

# ATTESTATION PAPER

Original  
No.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE

Folio.  
H38314

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

A 38314

- (ANSWERS)
- What is your name? *Lott, Burk Bradford*
  - In what Town, Township, or Parish, and in what Country were you born? *Pamworth Ont.*
  - What is the name of your next-of-kin? *Mrs. Elizabeth E. Lott*
  - What is the address of your next-of-kin? *P.O. Box 1230 Pamworth Ont.*
  - What is the date of your birth? *Aug. 3rd 1878*
  - What is your trade or calling? *Lumberman*
  - Are you married? *No*
  - Are you willing to be vaccinated or re-vaccinated? *Yes*
  - Do you now belong to the Active Militia? *No*
  - Have you ever served in any Military Force?  
If so, state particulars of former Service. *Yes - 47th Bn. Kingston*
  - Do you understand the nature and terms of your engagement? *Yes*
  - Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? *Yes*

*Burk Lott* (Signature of Man.)  
*J. A. Johnston* (Signature of Witness.)

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Burk B. Lott*, 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.

Date *March 26th* 1915 *Burk Lott* (Signature of Recruit.)  
*J. A. Johnston* (Signature of Witness.)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Burk B. Lott*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Date *March 26th* 1915 *Burk Lott* (Signature of Recruit.)  
*J. A. Johnston* (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 *Lott Arthur* this *26th* day of *March* 1915

*A. W. Hayf* (Signature of Justice.)

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

*A. W. Hayf* (Approving Officer.)



# DESCRIPTION OF Burk B. Lott ON ENLISTMENT.

Apparent Age 38 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. 5 ins.

Chest measurement { Girth when fully expanded \_\_\_\_\_ 38½ ins.  
Range of expansion \_\_\_\_\_ 5 ins.

Complexion \_\_\_\_\_ Dark

Eyes \_\_\_\_\_ Blue

Hair \_\_\_\_\_ Brown

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

Scar on right leg  
Scar near left eye

## 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 \_\_\_\_\_ Fort Arthur 1915

Place \_\_\_\_\_ March 26th 1915

[Signature]

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

Burk B. Lott 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 \_\_\_\_\_ March 26 1915

[Signature] (Signature of Officer.)



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

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for  
Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....



# DISCHARGE DOCUMENTS

Name Lott, Burk Bradford

Regt. No. 438314 Rank Pte

Corps 52nd Bn.

