. Relationship Mother.

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

H

M

Discharge, Date and Place Reason Character

Report Date	From whom received	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
		Embarked for France.		24 OCT 1915	
21.4.16	O/C 5th	Granted 8 days leave	Field	24 2/16	Pt II O. 017
18-10-16	5th C.M.R.	To be Act/Lance/Cpl Paid to Complete Establishment	---	7.8.16	Pt II 053.
22-1-17	---	Appointed Act/Sergeant unpaid	---	26.9.16	Pt II 06.
22.2.17	---	Granted a Temporary commission as Lieutenant & Posted to 5Bn CMR		20. 19.2.17	Pt II O 17. Amended by Pt 030
5-3-17.	5th.CMR.	Mentioned in Despatches.	Field.		Pt ii Ord.22. Lond Gaz. 29890

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					

Forms R. 150.
3232. 15 M. 14/12/16.

Surname ATTO **Christian Names** Harold Lynn MC.

Rank 110017, A/Sgt.

Promotion Temp.Lieut.

Name and Address of Next-of-Kin
Mrs.H.Ellen Louise Atto, (Mother)
P.O.Box, 77, Lennoxville, Que..

Unit 5th.CMR's.Bn..

Place of birth Levis, Que..

Married (Yes or No) no

Appointments

Date of leaving Canada 18-7-15.

Date and Cause of Resignation

	Report Date	Report From whom received	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
			To be Temp.Lieut.& Psted.			
	22-2-17.	5th.CMR.	to 5th.C.M.R.Battn.		19-2-17.	Pt.11 Ord.No.17.
1	20-3-17.	W.O.	To be Temp. Lieutenant + Posted to 5th CMR.		20-2-17	Lond. Gaz. 29993.
	2-7-17	5th CMR	Granted leave of absence to Paris 20-6-17 to 30-6-17			Pt II of 64
	19-11-17	do	granted leave of absence 5-11-17 to		19-11-17	Pt II of 108.
2	4-2-18	W.O.	Awarded the Military Cross			L.G. 30507
	14-3-18	5th CMR.	granted 14 Days leave to UK		26-2-18	Pt II of 22
3	20 4 18	BAMS	Adm 51 Gen Hosp Naples		16-4-18	C.L. 961 V.D. (a)
				discharged	13-6-18	S.R. 1081
4	11-6-18	5 Can R.	Asst Scout Officer to Camp Lete Gabl.		5-6-18	Pt II 63
				Discharged	30.6.18	C.L. 1027
5	19-6-18	A.M.S.	Adm 51 General Hospital Naples		18-6-18	C.L. 1012
6	13-8-18	AMS	Adm. No 8 Gen Hosp. Rouen "Dangerously Ill"		12-8-18	C.L. 1058 GSW. Back, Neck Penet.
	31-8-18	do	—— do —— Now Rptd "Seriously Ill"		30-8-18	C.L. 1074 ——
	11-9-18	5th Can R.	Invalided Wounded & detached to D.R.D.		31-8-18	Pt II of 95

20 SEP. 1918

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				
6.9.18	QRO	T.O.S of Que RO from 5th CMR (Hosp)		1.9.18	P.R.O/217
3.9.18	ams 6	Adm. Prince of Wales Hosp. Marylebone N.W.		1.9.18.	Cl 1076 G.S.W. Back Neck Penet
			Deceased	10.10.18	Cl 1153 amended by Cl 1155
8.10.18	do 6	Adm Can Cons officers Hosp. Matlock Bath		28.9.18	Cl 1106 — do —
16.10.18.	QRO 7	S.O.S per Porting to 23rd Res Bn		10.10.18	P.R. II 0/251.
16.10.18	23rd Res Bn	T.O.S. from Que RO & Granted Leave 10.10.18 to		1.11.18	P.R. II 0/289.
6.12.18	QRO	T.O.S from 23 Res Bn & det 6 Segreg Camp. Rhyl for Return to Canada		2.12.18	P.R. II 0/295
10/19	H.Q. Ottawa/C.D.O.	Ottawa/C.D.O. re Transfer to the C.E.F. in Canada upon Cessation of Hostilities		12.12.18	R.O. 5.63.
	8				

10483

~~36~~

964 = 4 = 36

1. THIS IS TO CERTIFY that (Rank) Lieutenant

2. (Name in full) Harold Lynn ATTO. M.C.

3. Enlisted in The 5th Batt C.M.R. as Pte #110014.

4. CANADIAN EXPEDITIONARY FORCE, on the Fourth

5. day of April 1915 AND WAS APPOINTED TO COMMISSIONED RANK

6. in 5th Batt C M R

7. CANADIAN EXPEDITIONARY FORCE on the Twentieth day

8. of February 1917

9. He SERVED in CANADA England & France with the 5th Batt. C M R, C R Depot.

10. and was STRUCK OFF THE STRENGTH on the Fourth day

11. of February 1919 by reason of Gen Demob

12. Dated at Ottawa, this day

13. of 191

14. awarded the M C. L G. #30507 4-2-18

Report No. 6891 Army Form W. 3212.

(In books of 100.)

Regtl. No., Rank and Name Lt ATTO Age ____ Corps 5 1 Corps Mob Hospital

Disease GSW chest Hospital ____

To Officer i/c Laboratory. Ward 0/A 2

Please carry out an examination of the accompanying specimen of Pl chest fluid

with special regard to Cells & organisms

Nos. of previous Reports (if any) ____

In Pathological Reports a résumé of clinical history, treatment or progress since last report should be given.

Date Aug 20/18 [illegible] Capt

O. i/c Ward.

LABORATORY REPORT.

Films Blood + endothelial cells.
No organisms found.

Culture Aerobic } Sterile
Anaerobic } (24 hrs).
Original fluid

Date of Examination 21/8/18 [illegible] Capt RAMC

O. i/c Laboratory.

W9915—M1029 200,000 11/16 HWV(M1107) Forms/W3212/4
7264—M2967 250,000 8/17

2

(641)—Wt. W1751-1403. 500,000.—5-15.—C. & G. Forms B. 103/1.

Army Form B. 103.

CERTIFIED CORRECT
20 SEP 1918
CANADIAN RECORD OFFICE

OFFICIAL

Casualty Form—Active Service.

Regiment or Corps 5th Canadian Mounted Rifles

Regimental No. 110017 Rank ~~Pte~~ A/Sgt. Name Atto, Harold Lynn M.C.

