

1289
TRADE RECORD, CARLISLE.

PUPIL *Alfred Lamont*

TRADE *Telegraphy*

ABILITY *poor*

CONDUCT *Excellent*

REMARKS *has been out great deal
account eyes*

INSTRUCTOR *Wm H Miller*

1209
Alfred Lamont, of Michigan, and Margaret Mantell, of Oklahoma, students of this school, were married in St. Patrick's Church in Carlisle on June 10, by the Rev. Mark E. Stock. The bride was beautifully gowned in crepe de chine with white veil and wreath, and carried a bouquet of white roses. Margaret Culbertson, of Montana, the bridesmaid, wore a dress of white mull and carried pink carnations. Louis Schweigman, of South Dakota, was groomsman, and the ushers were Francis Bacon, Joseph Guyon, Louis Palin, and Henry Broker. The "Bridal Chorus" from Lohengrin and Mendelssohn's "Wedding March" were played by Mary Pleets at the organ and Fred Cardin with the violin. After the ceremony, High Mass was celebrated. Dr. Ganss' "Second Mass in D" was sung by the church choir. Miss Sweeney, one of our teachers, sang Millard's "Ave Maria" at the offertory. After the wedding, breakfast was served at St. Katharine's Hall for the bridal party, and in the afternoon a reception was given at the home of Mr. and Mrs. Friedman. The newly wedded pair later departed for the home of the bride in Oklahoma.

1913

Name Lamonte, Alfred

1209

Age

Deg. Ind. blood

Address Ontonagon, Mich.

Information from

Date Jan 1914 191

State

Agency

Tribe

POSITIONS FOR WHICH LISTED. SUITABILITY IN ORDER NAMED.

1. Baker.

2.

3.

4.

Remarks: Nothing recent.

NAME.

alfred Lamont

TRIBE.

Chippewa

PARENT OR GUARDIAN.

Peter Lamont

DATE ENROLLED.

Oct. 27, 1910

TERM.

Three years

AGE.

20

HOME ADDRESS

Ontonagon, Mich.

DATE OF RECORD

ACADEMIC DEPARTMENT.

INDUSTRIAL DEPARTMENT.

DORMITORY.

OUTING

SPECIAL REMARKS.

ROOM
NO.

Scholarship

Conduct.

Shop.

Ability.

Conduct.

Room
No.

Neatness

Conduct.

Ability.

Conduct

Jan. 11
July '11
Dec. '11

11

M.

Ex

Jelg.

Porr

24

V. G.

V. G.

V. G.

V. G.

V. G.

10

Good

Ex.

11

Good

Ex.

Jelg.

Porr

24

V. G.

V. G.

V. G.

V. G.

V. G.

Carlisle Indian School Hospital.

Name

Albert Lamont.

Age *24*

Sec. *M.*

Diagnosis

Admitted

Discharged

Apr. 17, 1911

Days in Infirmary

Result

Resident Physician.

DIET.

Full.

TREATMENT.

Date

Hr.

P.

R.

T.

apr. 19.

4⁰⁰

88

98

apr 20

7⁰⁰

98

11 11

4⁰⁰

82

98

11 21

7⁰⁰

72

98

PUPIL'S HEALTH REPORT.

This blank is issued so that the school authorities may keep in touch with the health of the pupil. The patron is requested to fill this blank out on the first of MAY, JULY, SEPTEMBER, NOVEMBER, JANUARY, and MARCH, and send it to the school with the outing report for the month.

Patron's name and address *H H Brown High Street Pa*

Pupil's name *Alfred Lamont*

General health of the pupil.....

Has pupil been ill the past two months? *Twice*

Name of disease *No disease only weakness.*

Name and address of the physician in attendance *J. R. Wolfe M.D.
Esq. Pa*

Does the pupil have a cough? *No*

For how long has he had it? *—*

Give the pupil's weight *130 lbs*

Has the pupil any trouble with the eyes? *No*

Are the eyelids inflamed? *No*

Remarks: *Alfred's health is apparently all right. Only the Dr says he is only weak and he has acc^d medicine three times from the Dr. which I have paid for just the same as for any of the rest of the family.*

NO.

United States Indian School Hospital,

Carlisle, Pennsylvania.

YEAR 1913.

TRIBE

FULL. ONE

NAME Alfred Lamont,

AGE

DIAGNOSIS Measles.

ADMITTED March 20.

DISCHARGED Apr 13-

RESULT Good

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

A. R. Allen

H. B. Francis.

REMARKS:

DIAGNOSIS

Notes of Case

Age 1 S.M.W.

