

Boyle 13211

ORIGINAL 138211

Original
138211

ATTESTATION PAPER.

No.

75th BATTALION C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... George Robert Lawson.....
2. In what Town, Township or Parish, and in what Country were you born?..... Dunganon, Co. Tyrone, Ireland.....
3. What is the name of your next-of-kin?..... Father, William John Lawson.....
4. What is the address of your next-of-kin?..... Dunganon, Co. Tyrone, Ireland.....
5. What is the date of your birth?..... 23rd March, 1893.....
6. What is your Trade or Calling?..... Grocery Packer.....
7. Are you married?..... No.....
8. Are you willing to be vaccinated or re-vaccinated? or inoculated..... Yes.....
9. Do you now belong to the Active Militia?..... No.....
10. Have you ever served in any Military Force?..... Yes, Ulster Volunteers, 1 year.....
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.....

George Robert Lawson (Signature of Man).

J. Power (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, George Robert Lawson, 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.

George Robert Lawson (Signature of Recruit)

Date 9th September 1915 *J. Power* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, George Robert Lawson, 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.

George Robert Lawson (Signature of Recruit)

Date 9th September 1915 *J. Power* (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 Toronto this 9th day of September 1915.

W. J. M. J. (Signature of Justice)

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

W. J. M. J. (Approving Officer)

Description of George Robert Lawson on Enlistment.

Apparent Age 22 years 5 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 7 1/2 ins.

Chest measurement { Girth when fully expanded 36 ins.
Range of expansion 3 ins.

Birthmark on right side.

Complexion Fair

Eyes Blue

Hair Dr. Brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* fit for the Canadian Over-Seas Expeditionary Force.

Date 9th September 1915 191 .

Place Toronto

Jas. W. Barton
Captain
Medical Officer
H. H. C. C. C.

*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.

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

[Signature] (Signature of Officer)

Date Sept 9th 191 5

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 Lawson Geo. Robert

Regt. No. 138211 Rank Pte.

Corps 7th Bn.

D. Q. W. 4-10-16.

R. O. No.

H. Q. No.



14259

M



30-19
8-19
1

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 Diagnosis: if more than one state present

DISPOSITION

Date

REMARKS

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

No 138211

RANK

E.

NAME

Lawson. G. R.

T. O. S. 9-10-16

D.O. 60 7-15-10-11

UNIT

75th Battalion C. B. F.