Enlisted (*a*) ~~4.4.15~~ Terms of Service (*a*) Duration of war Service reckons from (*a*) ~~4.4.15~~

Date of promotion to present rank 20.2.17 LG 29993. Date of appointment to lance rank Numerical position on 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				
			Emb. Southn 18/4/15 LANDED FRANCE 24 31.10.15.	IN	
21/4/16	Unit	Granted 8 days Leave of Absence.	Field	24/5/16	B.213 d/25/3/16. Pt II No.17.
		To be a/L/cpl. paid	"	7/8/16	B213 Pt II 53d 18/10/16.
26-8-16	Unit.	Proceeded to G.H.Q. Cadet School		29.11.16	K.E. Tel 9491 d/19.12.16
29.11.16	Unit				
7.10.16	"	appointed A. Sgt. unpaid	Field.	26.9.16	AFB 213. Pt II 9/a 6 [illegible]
12-2-17	A.G.	Granted a Temporary Commission as Lieut., and posted to 5th C.M.R. Bn.	"	19-2-17. 20-2-17	A.G. a/1186/378 d. 12-2-17. Can. Sec. File. K.6. 181-10 11 Pt II Orders. 17 22/2/17. Correction in Pt II O. 30 24/3/17.
2-1-17	W.O.	Mentioned in Sir D. Haig's Despatches for distinguished services in the Field	Field		Gaz. No. 29890. Pt. II O. 22 d/6-3-17.

(*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.

Lieutenant ATTO. H.L.

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				
23/6/17	Unit.	Granted Leave to Paris. 20/6/17 to 30/6/17	—	—	B213 fol II "64 7/7/17.
7.7.17	"	Reported from Leave	—	3.7.17	B213 Doc 25a
10.11.17	"	Granted Leave of absence 5/11/17 to 19/11/17.	—	—	B213 fol II 108 19/11/17.
1.12.17	"	Reported from Leave	—	23/11/17.	B213.
3.3.18	"	Granted 14 days leave to U.K.	—	26/2/18	B213. Apt No 22 d/14.3.18
14/2/18	London Gazette	Awarded "Military Cross." for distinguished Services & Gallantry in the field	—	14/2/18	Sup. to London Gazette No 30504 d/14.2.18. Granted No 26 d/22.3.18.
16.3.18	Unit	Rejoined from Leave	—	14/3/18	B213.
14.4.18	10.C.F.A	Gonorrhoea to	22 Cas.	14.4.18	F 4599
16.4.18	51 Gen'l	V.D.G.	51 Gen'l	16/4/18	F 6501
18.4.18	23 C.C.S.	" to	23 C.C.S.	15/4/18	F 6530.
5-6-18.	G.O.C. 3rd.Div.	Apptd. Scout Officer			G.O.C's.A.3-157. ref.K.I.18-12631. D.O.63
13.6.18.	51. Genl.	V.D.S. to	duty.	13.6.18.	F. 7130.
14.6.18.	C.I.B.D.	Class. "A"	—	14.6.18.	B.E. 1630.
18.6.18.	C.I.B.D.	Left for	C.C.R.C.	18.6.18.	B.E. 1698
17.6.18.	51 Genl.	V.D.G. "M"	51 Genl.	17.6.18	F. 7779.
1.7.18	C.I.B.D.	T.O.S.	C.I.B.D	1.7.18	B.E. 1840.
30.6.18	51 Genl.	V.D.G. to	C.I.B.D.	30.6.18.	F. 9832.
19.7.18.	C.I.B.D.	Left for Unit.		19.7.18.	B.E. 2070.
20.7.18.	Unit.	Rejoined	Unit	20.7.18.	B.213
10.8.18.	I.C.F.A.	G.S.W. back & neck		9.8.18.	A.36/2058.
11.8.18.	8. Genl	— do — penetrating	8. Genl	11.8.18.	G. 9178
18.8.18.	8. Genl	— do — Remg	8. Genl	18.8.18.	H. 389
24.8.18.	8. Genl	— do — Serious Rem	8. Genl	24.8.18.	W. 3034

Army Form B. 103. Regimental Number.....

Casualty Form—Active Service.

OFFICER.

Regiment or Corps 5th C.M.R. C.E.F.

Rank Lieut. Surname Ellis Christian Name Harold Lyon

Religion..... Age on Enlistment.....years.....months

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

Date of promotion to present rank 20.2.17 Date of appointment to lance rank.....

Extended {.....} Re-engaged {.....} Qualification (*b*).....

LG 29993.

or Corps Trade and Rate.....

Occupation..... .....Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
		Embarked ...			
		Disembarked...			
11.8.18	No 2 Red Cross	G.S.W. back + neck. Perm.	2 Red Cross	11.8.18	W 3034
17.8.18	48 C.C.S.	— do — do	A.T. No	10.8.18	H 2462
25.8.18	8 Genl.	" " Improving.	8 Genl.	25.8.18	H 3902
31.8.18	"	" " to	England	31.8.18	H 3953
31.8.18	D.C.A.T. Granatally Cycle.	Invalided Wd and Detached to Que Reg. Depot.		31.8.18	W.8083/5882 Pt. II 95 d/11.9.18
					Lieut. for Lt. Col A.A.G. Canadian Corps G.H.Q. 3rd Echelon.

(*a*) In the case of a man who has re-engaged for, or enlisted in Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.

(*b*) Signaller, Shoeing-Smith, &c

(17591.) Wt. W 1887—P 1124. 1,000,000. 6/18. D & S. Form B/103. (E. 1256.)

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A.36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents
Date	From whom received				
6-9-18	O.C.Q.R.D.	T.O.S.and shown,as a Patient in hosp		31-8-18	D.O. 217/6-9-18
16-10-18	Do Do	Ceases to be a patient in hosp and is S.O.S.on posting to the 23rd Res Bn	Bramshott	10-10-18	,D.O.251/16-10-18
					Lieut i/c Records,
			Quebec		Regimental Depot.
16/10/18	23rd. CAN. RES. BN.	TAKEN ON STRENGTH	Bshott.	10/10/18.	D.P. H. O. No. 289.
5/12/18	23rd. CAN. RES. BN.	POSTED TO 1st. QUE. REG. DEPOT. Name processed by Seg. Camp Rhyl.	Do	2/12/18	D.P. H. O. No. 339 For O.C. Regl. Con. Depot.
6-12-18	O.C.Q.R.D.	TOS from 23rd Res Bn and Detached to Seg Camp Rhyl N.Wales ~~pend Return to~~ Canada.....	Bramshott	2-12-18	Part 11 Do 295/6-12-
		SOS 4 Feb/19	Quebec		Lieut i/c Records, Regimental Depot.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
60m.—12-15.
1772—39—819.