Nativity.....

Occupation_____

Residence.....

Date of admission Mar. 20 - 1913

Diet 7²⁰ am.

Treatment

Result

[illegible]

Copyright, 1885, by James C. Wilson, M.D.

Published by J. B. Lippincott Company, Philadelphia, Pa.

Rosie Heaney

April 6.

Patient Albert Lambert Carlisle, Pa. Mar 31 191 0 Physician _____
 Address _____ Nurse Kris Heaney

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
4	98	60	18				Full		
5	97 ³	60	18						
April 1									
7	97	60	18				"		
8	97 ²	60	18						
April 2									
7	97	60	18				"		
8	97	60	18						
April 3									
4	97	60	18				"		
5	97	60	18						
April 4									
4	97 ²	60	18				"		
5	97 ²	60	18						

Patient Alfred LaMontCarlisle, Pa. Mar 25

191

Physician

Address

Nurse Rosie Heaney

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7	98	72	18				Full.		
5	98	60	18						
					Mar 26				
7	98	60	18				"		
5	98	60	18						
					Mar 27				
7	97 ³	60	18				"		
5	97 ³	60	18						
					Mar 28				
7	97 ³	60	18				"		
5	97 ³	60	18						
					Mar 29				
7	97 ²	66	18						
5	98	60	18						
					Mar 30				
7	98	60	18						
5	97	60	18						

Patient Alfred La Monte Carlisle, Pa. Mar 20 1913 Physician _____
 Address _____ Nurse Rene Heaney.

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
7 th	99 ²	86	18				Full diet		
5 th	98	50	18						
				8	Mag Sulph				
					Mar 21.				
7	98	72	18				Full diet		
5 th	98	72	18						
					Mar 22				
7	98	73	18				Full		
5 th	98	72	18						
					Mar 23				
7	98	71	18				Full		
5 th	98	72	18						
					Mar 24				
7	98	72	18				Full		
5 th	98	72	18						

NO.

United States Indian School Hospital,

Carlisle, Pennsylvania.

YEAR 1913,

TRIBE

FULL ONE

NAME Alfred Gammert,

AGE

DIAGNOSIS

Tonsillitis

ADMITTED

Jan 14

DISCHARGED

Jan 17

RESULT

Good

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

A. R. Allen

H. B. Frahm

REMARKS:

March 16th, 1915.

Mr. Alfred Lamont,
Pawhuska, Oklahoma.

My dear Sir:

I must again call your attention to an amount of \$1.11 which is yet due on the ticket that was furnished you when you left here with your bride in June of 1913. I am anxious to have the indebtedness cancelled and I would thank you to let me hear from you without delay.

On September the 7th of 1914 a letter as follows was addressed to you:

"The Cumberland Valley Railroad Company has notified me that a total amount of \$7.11 should have been paid by you when you left here in June of 1913 to cover the difference in the cost of transportation from Carlisle to your former home at Ontonagon, Michigan, and from Carlisle to Pawhuska, Oklahoma.

It seems that \$6.00 is the amount that has been received by the Company and that an amount of \$1.11 is yet due.

Will you kindly co-operate with me in adjusting the matter by sending without delay the \$1.11 required to cover the balance due?"

Very truly yours,

HKM.

Supervisor in Charge.

(Copy to Superintendent Wright)

DIAGNOSIS

Notes of Case

Age _____ S.M.W.

Nativity.....