M. D.

2

PAID

PAID

SIG.
OR
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

FROM

TO

PARTICULARS

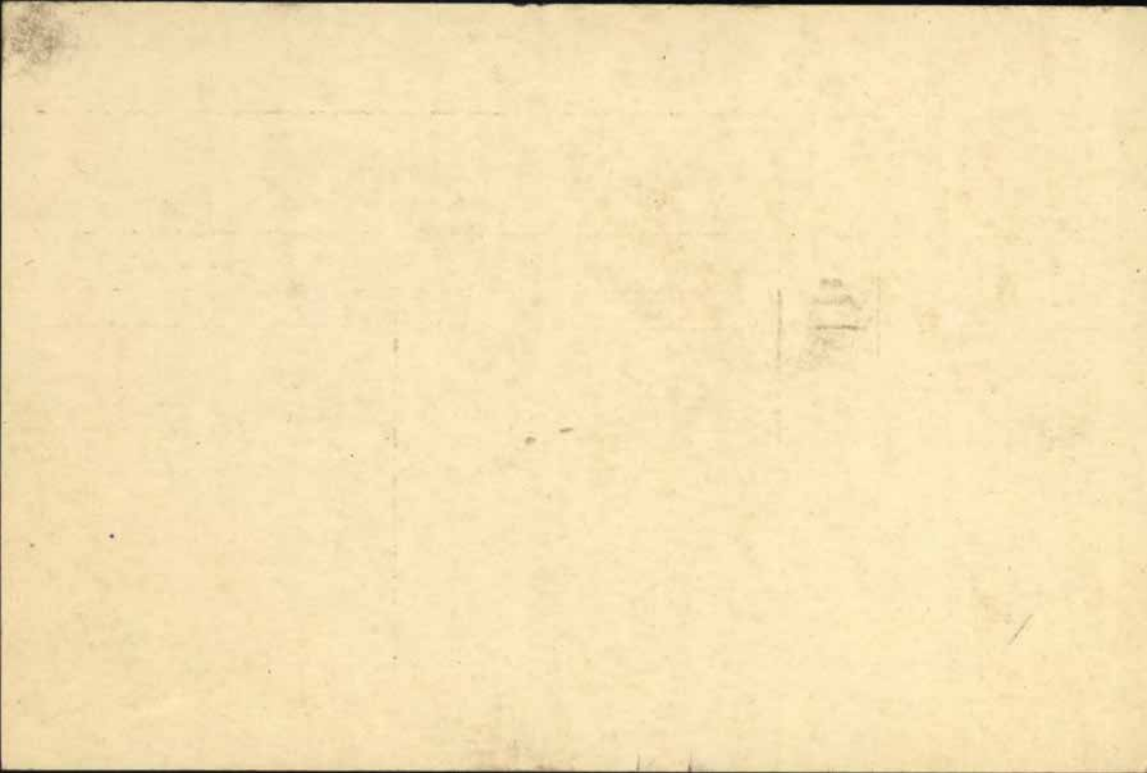
AUTHORITY

Oct. 9 *Oct. 31*
Nov.
Dec.
1916
Jan.
Feb.
Mar.
Apr.

✓
✓
✓
✓
✓
✓
✓

UNIT SAILED

MAR 29 1916



No.

RANK *Pte.*

NAME

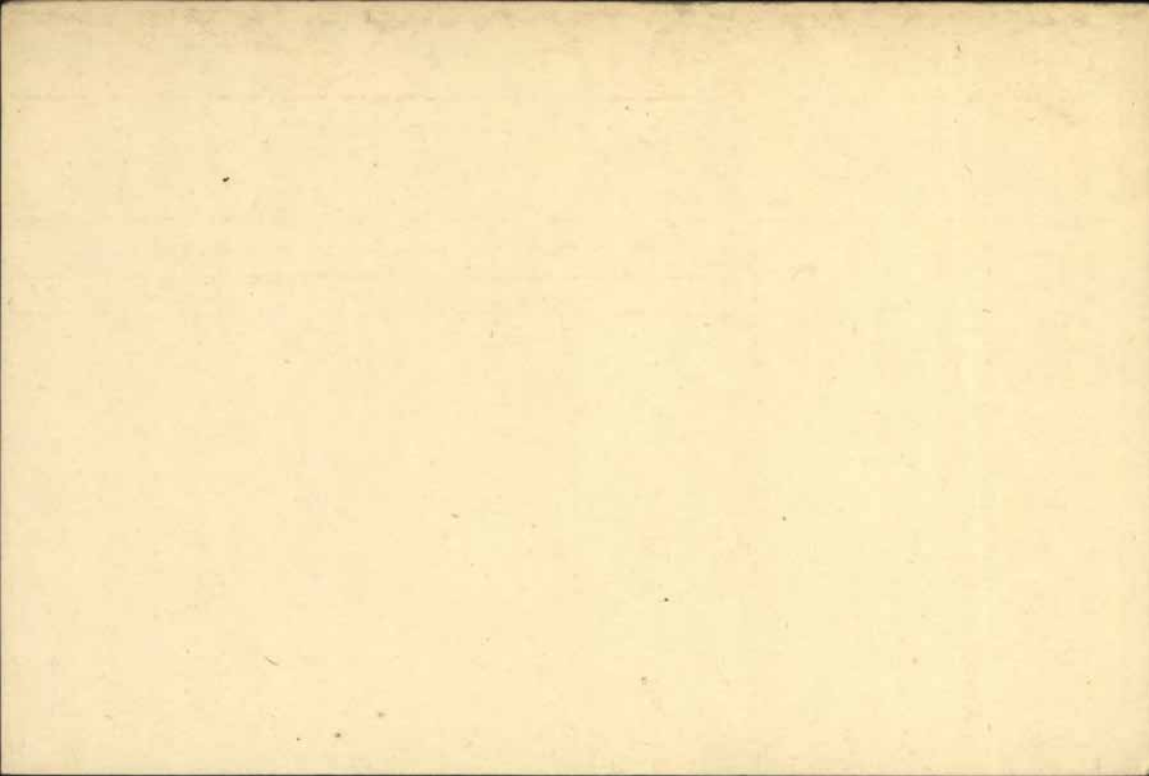
*Lawson, G.**R.*

T. O. S.

UNIT

*Toronto Recruiting Depot
(9th Mississauga Horse)*M. D. *2*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915- Sept. 9 Oct. 1</i>	<i>1916- Sept. 30 Oct. 9</i>	<i>✓ ✓</i>	<i>Transfd to 45th Bn. 9-10-15</i>	<i>Oct. payroll</i>



Name LAWSON George Robert

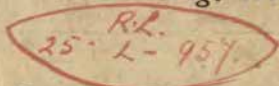
Rank *N/C*

Reg. No.

