

TRIPPLICATE

Regtl. 3810546

# PARTICULARS OF RECRUIT

## DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class **1**)

1. Surname..... **Lyseng** ✓

2. Christian name..... **Ludwig Arthur** ✓

3. Present address..... **Camrose, Alta.** ✓

4. Military Service Act letter and number..... **366170 MC** ✓

5. Date of birth..... **Feb 22 1897** ✓

6. Place of birth..... **Clinton Minnesota U.S.A.** ✓  
(town, township or county and country)

7. Married, widower or single..... **Single** ✓

8. Religion..... **Lutheran** ✓

9. Trade or calling..... **Farmer** ✓

10. Name of next-of-kin..... **Mr. Albert Lyseng** ✓

11. Relationship of next-of-kin..... **Father** ✓

12. Address of next-of-kin..... **Camrose Alta. Genl Del** ✓

13. Whether at present a member of the Active Militia..... **no** ✓

14. Particulars of previous military or naval service, if any..... **no** ✓

15. Medical Examination under Military Service Act:—  
(a) Place **Calgary Alta** ✓ (b) Date **15-5-18** ✓ (c) Category **B-2** ✓

### DECLARATION OF RECRUIT

I, **Ludwig Arthur Lyseng** ✓, do solemnly declare that the above particulars refer to me, and are true.

*Ludwig Arthur Lyseng* (Signature of Recruit)

### DESCRIPTION ON CALLING UP

Apparent age..... **21** yrs..... **3** mths. } Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Height..... **5** ft..... **8** ins. } *Stone*

Chest measurement } fully expanded..... **36** ins. }  
range of expansion..... **4** ins. }

Complexion..... *Red Blue Fair*

Eyes.....

Hair.....

*Panman*  
O. C. **Commanding 1st Depot Batt'n, Alta Regt 1** Depot Btln.

Place **Calgary Alta** Date **15-5-18**

# PARTICULARS OF RECRUIT DRAFTED UNDER MILITARY SERVICE ACT, 1917

Class

1. Surname	
2. Christian name	
3. Present address	
4. Military service, for letter and number	
5. Date of birth	
6. Place of birth	
7. Married, widower or single	
8. Religion	
9. Trade or calling	
10. Name of next of kin	
11. Relationship of next of kin	
12. Address of next of kin	
13. Whether or not in the Active Militia	
14. Particulars of previous military or naval service, if any	
15. Medical examination under Military Service Act	
16. Place and date of birth	

## DECLARATION OF RECRUIT

I, the undersigned, do solemnly declare that the above particulars are true and correct.

(Signature of Recruit)

## DESCRIPTION ON CALLING UP

Apparent age	
Height	
Complexion	
Build	
Complexion	
Complexion	
Complexion	
Complexion	
Complexion	
Complexion	

Date

Place

Regt. No.

Depot Bde.

REGIMENTAL DOCUMENTS

*Ham*  
12-4-19

*pte*  
**S**

NAME Lyseng Ludwig Arthur REGT. NO. 3210546 UNIT 1/alt. Regt. H. Q. FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
3 2 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
1 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category <i>hemob.</i>
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
1 LAST PAY CERTIFICATE (M.F.W. 44)				36224	
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>m. f. w. 160</i>					

**H**



Surname

Lyseng

Christian names

Ludwig Arthur

Regtl. No.

3210546

Rank

Pte

Unit

Alta. Regt. 1st Dpo Bn

H. Q.

M ✓

M. D. No.

13

T. O. S.

May 15<sup>th</sup> 1918

D. O. Pt. II

1036 of 16-5-18

S. O. S.

15-9-1918

Reason

R to R

Auth

D.O. 227 of Aug 15-18 / O.R. M.D. 13

Next of kin

Lyseng, Albert

Relationship

Father

Address

Geny Del.  
Camrose, Alta.

Also notify:

BORN—Place

U.S.A. Clinton Minn.

Date

Feb 22<sup>nd</sup> 1897

ATTESTED—Place

Calgary, Alta.

Date

May 15<sup>th</sup> 1918

O/S

R/C

1

•

100

100

100

100

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

M. F. W. 54. (A. F. B. 103.)

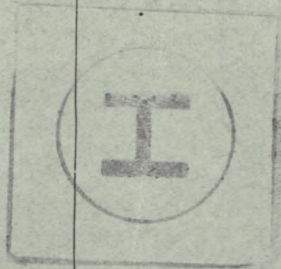
350M.—5-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps *1st Depot Bn. Alta. Regt.*  
 Regimental No. *3210546* Rank *Pvt.* Name *Lupeng, Ludwig Arthur*  
C. E. F.  
 Enlisted (a) *15. 5. 18* Terms of Service (a) *DoF W* Service reckons from (a) *15. 5. 18*  
 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				
<i>15. 8. 18</i>	<i>1/a. R.</i>	<i>Granted C. L. of A. from 15. 8. 18 to 15. 9. 18 and S. O. S. on return to R. of R w/e</i>	<i>Lancee Camp.</i>	<i>15. 9. 18</i>	<i>DD# 227</i> 

*Chas. S. ...*  
*for DoF R.*

(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				



# CANADIAN CONTINGENT EXPEDITIONARY FORCE

## LAST PAY CERTIFICATE

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

Regimental No. 3210546 Rank Private Name Lyseng, L.A.  
 Corps 1st DEPOT BATT'N, ALBERTA REGIMENT who was Struck off Strength  
 On 31.5.18 191... to ..... 191...  
 \*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from May 15 1918  
 to May 31 1918, the inclusive date of ~~transfer~~ or discharge.

