

603

TRIPLICATE

# ATTESTATION PAPER

No. 4-43764

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE

Folio. 62/ 21742

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? ..... Joseph James Lyon
2. In what Town, Township, or Parish, and in what Country were you born? ..... Lancs. Eng
3. What is the name of your next-of-kin? ..... Mrs Katherine Lyon
4. What is the address of your next-of-kin? ..... 12 Baron St. Wigan Lancs.
5. What is the date of your birth? ..... Oct. 26th 77
6. What is your trade or calling? ..... Police man
7. Are you married? ..... Yes
8. Are you willing to be vaccinated or re-vaccinated? ..... Yes inoc
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

*[Handwritten mark]*

Joseph James Lyon (Signature of Man.)  
J. Pontlock - Wigan (Signature of Witness.)

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

I, Jos James Lyon, 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 Aug 11th 15 191 . Joseph James Lyon (Signature of Recruit.)  
J. Pontlock - Wigan (Signature of Witness.)

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

I, Jos James Lyon, 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 Aug 11th 15. 191 . Joseph James Lyon (Signature of Recruit.)  
J. Pontlock - Wigan (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 Bermon Camp this 11 day of Aug 191 .

W. F. Waterman (Signature of Justice.)  
 A Justice of the Peace in and for the Province of British Columbia

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

J. Pontlock - Wigan (Approving Officer.)

DESCRIPTION OF

*J. J. Lyon*

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. 9 ins.

Chest measurement { Girth when fully expanded 39 ins.  
 Range of expansion 4 ins.

*3 rae arm*

Complexion fair

Eyes grey

Hair fair

Religious Denominations { Church of England   
 Presbyterian   
 Methodist   
 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-Sea Expeditionary Force.

Date 21 Aug 1915

*W. H. M. Campbell*

Place Vernon B.C.

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

J. J. Lyon 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.

*A. H. M. Call* (Signature of Officer.)  
 LIEUT. COL.  
 54th O. S. KOOTENAY BATT. C. E. F.

Date Sept. 28 1915

LYON, JOSEPH JAS.

443764

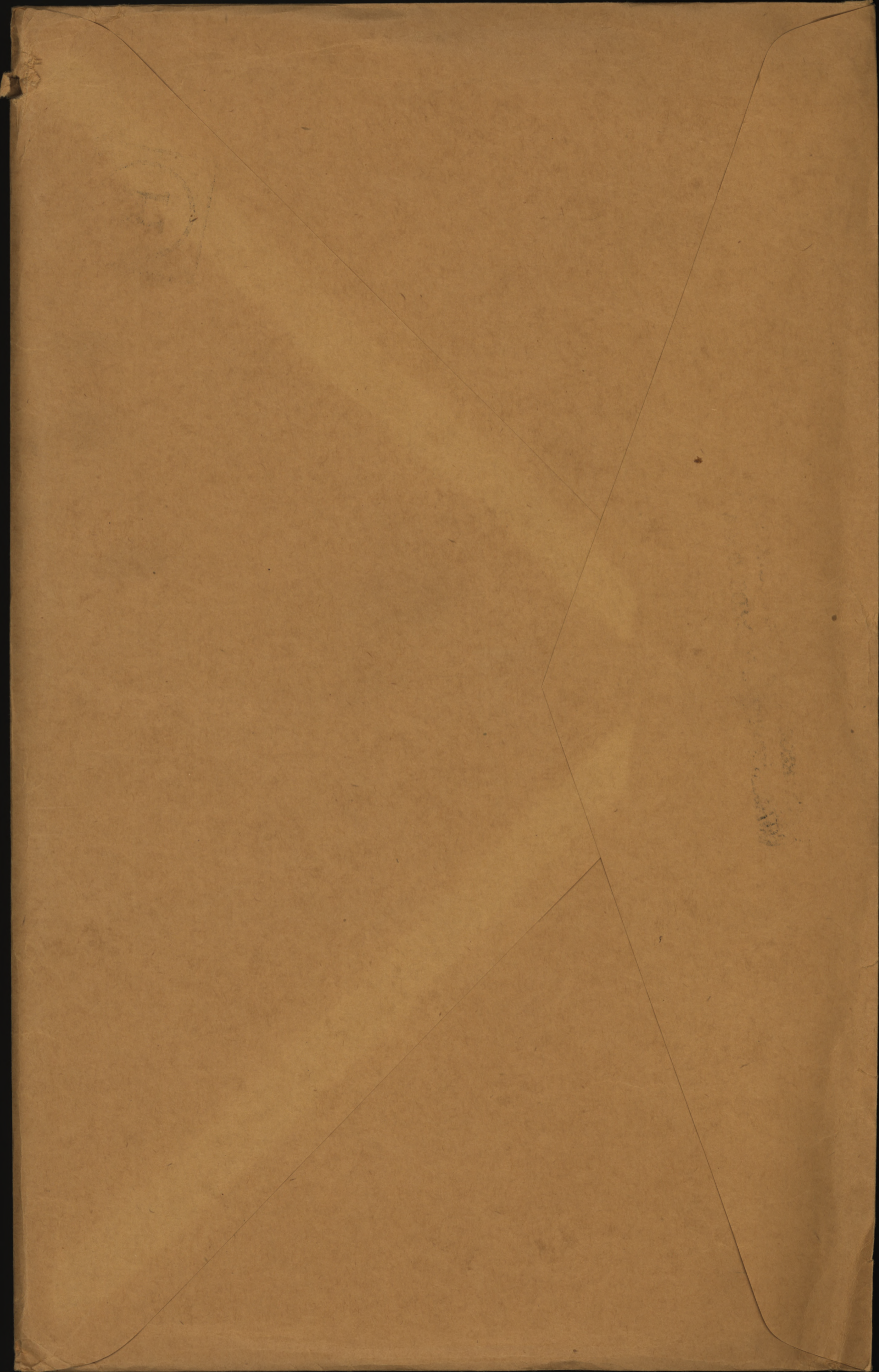
E.O.R.D. 54 BN

35920

C.E.F. REGIMENT DOCUMENTS  
WAR SERVICE RECORDS D.V.A.

M.U.





## CANADIAN CONVALESCENT HOSPITAL

AT

A. & D.  
CARD.*Bear Wood, Wokingham, Berks.*

Regt. No. *443764* A. & D. No. *5227*  
 Rank *S/ser* Corps *2nd Bu.*  
 Name *Lyon J. J.* Age *42* Religion *R.C.*  
 Service at Home *11/12*  
 „ „ Front *3/12*  
 Diagnosis *Gsw rt. hand*  
 Admitted *16 OCT 1916* *Roy. Berks. Reading.*  
 Discharged *15 NOV 1916* *C. C. A. C. Duty*  
 Place in Hospital *bed 24*  
 M. H. Rec'd (See Document Card)  
 Transferred  
 Results

REMARKS:

At La Somme 9/9/16

Adm. No. 3 Eau Gen. Hop Boulogne 11/9/16  
" Royal Beers Hop Reading 12/9/16  
thence here

S.T. per. extractions shafuel

G.C. G.C. Good

Z.L.P.D.

NAME

Lyon, Joseph James

S.O.S. Dis. 30/11/17. II.

2

RANK & NO.

L/6pl.

443764

CORPS

54<sup>th</sup>

Batt

ENLISTMENT, PLACE

Vernon, B. C.

DATE

August 26/15

m.

FORMER CORPS

Nil

COUNTRY OF BIRTH

England, Lancs.

NEXT OF KIN

Lyon, Mrs Catherine

ADDRESS OF NEXT OF KIN

12 Baron St, Wigan, Lancs, Eng.

DISCHARGE, PLACE

DATE

P/S 22-11-15 271  
12.



R/S 23/6/17.