138211

Unit THIRD PIONEER BATTN

Next of Kin William John Lawson, Dungannon, Co. Tyrone
Ireland



Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916						
Oct 3	No 18 Gen Hsp	Camiers	GSW Groinal & Scrotum	A160	4.10.16	
		SERIOUSLY ILL			0 2096	
Oct 4th	DIED OF WOUNDS 18 G.Hsp		GSW.Com.Fr. Femur	A161	0-2200	
					5.10.16	

[illegible]

SURNAME.

*Lawson**(649-L-3656)*

CARD NO.

CHRISTIAN NAMES

George Robert

REGL. NO.

13 82 14

RANK

Pte

UNIT

*75th**Batt*

FORMER CORPS

Ulster Volunteers 1 Year

NEXT OF KIN.

NAMES IN FULL

Lawson, William John

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Wanganow Co. Tripone, Ire.

CHANGE OF ADDRESS

*Also notify M.
Harved. 136. Ellw-
orth Ave. Toronto, Ont.
auth letter 6-10-16.*

COUNTRY OF BIRTH

Ireland, Wanganow Co.

DATE

March 23rd 1893

PLACE OF ATTESTATION

Toronto Ont

DATE

*Sept 9th 1915**Sailed from Halifax**364**per. S.S. "Empress of Britain"*

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

29-3-16 13

M. F. W. 22. 230M.-2-16. H. Q. 1772-39-339.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Yes
Grocery Packer

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

22 YEARS

5 MONTHS

HEIGHT

5 FEET

73 INCHES

CHEST MEASUREMENT

36 INCHES

EXPANSION

3 INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

dk. Brown

DISTINGUISHING MARKS

Birthmark on right side

MEDICAL EXAMINATION.

PLACE

Toronto Ont.

DATE

Sept. 9th. 1915

File No. 649-L-3656.

Lawson, G.R. #138211, Pte

3rd Pnr. Bn.

Medals & Decs. Mother

Not elig. for 14-15 Star

Scroll Desp. 1-2-21 Keon No 2-15797

APR - 8 1922

Plaque Desp. Keon No P 34953

P & S.

(Serial no. 774810.)

Father

Mem. Cross

Mother

Mrs. Matilda Lawson,
Milltown,
Dungannon Co.,
Tyrone, Ireland.

Mr. Wm. John Lawson,
Address as above.

Mrs. Matilda Lawson,
Address as above.

Desp AUG 6 1920 M 1817316

16675

a

516

~~SCANDIA, J., Pte. No. 828649, Can. Cav. (CLR)~~

~~HA~~
~~MA~~

Sh. No. 4847

NAME Lawson George Robert H. Q. FILE No. 649-
 RANK AND CORPS Pte REGT'L. No. 138211
3rd Pns Bn 75th Bn

CABLE		NATURE OF CASUALTY
NO.	DATE	
02096	4-10-16	Seriously ill no 18 Gen Hosp. Camiers Oct. 3rd 1916 (G.S.W.) groin scrotum <i>✓</i>
02200	6/10/16	Died of wounds 18th Gen. Hosp Camiers Oct 4th 1916 (G.S.W) Compound fracture femur <i>✓</i>
<i>a</i> A.F.B.2090a	<i>rouen</i> 9-10-16	Died of wounds received in action no. 18 Gen. Hosp France Oct. 4th. 1916. (rec'd 22-1-17)

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 160	No 18 Gen. teamiers	3-10-16	Y S W. Troin & Scrotum seriously ill.
A 161	" " "	" Died of wounds 4-10-16	Y S W. Compound frac Femur

Blair
GB
Number. . . 138211. Rank.

Surname. LAWSON

Christian Name. George Robert

Unit. 3rd. Cav. Div. Theatre of war. France

Date of Service. 16-6-16.

Remarks. Mother

Latest Address Mrs. Matilda Lawson

Milltown

Roll No.

Page 545
Mungannon Co
Tyronne, Ireland

GV 45304 Dec 19.8.21

ORIGINAL MEDICAL HISTORY SHEET.

138211

Surname Lamson 75 Bn. C.E.F. Christian Name Geo Robert

Examined { on 9th day of September 1915
at Toronto

Birthplace { City or Town Dunganon
County Co. Tyrene, Ireland

Apparent age 22 Years, 5 months

Trade or occupation Grocery Packer

Height 5 Feet 7 1/2 Inches.

Weight 122 1/2 Lbs.

Chest measurement { Minimum 33 inches.
Maximum expansion 36 inches.