Occupation_____

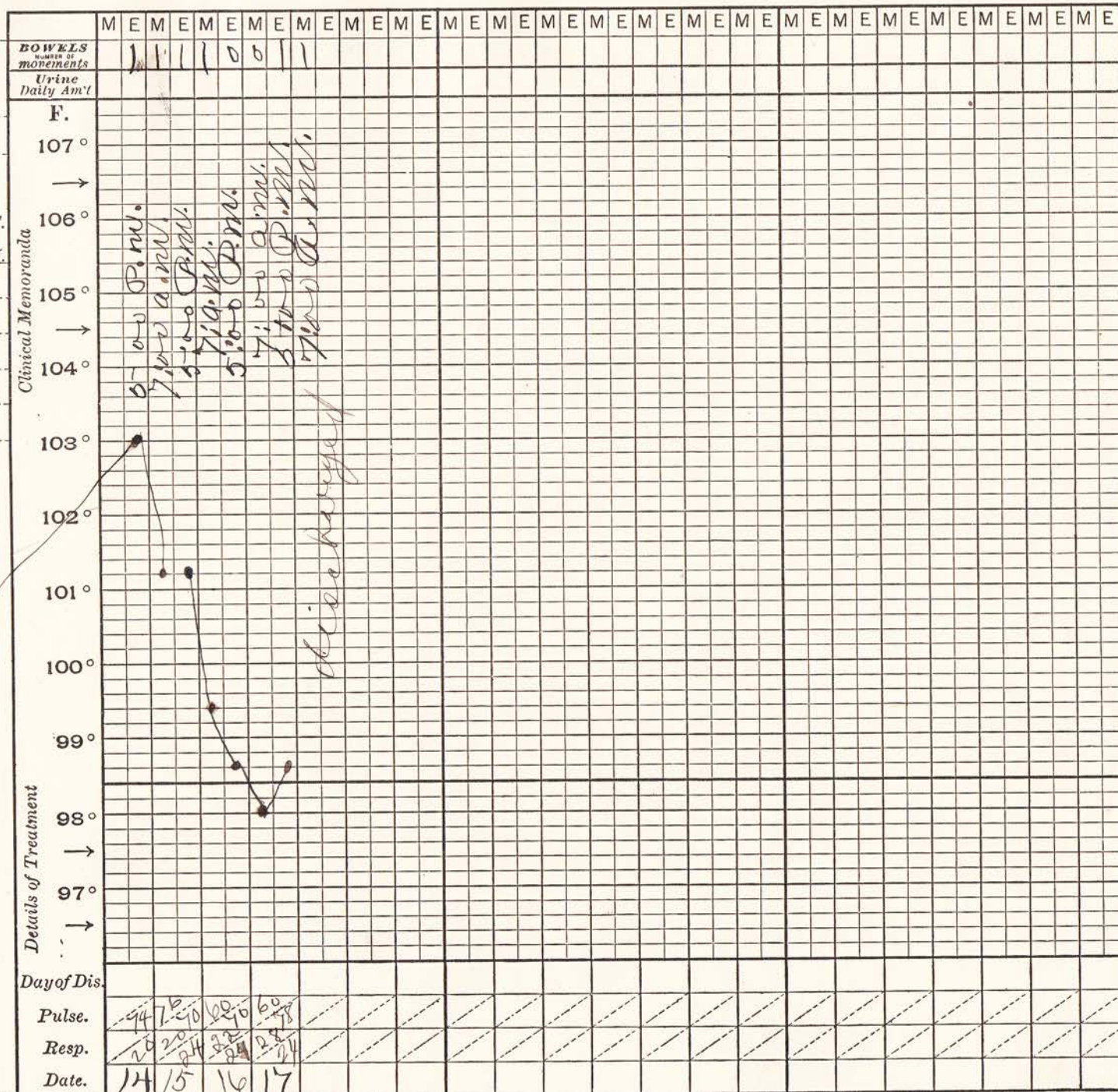
Residence.....

Date of admission Jan. 14-13

Diet 4:00 P.M.

Treatment

Result



Copyright, 1885, by James C. Wilson, M.D.

Published by J. B. Lippincott Company, Philadelphia, Pa.

Patient Alfred LaMont Carlisle, Pa., Jan. 17 - 1913 Physician Allen and Fralick
Address _____ Nurse Edith Emery

Address _____ Nurse Odith Lerner

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
					Jan. 17, 13.				
				3:30	Throat Swab				
				4:00	Phena & Salol				
				5:00	Cough mix				
				5:30	Throat Swab				
				6:00	Salol & Phen				
				7:00	Cough mix				
				7:30	Throat Swab				
				8:00	Phena & Salol				

Patient Alfred Lamour Carlisle, Pa., Jan. 16 1913 Physician Allen + Foulis
Address _____ Nurse Edith Emery

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
Jan. 16-'13									
7 A.M.	99.2	60	22	8'0	Salol & Phenol 10 ^{grs}		milk		
5 P.M.	98.3	70	24	10'0	" "				
				12'0	" "				
				1'30	Throat Swab				
				2'00	Phena & Salol				
				3'30	Throat Swab				
				4'00	Phena & Salol				
				5'30	Throat Swab				
				6'00	Phena & Salol				
				7'30	Throat Swab				
				8'00	Phena & Salol				
Jan. 17-'13									
7 A.M.	98	60	28	8'10	Salol & Phenol 10 ^{grs}		milk		
5 P.M.	98.3	78	24	9'10	cough mix				
				9'30	Swab				
				10'10	Salol & Phenol				
				11'00	cough mix				
				11'30	Throat Swab				
				12'10	Salol & Phenol				
				1'00	Cough mix				
				1'30	Throat Swab				
				2'00	Phena & Salol				
				3'00	Cough mix				