Sheet No. 2. Mrs E. L. Atto PAYMENTS.

L. L. Job 89002.—Req. 6213.

Name of Soldier Atto H. G.
Pte Lt. Asgd - 5th CMR

Month.	Year.	Cheque No.	Amt.	Remarks.
			20.00	
April	1916	J 1061	20	— S# 60 Refund requested. O/s modified on action taken on 3 NI & letter d/c closed June 30/17. 9/7/17 F.L.
May		K 4237	20	
June		L 7431	20	
July		A 7956	20	
Aug.		B 11189	20	Stop April 1st/17
Sept.		D 15288	20	
Oct.		G 19736	20	An overpayment of $300.00 on this Account to 9/7/17
Nov.		I 24784	20	
Dec.		K 28377	20	
Jan.	1917	P 36408	20	
Feb.		S 43742 P 42632	20 20	20 P. 42632 Cancelled
March		D 44763	20	20 L.
April		G 4446	20	20 E.
May		Q 6344	20	
June		B 12939	20	20 E
July		R 19783	20	R 19783 Cancelled
Aug.		B 30635	40	Hold/ Ayg't adjust
Sept.		X 33676	20	0320 - future
Oct.				440 = D.C.B.
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				

P—56

Rank Name ATTO, Harold Lynn Reg'l No. 110017

Unit 5th C.M.R. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Sherbrooke, 4th April, 1915. Place of Birth Quebec.

Name and Address, Next-of-Kin Mrs. H. Ellen Louise Atto, P.O. Box 77, Lennoxville, P.Q. Relationship Mother.

Assigned Pay Monthly $ 20.00 1/12/15 Payable to Above. Relationship

Separation Allowance $ Payable to Relationship

Discharge, Date and Place Reason Character

PAY OFFICE, A.F. & A. FEB 18 1918 CANADA

Entered on N.E. Card Index

Checked by

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
Aug 1	Aug 31	31	1.00	31 -	31	10	3 10	10 -	44 10			31 63			31 63	2 47	Clothing
Sept. 1	Sept 30	30	1.00	30 .	30	10	3 .		45 47			31 63			31 63	13 84	
Oct 1	31	31	1.00	31	31	10	3 10		47 94			24 56			24 56	23 38	
Nov 1	30	30	1.00	30	30	10	3		56 38			268		58	326	53 12	1/ Stores Recd
Dec 1	31	31		31	31		3 10		87 22			16 8c 70 -			36 8c 50	38	
Jan 1	31	31		31	31		3 10		34 10			524 20 -			25 24	59 24	
Febry 1	29	29		29	29		2 90		31 90			262 20			2262	8852	
Mar 1	31	31		31	31		3 10		34 10			48 66 70			71 77	31 35	
				244 .			24 40 10		278 40			166 47 80		58	247 05	31 35	Fd to new Ledger

Carried forward to Large Ledger sheets

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

Sgt. Name Atto, Harold Lyons

M. F. W. 61
100m-1-18.
1772-39-889.

Regimental No.

Unit Que Regt.

Date of enlistment Oct 15 M D 4 Party

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

REGINA

DEC 12 1918

DEC 20 1918 Pub Exp

Name and address of next-of-kin

Lennoxville, P.Q.

Date and place discharged Transf to C E F.

Reason for discharge M D 4

Character on discharge

1 L.R.L. dec 31 '18
C.R.

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

M. F. W. 41
100M-1-18.
1772-39-889.

Name.....

Regimental No.

Name and address of next-of-kin

Unit

Date of enlistment

Place of "

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly $

Reason for discharge

To whom payable

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

Army Form B. 181.

CLINICAL CHART.

(To be attached to Case Sheet.)

Corps 5. C. M. R. 3rd Div. Military Hospital _____

No. _____ Rank and Name Lt Allo. H. L. Age _____ Service _____

Disease G S W Chest Date of admission 11 . 8 . 18. Date of discharge _____ Result _____

Dates of Observation	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31.
Days of Disease																			A.T.S.		
Temperature, Fahrenheit	Time A.M. P.M.																				
Pulse per Minute	84 104	88. 96	80. 96	72. 84	68.	88.	64.	88.	100.	100.	76.	98	90 96	88 90	92 92.	88	96.	88	80	72 76	80 80
Respirations per Minute	24 24	24. 26	24. 24	24. 24	22.	22.	20.	22	20.	24.	24.	22.	26.	22. 28	28 30	26 28	22	24. 22	22	24. 20	24 24
Motions per 24 Hours																					

Mag. Sulph. 1/2.
Cal. Gas. III
Pulse hot 13 (2).
ATS 500 units
Aspirated 3 xxv.
A.T.S. 500 units 3rd
A.T.S. 500 units 4th
Pleural effusion

Wt. W3728/M2313—2,000,000—6/17—H. & Sp. (0693)—A.F.B. 181/5 (E. 735)

Signature _____

CLINICAL CHART.

(To be attached to Case Sheet.)

Army Form B. 181.

Corps_____ Military Hospital_____

No._____ Rank and Name_____ Age_____ Service_____

Disease_____ Date of admission_____ Date of discharge_____ Result_____

Dates of Observation

Days of Disease

Temperature, Fahrenheit

Time A.M. P.M.

107° 106° 105° 104° 103° 102° 101° 100° 99° 98° 97°

Pulse per Minute

Respirations per Minute

Motions per 24 Hours

H. & Sp. (10693)—A.F.B. 181/5 (E. 735)

Signature_____ In charge of case.

Lieut. — Edgar Sherbrooke

1914.

5TH CANADIAN MOUNTED RIFLES
C. E. F.

110017 Pte H. L. Atto

14

WILL

In the event of my death
I give the whole of my property
& effects to Mrs. Ellen Louise
Atto, Lennoxville, P.Que.,
Canada.

Pte Harold Lyman Atto
No 110017,
5th C.M.R.

Sept 29/1915.