M. F. W. 22. 100 m.-9-15.

REMARKS:



No. *243764* RANK *Pte*

NAME

*Lyon J. J.*T. O. S. *11-8-15*

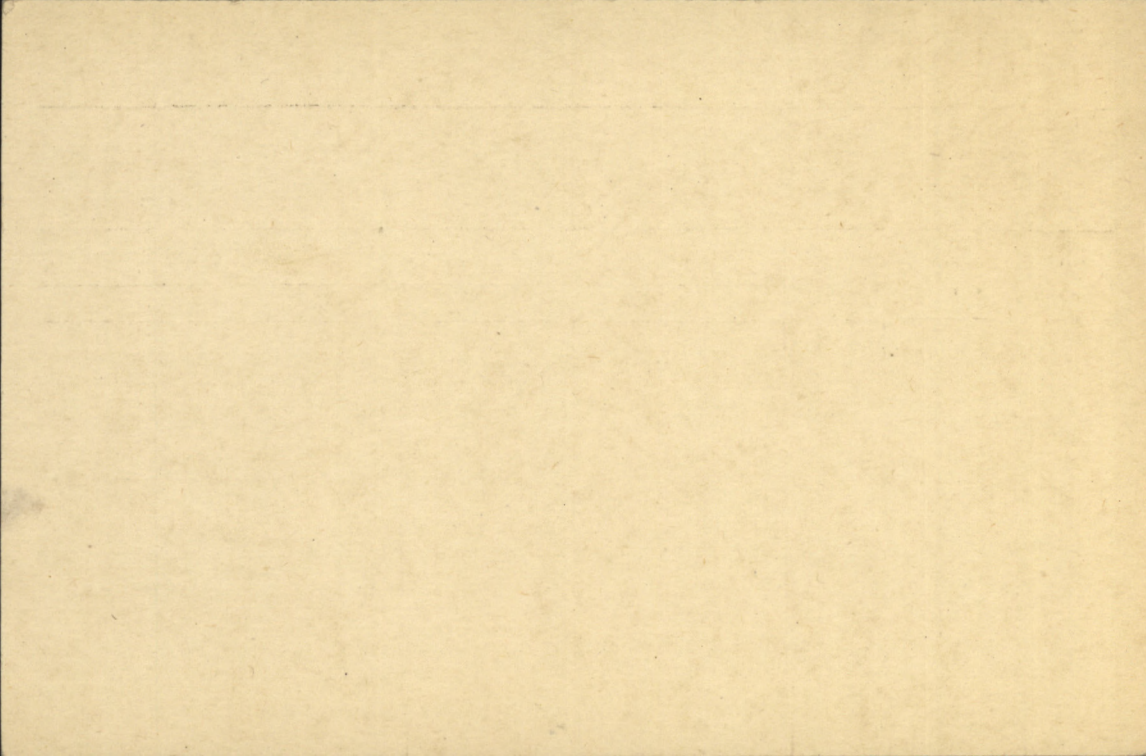
UNIT

*54th Battalion C. E. F.**Do 17723/28-8-15*M. D. *11*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i> <i>Aug 11</i>	<i>1915</i> <i>Aug 31</i>	<i>✓</i>	<i>app. R/cpl. 16-9-15</i>	<i>Do 1257/17-9-15</i>
<i>Sept.</i>		<i>✓</i>		
<i>Oct.</i>		<i>✓</i>		
<i>Nov.</i>		<i>✓</i>		

UNIT SAILED

NOV 22 1915



REGT'L NO 443764

H. Q. FILE NO. 649-

NAME

*Lyon, Joseph James*

RANK AND CORPS

*Pte 2<sup>nd</sup> Bn. (Form. 54<sup>th</sup> Bn.)*

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

No.

FOLLOWS

*0843**15-9-16**Adm. War. Hosp. Reading, Sept. 13<sup>th</sup>  
(G.S.W. Arm.)**ADP 11. 7*

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
B169	War, Reading	13-9-16	G.S.W. Arm
B200	L.C.C.H. Bearwood Wokingham	17-10-16	G.S.W. R. Arm
B223	" " " " Disch.	14-11-16	G.S.W. Arm
155-	M.H.C.C. Esquimaux	37-17	I.O.S. for Duty, Rations and Treatment.
147	M.H.C.C. "	31-4-17	Temp. Out P. to Braemar
260	" " " "	6-11-17.	Trans. Shaughnessy to Out-P. (Pend. Disch)
244.	" " " "	30-11-17.	Phys. unfit for further service





Surname *Lyon* Christian Name or Names *J.* Reg. No. *443,764*  
 Rank *Pl.* Unit *2nd Btn* Co. Troop Batty.  
 Hospital *War Hosp. Reading* Date of Admission *13-9-16.*  
 Transferred *Beaumont Wokingham* Hosp. *17-10-16.*  
 Hosp.  
 Hosp.  
 Hosp.

Diagnosis *G.S.W. Arm. R.*  
 (1)  
 Later Diagnosis (if changed)  
 (2)  
 (3)  
 Additional Diagnosis: if more than one state present

DISPOSITION

Date

*Dis. 14.11.16.*

REMARKS

*CL. 16.9.16. B.169.*  
*C.L. 23-10-16 B200*  
*15. 11.16 B.223.*

A.M.D. 2 Dept.

Sch. of D.G.M.S. O.M.F.S. London

*R*

EPITOME OF HOSPITAL TREATMENT.

1888

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.



Name LYON J. Rank Pte. Regt. No. 443764 Unit "J"  
 Battn. 54th. Camp or O. S. O File M. H. C. C. H. Q. File 649-L-7952  
 Next of kin Wife, 12 Baron St. Wigan, Larchoshire.  
 Discharged to Class 3 Conduct on discharge Very Good  
 Pension awarded 150.00 6Mos. Date of first payment 1-12-17  
 Address on discharge Fernie B.C.  
 Diagnosis Strain left leg. Date boarded 26-6-17 D. of D. 20%

DATE	CLASS	REMARKS	Part 2 Order
<u>3-7-17</u>	<u>2</u>	<u>Langara DR&amp;T</u>	<u>#155</u>
<u>5-7-17</u>	<u>2</u>	<u>" (Outpatient Until 25-7-17</u>	<u>#157</u>
<u>31-7-17</u>	<u>2</u>	<u>Braemar</u>	<u>#177 #178</u>
<u>6-11-17</u>	<u>2</u>	<u>Shaughnessy Out. P.D.</u>	<u>#260</u>
<u>30-11-17</u>	<u>3</u>	<u>DISCHARGED</u>	<u>#278</u>



*09/21242*  
**CERTIFIED Form B. 103.** *c.H.B. 475*  
**Canadian Record Office,**  
 Westminster House,  
 7, Millbank, S.W.

**Casualty Form—Active Service.**

Regiment or Corps 57<sup>th</sup> Rookery Batta. C.O.F.  
 Regimental No. 447 3764 Rank PRIVATE Name Lieut Joseph James  
 Enlisted (a) 11/8/15 Terms of Service (a) Duration of War Service reckons from (a) 11/8/15  
 Date of promotion to present rank } Date of appointment to lance rank } Numerical position on roll of N.C.Os. }  
 Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) (Policeman)

Date	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.
<u>1915</u>	From whom received				
<u>Nov 22</u>	<u>Embarked Halifax, Canada</u>		<u>"H.M.T. Saxonie"</u>		
<u>Dec 1</u>	<u>Arrived Plymouth, England.</u>				
	<u>Proceeded for service overseas, with 2<sup>nd</sup> Batta. 18.6.16</u>				
				<u>Thomas' Court</u>	<u>Lieut &amp; Adj. For O.C 54th. Battalion.</u>
<u>8.5.16</u>	<u>To 54<sup>th</sup></u>	<u>To be Adj. Pl.</u>	<u>Bramholt</u>	<u>7.5.16</u>	<u>Part II D.O. 128 c.H.B. -</u>
<u>19-6-16</u>	<u>C.B.D.</u>	<u>Taken on strength 2nd Bn</u>	<u>C.B.D.</u>	<u>19-6-16</u>	<u>HR. Pt II O.No. 26 a/ 30-6-16</u>
<u>20-6-16</u>	<u>do</u>	<u>Left to join Unit</u>	<u>Field</u>	<u>20-6-16</u>	<u>HR.D.C.S. 326 a/- 627-16.</u>
<u>23-6-16</u>	<u>2<sup>nd</sup> Bn</u>	<u>Joined Unit</u>	<u>do</u>	<u>21-6-16</u>	<u>B.213 do.</u>
<u>29-6-16</u>	<u>do</u>	<u>Returns to the ranks</u>	<u>do</u>	<u>19-6-16</u>	<u>At 20 No 26</u>
<u>12.9.16.</u>	<u>U.S. Newhaven.</u>	<u>S.W. Ar. Hand.</u>	<u>To England.</u>	<u>12.9.16</u>	<u>W3083 PR II No 48 d/18.9.16</u>

*Whogan*  
 Capt.  
 for Lt. Col. aag

1. OCT. REC'D

(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.