Reg. No. 2014161

R. O. No. ....

H. Q. No. ....

31916

19-24  
19-24  
3-24  
1

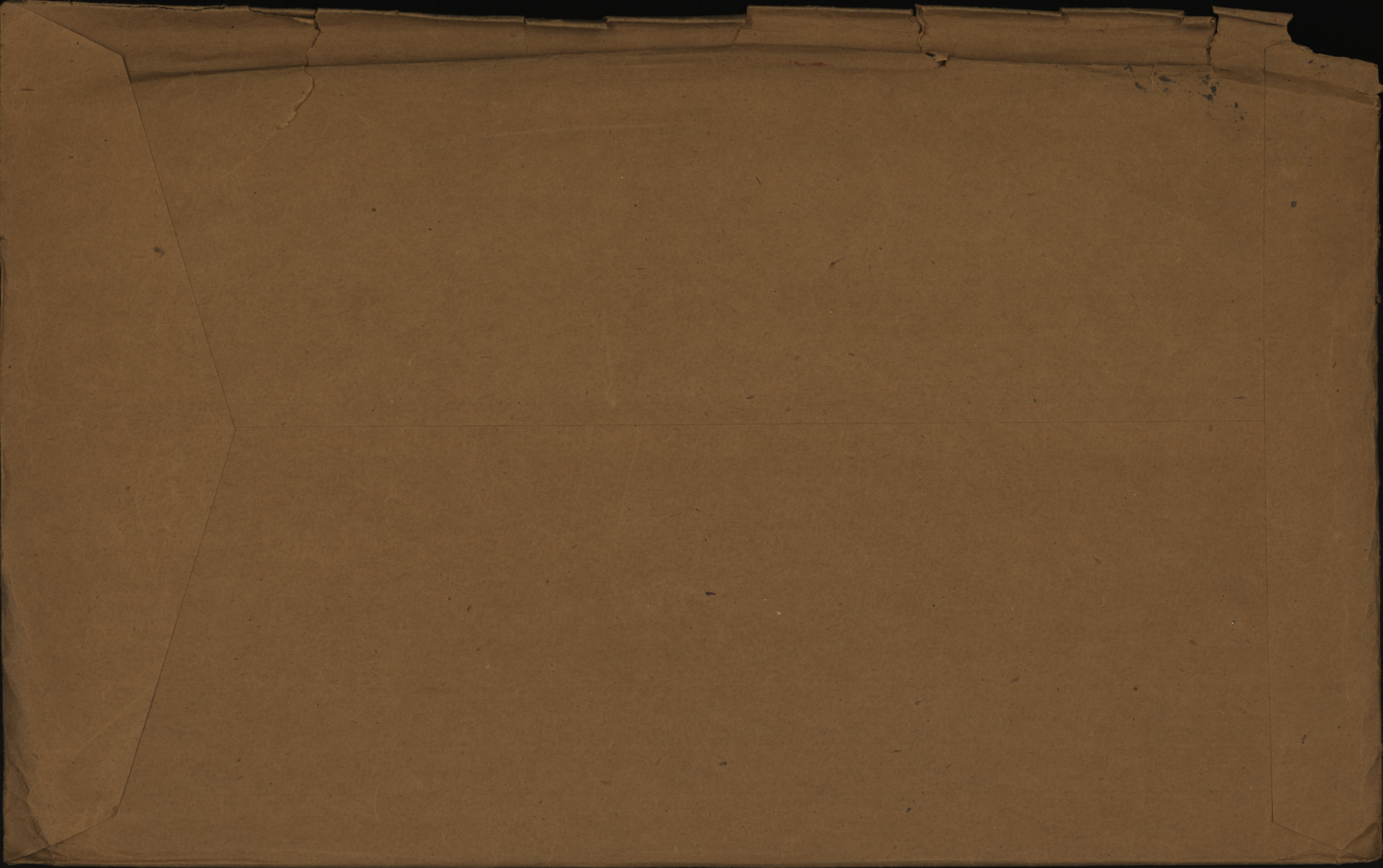


R. 112-1  
1 pay cert

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

will - 1  
card - 1  
copy will - 1  
no instructions







No. A 38314  
438314

RANK *Pt.*

NAME *Lott, B.*

*B.*

T. O. S.

UNIT *5<sup>th</sup> 2<sup>nd</sup> Battalion, C. E. F.*

M. D. 10.

PAID FROM	PAID TO	SIG. OR REC'D	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i>	<i>1915</i>			
<i>Apr. 1</i>	<i>Apr. 30</i>	<i>✓</i>		
<i>May</i>		<i>✓</i>		
<i>June</i>		<i>✓</i>	<i>Fined \$2</i>	<i>B.O. 83 of 23-6-15.</i>
<i>July</i>		<i>✓</i>	<i>Forfeits 1 dys. pay.</i>	<i>B.O. 89 of 3-7-15.</i>
<i>Aug.</i>		<i>✓</i>	<i>Forfeits 1 dys. pay.</i>	<i>B.O. 117 of 5-8-15.</i>
<i>Sept.</i>		<i>✓</i>	<i>Forfeits 2 dys. pay. a. w. L.</i>	<i>B.O. 129 of 4-9-15.</i>
<i>Oct.</i>		<i>✓</i>	<i>Forfeits 2 dys. pay. a. w. L.</i>	<i>B.O. 167 of 7-10-15.</i>
<i>Nov.</i>		<i>✓</i>	<i>Forfeits 1 dys. pay. a. w. L.</i>	<i>B.O. 175 of 16-10-15.</i>
<i>Dec.</i>		<i>u.</i>	<i>Fined <sup>1/2</sup> 5<sup>00</sup></i>	<i>B.O. 233 of Dec. pay list.</i>
			UNIT SAILED	
			NOV 23 1915	







NAME

RANK &amp; No.

CORPS

ENLISTMENT, PLACE

FORMER CORPS

COUNTRY OF BIRTH

NEXT OF KIN

ADDRESS OF NEXT OF KIN

DISCHARGE, PLACE

DATE

649-L-1487.

20  
9  
76

438314.

Batt.

DATE

March 26<sup>th</sup>, 1915-'8'

Canada, Hamworth, Ontario.