	Pay.	Field. Allowance
Colonel	$6.00	$1.50
Lieut-Colonel	5.00	1.25
Major	4.00	1.00
Captain	3.00	.75
Lieutenant	2.00	.60
Paymaster	3.00	.75
Quartermaster	3.00	.75
Nursing Sister	2.00	.60
Command Pay	1.00	
Adjutant in addition to pay of Rank	.50	

WARRANT OFFICERS, N. C. O's and Men.

Warrant Officers	$2.00	.30
Quartermaster Sergeant	1.80	.20
Orderly Room Clerks	1.50	.20
Pay Sergeants	1.50	.20
Squad. Batt'y, or Co. Sergeant-Major	1.60	.20
Colour Sergeant or Staff Sergeant	1.60	.20
Squad. Batt'y, or Co. Q. M. S.	1.50	.20
Sergeants	1.35	.15
Corporals	1.10	.10
Bombardiers or Second Corporals	1.05	.10
Privates, Gunners, Sappers, etc	1.00	.10

Working Pay in addition to pay of rank varying from $1.00 to 50c. per diem, according to qualifications, is granted to Artificers, Motor Car Drivers, Cooks, etc.

Forms
I. 1237
12

Army Form I. 1237.

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
		Lieut:	Otto.	H. L.

Year	Unit.	Age.	Service.
1918.	5th C.M.R., 3rd Div. Cdn		

Station and Date.	Disease
R.P.W. Hosp.	G.S.W. Neck & Chest – penetrating. (severe).

Admitted 1st Cdn F.A. on 9.8.18.
Transferred to 48th C.C.S. on the same day who reported "Exit wound left chest, condition fairly good".
Transferred to No 8 General Hospital on 11.8.18 who reported "entry wound right side of neck, exit wound left of spine in dorsal region".
1st A.T.S. 750 units on 9.8.18.
2nd A.T.S. 500 units on 16.8.18.
3rd A.T.S. 500 units on 23.8.18.

1.IX.18. Admitted to Prince of Wales Hospital this afternoon.
Wound of right side of neck healed –
Small wound on left side of spine in dorsal region about the size of half-a-crown. Nothing symptoms.
General condition of patient good.

A.W. Gloss.
Capt.

Sept 14:– Patient had a haemothorax 3ixxv were withdrawn from left pleural cavity. Air entry good now, no signs of pulm. or pleural trouble ~~at~~ except dyspnoea on exertion he has no symptoms. Hearts action normal.
For Board. Recommend E1

A Rose-Innes.
Capt.

Sept. 16.– Temp. 101. P. 90. Diarrhoea .. Rigor. No pain. Some friction on left side below heart. probably resultant from old haemothorax.

A Rose-Innes.

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

Wt. W 6604/M 2870—1,500,000—8/17—H. & Sr. (10938). Forms/I. 1237/12. (E239)

P.T.O.

Station and Date.	
Sept. 18.	Symptoms disappeared. For Board E. This Officer is convalescent. A Rose Jones

13

Formerly 110017 Sgt. 5th C.M.R.
Lieut 20-2-17 L.G. 2758-9 20-3-17
T.D. 16 at $20 $320 to 3133-17. ✓
Hence a/m effect Dec 1/15 20.00 C/S.

1/4 593-1-12 7 Aug/17 a 44-4
A/P rendered 4/11/17 acct 5-10-17

Assignment as at
April 1st 1917.

Atto, H. L. Lieut. 5th C. M. R. 20

E.L.

Mrs. H. E. Atto,
P.O. Box 77,
Lennoxville, Avenue.

$
1-1-19
Mtd Canada

Payment Stopped
S.M. Form

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher Nr	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.

Rank Name Reg'l No.

Unit If in perm. Corps, What Unit? Married or Single

Place and Date of Enlistment Place of Birth

Name and Address, Next-of-Kin

Relationship

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance Payable to

Relationship

Discharge, Date and Place Reason Character

	Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc
	From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

L. L. Job 85095—M. & D. 5953.

M. F. W. 12.
20m.—9-15.
H. Q. 1772-39-819.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

To Whom Mrs E. L Atto

Address Kennoxville Que

Rate $20.00 Dec 1st 1915

2m 26 11/15 Jky

By Whom Assigned Atto N. L.

Regtl. No. 110017

Rank ~~Pte~~ Lieut.

Corps Asgd 5th C. M. R.

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			~~Stop Payment April 1/16 Authority 3 M 24/4/17 Reason Commsn in C & F London Gazette 2758 9. 20/4/17. F.J.B. 9/7/17~~
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			account reopened per Cable F8880 14/7/17 from date of Stoppage Eab 2/8/17.
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		Z7963	20 —	
Jan.	1916	Q13389	20	
Feb.		Q13807	20 —	
March		14368	20 —	

CONSOLIDATED ACCOUNT 2

Name Atts. Military Cross.
Harold Lynn.

M. in D. L.G. 29890. 4-1-17.

Rank Lieut. Date 4-2-18.
See Also 5-7-18.

Unit Mtd. Rif. Bn. Auth. L.G. #30507.
5th. See Also L.G. #30780 E.J.D.

SURNAME. Alto M C

CHRISTIAN NAMES Harold Lynne

REGL. No. ~~1-10017~~ RANK ~~Capt.~~ Lt. Temp. Lieut.

UNIT S. C. M. C.

FORMER CORPS

CARD NO. 4841

O.S. 4-2-19

ROLL

NEXT OF KIN.

NAMES IN FULL Alto Mrs. Ellen Louisa,

RELATIONSHIP TO SOLDIER wife.

ADDRESS P.O. Box 77
Lennoxville, P.Q.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada Lewis Lue DATE

PLACE OF ATTESTATION Sherbrooke DATE Apr 7 15.

Can. Com. Y.M.C.A. 9/C 20 12-18 244

L. L. 90:89.—M. & D. 6312. M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

Pro-to Temp Lieut. 19-2-[redacted] 17. auth Ot HQ No 17.
22-2-17

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

REGT'L NO. (Ob.No 110017)

NAME Atto, Harold Lynne M.

H.Q. FILE NO. 649.

RANK AND CORPS Lieut. 5th & 6th M.R.

FOLLOWS NO.