Dr.	\$	c.	Cr.	\$	c.
Sal. Dr. from prev. month.....			Balance Cr. from prev. month.....		
Advances } No. ....			Reg'l. Pay... <u>17</u> .....days at <u>1.00</u> c.....	<u>17</u>	<u>00</u>
by } Cheques } No. ....			Field Allow... <u>17</u> .....days at <u>\$.10</u> c.....	<u>1</u>	<u>70</u>
Leave <u>16.5.18 to 30.5.18</u>	<u>16</u>	<u>50</u>	Separation Allowance* (Monthly).....		
Assigned Pay and Sep'n Allee. No.....			Other Allowances*.....		
Other charges.....			Other Credits*.....		
Payment on <del>transfer</del> or discharge No <u>5466</u>	<u>2</u>	<u>20</u>	Bal. Dr. (to be deducted by new unit).....		
(Nov, chg)					
Sal. Cr. (to be paid by the new unit).....			Total.....	<u>18</u>	<u>70</u>
Total.....	<u>18</u>	<u>70</u>			

\*Give particulars.

A monthly stoppage of \$ Nil (†) has ..... (‡) been paid on account of Assigned  
 { Pay for the month of ..... 191... }  
 { and Sep'n Allee. for month of ..... 191... } (to) Assignee.....  
 (Address) .....

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

### On Transfer of an Officer.

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

**REMARKS:—**

State (1) date of enlistment.....15.5.18.....  
 (2) if married and if a Separation Allowance Card has been submitted.....No.....No.....  
 (3) cause of discharge C.L.A. until..... authority D.O. 151 S......  
 (4) authority for transfer B.2. called.....

NOTE.—Separation Allowance and Assigned Pay Card and Index Card (M.F.W. 71) are to accompany the original Last Pay Certificate on transfer.

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

Date .....  
 Place Galgary Al. MAY 21 1918

*W. Woodcock*  
 Paymaster First Depot Battalion, Alber Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit, duplicate to District Paymaster, triplicate to accompany the pay list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triuplicate, with his discharge documents.

M. F. W. 44

H.Q. 1772-39-993.  
 100M-9-18, D.P. 274.

RB.

# CANADIAN CONTINGENT EXPEDITIONARY FORCE

## LAST PAY CERTIFICATE

This form is to be used for all ranks (with the exception of the ranks of Major, Captain, Major-General, Colonel, and Lieutenant-Colonel) and is to be filled in by the commanding officer of the unit to which the soldier belongs.

PART I - PAY AND ALLOWANCES		PART II - DEDUCTIONS	
Description	Amount	Description	Amount
Basic Pay	11.00	Income Tax	1.00
Gratuity	1.00	Other Deductions	0.00
Other Pay	0.00	Total	1.00
Total	12.00		

The following is a statement of the amount of the above named form as at the date of the last pay certificate.

Total amount of pay and allowances: 12.00

Total amount of deductions: 1.00

Net amount payable: 11.00

On transfer of an Officer

Outstanding pay of the Officer is 11.00

The amount of pay and allowances is 12.00

The amount of deductions is 1.00

Net amount payable is 11.00

Date: 1st May 1918

Place: Calgary

Signature: [Signature]

Rank: Major

Unit: [Unit Name]

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

L

ORIGINAL

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that a copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

- 1. Surname Lyseng Christian name Ludwig A.
- 2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule. } 366170-me
- 3. Consecutive number on schedule of men reporting for service (if he appears on it) }
- 4. Address (including street and number, if any) } Camrose, Alta.,

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 15th day of May 1918 ~~1917~~ by the undersigned medical board sitting at CALGARY

- 5. Age as stated 21 Years 3 Months. 6. Apparent age 21 Years - Months
- 7. Height 5 Feet 8 Inches. 8. Weight 132 Pounds.
- 9. Chest measurement { Minimum 32 Ins. Maximum 36 Ins. 10. Complexion Medium { Eyes Blue Hair Fair
- 11. Physical development. Good { Good Fair Poor 12. Smallpox marks None
- 13. Number of vaccination marks { Right arm X Left arm 1 14. When vaccinated last Childhood.
- 15. Distinctive marks and marks indicating congenital peculiarities or previous disease None

16. Slight defects but not sufficient to cause rejection Injury to Rt. Hand Flexed. fingers  
The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis  
(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category

B

Vision R.D. L.D. RT. LFT. Hearing Normal

D. DuClare Member. Wolles Member

Signature of Man Ludwig A. Lyseng

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
		<u>Captain C.A.M.C.</u> M.O.			<u>Captain C.A.M.C.</u> M.O.
		M.O.			<u>Captain C.A.M.C.</u> M.O.
		M.O.			<u>Captain C.A.M.C.</u> M.O.