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

22-3-17

Re-attached from  
C.O.D. & Lt. Coy Hastings 22-3-17

W. F. 5077  
J. L. Laddick  
O. in Records & Dispatch,  
For Lt. Col. Commanding,  
Canadian Garrison Duty Depot.

6-5-17

Ceases to be attached Hastings  
to C. G. P. Day on proceeding  
to 3rd C. C. D. 6-5-17

L. S. Landy  
Lt & Adjutant  
C.G. & Coy  
Hastings

Discharged from 3rd C.C.D. ~~to Depot~~ ~~to Depot~~

En. Part II D.O. No. ~~1111111111~~

~~W. F. 5077~~  
P. H. Law  
Lieut.

17/4/17

C.O.R.D. 2. O.S. East. Ont. Reg. Depot. Seafood.

17/4/17

for C.O. 3rd CANADIAN COMMAND DEPOT

22/5/17

C.O.R.D. On command from  
C.O.R.D. to C.O.D. Burlington. Seafood.

22/5/17

D.O. No. 6.  
D.O. No. 71.

A. Chamberlain  
Lt. & Adj. for Lt.  
C.O.D.

## Casualty Form—Active Service.

Regiment or Corps 54th. Bn.Regimental No. 443764 Rank L/Cpl. Name Lyon, J.J.

Enlisted (a) \_\_\_\_\_ Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_

Date of promotion to present rank } \_\_\_\_\_ Date of appointment to lance rank } \_\_\_\_\_ Numerical position on roll of N.C.Os. } \_\_\_\_\_

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_

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				
23-5-17	Taken on strength C.D.D.		Part 11 Orders No 112		<i>NEOBrian</i> Lieut. for O.C.-C.D.D.
	Embarked for Canada.		9 - JUN 1917		<i>NEOBrian</i> Lieut. for O.C.-C.D.D.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

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				
6/7/17	England	Transferred to "J" unit M.H.L. in Canada 3/7/17.	Esquimaux B.C.	6/7/17	"J" unit A10 of 6/7/17.
		Discharged to class 3 as at 30/11/17.	Esquimaux B.C.	29/11/17	"J" unit A10 278/2697 of 29/11/17
		Physically unfit for further service on account of under K.R. + D. Can. 3221X R. # 150. authority: P.L. Telegram 26/11/17.			

ROYAL BERKSHIRE HOSPITAL.

Radiographic and Photographic Department.

Name of Patient L/cpl Lyon. Number in Register 1007.  
Ward Sidmouth Bed          Age 42.  
Date Sept. 18<sup>th</sup>.  
Physician or Surgeon Maj. Price.  
Clinical Diagnosis  
Area to be included R. Hand for F. B.

State what is required in accordance with the following instructions:

1. A report from examination with fluorescent screen.
2. If Physician or Surgeon wishes to examine the case himself with fluorescent screen.
3. A single radiogram.
4. Stereoscopic radiograms.
5. Clinical photograph.
6. Print from radiogram.

Signed.....J. Price.....

This form must be signed by the House Physician or House Surgeon in charge of the case.

Report of the Medical Officer in charge of the Radiographic Department.

Copy: Fracture of 1<sup>st</sup> Phalanx of 5<sup>th</sup> Finger.  
Shrapnel present.

Please inform the Radiographer of the termination of this case.

Radio-graphic and Photographic Department.

Name of Patient: *Mr. J. H. Smith*  
 Ward: *General*  
 Room: *112*  
 Physician or Surgeon: *Mr. J. H. Smith*  
 Clinical Diagnosis: *None*  
 Area to be radiated: *None*

Department is required to maintain and the following conditions:

1. A report from examination with fluorescent screen.
2. If Physician or Surgeon wishes to compare the case himself with fluorescent screen.
3. A single radiograph.
4. Stereoscopic radiographs.
5. Clinical photographs.
6. Print from radiograph.

The form must be filled in by the Radiographer or Nurse in charge of the Department.

Report of the Medical Officer in charge of the Radio-graphic Department.

*Signature of Medical Officer*



MEDICAL CASE SHEET.\*

No. in Admission and Discharge Bk. (c) Year	Regimental No.	Rank.	Surname.	Christian Name.
Year	Unit.	Age.	Service.	
1916.	443764	L. Cpl.	Lyon.	Joseph.
1916.	2 <sup>nd</sup> Canadians.	No. 2. Co.	42.	1 1/2.
Station and Date.	Disease <i>W. R. hand</i>			
R. B. H. Section.	Sept 12 Wounded Sept 9 <sup>th</sup> near Soziers			
	Wound through hand fr. outer margin between thumb & forefinger & exit in palm over 4 <sup>th</sup> metacarpal. X-rays of Rad. side of R. forefinger & thumb radiographed.			
20.9.16.	Bullet removed under general anaesthesia.			
20.10.16.	Incision completely healed. very limited flexion of little finger - some pain in palm over scar. Numbness of little finger persists.			
Oct 16/16	Transf. C.M.C. Hq. Bearwood			

*John A. [unclear]*

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



MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book. 5227 Year	Regimental No.	Rank.	Surname.	Christian Name.	<i>P.B.</i>
	443764	Lt/Ltj. L.	Lyon	J.J.	
		Unit.		Age.	Service.
		2nd Bn.		42	17/12.

Station and Date. *16 OCT 1916.*  
Disease *GSW. Rt. hand.*

*Hat 12*  
*Somme Sept 9/16.*

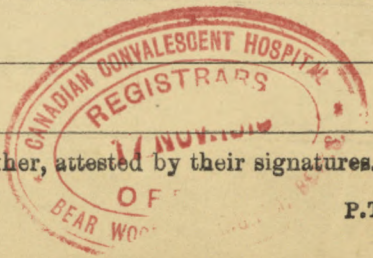
*No 3 Co Rm Wg. Boulogne Sept 11.11*  
*Royal Berks Wg. Reading Sept 12.16*  
*Beaumont Oct 17.16*

*S.T. Oper extraction Sharpnel*

*P.C. G.C. Good*

*J. L.P.D.*

*15/11/16 Discharged to C.C.A.C. Duty*  
*W.H. Martin* Captain,  
Med. Off., Canadian Convalescent Hospital,  
Bear Wood, Wokingham, Berks.



Station  
and Date.

Form to be used instead of blank space on Army Form 179

Proceedings of Medical Board at Discharge Depot.

Number 443764 Rank L/Cpl Name and Corps of disabled soldier. Jos. J. Lyon 54th Batts  
Previous Civilian Occupation. Police Force

Cause of disability - Strain left leg following burial by shell explosion.

Condition in detail which prevent the soldier earning a full livelihood:- Enlisted Aug/15 went to England Oct/15 and to France June/16. He states that on Sept 2/16 he was buried up to the knees by a shell explosion and in getting loose he strained his left leg. but he did not go to hospital, but it kept bothering him right along by pain in the foot, ankle and knee, difficulty in  
Opinion of the Board.

Degree of incapacity (Please state in fractions.)

20% ~~total~~ 2 months after that impossible to state

Probable duration of incapacity:-

Impossible to state.

Does it render him permanently unfit for Military Service? Yes

Would operation, special treatment or the use of appliances, etc., lessen incapacity? Convalescent Home for massage.

Signature.

K. Cairns Capt President.

A. Haig Capt Members.

Station. Quebec

W. A. Hunter Lieut

Date

June 26/17

Approved.

Date

June 26/17

W. A. Cairns Major  
Assistant Director Medical Service.

Date

Director General Medical Service.

walking and weakness. He says it  
twists along the outer side of the foot.  
He was wounded ~~on~~ through the right  
hand on Sept 9/16 for which he was  
sent to Hospital.

Present Condition General good  
Local :- The right hand shows  
three scars one small one between  
the thumb and 1st finger. A larger  
one on the palm at the base of the  
3rd finger and an operation scar  
about 2 inches long at the base of the  
little finger palmar surface where  
a bullet was removed. He is unable to  
fully flex the thumb and little finger  
and there is some numbness in these members.

The left leg when lying on the bed  
tends to be everted. There seems to be  
some stiffness in the knee joint so that  
he is able to flex and extend it with difficulty.  
There does not seem to be any atrophy of  
the muscles.

He should be placed in Convalescent  
Home for massage, passive motion  
treatment for 2 wks. and then re boarded.