Physical development Good

Small-Pox Marks Nil

Vaccination Marks { Arm. Right. Left 2
Number 2

When Vaccinated last 1900

(a) Marks indicating congenital peculiarities or previous disease nil

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

Approved by

Jas. J. Barton
Rank Captain M.C.

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

Date	Result	VACCINATIONS.
<u>23/9/15</u>	<u>Low</u>	<u>Concussion head</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>20/9/15</u>	<u>Low</u>	<u>Spaulding</u> M.O.
<u>28/9/15</u>	<u>"</u>	<u>"</u> M.O.
<u>1/10/15</u>	<u>"</u>	<u>"</u> M.O.

Enlisted on 9th day of September 1915 191 at Toronto

	CORPS	REG'TL NUMBER	REMARKS	DATE
Joined on enlistment	<u>9th. M. H.</u>			
Transferred to..	<u>10th BATTALION C.E.F.</u> <u>TORONTO, ONT.</u> <u>Pioneer Bn.</u>	<u>138211</u>	<u>Good.</u>	<u>9.9.15</u>

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.

George Robert

Christian Name.

Surname *Kawson*

[illegible]

TLH. Rank Name **LAWSON George Robert.** Reg'l No. **138211.**
 Unit **75th. Battn.** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Toronto, 9th. September 1915.** Place of Birth **Danganon, Co. Tyrone**
Ireland
 Name and Address, Next-of-Kin **William John Lawson,**
Dungannon, Co. Tyrone, Ireland. Relationship **Father.**

Assigned Pay Monthly \$

Payable to

Relationship

N/E. R.B. No. **3176**
 File R.L.
 Category **D.W.**

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason **25-L-957.**

Character

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.				
10/4/16	S.R.O. 594	<i>Arrived in England</i>	<i>SS Empress of Britain</i>	<i>25.4.16</i>	<i>Pl. II 150 94</i>
28.4.16	9675 ¹² Bn				
29.4.16	"				
15/6/16	"				
		<i>also at from 17.11.25.4.16</i>			
		<i>Returned 9 AM 29.4.16</i>			
		<i>S.O.S. on trans to 3 Pioneer Bn</i>		<i>15.6.16</i>	<i>Pl. II 150 95</i>
					<i>✓ ✓ 138</i>
21.6.16	3 rd Pion	<i>L. O. Strength</i>	<i>Field</i>	<i>16.6.16</i>	<i>Pl. II O. 14.</i>
5-10-16	do	<i>18 General Hosp</i>	<i>Cambridge</i>	<i>3.10.16</i>	<i>CL 160. 9. S.W. from 9 Serotum</i>
6-10-16	do	<i>Died of Wounds</i>	<i>do</i>	<i>4-10-16</i>	<i>CL 161. ONKN.</i>
9-10-16	do	"	"	<i>4-10-16</i>	<i>Pl. II O. 56.</i>

[illegible]

Fill in Only.—Unit, Number, Rank and Name.

Casualty Form—Active Service.

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

Unit, Regiment or Corps 75 Bn. C.E.F.
Regimental No. 138211 Rank Pte Name Lawson, George Robert
Enlisted (a) Sep. 9, 1915 Terms of Service (a) Duration of War Service reckons from (a) Sep. 9, 1915
Date of promotion to } Date of appointment } Numerical position on }
present rank. } to lance rank } roll of N. C. Os. }
Extended _____ Re-engaged _____ Qualification (b) Guernsey Packer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 33, 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. 33, or other official documents.
Date	From whom received				
<u>29/3/16</u> <u>9/4/16</u>		<u>Embarked Canada</u> <u>disembarked Enl and</u> <u>Proceeded Overseas for service</u>	<u>Halifax</u> <u>Liverpool</u> <u>60th Bn</u>	<u>29/3/16</u> <u>9/4/16</u> <u>15/6/16</u>	<u>Wm S. Empress of Britain</u> <u>LT. COL.</u> <u>O.C. 75th C.E.F.</u> <u>INFANTRY BATT.</u>
<u>16.6.16.C.B.D.</u>		<u>Arrived in France and taken on</u>	<u>C.B.D. Havre</u>	<u>16.6.16.</u>	<u>Part II Ord. No.14. 21.6.16.</u>
<u>17.6.16. "</u>		<u>strength 3rd C.F.Bn.</u>	<u>In the Field</u>	<u>17.6.16. "</u>	<u>Nom. Roll Rein: 16.6.16.</u>
<u>24.6.16. O.C. Unit</u>		<u>Left Base for Unit</u>	<u>" "</u>	<u>20.6.16. B.23. 24.6.16.</u>	<u>AFB.213. d/4.10.16. Ref. File</u>
<u>4.10.16.18.Gen.</u>		<u>Died of Wounds (GSW Compound fracture of Femur, R)</u>	<u>18.General.</u>	<u>4.10.16.</u>	<u>A.A.G. Can. Sec. 3rd. Ech. GHQ</u>
		<u>1.5.a.m. 4.10.16.</u>			<u>137-1625.</u>
					<u>Part II Ord. 56. 9.10.16.</u>
					<u>Lieut.</u>
					<u>Lieut. Col. A.A.G.</u>

(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				

2nd Pioneer Bn

138211

Drummer G R. Lawson

~~75 Battalion C E F~~

Military Will.

the
In event of my. death, I
give the whole of my.
property, or anything I may
own to My Mother.