Joined MAY 15 1918 day of MAY 15 1918 191 at CALGARY, ALTA.

CORPS	REG'TL NUMBER	HABITS	DATE
<u>1st DEPOT BATT. ALBERTA REG'T.</u>	<u>3210346</u>		<u>MAY 15 1918</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

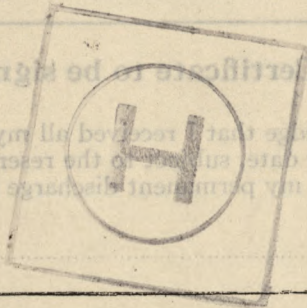
STATION	DATE	DISEASE	RESULT

N. B.—This sheet is 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.



# Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No. 3210546	
Rank Pte.	
Surname Lyseng.	
Christian name Ludwig Arthur. <small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company) 1st Depot Battn. A.R.	
Date of discharge <del>30th of June, 1918.</del> 15.9.18.	
Place of discharge Calgary, Alta.	
<b>1. DESCRIPTION AT THE TIME OF DISCHARGE.</b>	
<p>Age.....21.....years.....3.....months.          Height.....5.....feet.....7.....inches.          Complexion Ruddy,          Eyes Blue          Hair Brown.          Trade Farmer.          Intended place of residence   Camrose, Alta.  <small>(To be given as fully as practicable.)</small></p>	<p>Descriptive marks</p> 
<p>2. The above-named man is discharged in consequence of <del>Derobilization</del>, struck off the strength and returned to records of Registrar. <del>30-6-18. D. O. 30x3x18x 101-01-30-18.</del></p> <p style="text-align: center;">Authority for discharge P.C. 3051, off 11-12-18.....</p> <p><small>N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.</small></p>	
<p>3. Conduct and character while in the service have been, according to the records, etc.</p> <p style="text-align: center;"><small>N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.</small></p>	
<p>4. Special qualifications for employment in civil life. (Vide para. 332, K. R. &amp; O., Canada.)</p> <p style="text-align: center;">Farmer.</p>	
<p style="font-size: small; transform: rotate(-90deg); position: absolute; left: -100px; top: 50px;">To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.</p>	
<p>M. F. B. 218.  <small>200M.—5-18.          H. Q. 1772-39-113.</small></p> <p style="text-align: right;">(OVER)</p>	

5. He is in possession of the following number of G. C. Badges

Proceedings on Discharge

When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth

Nil.

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

Nil.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, (Squadron or Battery, and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(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 on 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 toward Engagement to.... (the date to which the Record of Service is completed).....years.....days.

Total.....years.....days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place) Calgary, Alta......

(Signature).....

*W. J. Sam'ls*  
Capt

(Date) 14-1-19.....

M.S.A. D.O.

**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.**

Reg. Conduct Sheet	Minutia form B. 303	Attestation Paper	Minutia form W. 28
Station Battery Company	Conduct Sheet	B. 254	Particulars of Record
			W. 174
Field Conduct Sheet	W. 178	B. 218	Proceedings on Discharge
			W. 178
Copies of Convictions by C. P.		in MS	
Check Item Sheet		Minutia form B. 313	
Casualty Form		W. 24	
Medical Report for Invalid		B. 237	
Dental History Sheet		B. 402	
Last Pay Certificate		W. 44	
Duplicate Discharge Certificate		W. 304	
Form of Will		W. 82	

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable:

(Enter Commanding Officer's Name and Rank)

.....

.....

N.B.—In the case of a man discharged by purchase the date and number of deposit receipt with amount of sale is to be noted hereon.

## List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron }          Battery } Conduct Sheet, " B. 263a          Company }</p> <p style="text-align: center;">or</p> <p>Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, <i>✓</i> Militia form B. 313</p> <p>Casualty Form <i>✓</i> " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate <i>✓</i> " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will <i>X</i> " W. 82</p> <p>§Only if discharged "Medically unfit."</p> <p>‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23</p> <p style="text-align: center;">or</p> <p>Particulars of Recruit <i>2 ✓</i> " W. 133</p> <p>Proceedings on Discharge <i>2 ✓</i> " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="text-align: center;">(a) Proceedings on Discharge.</p> <p style="text-align: center;">(b) Attestation.</p> <p style="text-align: center;">(c) Medical History Sheet.</p>
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Documents not accompanying this form should be crossed out.

*I hereby certify that the following documents are unobtainable.*

*Officer Commanding.*

C.L. of A. Certificate *✓* . . . . . M.F.W. 160.

Training History Sheet . . . . . M.F.W. 113.

*N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.*