

716221

I.D. number
No. d'identification

JONES

Surname
Nom de famille

dec'd 23/11/50

JEREMIAH JERRY

Given names
Prénoms

OPEN
ATIA

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

Location
Lieu

4944

716221
I.D. number
No. d'identification

Jones
Surname
Nom de famille

Jeremiah Jerry
Given names
Prénoms

Deceased on ~~about~~ 25/10/59 (FROM DEATH CERTIFICATE)
~~on~~ 23/11/50 (FROM DEATH CERTIFICATE)

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL



Location
Lieu

Box: 4944

« CONTENTS CONFIDENTIAL »
« CONTENU CONFIDENTIEL »

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O.'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION *Halifax* DATE *12-4-18*

1. (a) Unit *D 106th* (b) Regimental No. *716221* (c) Rank *Plt*

(d) Surname *Jones* (e) Christian name *Jimmy (Colonel)*

2. Age last birthday *53* Date of birth *Mar 29th 1864*

3. Enlisted at *Truro* on *June 1916*

4. Personal description:—

(a) Height *6-2* (b) Weight *200* (c) Complexion *Black*

(d) Colour of hair *Black* (e) Colour of eyes *Black* (f) Identification marks

5. Address after discharge (for the use of the Board of Pension Commissioners.)

200 5th Long Plain surface left forearm

6. Former trade or occupation *farming & teamster*

7. (a) Service

	PERIODS	
	From	To
<i>106th</i>	<i>June 4th 1916</i>	<i>Aug 1916</i>
<i>40th</i>	<i>Aug 1916</i>	<i>Oct 1916</i>
<i>26th</i>	<i>Oct 1916</i>	<i>Dec 1916</i>
<i>R.C.R.</i>	<i>Dec 1917</i>	<i>Dec 1917</i>
<i>B Unit</i>	<i>Dec 1917</i>	

(b) Has he been Overseas? *Yes*

8. Present disease or disability (use authorized nomenclature if possible). *Myalgia anterior sclerosis*

(a) Date of origin *Oct 1917* (b) Place of origin *England*

(c) Cause* *Acute Renal Conditions*

9. Present condition. (Important, to be a full description of the present disabling condition or conditions).

A large well developed man who looks his age (Colonel)
The complaint of pain in back and between his shoulders
He says he can walk two miles at his own pace.
but feels tired afterward. He is unable to touch his
feet when standing without causing pain
Digestive System is normal - teeth good.
Heart - negative - arteries sclerosed B.P. systolic 160
Lungs negative -

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

a. weakness and (c) incapacity - due to

71615

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Shrapnel wound of left forearm which has healed Scar is not adherent, no atrophy of muscles Grip practically normal Has had operation recently for radical cure of left inguinal hernia, well healed, no pain.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

12. Did the disability arise on or off duty? *a on duty to R.A.*

13. Was a Court of Inquiry held? *No.*

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes *a* No *a No to R.A.*
(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? *No.*

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? *a indefinite to permanent*

17. Treatment (Case reports, general or special, should be secured and attached where possible).

Hospitals in England Liverpool 10 days, Bromley 6 day - Enniskillen 8 weeks

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No

19. Can the former trade or occupation be resumed? *partially*

20. Recommendations *Category E*



L. S. Morse, Major
Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned..... have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

Jerry Jones
Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

yes

22. Is the soldier fit for

- (a) General service, (Category A) (Yes or No).
- (b) Service abroad, not general service, (" B) (Yes or No).
- (c) Home service, (Canada only), (" C) (Yes or No).
- (d) Temporarily unfit, (" D) (Yes or No).
- (e) Unfit for service in Categories A, B and C, (" E) (Yes or No).

*no
no
no
no
yes*

23. It is certified that the soldier

- (a) ~~Does require treatment.~~
- (b) Does not require treatment.
- (c) Should pass under his own control.
- (d) ~~Should not pass under his own control.~~

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).