Patient Alfred Lamour Carlisle, Pa., Jan 14 1913 Physician Allen + Fralich
 Address _____ Nurse Edith Emery

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
Jan. 14-13									
5 P.m.	103	74	20	8:10	Salol + Phen				
				8:30	Throat Loz. + cw		milk		
Jan. 15-13									
7 a.m.	101.1	70	20	8	Salol + Phen				
5 P.m.	101.1	70	24	9					
				9:30	Throat Loz.				
				10.	Salol + Phen				
				11					
				11:30	Throat Loz.				
				12	Salol + Phen				
				1					
				1:30	Throat Loz.				
				2	Salol + Phen				
				3:30	Throat Loz.				
				4	Salol + Phen				
				5					
				5:30	" "				
				6					
				7					
				7:30					
				8					

NO.

United States Indian School Hospital,

Carlisle, Pennsylvania.

YEAR 1912.

TRIBE

FULL. ONE

NAME Alfred La mont.

AGE

DIAGNOSIS Acute Enteritis (Dysentery)

ADMITTED June 26

DISCHARGED June 29

RESULT Good

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

A. R. Allen

H. B. Foulie

REMARKS:

DIAGNOSIS
Acute Endocarditis

Notes of Case

Name Alfred Larnont M.F.

Age _____ S.M.W.

Nativity.....

Occupation.....

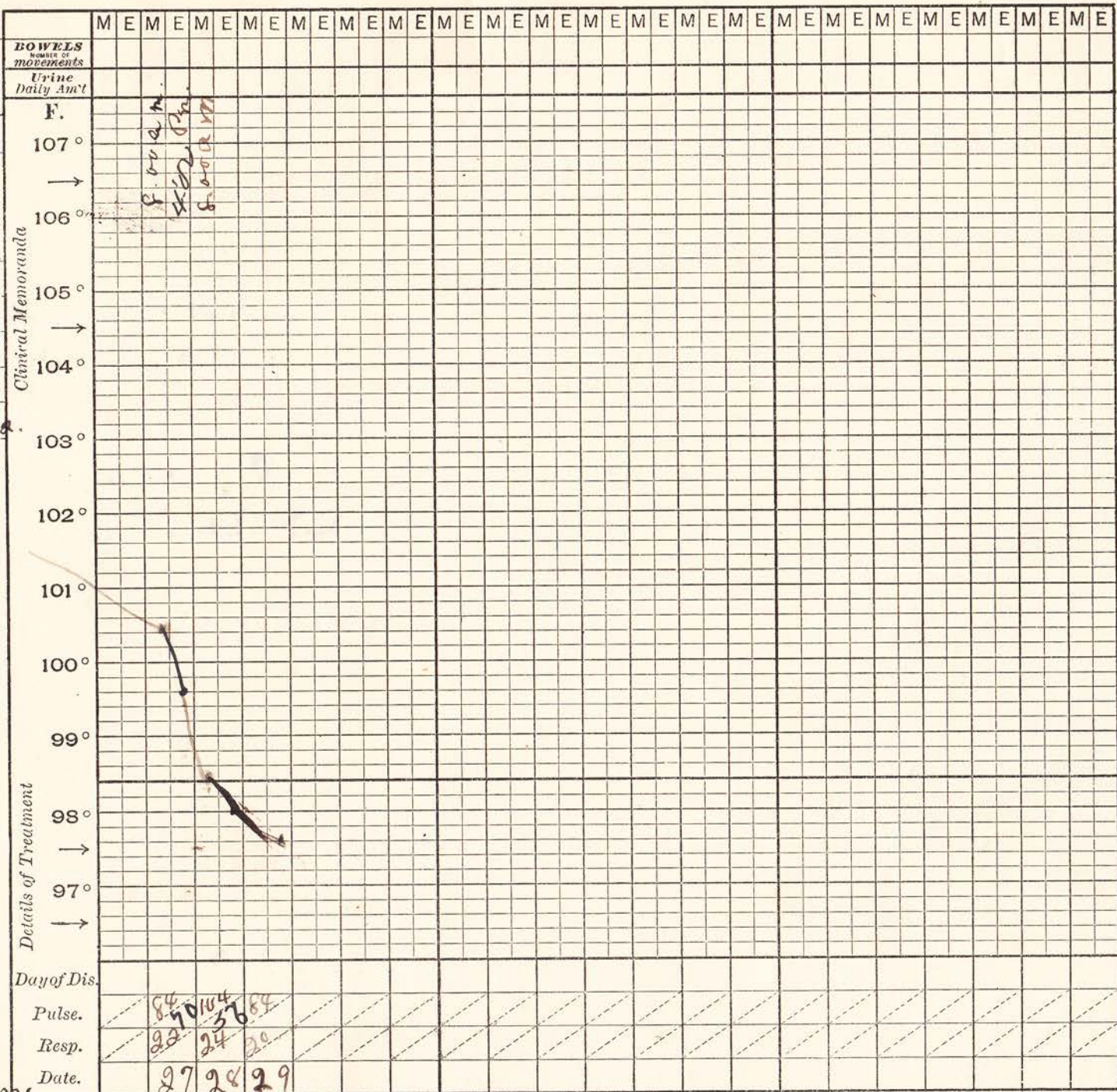
Residence.....

