Deceased 22-12-15 D

D

M.X. 19-3-21 R.R

ATTESTATION PAPER.

No. 469749

Folio.

ORIGINAL

DEPT. MILITIA & DEFENCE DEC -6 1917 CANADA

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your name? John Leonard Crowell
2. In what Town, Township or Parish, and in what Country were you born? Bacarro Shel Co N S
3. What is the name of your next-of kin? Mabel Crowell (Wife).
4. What is the address of your next-of-kin? Bacarro Shel Co N S
5. What is the date of your birth? 1879 Dec 24th
6. What is your Trade or Calling? Clerk
7. Are you married? Yes
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.

Deceased 22-12-15 Halifax

John L. Crowell (Signature of Man.)

G. W. Butlier (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Leonard Crowell, 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.

John L. Crowell (Signature of Recruit)

Date Sept 2nd 1915. G. W. Butlier (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Leonard Crowell, 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.

John L. Crowell (Signature of Recruit)

Date Sept 2nd 1915. G. W. Butlier (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 Sussex, NB this 3rd day of September 1915.

H. Montony Campbell J.P. (Signature of Justice)

J. P. IN AND FOR THE COUNTY OF KINGS, N.B.

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

L. C. Corey Capt. (Approving Officer)

M. F. W. 23.
200 M.—7-15.
H. Q. 1772-39-841.

X-1 Sect. 7-12-17

Description of John Leonard Crowell on Enlistment.

Apparent Age 36 years 8 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7 ins.

Chest measurement:
- Girth when fully expanded 36 ins.
- Range of expansion 4½ ins.

Complexion Medium

Eyes Hazel

Hair Dark Brown

Religious denominations:
- Church of England
- Presbyterian
- Wesleyan
- Baptist or Congregationalist
- Other Protestants (Denomination to be stated.) Methodist
- 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 Sept. 3rd 1915.

Place Sussex, N B

J. S. Carruthers
64th "OVERSEAS" BATTN. C.E.F.
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

John Leonard Crowell 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.

H. Montague Sanford (Signature of Officer)
LT.-COLONEL
CMDG. 64th "OVERSEAS" BATTN. C. E. F.

Date Sept. 3rd. 1915

C.E.F. REGIMENTAL DOCUMENTS

NAME CROWELL JOHN LEONARD REGT. No. 469749 UNIT 64 BN H. Q. FILE No. 46928

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE
ATTESTATION PAPER (M.F.W. 23, 133 or 51)				
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				
TRAINING HISTORY SHEET (M.F.W. 113)				
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)				
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)				
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)				
DENTAL HISTORY SHEET (M.F.B. 465)				
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				
MEDICAL EXAMINATION (M.F.W. 129)				
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)				
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)				
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)				
LAST PAY CERTIFICATE (M.F.W. 44)				
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)				
PARTICULARS OF CHARACTER (A.F.W. 3226)				
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)				
CARDS				
PAY-SHEETS				

NON-EFFECTIVE BY
DEATH
CATEGORY
DIED
22-12-15
DISCHARGE
CATEGORY
DESERTION

H

M.F.W. 2589
20M-4-46 (9113)
H.Q. 1772-39-1377

Register No. D C 116

WAR SERVICE GRATUITY
TO
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. ~~Nople~~ 4016-J-38

Regt'l No. 468749 Name John Leonard Crowell (Christian Name) (Surname)

Unit 64 Bn. Rank Pte. Date of enlistment

Date of casualty 22-12-15 B.P.C. File No. 3376

Was service performed overseas? Yes

DEPENDENT

Name Mrs. Mabel F. Crowell Relationship Widow.

Address Baccaro,
Shelbourne Co.
N.S.

Amount of Special Pension Bonus $ 64.00/Ft. Abstracted by J. M. Davidson.