G. H. Morrison President.

[Signature] } Members.
[Signature]

STATION *Delroy. 11 S*

DATE *12. 4. 18*

APPROVED BY

DATE *19. 4. 18*



E. Illwors Myn
Assistant Director of Medical Services.

APPROVED BY

DATE

Director-General of Medical Services.

OPINION OF THE MEDICAL BOARD

[Faint, illegible handwriting and bleed-through from the reverse side of the page]



TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned,.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....
Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

CLINICAL CHART.

Army Form B. 181

Corps R. C. R.

(To be attached to Case Sheet.)

Military Hospital 13th Stal Boulogne

No. 716221

Rank and Name Pfc. Jones J. G.

Age 48

Service _____

Disease S. W. Arm L.

Date of admission 10-4-17.

Date of discharge _____

Result _____

Bapt.

Dates of Observation	April																													
	10	11	12	13	14	15	16																							
Days of Disease																														
Temperature Fahrenheit	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time	Time
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.
107°	<p><i>on admission</i></p> <p><i>10-4-17</i></p> <p><i>Distal B</i></p>																													
106°																														
105°																														
104°																														
103°																														
102°																														
101°																														
100°																														
99°																														
98°																														
97°																														
Pulse per Minute																														
Respirations per Minute	60	83	84	90	88	90	55	90																						
Motions per 24 hours	1	1	1	1																										



wd. 9. 4. 17

depression l. foream.

ruel.

M E D I C A L

A N D

D E N T A L

R e c o r d s

Casualty Form—Active Service.

U.K. Archives
 1917
 J.P.

Regiment or Corps 106th B'n. C.E.F. Regimental Number 70001
 Rank Pte Surname Jones Christian Name Jeremiah
 Religion Baptist Age on Enlistment 39 years 0 months.
 Enlisted (a) 19-6-16 Terms of Service (a) Def War ^{and 6 months} Service reckons from (a) 19-6-16
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) _____
 or Corps Trade and Rate Teamster
A. Marshall Signature of Officer i/c Records.

Date	Report		Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
	From whom received	Record of promotions, reductions, transfers, casualties, &c., 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.			
			Embarked ... <u>Salisbury, N.S.</u>	<u>15-7-16</u>	
			Disembarked <u>Liverpool, Eng</u>	<u>25-7-16</u>	
<u>6-10-16</u>	<u>C.O. 106th Bn.</u>	<u>Transferred to 40th Bn</u>	<u>in Diblegate</u>	<u>5-10-16</u>	<u>Part II #65</u>
			<u>C. P. McHullen</u>		
<u>6-10-16</u>	<u>C.O. 40th Bn.</u>	<u>Taken On Strength</u>	<u>Caesar's Camp</u>	<u>5-10-16</u>	<u>D.O. Pt. 11, 259.</u>
<u>4-1-17.</u>	<u>" " "</u>	<u>Trans. from 40th Bn.</u>	<u>Diblegate</u>	<u>4-1-17.</u>	<u>D.O. Pt. II #336.</u>
		<u>to 26th CRB (nova section)</u>	<u>RF Parker</u>		
<u>4-1-17.</u>	<u>" 26th Bn.</u>	<u>Taken on strength.</u>	<u>"</u>	<u>4-1-17.</u>	<u>" " " with I</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) Signaller, Shoemaking, &c.

CERTIFIED CORRECT
 11 FEB 17
 CAN. RECORDS DIVISION.