Date of admission June 26, 1911

Diet
milk -

Treatment
Dianthaea tub.
of 2 lbs.
castor oil 3 1/2 stat.

Result



Patient Alfred Lamont Carlisle, Pa., 191 Physician _____
 Address Carlisle Nurse Agnes Bartholmew

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
4:00	98	56	24	2:00	Phena & Salol				
				4:00	" "				
				6:00	Phena & Salol				
				4:00	Dia Tab				
				4:30	" "				
				5:00	" "				
				6:00	Dia Tab.				
					June 28.				
8:00	97 3/5	84	20.8	8:00	Phena & Salol				

Patient Alfred La. Mont. Carlisle, Pa.,
 Address _____

June 27 1912

Physician _____
 Nurse Rigues Bartholomae

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
					<u>June 27.</u>				<u>June 27.</u>
8:00	1002	84	22	8:00	Phen + Salol			6:30	Does not eat.
	5			9:00	Lia Tab.				
				10:00	" "				
				11:00	" "				
				12:00	" "				
				1:00	Lia Tab.				
				2:00	Phen + Salol.				
4:00	99 ³	70		4:00	Lia Tab.				
					Phen + Salol.				
				6:00	Phen + Salol.				
				8:00	" " + "				
					<u>June 28.</u>	10.	milk		
8:00	982	104	24	8:00	Phen + Salol				
	5			8:30	Lia Tab.				
				9:30	" "				
				10:30	" "				
4:00	78	51		11:30	" "				
				12:00	Phen + Salol				

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

Mich. 835
Tribe Chippewa

Name of Student *Alfred Lamont*

Home Address *Peter La Mont - Ontonagon*

Age at Entrance *20* Date of Entrance *10-27-'10* Shop

JAN FEB MAR APR MAY JUNE JULY AUG SEPT OCT NOV DEC
July Aug Sept Oct Nov Dec Jan Feb Mar Apr May June

Patron *H. F. J. Brown* Locality

Days in School

Address *Light Street, Pa.* R. R. Station

Conduct

Recommended by Grade in School

Ability

Grade of Home Church

Health

Date of Outing *5-26-'11* Date Returned *9-18-'11* Wages

Earnings

v.g. 14
" 14
" 14
270 14.

14 14
14 14
14 14
14 14

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

[illegible]

Alfred La Mont

PRESENT NAME

1209
Name

Jan 17, 1914
Alfred LaMont

(Please give name by which enrolled and also present or married name.)

Tribe

Chippewa

Present Address

Pawhuska Okla

Former Address

Pawhuska Okla
(Address from which we heard from you last.)

Present Occupation

Unoccupied at present

Remarks:

*By F. J. Jones M. D. Mr LaMont has
been under my care for some time. He has
been having some glandular trouble*

1-567 a

Department of the Interior.

Mr. M. Friedman

Supt. U. S. Indian School

Carlisle

Pennsylvania



1209

835

5-192

BRIEF.

APPLICATION OF

FOR THE ENROLLMENT OF

Alfred Lamont

IN THE INDIAN SCHOOL AT

POST OFFICE ADDRESS OF APPLICANT:

Date of enrollment, _____, 190

Term of enrollment, _____ (_____) years.

NAME OF COLLECTING AGENT:

Position, _____

6-871



APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL.

(For a child not enrolled at an Agency.)

For and in consideration of the United States assuming the care, education, and maintenance in the United States Indian School at Carlisle, Pa, of Alfred LaMont, male, I, (Name of child.) (Sex.) (Parent, guardian, or next of kin.) of Carlisle P. O., State of Mich., do hereby voluntarily consent and agree to my enrollment in said school for a period of 3 years, and also obligate and bind myself to abide by all the rules and regulations for Indian schools. (Not less than 3.)