Mrs Matilda Lawson

Milltown

Dungannon

Co. Tyrone.

Ireland.

G. R. Lawson

Drummer 75 Batts CEF

June 10th 1916

NOTE:- Taken from Living, 14/3/17.

Extracted from Pay Book, Page 20.

Holograph.

No. 138211 - Drmr. Lawson, G.R. - 75th Battn.

M

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
20m.—11-15.
H. Q. 1772-39-819.

To Whom Mrs. Matilda Lawson
Address Milltown, Dungannon
Lyrone Ireland

By Whom Assigned Lawson G. R.
Regtl. No. 138211
Rank "Pte"
Corps 45th Bn. C.E.F.

Rate \$15-00

APR 1 1916

5

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			"Duplicate sent to England."
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			Stop payment 1 ¹¹ / ₁₆
Feb.				Died of wounds Oct-4/16
March				C.E.F. (33) Oct 6/16 B.N.M.
April				3 M Oct 26/16
May				S. 7 6/10/16
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

Casualties

MARRIED OR SINGLE ☒PLACE OF BIRTH *Dungannon, Co. Tyrone, Ireland*NAME AND ADDRESS OF NEXT OF KIN *W. John Lawson**Dungannon, Co. Tyrone, Ire.*RELATIONSHIP OF NEXT OF KIN *Father*

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
<i>Deid of wounds</i>	<i>4-10-16</i>	<i>BO 56 Oct 9/16</i>

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. NO. *138211* RANK*Pte.*NAME *Lawson, George Robert*IF IN PERM. CORPS
WHAT UNITUNIT *75th Bn*TRANSFERRED TO *3rd Bn Pwr*DATE *10.6.16*AUTHORITY *BO 138*

PERMANENT FORCE ALLOWANCES

TRANSFERRED TO *N.E. Br.*DATE *9-11-16*AUTHORITY *BO 56 Oct 9/16*PLACE OF ATTESTATION *Toronto*

TRANSFERRED TO

DATE

AUTHORITY

DATE OF ATTESTATION *7 Sept 1915*

TRANSFERRED TO

DATE

AUTHORITY

ASSIGNED PAY MONTHLY \$ *15.*

DATE EFFECTIVE

PAYABLE TO *Matilda Lawson, Dungannon, Tyrone, Ireland.*

RELATIONSHIP

ASSIGNED PAY MONTHLY \$

DATE EFFECTIVE

PAYABLE TO

RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) *23-10-16* EFFECTIVE *1-11-16* REASON *Deid of wounds Recd in Action 4-10-16 BO 56 Oct 9/16.*

DISCHARGE DATE AND PLACE

REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *Deid of wounds 4-10-16 BO 56 Oct 9/16*

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
JUN 8 1917
Account rendered

[illegible]

15381

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.
20m.—11-15.
H. Q. 1772-39-819.

Duplicate

Stop!
Mrs. Matilda Lawson
To Whom
Address Milltown,
Sungannon, Tyrone
Ireland

By Whom Assigned Lawson G. R.
Regtl. No. 138211
Rank "Pte"
Corps 75th Batten. C. E. F.

Rate 8 15⁰⁰
new Rodley

APR 1 1916

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<div data-bbox="1596 711 1995 972"> RECEIVED FROM MAY 1 1916 OTTAWA </div>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

ASSIGNED PAY.

By whom assigned

Lawson G R.

Regtl. No.

138211

Pte.

75th Batt C.E.F.

Month	Year	Cheque No.	Amt.	Pay Sheet	REMARKS.
Jan.	1916				
Feb.					
March					
Apl.		23913	15		
May.		40011	15		
June		66806	15		
July		101296	15		
Aug.		135298	15		
Sept.		169872	15		
Oct		216492	15		
Nov.					
Dec.			\$105		
Jan.	1917				
Feb.					
March					
Apl.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					



Payment Stopped
A.3M Form.

Pay October
26.10.16 24h.
D of Wds.