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
7-2-17	O.C. 26th. Res.	Proceeded overseas to Royal Canadian Regt.	Bramshott	7-2-17	D.O. Part II No. <i>[Signature]</i> Lieut. Col. Commanding 26th Canadian Reserve Battn.
9. 2. 17	O. C. C. B. D.	Landed in France. Taken on Nom. Cd of 9. 2. 17			
29. 3. 17		Left for 3rd Can Bn 22. 3. 17			
25. 3. 17	O.C. 3rd Can Bn	Arrived 3rd Can Bn for duty 25. 3. 17			
4. 4. 17	O.C. 3rd Can Bn	Left for front	Fields	4. 4. 17	IRL
7. 4. 17	O.C. front	Arrived front		4. 4. 17	B213 DCL 179
14. 4. 17	"	WOUNDED IN ACTION "		8-4-17	B213 DCL 184
12. 4. 17	13 legs	Deep laceration forearm & bled to Nova Scotia Regt Depot, Bramshott	St. Patrick's	12-4-17	W3083 (3539) 9411 04504 24/4/17
27. 4. 17	N.S.R.D.	T.O.S. from R.L.R. Bidart		14. 4. 17	PL 49 <i>[Signature]</i> Lieut. for Major, A. R. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

3100
 1917

Lieut.
 For Colonel t/c Records, COMAF.

J.M. Rank Name **JONES, Jeremiah.** Reg'l No. **716221**
 Unit **106th Bn.** If in perm. Corps, } Married or Single **Married**
 What Unit? }
 Place and Date of Enlistment **Truro N.S. 19th June 1916.** Place of Birth **East Mountain, Col. Co. N.S.**
 Name and Address, Next-of-Kin **Mrs Ethel Jones.**
Truro, N.S., Canada. Relationship **Wife.**

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

N/E. R.B. No. **3344**

File R.L.

Category **Can O.R.**

Discharge, Date and Place

Reason

Character

H. W. & V., Ltd.—7165-16.

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.				
Arr. in England		S.S. Empress of Britain	25th July 1916.		
6-10-16	106 th	Tfd to 106 th Bn	Caesarbamp	5-10-16	190 th 65
6-10-16	106 th	Taken on strength.	do	5-10-16	✓ 258
1.1.17	10 Res Bn,	SOS to 26 Res Bn	Dibgate. 4.	I. 17	Pt, ii, O-33
4 1 17	26 Res Bn.	T O S from 40 Res-Bn	Dibgate. 4.	1, 17	Pt II O
7-2-17	26 Res Bn.	S.O.S. to 26 Res Bn (overseas)	Braunholt.	7-2-17	
12-2-17	A.C.R.	Taken on strength.	In Field	2-2-17	Pt II 15
19-4-17.	"	Adm. No. 13. Stety. Hosp.	Boulogne	10-4-17	CBP-362. SW. 6 Am. 104
25-4-17	"	4 th London Genl. Hosp.	Denmark Hill	14-4-17	CBP 263 "
24-4-17	"	Invalided (Wounded) to N.S.R.D	In Field	12-4-17	Pt II 45, NSRD. Pt II 49/22.4.17



A.F.B. 108 CHECKED
 13 FEB. 1917

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.				
19.6.17	H.C.R.	C. V. H. Bromley		14.6.17	G.A.W. B.Arm. CLB. 303 + side.
23.6.17	"	Shield	"	18.6.17	CLB. 307.
20.6.17	2nd Lt. B.O.	Octave Lag from Bramley Hastings		18.6.17	TR 111 (N.S.R. DP 103) 20.6.17
18.8.17	26 th Res.	ceases att on ret. to 26 th Res. Pte Bishott		17.8.17	Pt # 159
18.8.17	26 th Res.	T.O.S. from NSRD. on reporting from 2 nd E.C.O. Pte Bishott		17.8.17	Pt # 195. NSRD. Pt # 164 d. 20.8.17
21.9.17	2 nd E.C.O.	Att'd. from 26 th Res.	"	20.9.17	Pt # 187.
21.9.17	M.S.N.D.	T.O.S. from 26 th Res. on command to 2 nd E.C.O.	"	19.9.17	Pt # 194 (26 th Res Pt # 223) d. 20.9.17.
29.10.17	"	Ceases on command 2 nd E.C.O.	"	28.10.17	Pt # 227, 2 nd E.C.O. Pt # 219 d. 29.10.17
4.11.17	"	In command to E.C.O. Buxton awaiting embarkation to Canada for disposal by a.g. Ottawa.	Pte Bishott	4.11.17	Pt # 233.
20.11.17	"	Ceases to be op. to G.H. Buxton P.S.O.S on embark to Canada for disposal by a.g. Ottawa.	✓	6.11.17	- 248.
	Halifax	Convalescent.	M.D.6 Halifax	14.11.17	Non Roll 398



CASE HISTORY SHEET.