FOLLOWS

CABLE NO.	CABLE DATE	NATURE OF CASUALTY
N.O.K.		Mrs. Ellen Louisa Atto (Wife) P.O.Box 77. Lennoxville, P.Q.
O 789. 5-1	14-8-18	Dang. ill 8 Gen. H. Rouen, Aug 12th/18. Gsw. Back Neck. Pentg.
O 1017. 4-1	1-9-18	Prev. rept. dang. ill now ser. ill Aug 30th/18

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
1058,	8 Gen: Rouen	12-8-18	Dang ill, G.S.W. Back, neck, Chest.
1074	" " "	30-8-18	Prev. Dang now ser ill G.S.W. Back Neck Chest
1076 (5)	Ex H. S. to Prince of wales	Marylebone N.W. 1-9-18	Glw Back, neck Chest
1106	Cin Con Offic: Matlock	Left 28-9-18	" " " " "
1153	Disch	~~10-9-18~~ 10-10-18 as per H.C. 1155-3	" " " " "

Name Atto (M. B.) Despatches
H L

Date:-

Rank Pte (actg Lce-Cpl.) Gen. Sir Douglas Haig G.C.B.
110017. Despatch 13-11-16.

Unit Cavalry. Auth. L.G. # 29890 - 2-1-17.

No. 5123 Rank Pte Name Atto. H. L.

T.O.S. 4-4-15. Unit 5th Canadian Mounted Rifles
Apr. paylist.

M. D. #4.

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1915	1915			
april 4	april 30	✓		
may		✓		
June		✓		
July		✓		

UNIT SAILED
JUL 18 1915

Number..... Rank LIEUT.....

Surname ATTO.....

Christian Names HAROLD LYNN.

Unit.....Theatre of War FRANCE

Dates of Service 18.7.15.....24.10.15...2.12.18.

Remarks.....

Latest Address 1431 Van Horne Ave
Montreal Que
.....

Roll No. B Page 1848

G 105 j5-Dec
G 248928 Delh
APR 12 1922
SEP 3 1921

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
961-1.	51 Gen. Etaples	16-4-18	V. D. (G)
1011-2.	" " dis-to Duty.	13-6-18	" " S.
1012-2.	51 Gen. Etaples.	18-6-18.	" " G.
1027.	Dis to duty	30-6-18	" " G.

NAME Otto. H. L.

RANK AND CORPS Lieut. 5th C. M. R.

REGT'L. No. _____

H. Q. FILE No 649

FOLLOWS

NO.

FOLLOWS

CABLE NO.	DATE	NATURE OF CASUALTY

L. L. 31493. M. & D. 8476.

M. F. W. 42 -100M.—28-11-17.
H. Q. 1772-39-893.

Form R. 149.

"mc"

Name ATTO H. Harold L. Rank LIEUT. Reg. No.

Unit 5th CMR.

Next of Kin CANADA

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
16-4	51 Gen Hos. Etaples (WO)		VD	961			
13-6	Disch to duty (200)		VDS	1011			
18-6	Readmitted (4)		VDS	1012			
30-6	Disch to duty (200)		VDS	1027			
12-8-18	5th Gen Hosp Rouen. Dangerously Ill	(Ph W.O.)	G.S.W. Back, Neck, Penetg	1056	8-8		14/8
30-8-18	Now Seriously Ill.	(Ph: W.O.)		1074	01	01	
1-9-18	Pr of Wales Hosp Marylebone Exc H.D. 7001			1076			
28-9-18	Can Conv Hosp Matlock 7001			1106			

(over)

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
10-9-18	Discharged	7003	—	1153	X	✓
	Correct date Discharge 10-10-18			1155		

110017

Atto Harold Lynn

2nd C. M. R.'s

To France 24-10-15

To Comm - 20-2-17

Mentioned in Despat.

Awarded M. C.

Inv Wounded 31-8-18

To Canada

Reg. No.....

Rank...Lieut.....

Name...Atto, Harold, Lynn, (M.C.)

Unit.....5. C. M. R.....

This form, after completion, is to be attached to the documents of the m/n and filed in envelope.

H.Q. File Reference..6.02-1-8.3...

Date Struck off Strength...4/12/19...

Reason.....Gen. Demob.....

Military District.....4.....

R.O. 1619- 7/2/19.

Clerk's Initials.....H.....

Date.....8/10/19.....

Doc. S. F. 10.
500/11/18

Surname. ATTO

Christian Name. H. L.

Rank. Lieut. (MC).

Unit. 5th C.M.R.

Hospital.	Date of admission.
No.51 General Hospital, Etaples.	16-4 18.
Readm. do. do. do.	18-6-18.
No.8 General Hospital, Rouen.	12-8-18.
H.S. to Prince of Wales Hosp. London	1-9-18.
Transferred Canadian Conval.Offs.Hosp.Matlock	28-9-18.
..... Hosp.	
..... Hosp.	
..... Hosp.	

Diagnosis. ~~V.D.-(Q).~~ V.D.S. Rw

Later diagnosis. ~~V.D.-(Q).~~ Rw V.D.G. Rw.
G.S.W.Back,Neck penet.(Dangerously ill:-12-8-18.) Rw
Now seriously ill 30-8-18.

Disposition.

Disch.to Duty:-13-6-18
do. Datedo. 30-6-18.
Discharged:-10-10-18.?

20-4-18	961.	
18-6-18	1011-2.	
19-6-18	1012-2.	
8-7-18	1027-2.	
13-8-18	1058-2.	
C.L. 31-8-18	10[illegible]-2.	Remarks.
C.L. 3-9-18	1076-5.	
C.L. 8-10-18	1106-4.	
C.L. 2-12 18	1153-3.	
C.L. 4-12-18	1155-3.note.	
C.L.		
C.L.		
C.L.		

A.M.D. 2 DEPT.

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

D. M. S. 1347.

Surname	Christian Name	Reg. No.
ATTO	H. L.	

Rank	Unit
Lieut.	5th. C.R.T.

MEDICAL BOARD held at	Date	Serial No.
(1) Buxton Area	4-10-18.	

Other Medical Boards at	Date	Serial No.
(2)		
(3)		
(4)		
(5)		

Condition found by Board

(1) GSW. Neck Chest penet.

Disposition Recommended

(1) Fit for General service.

(2)

(3)

(4)

(5)

PENSIONS & CLAIMS BOARD held at ..... Date.....

Disposition

Remarks

Indicate by a P.T.O. if continued on other side.