I further say that the said child was born at Baraga Mich. on Apr. 5-1890; (Date.) that the father, Peter LaMont, is a French Indian of the (Name of father.) (Is or was.) (Degree.) Tribe located at Tondus Mich. agency; that he left the tribe about 1884; (Approximate date.) that the mother, Christine Gachotte, is a 1/2 Indian of the Chippewa (Name.) (Is or was.) (Degree.) Tribe located at Tondus Mich. Agency, and left the tribe about 1884; (Approximate date.) that the said child was born and reared in the United States, and now actually resides therein; and that he has attended the following schools:

NAME OF SCHOOL—PUBLIC, GOVERNMENT, OR MISSION.	LOCATED AT—	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE OF DISCHARGE.	GRADE.
<u>Public</u>	<u>Baraga Mich.</u>	<u>1896</u>	<u>1900</u>	<u>Term out</u>	<u>4th</u>
<u>Govt</u>	<u>Hasbuhl Kan.</u>	<u>1905</u>	<u>1908</u>	<u>Rich</u>	<u>5th</u>
<u>Jonah W Govt.</u>	<u>Jonah Mich.</u>	<u>1908</u>	<u>1910</u>		<u>8th</u>

This 24th day of Oct., 1900

Two witnesses:

Louis Carpenter

Alfred LaMont
(Parent, guardian, or next of kin.)

Oliver Carpenter

P. O.,

(NOTE.—Every blank in this application must be properly filled out by the applicant, in his own handwriting, if possible. The signature, whether by mark or otherwise, must be attested by two witnesses.)

AFFIDAVIT.

I, Alfred LaMont, do hereby swear that the statements made in the above application are true.

Alfred LaMont
(Signature of applicant.) (Parent, guardian, or next of kin.)

Sworn to and subscribed before me this _____ day of _____, 190

(NOTE.—This application and affidavit must be executed before some officer authorized to administer oaths by the parent with whom the child is living; if the parents are dead, by the guardian or next of kin.)

Louis Carpenter Notary Public
Philmore Co. Minn.
My Commission expires June 22-1906

CERTIFICATE OF PHYSICIAN.

X I, Z. E. House, a practicing physician of Cass Lake
Minn., do hereby certify that I have carefully examined Alfred Lamont,
the child named in this application, and find that he is in proper physical condition to attend
school, and is not afflicted with tuberculosis or other disease which would be a menace to the health
of other pupils.

This 24 day of October, 1910 Z. E. House, M. D.

VOUCHER OF SOLICITOR FOR SCHOOL.

I hereby certify that I was present and witnessed the execution of the foregoing application
made by _____; that its contents were explained or interpreted to
(Parent, guardian, or next of kin.)
by _____; that I believe _____ understood the purport
(Name of interpreter.)
thereof; that I was present at the medical examination of the child named herein; that _____
resides with _____, in or near the town of _____;
(Name of person—parent, guardian, etc.)
that the child can not have adequate and proper educational facilities at home for the reason that

Dated at _____
this _____ day of _____, 190_____
(Official title.)
(NOTE.—This voucher must be executed by the official representative of the nonreservation school to which application
is made. Pupils and Indian solicitors will not be accepted.)

VOUCHERS OF DISINTERESTED PERSONS.

VOUCHER NO. 1.

I, Albert Boutang, a Carpenter, of
Cass Lake, Minn., do hereby certify that I am personally acquainted with
Alfred Lamont who makes the foregoing application; that I believe his state-
ments therein are true; that I am acquainted with Alfred Lamont;
(Name of child.)
he is known and recognized in the community in which he lives as an Indian; that in my opinion
he can not receive proper and adequate schooling at home for the reason that he has
no home

This 24 day of Oct., 1910 Albert Boutang.

VOUCHER NO. 2.

I, _____, a _____ of _____
(Business, calling, or profession.)
 _____, do hereby certify that I am personally acquainted with _____,
 _____, who makes the foregoing application; that I believe his state-
 ments therein are true; that I am acquainted with _____; that
(Name of child.)
 he is known and recognized in the community in which he lives as an Indian; and that in my
 opinion he can not receive proper and adequate schooling at home for the reason that _____

This _____ day of _____, 190 _____

CERTIFICATE OF SCHOOL PHYSICIAN.

I hereby certify that on _____, I made a careful exami-
(As soon after arrival as possible.)
 nation of the physical condition of _____, the child named in
 the foregoing application, and found _____ to be _____

I therefore recommend that the said child be _____ enrolled in this school.