K. Cairns Capt  
Wattunter Lieut.  
Haig Capt

# CANADIAN CONTINGENT EXPEDITIONARY FORCE

## "J" UNIT

### LAST PAY CERTIFICATE

Military Hospitals Commission Command

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 43264 Rank Pt Name Lyon J (Sub Batt)  
 Corps J Unit MHE who was\* Discharged  
 On Nov 30 1917, to Class 3

\*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Nov 1 1917,  
 to Nov 30 1917, the inclusive date of transfer or discharge.

Dr.	\$	c	Cr.	\$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances by Cheques } No. ....			Reg'tl Pay <u>30</u> days at \$ <u>1</u> c	<u>30</u>	<u>00</u>
Cheques } No. ....	<u>33</u>		Field Allow. <u>30</u> days at \$ <u>c.10</u>	<u>300</u>	
Assigned Pay No. ....			Other Allowances* <u>Clothing</u>	<u>10</u>	<u>00</u>
Other Charges* <u>Spa/Spa by CPA</u>	<u>35</u>	<u>00</u>	<u>Subs 6-30/11</u>	<u>15</u>	<u>00</u>
Payment on transfer or discharge No. <u>12345</u>	<u>10</u>	<u>00</u>	Other Credits* <u>Dep allow</u>	<u>20</u>	<u>00</u>
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	<u>78</u>	<u>00</u>	Total	<u>78</u>	<u>00</u>

\*Give Particulars.

A monthly stoppage of \$ 15.00 (†) has charged (†) been paid on account of Assigned Pay for the month of Nov 1917 to (Assignee) Mrs E Lyon  
 (Address) 12 Baron St  
Wigan Eng

(†) 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 Aug 11<sup>th</sup> 1915  
 (2) if married and if a Separation Allowance Card has been submitted paid to 30/11/17 by CPA  
 (3) cause of discharge and authority Sp 278/2697 J Unit MHE 29/11/17

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date Dec 3 1917  
 Place Esquimaux Pt  
 Paymaster "J" Unit M. H. C. G.  
 Capt. Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.  
 For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

M. F. W. 44.





POST DISCHARGE PAY OFFICE

31589/6302

*undone*

Three months pay and allowances after discharge.

1157 6-J-3

Name **Lyon, Joseph James**  
Surname Christian Name

Regimental Number **443764** Rank **Pte.**

Address (in full) **Fernie, B.C.**

Unit **54th Bn.**

Original Unit

District where paid **M.D.11**

Date of Discharge **30-11-17**

P. D. P. Filing Number **11-67-11**

Rates:—Regimental pay \$ **1.00** per diem: Field Allowance \$ **.10** per diem. Separation Allowance \$ **20.00** per month.

L. L. 22573—M. & D. 8008.

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Over-payments 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		
160 10	791	20-12-17	53 00	783	21-1-18	53 00	789	21-2-18	54 10		160 10

M. F. W. 127.  
50M-617.  
1772 80-1140.

Remarks:

*8m*

1140 Pender St. W.  
Vancouver, B.C.

Dec'n No. 31587/630 File No. 11516-J-7

Award 153 days at \$ 70 per day \$ 350.00

S. A. 153 months at \$ 30 per mo. \$ 500.00

Less P. D. P. Credited 339.90

Less further debit balance \$ 339.90

Net due paid as below 339.90

TO SOLDIER TO DEPENDENT						
0	Ag. No	Ch No	Amount	Ac No	Ch No	Amount
1	<u>5237</u>	<u>7064</u>	<u>189.90</u>	<u>26885</u>	<u>503866</u>	<u>120.00</u>
2						
3						
4				<u>26692</u>	<u>523121</u>	<u>30.00</u>
5						
6						
Total						

*22/5/19*

*9-7-19*

*19-9-19*

*R. 154  
W. 1610-19*

*out*  
*M<sup>rs</sup> C. Lyon*  
*1140 Pender St W.*  
*1723 Dore St. W.*  
*Vancouver*  
*B.C.*

GEN'L AUDITOR  
 Payment checked by  
*[Signature]*  
 Date 7/7/19

Name Lyon, (Pte.) J.J.

Regimental No. 443764

Home Name and address of next-of-kin Gernie, B.C.

Unit 54<sup>th</sup> Bn.

Date of enlistment 26-6-17 Med. Bd. Rec. Ex. Home for massage.

Place of " "

Married (yes or no) Yes Date and place discharged

Amount of pay assigned monthly \$15<sup>00</sup> 31-5-17. Eng Reason for discharge Being continued in Eng.

To whom payable Hall 20<sup>00</sup> 31-5-17. Eng. Character on discharge Class II.

S.S. Scandinavian, 23-6-17. N. A. 649-L-7952.

D. Job 5351-M. & D. 6880.

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					
							80 56							
25 <sup>57</sup>	30 <sup>77</sup>	37	1 <sup>00</sup>	37 00	37	1 <sup>00</sup>	37 00			75 00		* 9 73		L.P.C. Eng.
												* 70 00	94 73	* Adv. on foot.
												26 53		D. S. Lue.
													121 26	Pay for June/17.
													121 26	Trans. to "J" unit
														Jr. 1-7-17 with Bal
														24-7-17
														Wrote C.P.M. gen. let.
														re. of Pay 15 <sup>00</sup> Nov/15

Lo. Bal.  
**Pensioned.**  
Be.P. 6. 18622 Fr. 1-12-17 \$150.00



## SEPARATION ALLOWANCE

332

Name *W<sup>rs</sup> Catherine Lyon*Name of Soldier *Lyon. Joseph James*Address *12 Baron St.*Regtl. No. *N 4376 H.**Wigan*Rank *Private**Lancashire England.*Corps *54<sup>th</sup> Bn*

Relation to Soldier

To what Corps belonging

wife, child or mother

when called out

} *wife*

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<p><b>ENGLISH</b></p> <p><i>Duplicate sent to you for payment there</i></p> <p>COPIED FOR CASUALTIES.</p> <p>..... A/c Closed</p> <p>Ret'd per. <i>Scandinavian</i></p> <p>Date <i>9. 6. 17</i> F. X <i>16. 7.</i></p> <p>..... Clerk <i>M. G. Hill</i></p> <p><i>Disch. 30. 11. 17 R.G. Daily Disch. 1-12. 17</i></p>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

1911

1912

1913

1914

1915

1916

1917

1918

1919

1920

1921

1922

1923 1924 1925 1926 1927 1928 1929 1930 1931 1932 1933 1934 1935 1936 1937 1938 1939 1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950 1951 1952 1953 1954 1955 1956 1957 1958 1959 1960 1961 1962 1963 1964 1965 1966 1967 1968 1969 1970 1971 1972 1973 1974 1975 1976 1977 1978 1979 1980 1981 1982 1983 1984 1985 1986 1987 1988 1989 1990 1991 1992 1993 1994 1995 1996 1997 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020 2021 2022 2023 2024 2025 2026 2027 2028 2029 2030 2031 2032 2033 2034 2035 2036 2037 2038 2039 2040 2041 2042 2043 2044 2045 2046 2047 2048 2049 2050 2051 2052 2053 2054 2055 2056 2057 2058 2059 2060 2061 2062 2063 2064 2065 2066 2067 2068 2069 2070 2071 2072 2073 2074 2075 2076 2077 2078 2079 2080 2081 2082 2083 2084 2085 2086 2087 2088 2089 2090 2091 2092 2093 2094 2095 2096 2097 2098 2099 2100

COMMUNICATIONS DIVISION

UNITED STATES DEPARTMENT OF THE ARMY  
WASHINGTON, D. C.

Aug 11/15

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

606

2nd Contingent

(Wife)

To Whom Mrs Catherine Lyon  
Address 12 Baron St  
Wigan Lancashire

By Whom Assigned Lyon Joseph James  
Regtl. No. A-4376A  
Rank Pte L/C  
Corps B. Co 54th Batt B. E. F.

Rate #1500

England  
NOV 1-1915

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<p>Duplicate sent to England</p> <p><b>ENGLISEI</b></p> <p>COPIED FOR 2 CASUALTIES.</p> <p>.....A/c Closed</p> <p>Ret'd per <u>Scandinavian</u></p> <p>Date <u>9/6/17</u> F. X. <u>14/7/17</u></p> <p>.....Clerk. <u>W. Hocking.</u></p> <p>Dich. 30. 11. 17, R.G. Daily Dist. 1-12. 17</p>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





MILITIA AND DEFENCE  
ASSIGNED PAY.