*Name ATTO. Harold. Rank Lieut. Regtl. No.

Original unit C. R. Present unit D. D. 4. M. or S. Age Religion Fyle Depot 22-Off-505 Ref. H.Q.

Port, ship, and date of arrival

Next of kin

Address on leave

Address on discharge Lennoxville Que.

Transportation issued Yes / No Date Character on discharge

Previous occupation Date and place of enlistment

Diagnosis Demobilization Date of Medical Boards

Date.	Remarks	Pt. 2 Order No.
2-1-19	T. O.S. from Overseas on Gen. Demob. and posted	No.2.
	to Cas. Co. effect. 12-12-18. Auth. R.O. #1478.	Page.1.

*—Name will be given in full; surname first.

(over)

Date.	Remarks.	Pt. 2 Order No.
10-2-19.	S.O.S. On return to his former Active Militia Unit	
	effect. 4-2-19. R.O. 1619.	41 P 4

M.F.W. 192
150M—5-18.
1772-39-1243.

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
2.7.15.	Vaccs. Capt. J. R. Goodall.
17.5.15.	Inocs. " do.
26.5.15.	
12.6.15.	

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

I certify the foregoing to be a true copy of an original entry on A Medical History Sheet of this Unit.

for the Officer in Charge of Records Canadian Contingents.

14 0 0 1 7

DUPLICATE

ARMY FORM B. 178.

To be used (*a*) for recruits enlisting direct into the Regular Army, and (*b*) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname A T T O *Christian Name* H. L.

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Hadlow, P.Q. County

Examined ... ... on 25th day of May 191 5, at Sherbrooke, P. Q.

Declared Age ... ... 19 years days.

Trade or Occupation ... Stenographer

Height ... ... 5 feet 10 inches.

Weight ... ... 155 lbs.

Chest Measurement — Girth when fully Expanded: 35 inches. Range of Expansion: 3 inches.

Physical Development ...

Vaccination Marks — Arm ... Number: Right 2 Left

When Vaccinated ... ...

Vision ... ... R.E.—V= 5/5 L.E.—V=

(*a*) Marks indicating congenital peculiarities or previous disease ... (*a*)

(*b*) Slight defects but not sufficient to cause rejection ... ... (*b*)

Approved by (*Signature*) J. R. Goodall,

(*Rank*) Capt.

Medical Officer.

Enlisted ... ... at Sherbrooke, P. Q. on 4th day of April 191 5.

Joined on Enlistment ... Corps: 5th C. M. R. Regtl. No. [illegible] LIEUT

Transferred to ... ...

Became non-effective by ...

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

on day of 191 .

(*Signature*)

(*Rank*)

H. Reumuster Lieut-Col.
In Charge of Records,
Canadian Contingent.

(4887.) W. 9597/1588. 500M. 9/15. C. P. Co. Ltd.

Forms B. 178 39

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in the case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. | RANK Lieut | NAME (IN FULL) ATTO, HAROLD L. (BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? No | DATE EFFECTIVE

TO WHOM PAID | RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
T.O.S. Portugal to Co 60	12/12/18	D.O. 2. p. 1

ORIGINAL UNIT C.E.F. G.R. | IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION 4.3.15 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY, $ 20.00 | DATE EFFECTIVE 1-1-19

PAYABLE TO Mrs. J. Atto | RELATIONSHIP 1385 | ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS ~~Lenoxville Que.~~ Van Horn Av. Outremont

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE

DISCHARGED | PLACE SOS to AM.L.Vet | DATE 4-2-19 | REASON Gen Dmnt Reg 1619 | AUTHORITY P.O. 41/4 | IF ENTITLED TO POST DISCHARGE PAY

MONTH 1919	PAY AND F. A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. No. 1 NO.	DATE	COL. No. 2 NO.	DATE	COL. No. 3 NO.	DATE	CASH PAYMENTS COL. No. 1 $	C.	COL. No. 2 $	C.	COL. No. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
Balance from previous account																																			Dr 2 Dec 1.30
Jan 1		2.00 1.00									17-1-19 16478	20-1-19 17164					50 00	50 00											1 30						
	31	1.70	93 00		52 70				145 70						25-1-19 17462						24 40		20 00						145 70					
															27-1-19 17237																			
1/2/19	4	2.00 1.00	12 00		6 80				18 80																				18 80					
4/2/19																													93 00					W.S.G.
									1 64 50		23-1-19 17-2-19						111 80												111 80					
																													257 50					

War Service Gratuity

	Other Credits	W.S.G.	S.A.	Total
		549 00		549 00

	Other Charges	W.S.G.	S.A.	Total	Soldiers Depst
31-3-19		93 00		93 00	456 00
~~29-3-19~~		90 00		90 00	
4/5/19		90 00		183 00	366 00
4.6.19.		93 10		273 10	273 10
4/7/19		90 00		90 00	183 00
4/8/19		93 -		93 -	90 -
		90 00		90 00	
				549 00	

Pd D D H
227308
237451
901663
924829
1258233

Issued

60m.-11-18 L. L. 51777. M. & D. 9585.

MONTH	PAY AND F. A.				OTHER CREDITS				TOTAL CREDITS		ACQUITTANCE ROLLS						CASH PAYMENTS						ASSIGNED PAY		REGIMENTAL 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		
			$	C.	$	C.	$	C.	$	C.	NO.	DATE	NO.	DATE	NO.	DATE	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	$	C.	

MARRIED OR SINGLE S.

PLACE OF BIRTH Quebec.

NAME AND ADDRESS OF NEXT OF KIN Mrs. A. E. Otto.
P.O. Box. 77. Lennoxville. Que.

RELATIONSHIP OF NEXT OF KIN Mother.

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
To be act. L. Cpl. with pay	7/8/16	B.O. 53 - 10/9/16
Act Sergeant with paid 26/9/16		B.O.6. 22/11/17

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 110017. RANK ~~Private~~ Sergt. ~~L/Cpl.~~ NAME Otto Harold Lynn. Lance Corporal

IF IN PERMT. CORPS | WHAT UNIT UNIT 5th C.M.R. TRANSFERRED TO L. Branch. DATE 20-2-17 AUTHORITY P.2758/9 20-3-17.