Mrs. Eliza

Hamworth, Ontario, Canada.

204 123,

(auth let. career. 19-5-16 on file)

O/S. 23-11-15-275-

L. L. 85093-M. &amp; D. 5952.

M. F. W. 22.-50m.-9-15.  
H. Q. 1772-39-839.



REMARKS:

---



LOTT, B.B. Pte. #438314, 52nd Bn. 649-L-1487.

Medals (Mother) Mrs. E. A. Copeland,  
& Decs. Box 123,  
Tamworth, Ontario.

*not elig for sta*

P. & S. (Mother as above.)

*(Serial no. 795118)*  
Memorial Cross.

(Mother as above)

(Not married).

Scroll Desp.

MAR 20 1921

Reqn. No.

203294

Regu. Desp.

NOV 21 1920

Reqn. No.

P17226.

*Desp.*

SEP 11 1920

(M.) C 22302

*nd*



M

610



Name Lott B.B.

Rank Private.

Reg. No. 438314.

Unit 52nd. Battalion.

25-<sup>up</sup>L-454

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
20-4-16.	O/C. No. 10. Can Cas Clr. Stat repts DIED OF WOUNDS.		Not Stated.	A44.	M 5857.	10/5/16



[illegible]



NAME

Lott, B. B.

H. Q. FILE No. 649-L-1487

REG'T L No. 438314

RANK AND CORPS

Pte. 52nd Batt.

B.E.F.

CABLE

NO.

DATE

NATURE OF CASUALTY

NO. 1315X

FOLL.

M5857

29-4-16

Died of wounds at No.  
10 Casualty Clearing Station  
April 20th.

A.F.B. 2090 a  
Rouens 6th April 1916.

Died of wounds received in  
action, 20th April 1916 at No  
10 Cdn. Cas. Clg. Str.



LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

A44

OL No 10 Can Can Cl.

Stu. Reports Died y wounds 20-4-16

Not Stated



A 2 B:

B  
W

Number. 438,314. . . . . Rank. Pte. . . . .

Surname. . . . . L. O. T. T. . . . .

Christian Name. . . . . Burk. Bradford. . . . .

Units. 2<sup>nd</sup> Bn. Can. Engr. Theatre of War. France. . . . .

Date of Service. 2/12/16. . . . . D . . . . .

Remarks. . . . . Mother . . . . .

Latest Address. Mrs. E. A. Copeland. . . . .

Box. 123. . . . .

Jamworth, Ont. . . . .

Roll No. Page 4849



No.

RANK

NAME

T. O. S.

UNIT

M. D.

MAY 20 1921

PAID  
FROMPAID  
TOSIG.  
OR  
RECT

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS

AUTHORITY

921656 Dip



Surname

Christian Name or Names

Reg. No.

Rank

Unit

Co.

Troop

Batty.

Hospital

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)  
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

DISPOSITION

Date

REMARKS

b.L. 1.5.16. A.V. oc. + 10 C. Cas. Ctg  
Sta Repts.

A.M.D. 2 DEPT.

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

2



# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.



## Casualty Form—Active Service.

Regiment or Corps

5<sup>th</sup> Can Bn

Regimental No.

438314

Rank

Pte

Name

Lance B. Bradford

Enlisted (a)

26.3.15

Terms of Service (a)

Mobilization

Service reckons from (a)

26.3.15

Date of promotion to  
present rankDate of appointment  
to lance rankNumerical 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				
		Landed in France		21.2.16	
		EMBARKED FOR FRANCE.		20.2.16	13144 CY 1844 QM52
1/4/16	O.B. 52 <sup>nd</sup> B.	Snipers' Course.		1-3-16 to 15/3/16	a.A.B. 213. 4/4/16.
24/4/16	O.B. H.O. C.C.C.S.	Died of Wounds	H.O. C.C.C.S.	20/4/16	R 30946. 24/4/16 #37.
					Part II orders No. 8 30 <sup>th</sup> April 1916
					Lieut. for Lieut. Col. A. H. G. Canadian Section. 3 <sup>rd</sup> Echelon. G.H. 2.

(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.

CERTIFIED CORRECT.  
 Canadian Record Office,  
 Westminster House,  
 7, Millbank, S.W.



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				



Rank Pte.

Name LOTT, Burk Bradford.

Reg'l No. 438314

Unit 52nd Bn.