This _____ day of _____, 190 _____

School Physician.

INDORSEMENT.

A child showing one-sixteenth or less Indian blood, whose parents live on an Indian reservation, Indian fashion, who, if debarred from the Government schools, could not obtain an education, may be permitted in the reservation day and boarding schools, but it is preferable that it be not transferred to a nonreservation school, without special permission from the Office. Children showing one-eighth or less Indian blood, whose parents do not live on an Indian reservation, whose home is among white people where there are churches and schools, who are presumed to have adopted the white man's manners and customs, and are to all intents and purposes white people, are debarred from enrollment in the Government nonreservation and reservation schools. Superintendents, in all cases where doubt exists as to the degree of Indian blood of a child proposed for transfer, should fully satisfy themselves of the facts by affidavits from reliable persons, which affidavits must be kept on file at the school.

A pupil who has been regularly enrolled in a nonreservation school must not be taken to any other nonreservation school without the consent of both Superintendents and the Commissioner of Indian Affairs, and Superintendents will be held to strict accountability for such pupils taken to their schools.

A pupil dismissed from school for cause must not be enrolled in any other school without the permission of the Commissioner of Indian Affairs. Full facts must be submitted with each request.

INFORMATION REGARDING RETURNED STUDENTS

PART 1

REPORT BY NONRESERVATION SUPERINTENDENT OR RESERVATION SCHOOL PRINCIPAL

SCHOOL, Carlisle, Pa., June, 1913
 Name, Alfred Lamont; Sex, M.; Age, 23; Deg. Indian Blood, 1/4
 Belongs: State, Mich.; Agency, _____; Tribe, Chippewa
 Home address, whose care, etc., Peter Lamont, Ontonagon, Mich.
 Grade in school, 7; health, Good; height, 5ft. 6 in.; weight, 123
 Number months instruction given pupil in each school department, including music, 27 in
academic dept. Played in band.
 Course completed, _____; years in this school, 3
 Years spent in other schools and names of schools, Public school, 1896-1900;
Haskell, 1905-8; Jonah, 1908-10
 Character and disposition, Good
 Recommended for what positions, suitability in order named: 1. Baker
 2. _____; 3. _____; 4. _____
 Remarks: Good record in school
 _____, Supt.

PART 2

REPORT BY RESERVATION SUPERINTENDENT

AGENCY, _____, 1913
 Date pupil returned from school, _____; employed since return as follows:

 Are home and local conditions favorable? _____
 Should he receive assistance to find employment? _____
 At what employment do you think he would do best? _____
 Remarks: _____
 _____, Supt.

SUGGESTIONS FOR SUPPLYING THE INFORMATION REQUESTED ON THIS BLANK

1. The report of nonreservation school Superintendent should be made at the time or a little before the pupil leaves school, whether at the end of the school year or during the school year, provided the pupil is 18 years of age or over, or younger, if for any special reason the pupil is quitting school permanently. As soon as this report is received, or at least very soon after the pupil returns home, the Supervisor of Indian Employment will correspond with the returned student for the purpose of getting more in personal touch with him and finding out something about his wishes, etc. His answer will be attached to and filed as part of this report.

2. Health, height, and weight of returned students are sometimes very important in placing them properly; height and weight could be approximated very satisfactorily, though from the pupil records now in use all information called for in part 1 of this blank can readily be obtained and be definite.

3. The State, agency, and tribe are important, and where the pupil is not attached to any agency this fact should be stated and the Superintendent should give all available information as to the home and local conditions surrounding the pupil.

4. Where the outgoing pupil has passed the civil-service examination for any position, this fact should always be noted, giving position for which examination was taken.

5. It should be remembered that the Supervisor of Indian Employment can but seldom have a personal acquaintance with the outgoing student, and that he must depend on the information furnished in this report for his basis of action in behalf of the pupil.

6. The degree of Indian blood should always be given, as this fact largely determines how much effort will be made on behalf of any particular returned student; qualifications being equal, or nearly so, the preference will be given to those having the greatest degree of Indian blood.

7. This report should be forwarded promptly to the Supervisor of Indian Employment, Indian Office, Washington, D. C.

8. Reports on students from reservation schools should be made only as to those who leave the schools at 18 years of age, or older, and who will probably not go away to school.

9. If part 1 of this report is made out by the principal of a reservation school, the reservation Superintendent should supply information called for in part 2 if the principal is not informed as to home surroundings and local conditions. Such information is essential to a proper understanding of the difficulties and needs of the pupil.