To whom *Mrs. Cath. Lyon*Address *12 Baron St.  
Wigan - Lancs. England*Rate *at \$15. dep. allow. 20.*Date to Commence *1<sup>st</sup> June 1917**Wife*By whom assigned *Lyon, Joseph James*Regtl. No. *445764*Rank *Private*Corps, &c. *54<sup>th</sup> Battalion**Pay 2 K.*

## PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Pay Sheet Deduction.	REMARKS.
Jan.	1916		ASSIGNED PAY	SEPARATION ALLOWANCE	<i>Noted on L.P.C. Discharged to Canada 24/5/17</i>
Feb.					
Mar.					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1917				
Feb.					
Mar.					
April					
May					
June		<i>A/6324</i>	<i>15</i>	<i>20</i>	
July		<i>A/67345</i>	<i>15</i>	<i>20</i>	
Aug.		<i>A/63033</i>	<i>15</i>	<i>20</i>	

*over*

# ASSIGNED PAY.

By whom assigned

Regtl. No.

Month.	Year.	Cheque No.	ASSIGNED		REMARKS.
			Amount.	SEPARATION ALLOWANCE Pay Sheet.	
Sept.	1917	A 122176	15	20	
Oct.		B 13197	15	20	
Nov.		B 23154	15	20	
Dec.		<i>Stop</i>			Cable from "Mikhozeou" "close" at 30-11-17
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					
Jan.	1919				
Feb.					
March					

*Duplicate*

11242

SEPARATION ALLOWANCE

6327

Name *Mrs Catherine Lyon.*  
Address *12 Baron St.*  
*Wigan*  
*Lancashire England*  
Relation to Soldier }  
wife, child or mother } *wife*

Name of Soldier *Lyon Joseph James.*  
Regtl. No. *A 43764.*  
Rank *Private*  
Corps *54<sup>th</sup> Bn.*  
To what Corps belonging }  
when called out }

*GPO Wigan.*

PAYMENTS

*\$15<sup>00</sup> 30/5/16*

Month	Year	Cheque No.	Amt.	Marriage Certificate Produced
Aug.	1914			OCT 30 1915. <i>M.T.T.</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.		<i>I. 11563.</i>	<i>33</i>	<i>cc 1/90490/02.</i>
Oct.				
Nov.				
Dec.			<i>60</i>	<i>cc 261457/469 \$1.20</i>
Jan.	1916			
Feb.			<i>60</i>	
March			<i>153</i>	

**FILE**

## SEPARATION ALLOWANCE.

Name of Dependant Lyon. Mrs Catherine Name of Soldier Lyon. G.G.  
 Relation to Soldier Wife. Regtl. No. A 43764  
 1 12 Baron St 3 Rank Pte  
Wigan Corps 54<sup>th</sup> Batten  
 P.O. Lanes P.O. To what Corps belonging }  
 2 4 when called out }  
 P.O. P.O.

Month.	Year.	Cheque No. or Postal Draft Book No.	Amount.		Date.	REMARKS.		
			£	s. d.		£	s.	d.
		Brought Forward ...	153	-				
Apl.	1916	B 8210	20	00				
May		B 17201	20	00				
June		B. 25388	20	00				
July		B 21293	20	00				
Aug.		B 58938	20	00				
Sept.		B 49156	20	00				
Oct.		B 59451	20	00				
Nov.		B 4516	20	00				
Dec.		B 48631	20	00				
Jan.	1917	B 90366	20	00				
Feb.			353	-				Total Separation Allowance paid to end of January, 1917.
Mar.								
Apl.								
May								
June								
July								
Aug.								
Sept.								
		Carried Forward ...						

TRANSFERRED TO ACCOUNT PAID LEDGER

ENTERED

CHECKED

Rank L/Cpl. Name LYON. Joseph James.

Reg'l No. 443764 P-56

Unit 54th Battn. If in perm. Corps, }  
What Unit? }

Married or Single Married.

Place and Date of Enlistment Vernon Camp, Aug 11th 1915.

Place of Birth Lancs, England.

Name and Address, Next-of-Kin Mrs. Catherine Lyon,

12, Baron St, Wigan, Lancs, Eng.

Relationship

Assigned Pay Monthly \$ 15<sup>00</sup>

Payable to Mrs. C. Lyon, 12, Barton St, Wigan Eng

Relationship

Separation Allowance

Payable to

Relationship

Discharge, Date and Place

Reason

Character

Checked by J. Scott

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	Amo	No. of Days	Rate	Amount			No.	Date						
1915																	
Dec. 1	31	31	1 <sup>05</sup>	3255	31	10	310	10	4565			1946	15		3446	1119	clothing lev.
Jan 1	31	31	1 <sup>05</sup>	3255	31	10	310		3565			973	15		3689	995	
Feb 1	29	29	1 <sup>05</sup>	3085	29	10	290		3335			1216	15		3960	1340	
March	31	31	1 <sup>05</sup>	3255	31	10	310		3565			1460	15		2960	1975	

Carried forward to Large Ledger sheet

BALANCE TRANSFERRED TO NEW LEDGE

128<sup>00</sup>

1220 10 150 30

7055 60

13055 1975

Checked by [Signature]



Name #1 Pte. Ryan

M. F. W. 41  
1 OM-7-16  
1772-39 889.

*out Patient*  
Name and address of next-of-kin Wife (as below)

Regimental No. 443764

Unit 54 Bn.

Date of enlistment

Place of

Married (yes or no) yes.

Amount of pay assigned monthly \$ 15<sup>00</sup>

To whom payable Mrs. C. Ryan.

12 Baron St. Wigan England.

J. for Pay July 1/17.  
Date and place discharged Disch'd Class 3 30/11/17

Reason for discharge D/O 278/2697 of Unit 1118/16 29/11/17

Character on discharge

Form 5351-M. & D. 6880.

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					
								26 53	147 33			58 23			147 33	
								40				19 10		70		
								12 60				18		35		
Sept	1	30	30	30	30		3	20	53							
Oct	1	31	31	31	31		3	10 20	54 10			19 10		35		54 10
Nov	1	30	30	30	30		3	15 20	68			33		35		68
								10	10			10				10





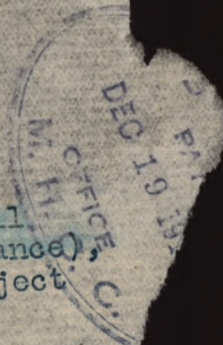




PARAGRAPH 8

I HEREBY ACKNOWLEDGE that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present day, subject to the reservations of the claims noted below.

Joseph James Lyon



RECEIVED

I have received your letter of the 15th inst. and in reply to inform you that the same has been forwarded to the proper authorities for their consideration. I am sorry to hear that you are having trouble with your engine and hope that the repairs will be completed soon. I will be glad to hear from you again when you are able to do so.

Very truly yours,  
J. J. Jones

This space to be left blank for the Chelsea number.

Scandinavian

Army Form B. 268.

June 23 1917  
Proceedings on Discharge.

J. L. 1237 60  
7-12-32

(When forwarded for confirmation the documents named on page 4 should be enclosed.)

No. 443764 Army Rank L/Cpl  
 Name Lyon Joseph J.  
 (The name must agree strictly with that on enlistment, unless changed subsequently by authority.)  
 Corps S.O.R.D.  
 Battalion, Battery, Company, Depot, &c. 54th Battalion  
 (If attached to the Regular Establishment of the Special Reserve or Permanent Staff of the Territorial Force, &c., or to General Staff of the Army, it should be so stated.)  
 Date of discharge 30th November 1917  
 Place of discharge Esquimaux P.C.

1. Description at the time of discharge.

Age <u>43</u> years <u>1</u> months	Descriptive marks. <u>Shrapnel W. R. Hand.</u>
Height <u>5</u> feet <u>9 1/2</u> inches	
Chest measurement { girth when fully expanded _____ ins. range of expansion _____ ins.	
Complexion <u>Fair</u>	
Eyes <u>Grey</u>	
Hair <u>Light</u>	
Trade <u>Police Officer</u>	
Intended place of residence (To be given as fully as practicable) <u>Home P.C.</u>	

(The measurements and description should be carefully taken on the day the man leaves his unit, but in the case of men sent home from abroad for discharge, the age and intended place of residence should be left blank to be filled in by the Officer who confirms the discharge at home.)

2. The above-named man is discharged in consequence of Being physically unfit for further service. Under R.F.D. Am 322 IX.