No. 716221 Rank Pte Name Jones J.A. Age 53.
Unit RCF Completed years of service Where and how long Can 1/2 Eng 7/2 Tra 3/2
Date of admission 14.2.18 Date of discharge 8.5.18
Diagnosis Hernia inguinal Place of origin Nova Scotia

CONDITION ON ADMISSION AND PROGRESS OF CASE. A man of good nutrition, he was wounded in left forearm 9.4.17, shows an oblique scar 4' long anterior aspect of left forearm, scar at times is painful. Left inguinal hernia, kept up in place by a truss. He complains of pain in back of shoulders and lumbar region, aggravated during cold damp weather, sleeping caused pain.

Hernia operated



FAMILY HISTORY negative.
(Tuberculosis, mental or nervous diseases.)

TREATMENT operation for cure of hernia
(Especially any specific or special form.)



CONDITION ON DISCHARGE, Cured
(and disposal made of case.)

Date 30.4.18 Medical Officer i/c case. S. J. Woodhouse

11587

1918-19
No. 6 DISTRICT DEPOT

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. 716221 Rank Pte Name Jones J.
 Corps. 106 Bn. who was* Discharged.
 On 8-5-18 191..., to.....
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from 1-5-18 191...,
 to 8-5-18 191..., the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month.....			Bal. Cr. from prev. month.....		
Advances } No.....			Regt'l Pay <u>8</u> days at \$ <u>1</u> c.....	<u>8</u>	<u>00</u>
by } No.....			Field Allow. <u>8</u> days at \$ <u>10</u> c.....		<u>80</u>
Cheques } No.....			Separation Allowances* (Monthly).....	<u>25</u>	<u>00</u>
Assigned Pay and Sep'n Allee. No.....	<u>4314</u>	<u>25</u> <u>00</u>	Other Allowances* <u>Clothing</u>	<u>8</u>	<u>00</u>
Other charges.....			Other Credits*.....		
Payment on transfer or discharge No.....	<u>4315</u>	<u>16</u> <u>80</u>	Bal. Dr. (to be deducted by new unit).....		
Balance Cr. (to be paid by the new unit).....					
Total.....	41	80	Total.....	41	80

* Give particulars.

A monthly stoppage of \$ 20.00 (†) has..... (‡) been paid on account of Assigned
 Pay for the month of April 191... }
 and Sep'n Allee. for month of May 191... } (to) Assignee. Mrs Ethel Jones
Fruro N. S.
 (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

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

REMARKS:—

- State (1) date of enlistment.....
- (2) if married and if a Separation Allowance Card has been submitted..... Yes
- (3) cause of discharge Med Unfit. authority.....
- (4) authority for transfer.....

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 & 7-5-18

Place Halifax N. S.

[Signature]
 Paymaster No. 6 District Depot
 CAPT

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 triplicate, with his discharge documents.

M. F. W. 44.

300M.—2-18. H. Q. 1772-39-903.

Made by.....
 Checked by.....
 No. Last D O.....
 Date.....

MEDICAL CASE SHEET.*

No. in
Admission
and
Discharge
Book.

Regimental No.

Rank.

Surname.

Christian Name.

716221.

P.C.P.

Jones, J.A.

Jerry.

Year

1917.

Unit.

P.C.P.

Age.

45.

Service.

10 Months

Station
and Date.

London
General.

Disease

S.W. Forum

14 4 17

Large flesh wound on dorsal
in neck side of arm.
Clean.

Saline dressing.