If in perm. Corps,  
What Unit?

Married or Single Single.

Place and Date of Enlistment Port Arthur. March 26th 1915. Place of Birth Tamworth. Ont.

Name and Address, Next-of-Kin Mrs Elizabeth E. Copeman.

P.O. Box 123 Tamworth, Ont, Canada.

Relationship

Mother

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason 25L - 454 Character

Report

Date

From whom  
receivedRecord of promotions, reductions,  
transfers, casualties, etc., during active  
service. The authority to be quoted  
in each case.

Place

Date

REMARKS  
Taken from Official Documents

22.12.15.	08/52nd Bn	Arrived in England	Witley	3 DEC 1915	22.12.15	Pt II A No. 233.	22.12.15
1.4.16	"	Embarked for France.	Field.	20.2.16	1.3.16 to 1.5.3.16	Norm Roll.	
1.5.16	"	Died of Wounds	Field.	20.4.16		CL A 44	Not Stated.
		#10 Can. Casualty Cl Str				Pt II C8 IV	DW.

N/E. R.B. NO	9
File R.L.	
Category	DW



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 Document



COPY

-- 20 --

Perforated sheet for Will from Pay Book of Reg.

No. 438214

Name Burk Bradford Lott

Unit 52nd Battalion C.E.F.

MILITARY WILL.

In the event of my death

I give the whole of my  
property and effects to my  
mother Mrs. E. A. Copeland

P. O. Box 123.

Tamworth

Ontario

Canada

Signature B. B. Lott

Rank and Regt. Pte. 52nd Battn. C.E.F.

Date 19th February 1916.

CERTIFIED A TRUE COPY

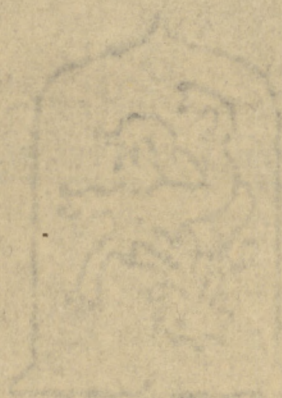
*[Handwritten Signature]*

OFFICER  $\frac{1}{c}$  ESTATES, M. & D.



THE NEW YORK

LIBRARY



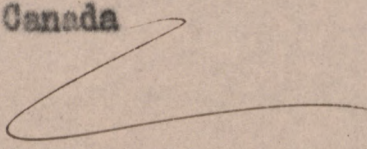


If page 20 with Military Will is removed, state  
on this page to whom it has been forwarded and  
date:-

---

The will made out by  
me on page 20. has been  
posted by me to-day the  
19th February 1916 to my  
mother

Mrs E.A. Copland  
P.O. Box 123  
Tainworth  
Ontario  
Canada



Extracted from Pay-book. Page 22.

Pte. Lott, B.E. No. 439314.

52nd Battn.







MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

2nd Contingent

79

To Whom Elizabeth M. Copeland By Whom Assigned Lott. B. B.  
 Address 123 B. O. Tammworth Regtl. No. 438314  
Ont. Rank Pte.  
 Corps 52<sup>nd</sup> Batt.

Rate \$5<sup>00</sup>

NOV 1 1915

~~DEC 1 - 1915~~

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div style="border: 1px solid black; padding: 10px; display: inline-block;"> <i>Casualties</i> </div>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				<i>Died of Wounds April 20<sup>th</sup> 1916. L.L. 2/5/16 Ensb.</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.				
Feb.				
March				<i>J.X. 29/2/16 O.K.</i>

1916

Y6399

L10022

M14874

S14352

10

5

5

5







## ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2

*Elizabeth M. Copeland*

PAYMENTS.

Name of Soldier

*Lott B B*

L. L. Job 89002.—Req. 6213.

#438314

52 Batt

*Recd.*

Month.	Year.	Cheque No.	Am <sup>t</sup> .
April	1916	<i>41190</i>	<i>5</i>
May			
June			
July			
Aug.			
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1917		
Feb.			
March			
April			
May			
June			
July			
Aug.			
Sept.			
Oct.			
Nov.			
Dec.			
Jan.	1918		
Feb.			
March			
April			
May			
June			
July			

500 *Report 25-411* Remarks.*Account closed Casualty.**#30.00 F.X. 29/3/16 A.K.**Casualty*



MILITIA AND DEFENCE  
**ASSIGNED PAY**  
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.				