Authority P.L. telegram of 26/11/17  
(The cause of discharge must be worded as prescribed in the King's Regulations and be identical with that on the discharge certificate. If discharged by superior authority, the No. and date of the letter to be quoted.)

3. Military character:— Very Good

4. Character awarded in accordance with King's Regulations:—  
Very Good  
Deceased 18-4-32  
6492-7952

Certified that the above is an accurate copy of the character given by me on Army Form B. 2067\* and that Army Form D. 489 was awarded in this case.

Initials of Commanding Officer.

Army Form B. 2088 has been issued to\*

F.B.  
D. J. Seed  
18-1-18  
B.C.

5. He is in possession of the following number of G.C. badges (if the man is a N.C.O. and enlisted prior to 1st July, 1881, the number he would have been entitled to had he not been promoted should be stated).

Is it probable that he will be entitled to another good conduct badge before the confirmation of these proceedings?

Classification for service, or proficiency pay... .. Class

6. Campaigns, Medals and Decorations

France 3 1/2 months

Certificate of education .....

7. His accounts are correctly balanced, and I have impartially inquired into all matters brought before me in accordance with Regulations.

(Place) Esquimaux B.C.

(Date) 3rd December 1917

Major  
A.C. "J" Unit, M.H.C.C.

Commanding \_\_\_\_\_ Battn. \_\_\_\_\_ Regiment.

8. Certificate to be signed by the soldier on discharge.

I hereby acknowledge that I have received all my pay and allowances (including clothing allowance), and all just demands up to the present date, subject to the reservations of the claims noted on the 3rd page.

(Place) \_\_\_\_\_ (Signature of Soldier.)

(Date) \_\_\_\_\_ (Signature of Witness.)

(When a soldier is absent through illness or any other cause, and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned should be attached here.)

9. Additional certificate in the case of a soldier who takes his discharge at his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

(Signature of Soldier.)

10. Statement of service.

Service towards engagement to 30/11/17 (the date to which the record of service is completed) 2 years 111 days.

Further service " " (the date of confirmation of discharge) " " " "

Total ... 2 " 111 "

11. Confirmation of discharge.

The discharge of the above-named man is hereby confirmed for 30th November 1917 (date)

(Place) Esquimaux B.C.

(Date) 3rd December 1917

Signature Major  
A.C. "J" Unit, M.H.C.C.

Commanding officers (or the Paymaster if at Netley) will issue to every discharged soldier whose claim to pension, either on account of service or disability, is to be brought under the consideration of the Chelsea Board, a memorandum for his guidance on Army Form D. 401, and will at the same time transmit to the Secretary, Royal Hospital Chelsea, a descriptive return of the man on Army Form D. 400.

RESERVATIONS REFERRED TO AT PARA. 8.

(To be signed by the soldier. When there are none, it is to be so stated and signed by the soldier.)

---

LIST OF DISCHARGE  
DOCUMENTS.

1. Proceedings on discharge.  
(Army Form B. 268.)
2. Proceedings on transfer to reserve (if any).  
(Army Form B. 2056.)
3. Duplicate attestation.
4. Army Form B. 97 (if any).
5. Declaration of change of name (if any).
6. Re-engagement paper (if any).  
Army Form B. 136.
7. Authority for continuance, or extension, of service (if any).  
Army Form B. 221.)
8. Court of Inquiry on an injury (if any)  
(Army Form A 2.)
9. Regimental conduct sheet.  
(Army Form B. 120).
10. Company conduct sheet.  
(Army Form B. 121.)
11. Copies of convictions by Civil Power (if any).
12. Medical history sheet.  
(Army Form B. 178).
13. Medical report on invalid (if any).  
(Army Form B. 179).
14. Copy of receipt for purchase money (if any).
15. Attestation of fraudulently enlisted man for corps in which he has not been held to serve (if any).
16. Detailed statement of former service allowed to reckon towards pension (if any).
17. Copy of 3rd page attestation (in the case of men from abroad entitled to deferred pay who go to Netley or the discharge depot for discharge).
18. Descriptive return (Army Form D. 400), where required.  
See section 11 on second page.
19. Active service casualty form.  
(Army Form B. 103).
20. Employment sheet.  
(Army Form B. 2066).

In the case of recruits who are rejected before, or on, final approval, the discharge documents will consist of—

1. Duplicate attestation.  
(On third page the date and cause of discharge will be entered and signed by the competent military authority).
2. Medical history sheet (if any).  
(Army Form B. 178).

Instructions as to the preparation, dispatch,  
and custody, of discharge documents.

1. When a soldier is to be discharged, the documents retained with the duplicate attestation will be placed inside this form. Should any of the documents be missing, an explanation of the deficiency, signed by the commanding officer, must be substituted for the missing document. The officer in charge of records will then extract from the original attestation, any documents required to complete the list of discharge documents enumerated in the margin, which will then be placed in this form in the sequence given.

2. When men are discharged from the colours at home as medically unfit, or with claims to pension, Army Form B. 268 will be sent confirmed, together with the duplicate attestation and documents retained therein to the officer in charge of records 10 days in advance of the date for discharge in the case of invalids, and 14 days in other cases. This officer will then extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them in this form, and after carefully checking the duplicate attestation with the original forward the whole to the Secretary, Royal Hospital, Chelsea. When such men are discharged abroad, the same procedure will be adopted as above, with the exception that the discharge documents will be sent to the officer in charge of records immediately after discharge takes place (except in the case of men who are granted gratuities on discharge from local battalions or companies, Royal Artillery).

3. When soldiers are sent home from abroad for discharge, the documents retained with the duplicate attestation will be placed inside this form and sent home with the men for transmission to the officer who carries out the discharge, together with the following additional forms:—

- (a) Discharge certificate (Army Form B. 2079 or Army Form B. 264).
- (b) Character Certificate (Army Form B. 2067) if entitled.
- (c) Copy company conduct sheet (Army Form B. 121) when required under King's Regulations.

The duplicate attestation and documents retained therein will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin and place them in this form.

4. The discharge documents of re-enlisted pensioners, on re-discharge, will be sent to the officer in charge of records, who will extract from the original attestation any documents required to complete the list of discharge documents enumerated in the margin, place them inside this form, and forward the whole to the Secretary, Royal Hospital, Chelsea, irrespective of the cause of discharge.

5. The original and duplicate attestations of recruits who are rejected before, or on, final approval will be retained by the approving officer for one year, when they will be destroyed.

6. In all other cases the discharge documents will be sent, directly the discharge is carried out, to the officer in charge of records of the unit concerned.

7. Postage need not be paid, and receipts are not required, in the case of documents sent to Chelsea or to the War Office,

8. When the discharge documents of men not entitled to pension are sent to the officer who will have final charge of them, they are to be accompanied by Army Form B. 279, and that officer will, if they are found to be correct, sign and return Army Form B. 279. Should any document be missing, he must at once apply for it.

9. The officers having final charge of the discharge documents will arrange them according to regimental numbers, and enter the names in the alphabetical index, Army Book No. 129.



B.P.C.

MEDICAL HISTORY OF AN INVALID.

1. Station. **Vancouver B.C.**

8. General remarks on his:—

2. Regiment or Corps. **8th Batt.**

(a) Conduct.

3. Regimental No. and Rank.

(b) Habits.

**443764 L.Cpl.**

4. Name. **Lyon, J.J.**

(c) Temperance. **Temperate**

DEPT. MILITIA & DEFENCE

NOV -8 1917

5. Age last Birthday. **43**

(For this purpose the Company default sheets will be obtained from the man's Commanding Officer.)

6. Enlisted on **Aug. 11th. 1915**

at **Fernie**

7. Former trade or occupation.

Date. **Oct. 15th. 1917**

**Policeman**

9. Service.

Years. Days.

PERIODS

	PERIODS	
	FROM	To
<b>54th. Batt.</b>	<b>Aug. 11th 1915</b>	<b>June 1916</b>
<b>2nd. Bn.</b>	<b>June 1916</b>	<b>Present.</b>

10. (a) Disease or disability. **(1) Weakness of left leg (2) Numbness in Rt. Hand.**

(b) Date of origin. **(1) Sept. 2nd. 1916 (2) Sept. 9th 1916**

(c) Place of origin. **France France**

(d) Cause. **(1) Buried by shell explosion (2) Shrapnel**

11. Present condition. (Most Important.)

(To include full description of present disabling condition or conditions, and of the immediate and direct cause of incapacity, i.e., debility, breathlessness on exertion, necessity of treatment by rest, etc.)