Sypho Forum Left Side
for Fomentation

15 17

Healing well



AUXILIARY HOSPITAL
AT Wallasefield
FROM 8.5.17. 6.6.17.

18.6.17

6/6/17 Downley
A. H. [Signature]

Major, R.A.M.C. (T)
Registrar
4th London General Hospital.

ADMITTED TO
4th London General Hospital
R.A.M.C.
Time _____
Word _____
Date _____
Duty Officer _____

9 7 11.

for Passages Passive & Active
Movement

[Signature]

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

Station
and Date.

CANADIAN EXPEDITIONARY FORCE

TEMPORARY DISCHARGE CERTIFICATE

War Service Badge
Class A 4426339

This is to Certify that No. Rank

716221

Private

Name (in full).....

JONES, Jeremiah

Enlisted in.....

106th Battalion

CANADIAN EXPEDITIONARY FORCE on the.....

France, E. S.

19th

June

16

day of.....

CANADA ENGLAND & FRANCE (with Royal Canadian Regiment)

HE SERVED IN.....

BEING FOUND MEDICALLY UNFIT

and is hereby discharged from the Service by reason of.....

and is free to accept ~~CIVILIAN~~ EMPLOYMENT.

6'3"
HIS DESCRIPTION ON THE DATE BELOW IS AS FOLLOWS
Colored
Shoulder Wound Scar 5 inches long
left forearm

Age.....

Black

Marks or Scars.....

Height.....

Black

Complexion.....

Eyes.....

Hair.....

Former Occupation.....

May 6th, 1918.

Signature of Soldier.....

(W. S. Coleman), Major,

Officer i/c Records,

Date of Discharge.....

Ottawa, Ont.

13th Issuing Officer..... February..... 34

Date of Discharge.....

E. D. H. G.

Rank.....

649-J-3705

Appointment.....

Signed at..... this..... day of..... 19.....

Military District No.....

Reference No.....



716221

Private

JONES, Jeremiah

Royal Canadian Regiment

Ford St. Truro., N.S.

VERY GOOD

Driving & Teamster

BRITISH WAR & VICTORY MEDALS

Ottawa., Ont.

13th

February

34


(W. E. L. Coleman), Major,

Officer i/c Records.



NS 341

Duplicate

Triplicate

ATTESTATION PAPER.

No. 716221

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Jones.
- 1a. What are your Christian names?..... Jeremiah
- 1b. What is your present address?..... Truro, N.S.
2. In what Town, Township or Parish, and in what Country were you born?..... East Mountain, Col: Co. N.S.
3. What is the name of your next-of-kin?..... Mrs Ethel Jones.
4. What is the address of your next-of-kin?..... Truro, N.S.
- 4a. What is the relationship of your next-of-kin?..... Wife.
5. What is the date of your birth?..... March 29th 1877.
6. What is your Trade or Calling?..... Teamster.
7. Are you married?..... Yes.
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes.
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 } No.
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }



DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Jeremiah Jones., do solemnly declare that the above are answers made by me to the above questions and that they 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.

Jeremiah Jones (Signature of Recruit)

Date..... June 19th..... 191 6. [Signature] (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Jeremiah Jones., 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.

Jeremiah Jones (Signature of Recruit)

Date..... June 19th..... 191 6. [Signature] (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..... Truro, N.S...... this..... 19th..... day of..... June..... 191 6.

[Signature] (Signature of Justice)

Description of Jones, Jeremiah on Enlistment

Apparent Age 39 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 6 ft. 0 ins.

Chest measurement { Girth when fully expanded 41 ins.
 Range of expansion 3 ins.

Complexion Negro

Eyes Brown

Hair Black

Religious denominations.
 Church of England
 Presbyterian
 Methodist
 Baptist or Congregationalist Yes
 Roman Catholic
 Jewish
 Other denominations
(Denomination to be stated.)

Scar 2"x1" on right cuttock.



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 June 19 191 6

Place Conno, N.S.