10. When part 1 is made out by a nonreservation Superintendent, this blank will be sent by the Supervisor of Indian Employment to the Superintendent of the reservation where the outgoing student belongs. He should fill out part 2 and return the blank as promptly as possible, for practically nothing can be done until the information called for in part 2 is supplied.

Information under the heading "Employed since return as follows," will be valuable only in cases where the pupil has been home for some time.

Sept. 7th, 1914.

Mr. Alfred Lamont,
Pawhuska, Oklahoma.

My dear Sir:

The Cumberland Valley Railroad Company has notified me that a total amount of \$7.11 should have been paid by you when you left here in June of 1913 to cover the difference in the cost of transportation from Carlisle to your former home at Ontonagon, Michigan, and from Carlisle to Pawhuska, Oklahoma.

It seems that \$6.00 is the amount that has been received by the Company and that an amount of \$1.11 is yet due.

Will you kindly co-operate with me in adjusting the matter by sending without delay the \$1.11 required to cover the balance due?

Very truly yours,

HKM.

Supervisor in Charge.

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

1209

[illegible]

Trade entered at Carlisle,

Grade at date of Discharge,.....

Trade or Industry,

Church, *Catholic*

Miles to school - 9

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL *Sarvout Alfred* DATE *28/10* 19*10*

AGE *20* YEARS { NEW { STUDENT. TRIBE *Chippewa* STATE *Minnesota*

DEGREE OF INDIAN BLOOD *1/4*

INSPECTION *Glandular enlargement above top of sternum. Dev good*

PALPATION *Normal*

PERCUSSION *Normal*

AUSCULTATION { RESONANCE *Normal*
{ RESP. MURMUR *Normal*

HEART SOUNDS *Good*

MENSURATION { INSP. *36 3/4*
{ EXP. *34 2/7* RESPIRATION PULSE

TEMPERATURE *98* degs. HEIGHT *5* FT. *5* IN. WEIGHT *135* LBS.

VISION *10 left 10 right* VACCINATION *Good scar*

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER	<i>Yes</i>	<i>Good</i>		
MOTHER	<i>Yes</i>	<i>Good</i>		
BROTHERS {	<i>3</i>	<i>Good</i>		
SISTERS {	<i>3</i>	<i>Good</i>		

PERSONAL HISTORY:

*Had fever when small
General health good*

REMARKS:

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

April 21, 1911

CONDITION:

O. H.

La MOTTE
LEASING
INSURANCE & LOANS
PAWUSKA, OKLA.

1209

Sept. 25th, 1916.

Mr. Harvey K. Myer,
Indian School,
Carlisle, Pa.

Mr. Geo. G. La Motte,

My dear Mr. Myer:

Pawhuska, Oklahoma.

My dear Sir:

I am in need of information which I think you can give me and I am taking the liberty of renewing old acquaintances and at the same time ask for what I want. Informing you as was requested in the letter you addressed to Mr. Meyer at this school on the 21st instant, I must state that Alfred Lamont came to Carlisle on October 27th of 1910 from Ontonagon, Michigan. Our records contain the information that he was born at Baraga, Michigan, on April 5th of 1890 and that his mother was a half-blood Chippewa Indian under the jurisdiction of the Fond du Lac Indian Agency. Alfred's father is reported to be a white man.

Very truly yours,

(Signed) O. H. LIPPS

Superintendent.

HGM.

(Copy to Supt. Wright.)

Baraga, Mich. - Apr 5, 1890
mother 1/2 Chippewa
Ontonagon
Fond du Lac Agency, Mich.

MOTTE AND LA MOTTE
LEASING
INSURANCE AND LOANS
PAWHUSKA, OKLA.

Sept. 21, 1916.

Mr. Harvey K. Myer,
Indian School,
Carlisle, Pa.

My dear Mr. Myer:-

I am in need of information which I think you can give me
and I am taking the liberty of renewing old acquaintance and at the
same time ask for what I want.

I want to get the enrollment record of Alfred Lamont a former
student of Carlisle. He is a Chippewa from Michigan and married
Mollie Mantle an Osage girl.

I want particularly to find out what his degree of Indian
blood; his former home; birth place; degree of blood; reservation or
non-reservation.

If you can give me this information I shall appreciate it.
Archiquette wishes to be remembered very kindly to you.

Very truly yours,

Geo. G. La Motte.

Bozaga, Mich - Apr. 5, 1890

mother 1/2 Chippewa

Antonagon

Fond du Lac Agency, Mich