

**Jackson, Henry (Charles Edward)**

Born Mar 21 1893 in Coboconk. Anglican

Served WW1 Lieutenant. Served 24<sup>th</sup> Btnn Militia

S/o James E. bn Mar 1866 & Susannah  
bn Oct 1868. 1911 Bexley (Coboconk)  
census p2

Grandmother Sarah Pattie bn June 1846

Henry March 1894

Etta I Jan 1898

in 1901, mother was listed as Susie and  
the family was living with grandmother  
Sarah A Pattie bn June 11 1846

*Original*

UNIT ..... NAME ..... NAME .....

OFFICERS' DECLARATION PAPER  
CANADIAN OVERSEAS EXPEDITIONARY FORCE  
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QUESTIONS TO BE ANSWERED BY OFFICERS.

1. (a) What is your Surname? *Jackson* .....
- (b) What are your Christian Names? *Charles Edward Henry* .....
2. (a) Where were you born? (State place & country) *Coboconk, Ont., Canada*
- (b) What is your present address? *Coboconk, Ont.* .....
3. What is the date of your birth? *March 21st, 1893* .....
4. What is (a) the name of your next-of-kin? *J.E. Jackson* .....
- (b) the address of your next-of-kin? *Coboconk, Ont.* .....
- (c) the relationship of your next-of-kin? *Son* .....
5. What is your profession or occupation? *Farmer & Millwright* .....
6. What is your religion? *Anglican* .....
7. Are you willing to be vaccinated or re-vaccinated and inoculated? *Yes*
8. To what Unit of the Active Militia do you belong? *24th Btn* .....
9. State particulars of any former Military Service. *NIL* .....
10. Are you willing to serve in the  
CANADIAN OVERSEAS EXPEDITIONARY FORCE? *Yes* .....

The undersigned hereby declares that the above answers made by him to the above questions, are true.

*C. E. Jackson*  
Signature of Officer

Taken on strength (place) .. *Baton Rouge, La.*

(date) .. *Aug 24, 1918* .....

*Samuel August Myers*  
(Signature of Commanding Officer)

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CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above named Officer in accordance with the Regulations for Army Medical Services.

I consider him *fit* .....

Date *8.9.18* .....

Place *W. Alley Camp*

\*Insert here 'fit' or 'unfit' ..\*

*C. E. Myers*  
Medical Officer