W. Muir
 Capt. amc
 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.

Jeremiah Jones 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 28/6/16 191

Libt. Col.
 Comd'g. 10th Over-seas Bn. C. E. F.
 "Nova Scotia Rifles."

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia Form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313.</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Settlement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge, " 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 (in the event of such having been prepared.)</p>
---	---

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.



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.)

Nil

J. A. Jones

Witness

W. R. Smith



5852

8-67

Group
13-3-34

Proceedings on Discharge.



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

No.	716 221
Rank	Private
Name	Jerry Jones
<small>NORE.—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	106th Battalion
Date of Discharge	May 8th 1918
Place of Discharge	Halifax N.S.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age	5 ³ years	months.	Descriptive Marks.	
Height	6	feet 2		Scars 5 Ins long flexor surface left forearm
Complexion	Black			
Eyes	Dark			
Hair	Black			
Trade	Farmer Plasterer			
Intended place of residence.	Ford Street			
<small>(To be given as fully as practicable.)</small>			Lynn N.S.	

2. The above-named man is discharged in consequence of

Being found med unfit for further service.

N.B.—The causes 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.

3. Conduct and character while in the service have been, according to the records, etc.

Very Good

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company.

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

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

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

6. Medals and Decorations.....

Four horizontal dashed lines for listing medals and decorations.



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) Hobart N.S.

J.P. Banks LIEUT
O. C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT

(Date) May 8th 1918

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.

(Place) Halifax N.S. J. A. Jones (Signature of Soldier.)

(Date) May 8th 1918 W.R. Smith (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) 1 years 323 days.

Total 1 years 323 days.

11. Confirmation of Discharge.

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

(Place) Halifax N.S.

(Signature) B.W. Rose Lt.-Colonel,
O. C. No. 6. District Depot.

(Date) May 8th 1918

Christian Name

Surname

REGISTRATION.	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				
<i>the</i> 4 th L. G. 18 th Pl.		14	4	17	13	6	17	G.S.W. forearm.	60	Large flesh wound on dorsal, & inner side of arm. Septic focus left side. 1/6/17 Healing well. Massage & movements Trans. to Bromley, Kent	<i>[Signature]</i> CAPTAIN, R.A.M.C. (T.), Assist. Registrar, 4th London General Hospital.
CANADIAN CONVALESCENT HOSPITAL: BROMLEY, KENT.		13	6	17	18	6	17	B.W. L. arm & side	6	Wound healed no disability To Hosp Ref Class D1	<i>[Signature]</i> C.M. This may come
Coq Hill		3	12	17	6	12	17	mydriasis		Pain in back - shoulder articular rheumatism other system normal	<i>[Signature]</i> Major
		14	2	18	30	4	18	arterial rheum			



E.M.H

Number 716221

Rank Pte

Surname JONES

Christian Name Jeremiah

Units R. C. R. Theatre of War France

Date of Service 9/2/17



Remarks

Latest Address 2nd St. Yuro U.S.

Roll No. B Page 16890

200m.-2-21.M.

DEAN
REQN. NO. 1439399
SEP 16 1922

Reg. No. 716221 Name Jones J
 Rank Pte Corps 53rd Bn Age 35 Service C 1/2 E 6/2 F 4/2
 Ledger No. 21 Serial No. 1158 610

HOSPITALS

DATE

DIAGNOSIS

HOSPITALS	DATE	DIAGNOSIS
Camp Hill Mil Halifax Dis not given	3-12-17	U & W left arm OP
	14 2 18	bernia
Dis Unit	8 5 18	



HOSPITALS

DATE

DIAGNOSIS



M. F. W. 2553.
50M-6-19.
1772-39-1332.



IMPORTANT.

DISPOSAL OF ORIGINAL MEDICAL HISTORY SHEETS.

1. Action by Officer i/c Hospital—

- (a) See that all entries are properly and fully made, and signed.
- (b) Forward to Hospital to which man is transferred, immediately it is done. If discharged to Unit—to Officer Commanding such Unit.