Rank **Pte.**Name **LOTT, Burk Bradford.**Reg'l No. **438314**Unit **52nd Bn.**If in perm. Corps,  
What Unit?Married or Single **Single.**Place and Date of Enlistment **Port Arthur, March 26th 1915.** Place of Birth **Tamworth, Ont.**Name and Address, Next-of-Kin **Mrs Elizabeth E. Copeman.****P.O. Box 123 Tamworth, Ont, Canada.**Relationship **Mother**Assigned Pay Monthly \$ **5.00** *Stopped*Payable to *Alone Address**Rem - Effect May 1st 1916**Died of wounds 20/4/16. D.O. 8.*

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

*20-4-16*

Reason

*Died of wounds*

Character

*D.O. 8.*

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						
1915																	
Dec 1	Dec 31	31	100	31 00	31	10	3 10		34 10	57		14 60 7 30	500	500	31 90	220	<i>20 233.75 net 5.00 drunk</i>
1916																	
Jan 1	Jan 31	31	100	31 00	31	10	3 10		34 10	104 152		12 17 9 73	500		26 90	9 40	
Feb 1	Feb 29	29	100	29 00	29	10	2 90		31 90	198 19		7 30 2 61	500		14 91	26 39	
Mar 1	Mar 31	31		31 -	31		3 10		34 10	104 83		2 61 2 61	5 -		10 44	50 47	
				122 00			12 20		134 20			58 93	20 00	5 00	83 93	50 27	

*Settled see new  
Ledger sheet 22/1/16*

Cash found in effects 029

Statement of  
AUG 11 1916  
Account rendered



[illegible]



MARRIED OR SINGLE

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS

EFFECTIVE DATE

AUTHORITY

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED

DATE DISCHARGED

V. OR A.

NAME OF HOSPITAL

REG'L No. 438314

RANK

NAME

IF IN PERMT. CORPS  
WHAT UNIT

UNIT

TRANSFERRED TO

DATE

AUTHORITY

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO

DATE

AUTHORITY

PLACE OF ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

DATE OF ATTESTATION

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

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

EFFECTIVE

REASON

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
	NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT		NO. OF DAYS	RATE	AMOUNT					1		2		3		4		1	2	3	4				CREDIT	DEBIT																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
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Statement of  
AUG 11 1916  
Account rendered

Sch. no 269  
Cash rendered in  
office 029







# ORIGINAL

## MEDICAL HISTORY SHEET.

438314

~~#38314~~

Surname Lott Christian Name Bark Bradford

Examined { on 26 day of March 1915  
 at Port Arthur  
 Birthplace { City or Town Samworth  
 County Ont.  
 Apparent age 38  
 Trade or occupation Lumberman  
 Height 5 Feet 5 Inches  
 Weight 175 Lbs.  
 Chest measurement { Minimum 33½ inches  
 Maximum expansion 38½ inches  
 Physical development Good  
 Small-Pox Marks -

Approved by H. H. Cullough  
 Rank Capt. Quee M.O.

Vaccination Marks { Arm Right Left  
 Number 1  
 When Vaccinated last 1915  
 (a) Marks indicating congenital peculiarities or previous disease -

Date	Result	VACCINATIONS.	M.O.
1915	Good	H. H. Cullough	M.O.
			M.O.
			M.O.

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

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.	M.O.
7 '15	Good	H. H. Cullough	M.O.
12 "	"		M.O.
8 "	"		M.O.
6 "	"		M.O.

Enlisted on 26 day of March 1915 at Port Arthur

	CORPS.	REG'T. NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>52<sup>nd</sup> I. B.</u>	<u>438314</u>		<u>26 Mar '15</u>
Transferred to.. ..				

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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



Christian Name.

Christian Name.



439314

Pte Lott B B

52 Bn

Linca

- 22 -

If page 20 with Military Will is removed, state  
on this page to whom it has been forwarded and  
date:—

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The will made out by  
me on page 20. has been  
posted by me to-day the  
19<sup>th</sup> February 1916 to my  
mother

Mrs E. A. Copland

P. O. Box 123

Tamworth

Ontario

Canada



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The space below this line is reserved for Army Form  
W. 3066, which is to be pasted hereon when man  
embarks for service.

observa

Arty.Bd

office

forward

returne