**A healthy looking man with a slight grade of**

**general debility. He gets short of breath on exertion. He has a little wheezing in his chest, he says, in the mornings with some coughing and sputum. He was wounded in the hand by shrapnel, but the only disability resulting is slight loss of power of flexion of little finger and dullness of sensation on outer surface of little and index fingers. The leg looks normal, no sign of atrophy of muscles. The leg tires more easily than the right leg, and at times when he is walking, he says that the ankle or knee joint will stick or lock, so that he has to stop walking in order to straighten it. All movements in hip, knee, foot, and ankle normal. Knee jerks normal. Heart and other systems normal.**

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

(b) Has it been aggravated by intemperance, vice or misconduct? **No**

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Scar Palmer surface of little finger Rt.  
Scar palm of rt. hand (centre)  
Deformed finger nail index finger (left)  
3 vaccination marks left arm.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action was a Court of Inquiry held?

On duty in action.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise.

Not applicable.

14. Treatment. Reading Hosp. shrapnel removed from right hand, dressings &c.  
Convalescent Hosp. Bearwood massage and medicines.  
Convalescent treatment at Vancouver.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

Not applicable.

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes?

(1) Cannot say

(2) Probably permanent.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. When more than one disabling condition is present, the extent of the disability due to each should be stated.

(1)  $\frac{1}{5}$

(2)  $\frac{1}{20}$

Total  $\frac{1}{4}$

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

Yes

SHAUGHNESSY  
MILITARY  
CONVALESCENT  
HOSPITAL  
VANCOUVER, B. C.

Medical Officer by whom the case is brought forward.

*Jingra Hayes*  
Cap Hayes

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. (1) Concurs (2) Weakness of rt. hand.

11. Debility seems due to shell shock. Hand, grasp very poor, not more than 1/4 normal, forefinger especially weak; colour livid and looks atrophic (over)

12. Concurs

15. Concurs

{ otherwise (1) Six months at least *from* *with* Concurs; though he is educating himself to use hand to more advantage.

17. Leg 1/10 . hand 1/4 owing (1) to actual weakness (2) to lack of finger tip sensation. Total 35/100 due to service.

18. Is he unfit for Military Service. Yes

Recommendations : The Board considers that further treatment is not indicated in this case, and recommends that he be placed in Class E for discharge, and allowed to pass under his own control.

Signatures :—

*J. Mac Dermot Kap* President.

Station. Vancouver B.C.

Date. Oct. 17th. 1917

*W. L. ...*  
*C. J. ...* Members.

Date. OCT 30 1917

*G. C. ...* Major, A. M. C.  
For Asst. Director of Medical Services. M. D. 11

Approved.

Date.

Director-General of Medical Services.

2335  
 11/17  
 383a  
 8/11/17

OPINION OF THE MEDICAL BOARD.  
 Cannot have forefinger against any resistance; all movements normal in range; use of hand causes pain and marked tremor. Leg as described appears to be about 20% loss of power generally.

240-8-1-17

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

If admitted. Index No.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
	From	From			
Date					

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depot.

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Date of final Medical Board or decision. } Administrative Medical Officer.

**DETAILED MEDICAL HISTORY OF INVALID.**

Militia Form B. 227.  
 200m. 8-16.  
 H. Q. 1772-89-117.

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

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

1159 186 22

# PROCEEDINGS OF A MEDICAL BOARD.

Dated at Nov 16th 1916.

No. 443764 Rank 1st Lt Name Lyon J.T.

Local Unit Acme Overseas Unit 2nd Bn Age 43

Examination held at Shurham

DISABILITY. G. S. W. Hand R.  
Overseas—Local.  
(scratch one out)

### PRESENT CONDITION.

No disability from wound.  
Is troubled with myalgia in  
legs.

### BOARD RECOMMENDS:—

- 1. Fit for Duty.....
- 2. Fit for duty after.....weeks' physical training.
- 3. Fit for Temporary Base Duty.....weeks.
- 4. Fit for Permanent Base Duty yes.....
- 5. Discharge.....

**APPROVED**  
 CAPTAIN C.A.M.C. FOR D. OF R. & O. FOR  
 BRIGADIER GENERAL  
 COMMANDING  
 CANADIAN TRAINING DIVISION.

### Signatures:—

Members } J. Cook Capt ..... President.  
 } W. Anderson Capt .....

APPROVED

Dated at Shurham 16 NOV 1916 1916. D. J. McIntyre

PROCEEDINGS OF A MEDICAL BOARD.

R & O 10/1/1918

Dated at ..... 1918

No. .... Rank ..... Name .....

Local Unit ..... Overseas Unit ..... Age .....

Examination held at .....

DISABILITY  
Overseas—Local  
(Scratch one out)

PRESENT CONDITION.

BOARD RECOMMENDS —

- 1. Fit for Duty .....
- 2. Fit for duty after ..... weeks' physical training
- 3. Fit for Temporary Base Duty ..... weeks
- 4. Fit for Permanent Base Duty .....
- 5. Discharge .....

Signatures —

..... President

Members

APPROVED

Dated at ..... 1918

For A.D.M.S.

R. B. N.  
C.C.A.C.

# ORIGINAL MEDICAL HISTORY SHEET.

Surname Lyon Christian Name Joseph James

Examined { on 21 day of August 1915  
at Permon B Co

Approved by W. A. M. ...  
Rank Captain M.O.

Birthplace { City or Town \_\_\_\_\_  
County Lancashire Eng.

Apparent age 38.75

Trade or occupation Policeman

Height 5 Feet 9 Inches.

Weight \_\_\_\_\_ Lbs.

Chest measurement { Minimum 35 inches.  
Maximum expansion 4 inches

Physical development \_\_\_\_\_

Small-Pox Marks \_\_\_\_\_

Vaccination Marks { Arm Right Left 3  
Number 3

When Vaccinated last \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease \_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection \_\_\_\_\_

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		19 SEP 1916
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS.
6/9/15	Pos.	JWH
		M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
6/9/15	Pos.	JWH
16/9/16	Pos	JWH
27/9/15	Pos	JWH
		M.O.
		M.O.
		M.O.

Enlisted on 11<sup>th</sup> day of August 1915 at Permon B Co

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>B Coy</u> <u>54th Batta R. G. F.</u>	<u>#</u> <u>443764</u>		<u>11/8/15</u>
Transferred to.....				

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD:

STATION.	DATE.	DISEASE.	RESULT.
<u>Ceue</u>	<u>Nov 16 1916</u>	<u>(G. S. W. hand R.)</u> <u>43 yrs of age</u>	<u>P. Bone duty</u> <u>J. M. ...</u>
<u>Hasting</u>	<u>27/4/17</u>		<u>Lieut. Col. ...</u> <u>...</u>

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

CANADIAN

The Medical History Sheets of all ...  
overseas, must be ...  
to the Record Office

Christian Name

Surname

STATION.	Date of Arrival at the Station.	DATES OF						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.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				
Reading War		12	9	16	16	10	16	G.I. W. R. Hand	25	A sharp bullet found lodged on flexor surface of proximal phalanx of little finger. * Extracted. Movement of little finger limited. A second bullet entered palm of hand & passed out along outer border of hand <del>causing</del> the N. to the radial side of the index finger & causing impaired sensation. * See diagnosis fracture.	W. A. P. H. M. J.
Col. W. B. Wood.		16	10	16	14	11	16	L.S.	29	* Knock to Ruby	C. A. C.
"J" Unit M.A.C.		3	7	17	30	11	17	L.S.	150	Discharged to class "3" 30/11/17 as being physically unfit for further service. Under R.F.P.O. Law 322 II. Rate \$150. Authority: - P.L. telegram of 26/11/17	Edward Masell
Esquimaux B.C.											