PERMANENT FORCE ALLOWANCES TRANSFERRED TO K. ✓ DATE 20/2/17 AUTHORITY

PLACE OF ATTESTATION Sherbrooke. TRANSFERRED TO P.M. Bch DATE " AUTHORITY ✓

DATE OF ATTESTATION 4th April 1915. TRANSFERRED TO A.E. DATE ✓ AUTHORITY ✓

ASSIGNED PAY MONTHLY $ 2.00 DATE EFFECTIVE 1/12/15. RELATIONSHIP Bde

PAYABLE TO Mrs. A. E. Otto, P.O. Box 77. Lennoxville, Que. Checked by TJ Wallace

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE RELATIONSHIP

PAYABLE TO

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) 27/3/17 EFFECTIVE 8/6/17 11/4/17 REASON Commission in C.E.F.

DISCHARGE DATE AND PLACE England 19/2/17 REASON AND AUTHORITY LC1 P2758 20/2/17

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) 20/3/17

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

T.C.S.

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1916																																		
															Forward from Old Ledger																				
30.4.16	30	1-	30		30	10	3								27440	33-	561 15/4/16							16647				80-	38 247 05	31 35				
																	536							267										
																								261				20	2523	2917				
31.5.16	31	1-	31		31	10	3 10								3410	695	155	670	31/5					511	255			20	2766	4556				
															33			780							256			20	2256	56				
Jan 1/30	30	1	30		30	10	3																	256	261			20	17	6193				
31.7.16	31	1.00	31		31	10	3 10								3410	806	30/6/16	895	15/7/16					262	262			20	2524	7379				
31.8.16	31	1.00	31		31	10	3 10								3410	93931	7/11	9966	18/8/16					262	261			20	2523	8156				
30.9.16	30	1.00	30		30	10	3								33	1045	31/8/16	1071	15/9/16					436	523			20	2959	9037				
31.10.16	31	1.05	32	55	31	10	3 10							2 75	3840	1126	30/9/16	1145	15/10/16					436				20	2436	10051				
30.11.16	30	1.05	31	50	30	10	3								3450	1167	31/10/16							842		1046		20	3918	9698				
31.12.16	31	1.05	32	55	31	10	3 10								3565	1244				1127	29/11/16	4 CMR												
1917			51	90			51 90																											
																				258														
31.1.17	31	1.10	3565												3565					1357	9/12/16					872		20	2872	10391				
																				0.58						872								
28.2.17	28	"	3080												3080					1553	6. 13/1/16.					871		20	4615	8856				
Fwd.			6419	5											1275	6547	0							20205	1818	4533		300	58 566 14	8856				

Payd each from 1/8/16 to 30/9/16

Small Ledger Sheet

110017 Sgt Atto H. L.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Fwd.	64	19	5											1275	6547					058			20205	18	18	45	33	300 -	58	566	14	88	56		
Mch.														140	140	1556	23/2/17			7147	9/1/18		2180			17	44	20	1035	69	59	203	7		
	64	19	5											1315	6561	0							22385	18	18	62	77	320	1093	635	73				
Apl.																				5 CMR 1659	19.3					2180					2180	-	-	1	43	

TRANSFERRED TO P.M. LIABILITY ACCT

MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR3	DR.4	BALANCE	DEFER-RED PAY	SER. ALLCE. ENG.
11 E may 1918				15801 16/6/17 OS Base	12R 14/4		53	53	53 53		
June	Mr. Bal. Trans to P.M.'s Branch. Voucher # 2 0 25/2		53 53	Bal Trans to Pay II 0					53 53 Nil		
do			53 53								

Balance transferred to N. E. Branch. Nil

2 Cpls pay 7th at enrolled
one entered 9 days Pay allce 7th
To L. Branch 20-2-17. (Com C.87)
Lapse Gazette P. 2758/19. 20/3/17.

A3M. FORM REN'D 27/3/17 EFFECT 1.4.17.
DISCHARGED TO Comm. DATE 20.3.17
PAYBOOK VERIFIED No Book.
CF. BAL. 20.37 L.P.O. REN'D 28/3/17
AUTHY. LG P 2758/19 20.3.17

Checked J. Macnevin LPC.

Supp LPC. 1/6/18. Dr Bal. 1.43
Trans to P.M. Bch Eff 24/2/17

Supp LPC Dr 53 53. 7.6.18
to P.M. Bch cf.

FORM P. 15
2227—10M—1/1/17

ASSIGNED PAY. | UNIT. NAME OF | DATE | AUTHORITY | RANK. | DATE | AUTHORITY | NAME.

Beneficiary — 5th Can R. — Lieut — Name Otto

Address — Initials A. L.

Amount. $ — Bank J. Montreal

Separation Allowance issued. Yes or No.....

1916-17

DATE 1917	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
Mch 31	Ord Des. France. 17 7/7 £14-7-1.	24569		69 86		69 86		

FORM P. 15
2227—10M—1/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.	
Beneficiary Address Amount. $ Separation Allowance issued. Yes or No.....							Name Initials Bank	

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS	

FORM P.15
5986–25M–19/1/17

ASSIGNED PAY.

UNIT. NAME OF: 5th M.G.R. DATE: AUTHORITY:

RANK. Lieut. DATE: 20/2/17 AUTHORITY: 45 2758/9 20/2/17

NAME.

Beneficiary

Address

Can

Amount. $20 1-4-17

Separation Allowance issued. Yes or No.....

Name Otto
Initials W.L.
Bank of Montreal

1917-18

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1917	Bal. from Old ledger forward			69 86		69 86		
Jan	Receipts		108					
16	Cashiers 20/12/16 - 30/12/16 less exch. Cdn. Cash	1591		94 81				
	do do		111					
17	Cbal from pay & engagement 15/2/17	208	20 37					
12	A Plan				20			
27	Bank	3009		88				
May 6	A/c Can.				20			
19	Pay may (R)		111 60					
23	Bank	5932		91 60				
June 12	A/c Can.				20			
18	June Pay (R)		108					
	Prev. Cl. with $20.37 Shs Dr. of $1.43 - Dr $20.37 & $1.43	Vo. 1486		21 80				
21	Bank	7976		66 20				
July	July Pay (R)		111 60					
16	A/c Can.				20			
19	Outfit Allce	1485					£51.7.5 $250.00	
24	Bank	17984		91 60				
Aug 13	A/c Can.				20			
20	August Pay (R)		111 60					
24	Bank	17070		91 60				
Sep. 19	Sept Pay (R)		108					
13	A/c Can.				20			
22	Bank	21610		88				
Oct 12	A/c Can.				20			
18	Oct Pay R.		111 60					
23	Bank	26282		91 60				

Cd. forw.