Eligible for Gratuity $ 180.00

Less amount of Special Pension Bonus paid $ 64.00

Less Debit Balance of S. A. or A.P. $

Total deductions $ 64.00

Balance due $ 116.00

Cheque No. D189183 Date issued 16-7-20

Clerk A H Nicol

REMARKS:

Audited by
W Lestayden
Date 16/7/20

$116.00

M.F.W. 2652
25M—6-20.
H.Q. 1772—39-1473

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name
Surname Christian Name

Regimental Number Rank

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Address (in full)

Rates:—Regimental pay $ per diem; Field Allowance $ per diem. Separation Allowance $ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

M. F. W. 127
300M-1-19
1772-39-1140

2-9-15

MILITIA AND DEFENCE

SEPARATION ALLOWANCE 136

J. L.

La

JR

Name Mrs Mabel Crowell

Address Baccarro, Shel. Co. N. S.

Name of Soldier Crowell, ~~J. J.~~

Regtl. No. 468749.

Rank Pte.

Corps 64th Battn,

Relation to Soldier wife, child or mother } Wife

To what Corps belonging when called out }

PAYMENTS

42229 M. CO.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				Died 22/12/15 (P.M.L. 23/12/15)
Oct.				in service Bronco-pneumonia (P.M.L. 12/1/16)
Nov.				
Dec.				ACCOUNT CLOSED
Jan.	1915			DATE MAR 30 1916 PER R
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.		M 6242	19	19
Oct.		O 5006	20	20
Nov.		R 10256	20	20
Dec.		N 21837	20	20
Jan.	1916	E 25639	20 —	20
Feb.		L 20025	20	20
March		J 26444	20	20 a/c closed. O.P.P. 28.3.16

SURNAME. Lerowell,

CHRISTIAN NAMES John Leonard

REGL. No. 469749 RANK Pte

UNIT 64th

FORMER CORPS Nil.

CARD No. V

FOLL.

Bn.

NEXT OF KIN.

NAMES IN FULL Lerowell, Mrs. Mabel

RELATIONSHIP TO SOLDIER Wife

ADDRESS Bacarro Shelbourne Co. N.S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Bacarro Shelbourne Co. N.S.

PLACE OF ATTESTATION Sussex, N.B. DATE Sept. 3rd. 1915

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

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

MARRIED Yes. 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

H. Q. 649-C-1632.

CROWELL, Pte. John L. #469749, 64th Bn. #6

Med & D (Widow) Mrs. Mabel F. Crowell,
Baccaro,
Shelburne Co., N.S.

P & S (Widow) Address as above.

Per # 806079

Mem Cross (Widow) Address as above.

MAY 5 - 1921
Sorell Desp. Reqn. No 24409

Mem Cross (Widow) Address as above.
Mother died subsequently.

Plague Desp. Reqn. No PC4928

Canada Only -

JAN 21 1922

51820 B

833.

W/ Twice

48786 MAR 26 1921

48787. MAR 26 1921

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS

NAME Crowell. J. L.

H. Q. FILE No. 649-

REGT'L No. 469749

RANK AND CORPS Pte. 64th. Batt.

CABLE	
NO.	DATE

NATURE OF CASUALTY

Died in the Nova Scotia Hosp., Dartmouth N. S. at 3.30 a.m. Dec. 22nd. 1915. from Broncho Pneumonia.

NO. 2699

FOLL.

L. L. Job 87318—M. & D. 6106.

M. F. W. 42—25m.-10-15.
H. Q. 1772-39-893.

REMARKS .....

98 547 (3) 624

REG. NO. 469749 NAME (SURNAME FIRST) Crowell

RANK Pte CORPS 64th Batt

AGE 37. SERVICE

NAME OF HOSPITAL Nova Scotia PLACE Halifax.

DATE OF ADMISSION 16-12-15

DISEASE Measles & Broncho Pneumonia.

DISCHARGE

OPERATION

~~DISCHARGED TO DUTY~~ (3) Died 22-12-15.

TRANSFERRED TO

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

No. 469749 RANK Pte. NAME Crowell. J. L.

T. O. S. 2-9-15 UNIT 64th Battalion
D.O. 190 of 7-9-15

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Sep. 2	Sep. 30	✓		
Oct.		✓		
Nov.		✓		
Dec 1	Dec. 22	N	Deceased 22-12-15	D.O. 110 of 22-12-15
			a/c closed by payment N	

UNIT SAILED
MAR 31 1916