Medical Superintendent,  
"J" Unit M. H. C. Comrades



Rank ~~1/cpl.~~ Name **LYON. Joseph James.** Reg'l No. **443764**  
 Unit **54th Battn.** If in perm. Corps, What Unit? Married or Single **Married.**  
 Place and Date of Enlistment **Vernon Camp, Aug 11th 1915.** Place of Birth **Lancs, England.**  
 Name and Address, Next-of-Kin **Mrs. Catherine Lyon,**  
**12, Baron St, Wigan, Lancs, Eng.** Relationship

Assigned Pay Monthly \$ Payable to

Relationship

N/E. R.B. No. **3143**  
 File R.L. **OS**  
 Category **MU Can** **R133B420**

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place Reason Character **MU Can OV Can**

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				
		<i>Arrived in England</i>		2 DEC 1915	
		<i>Per S.S. Saxonia</i>			
<i>36</i> 6.3.16	<i>To 54th Bn</i>	<i>app. 4/cpl. B.O. 125/17.9.15</i>	<i>Permanent grade Pt.</i>		<i>See copy of grant att. to A.P.</i>
26.4.16	<i>To 54th</i>	<i>Leave purlough granted</i>	<i>Bramshott</i>	<i>22/28.4.16</i>	<i>Pt. R. N.O. 116</i>
8.5.16	<i>To 54th</i>	<i>To be 2/cpl.</i>	<i>Bramshott</i>	<i>7.5.16</i>	<i>Pt. R. N.O. 125</i>
24.6.16	<i>Adj 54th</i>	<i>Having proceeded O/S. is struck off the strength as at that date. H &amp; 11 Bgd. Alter 11 B. 6-46-840. dated 17.6.16</i>	"	<i>18.6.16</i>	<i>... 175.</i>
30.6.16	<i>OC 2nd</i>	<i>T.O.S. as 4/cpl reverts to the ranks</i>	<i>France</i>	<i>19.6.16</i>	<i>Pt. II 26 Cancelled</i>
16.9.16	"	<i>War Hospital</i>	<i>Reading</i>	<i>13.9.16</i>	<i>Ch B/169 GSW Arm</i>
18.9.16	"	<i>Transferred to C.C.A.C., Folkestone,</i>		<i>12.9.16</i>	<i>Pt II H 8 end of 32/4/17</i>
19.9.16	<i>e.e.A.e.</i>	<i>Taken on strength.</i>	<i>Easton</i>	<i>16.9.16</i>	<i>405</i>

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				
20-11-16	C.C.A.C.	On Command to Garr. Duty Depot	Shoreham	18-11-16	Pt. II D.O. 511
12-3-17	C.C.A.C.	S.O.S. on transfer to <i>Eastern Out Regiment</i>	Hastings	10.3.17	Pt. II D.O. 118.
17-2-17	3rd Bn A.S.A.	Attached for base duty to the bank to <i>W. A. Leonard</i>		16-4-17	— 49 <i>93rd B.G.D. 63/8-5-17</i>
4-5-17	60th A.S.A.	Off base <i>W. A.</i>	Seaford	8-5-17	— 57.
23-5-17	"	In base <i>W. A.</i> pending discharge to Canada	"	22-5-17	— 72.
14-6-17	"	Off " " bank to base for discharge	"	9-6-17	— 94.
	Disch. Dep.	To Comwd. Home.	no. 11 Victoria	23-6-17	N.A. 296.

L. 85

MEDICAL EXAMINATION UPON LEAVING THE SERVICE

OF AN OFFICER FIT FOR GENERAL SERVICE OR A SOLDIER FIT FOR DUTY.  
Officers leaving the Service upon being found unfit for General Service  
a Medical Board, and Soldiers leaving the Service upon being found  
otherwise than fit for Duty by a Medical Board are not to be reported  
on this Form.

Rank... *1st Lt.* Name... *L. YON* Surname... *JOSEPH H. J.*

Unit or Corps... *F.P.R.D.* If a Soldier Regtl. No. *443264*

Born at... *ASHTON LANKSHIRE* on date... *OCT. 26<sup>th</sup> 1873*

Signature (for identification)... *Lyon Joseph James*

DEPT. MILITIA & DEFENCE  
NOV - 8 1917  
H.Q. CANADA

(The examination will be made by two Medical Officers.)

1. PHYSIQUE—Any deformity, maiming or lameness? if so describe.

weight... *160 lbs*  
Height... *5 ft 9 1/2 in.*  
*He was wounded in France in the face of the enemy. The left leg and foot is affected compelling him to use a stick to walk with*

2. NUTRITION AND DIATHESSES? *normal*

After searching inquiry and through examination if any evidence found of disease or impairment of the parts indicated below? if so describe.

3. NERVOUS SYSTEM? *normal*  
& This man appeared before a Board of Officers and is for disposal by the Adjutant-General, Ottawa, Auth. 1375-3-Seaforth.  
He has been paraded before an Officer from the Forestry Corps and Canadian Railway Troops and has not been selected for service with either of these Units.

4. RESPIRATORY SYSTEM? *normal*

5 Heart? *no*  
Abnormal sounds? *no*  
Abnormal Size? *no*  
Pulse Rate? *90*  
6 ARTERIES? ANY HARDENING? *no*  
Intermittance of irregularity? *no*  
May 16th, 1917.  
*M. H. Adcock* President.  
*J. J. Holburn* Member.  
*J. D. Koch* Member.

7. DIGESTIVE SYSTEM? *normal*  
8. GENITO-URINARY SYSTEM?  
URI-NALYSIS... *10. 2. 2.* Reaction? *acid* Albumen? *neg.* Sugar? *neg.*

9. SKIN MIDDLE EAR EYE. or any other part. *normal.*

10. Is there any evidence of impairment of health of Physical condition not above mentioned if so describe.  
*There is limitation of flexion to right index finger and small finger with slight involvement of nerve supply. There is increased left knee reflex and paralysis of anterior tibial nerve producing loss of power in tibial and peroneal muscles, and anaesthesia*

II. Opinion as to the health and Physical condition of the one examined?  
*Fair.*

EXAMINED AT... *Seaforth Bussell* SIGNED... *W. S. Jones Capt* M.O.  
DATE... *10/5/17* SIGNED... *C. H. V. Smith Capt* M.O.

If any disease or impairment of health or Physical Condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or soldier to be sent before a Medical Board for regular Boarding.

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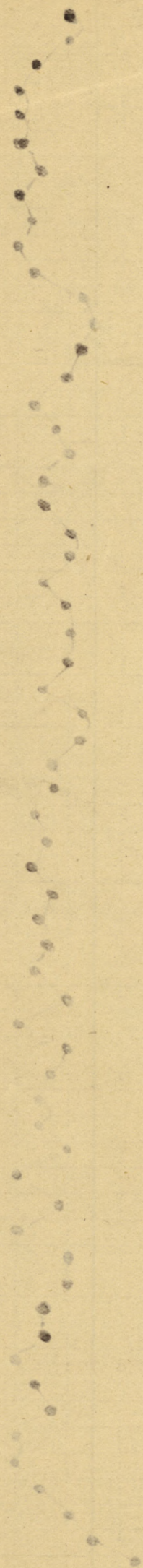
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MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

*Duplicate*

2a Contingent

<sup>16209</sup>  
*Aug 1/15*  
*(Wife)*

To Whom *Mrs Catherine Lyon*  
Address *12 Baron St*  
*Wigan Lancashire*  
*England*

By Whom Assigned *Lyon Joseph James*  
Regtl. No. *4* *43764*  
Rank *Pte L/C*  
Corps *B. Coy. 54<sup>th</sup> Batt C B F*  
*Bramshott*

**NOV 1-1915**

PAYMENTS

**COMPULSORY.**

*#*  
*Rate 1/10*

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

RECEIVED  
DEC 16 1915  
OTTAWA...

RECEIVING SEPARATION ALLOWANCE \$ *20*  
EFFECTIVE *Aug 1915*  
RELATIONSHIP *Wife*

**FILE**

# ASSIGNED PAY.

By whom assigned

Lyon J.J. Lt. Col.

Regtl. No.

443764 "B" Coy. 54<sup>th</sup> Batt. C. S. F. Promoted

Month	Year	Cheque No.	ASSIGNED PAY	SEPARATION ALLOWANCE	REMARKS.
Jan.	1916	108918	45		Nov. Dec. & Jan.
Feb.		133952	15		
March		161016	15		
Apl.		17578	15		
May.		43584	15		
June		70896	15		
July		101909	15		
Aug.		140076	15		
Sept.		171360	15		
Oct.		208321	15		
Nov.	1915	245543	15		
Dec.		290185	15		
Jan.	1917	337672	15	353	
Feb.		367946	15	20	
March		416049	15	20	
Apl.				40	
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					



TOTAL SEP. ALL PAID TO 31 JAN. 1917.  
FROM SEP. ALL LEDGER.

AP & SA to 31 March 1917 checked found correct Ed Foster  
S. E. Young