FORM P. 15
5986–25M–19/1/17

ASSIGNED PAY.

Beneficiary

Address

Amount. $ 20.00

Separation Allowance issued. Yes or No.....

UNIT.

NAME OF 5 Brk. | DATE | AUTHORITY
Pay 2.00
F.A. 0.60
M. 1.00

RANK.

Lieut. | DATE | AUTHORITY

NAME.

Name Atto
Initials H. L.
Bank of M.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1917 Nov 16	Nov Pay R. A. P. Can.		108		20			
22 Dec 10	A. P. Can. Dec Pay R.	Bank 30553		88	20			
14 1918 Jan 8	A. P. Can. Jan Pay R.	Bank 32995	111 60	91 60	20			
23 Feb 11	A. P. Can Feb. Pay R.	Bank 39354	111 60	91 60	20			
21 Mch 11	Mch Pay R. A. P. Can.	Bank 40953	100 80	80 80	20			
25		Bank 42598	111 60	91 60				

FORM P. 15. H.W.V.Ld.—3717-18.
12519—16M—1-3-18

ASSIGNED PAY. | UNIT. NAME OF: 5 Batt. | RANK. RATE OF P. AND A. | DATE | AUTHORITY | NAME.

Beneficiary
Address
Amount. $ 20. Can.
Separation Allowance issued. Yes or No.....

Pay 2.
F.A. 0.60
Messing 1.

Lieut. 20 2/17 | 2.9.2758/9 3/20 17

Name Atto
Initials H.O. L.
Bank of Montreal

100.00 Add. Ass't. d. 1/5/18

1918-19

DATE 1918	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
Apl 18	apl Pay R.		108					
	A.F. Can.				20			
24		Bank 1173		88			Admitted Hosp. V.D.2 16/4/18	
May	May Pay R.		111 60				Hosp 100 p.d. plus 7 d. C.L. 961 - 20/4/18	
13	A.F. Can.				20			
24		Bank 2551		18 60		73		
June	June Pay R.		108					
12	A.F. Can.				20			
19	Debit fr. Pay R. A/R 18801 16 2/17	Vo 1734		53 53		107 47	Disch'd Hosp V.D.S 13/6/18 C.L. 1011 - 18/6/18 Vo 4934	
26		Bank 4158		13 07		94 40	Admitted St Geo. Hosp. Staples. 18/8 V.D.S	
July 11	Deduction on apl V.D.S. 16 4/18 - 13 6/18 - 59 days @ 1.60 Vo 259 Envlope.	Cancl C.L. 1011		94 40		0	C.L. 1012. d. 19/8 - Vo 5505.	
12	a.P. Can.				20			
	July Pay R.		111 60				Disch'd fr. G.H. 30/6/18 V.D.2.	
20	Ded. on A/c V.D. 18 - 30/6/18	Vo 1241		20 80			C.L. 1027 - 8/7/18 Vo 6369.	
24		Bank 5568		70 80				
Aug	Aug Pay R.		111 60					
9	A.F. Can.				20			
24		Bank 7235		91 60				
Sep 10	A.F. Can.				20			
	Sep. Pay R.		109					
17	D.O.R. O.C.L. 11 2/18 French Ct 2175 Sep.	Vo 2058		28 71				
"	" 9 2/18 Various " 169 "	" 2054		33 34				
24		Bank 9103		25 95				
Oct 12	A.F. Can.				20			
	Oct Pay R.		111 60					
21		Bank 10348		91 60				

FORM P. 15. H.W.V.Ld.—3717-18.
2619—16M—1-3-18

ASSIGNED PAY. | UNIT. | RANK. | NAME.

NAME OF	RATE OF P. AND A.		DATE	AUTHORITY
5 C.M.R.	Pay 2	Lieut.	20 2/17	W.O. 2758/9 20 3/17

Beneficiary
Address
Amount. $ 20 Can
Separation Allowance issued. Yes or No.....

F.A. 0.60
Messing 1.
add outfit allce. 1 8/18.

Name Atto
Initials K.L.
Bank of Montr.

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
Dcl. 31.	Add. Outfit allce. 1-8-18.		100					
	Bank	10930		100				
Nov 22	A.R. Can				20			
	Pay R + A.F.A. 12 9/18		140					
	Bank	12542		120				
Dec 2	Adv. P & A Dec	12772		104			Remy to Can	
11	at Can.				20		A.P. 6531 17/18	
	Pay R.		124				from M.C. Ledger	
16	Rations 1.30 1/18 Less 8 dys	R587					1-10-3	
							P & A to cease 31 12/18	
							Vo 20339.	
							Indemf. fr h/13-12. 8/19	

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

A 4858

Date of Assignment 1 Dec. 1/15

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20.			

1 ft a 3-4 4-8

PARTICULARS OF SEPARATION ALLOWANCE

No. 1100017

Rank Pte. Promoted Lieut 20-2-17 Reverted Discharge

Soldier's Name H. L. Atto.

Battalion A Sqd. 5 C. M. R.

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. E. L. Atto.

Address Lennoxville Que.

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Sept-30-17			440	440		Now Lieut. effective 20-2-17. auth. P.C. 44-4-216 14917 Ont. Dougall 16-10-17
Oct	D 51382		20	20		
Nov.	C 53167		20	20	B	
Dec	B 59183		20	20	B	M
1918 Jan 18	F 60491		20	20	S	
Feb.	B 94598		20	20	S	
Mch	A 90937		20	20	S	
Apr	I 7666		20	20	O	
May	C 9028		20	20	A	
June	B 17407		20	20	B	
July	Y 30420		20	20	B	
Aug	A 32982		20	20	A	
Sept	R 39792		20	20	S	
OCT.	A 46416		20	20	C	
NOV	A 54502		20	20	C	
Dec	B 65471		20	20	C	
			440	440		

Jan cheque B 73616 Cancelled 2978

CONSOLIDATED ACCOUNT

M.P. 57923 A/c Closed 31-12-18

Ret'd per Regina

Date 20/12/18 F X 27/12/18

Clerk H. Challoner

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22820—M. & D. 7993.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

	Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128.
400m—17—1772 39-1141
L. L. 22329—M. & D. 7993.