2. Action by Officer Commanding Unit—

- (a) On admission of man to Hospital, forward M.H.S. to such Hospital at once.
- (b) On transfer to another Unit—to Officer Commanding such Unit.
- (c) On proceeding Overseas — return to Record Office, London, without delay.

(Authority, Army Council Instruction 831, April, 1916.)

No. 716221 RANK

Pvt.

NAME

Jones, Jeremiah

T. O. S. 19-6-16

UNIT

106th Battalion C. E. A.

L. O. 1-7-16

M. D.

6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 June 19	1916 July 31	✓		



UNIT SAILED
JUL 15 1916

REGT'L NO 716221
H. Q. FILE NO. 649-

NAME Jones Jeremiah

RANK AND CORPS Pte.

R. C. P. (Form. 106th

FOLLOWS

No. Bn.)

No.

DATE

NATURE OF CASUALTY

FOLLOWS

M2240 18-4-17

C.

Adm. 77013 Stat. Hosp. Boulogne Apr. 10th/17
(U.S.W. Left Arm.) ✓
sailed from Liverpool per S.S.
Olympic 6-11-17. Dis. of a. S. M.A
6 R.U. M.S.



LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
A 363 ^{2.}	no 13 Stat. Boulogne	10-4-17	SW. L. arm slt
B. 263.	4th Lon. Inf. Denmark Hill S.C.	14-4-17	SW. L. arm. slt.
B. 363.	Can. Com. Bromley	14-6-17.	SW L. arm & side
B. 307.	Discharged	18-6-17.	SW. L. arm slt
302.	M.H.C.C. Halifax	18-11-17.	Posted Out p. Camp Hill
316.	" " " " "	3-12-17	Lo. In. P. Camp Hill
328.	" " " " "	6-12-17.	Out-P. Camp Hill



Surname

Christian Name or Names

Reg. No.

Rank

Unit

Co.

Troop

Batty.

Hospital

Date of Admission

Transferred

Hosp.

13 Stat. Boulogne
 4 Lond. Gun. Detachment
 Boomley. Convales.

10-4-17

Hosp.

Hosp.

Hosp.

Diagnosis

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date



A 363

REMARKS

C.L. 19-4-17

25.4.17 B323.

- 19.6.17 B303

Dis. 18.6.17.

- 23.6.17 B306.

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.

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 *James Jeremiah*

Regimental No. *716221* Rank *Pte* Name
C. E. F.

Enlisted (a) *19/76* Terms of Service (a) Service reckons from (a) *19/76*

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) .. *Transfer*



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>18⁴/₁₈</i>	<i>B" Unit M.H.C.</i>	<i>T.O.S. #6 Dist. Depot</i>	<i>Hq M.D.</i>	<i>18⁴/₁₈</i>	<i>Pte J. D. Bowie</i> CAPTAIN ADJUTANT NO. 6 DISTRICT DEPOT
		<i>Posted to Hosp. Sect.</i>	<i>" "</i>	<i>" "</i>	<i>4.2.5 M.P.</i> CAPTAIN 2nd. IN COMMAND HOSPITAL SECTION No. 6 DISTRICT DEPOT.
		<i>Trans to Discharge Section</i>	<i>" "</i>	<i>2⁵/₁₈</i>	<i>Pte J. D. Bowie</i> CAPTAIN 2nd. IN COMMAND HOSPITAL SECTION No. 6 DISTRICT DEPOT.
<i>2.5.18</i>	<i>Hospital Section</i>	<i>Taken on strength</i> <i>Discharged</i>	<i>Halifax</i>	<i>8.4.18</i>	<i>Pte J. D. Bowie</i> LIEUT. C. DISCHARGE SECTION NO. 6 DISTRICT DEPOT

(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.

[P.T.O.]

SURNAME.

Jones

CHRISTIAN NAMES

Jeremiah

REGL. No.

716221

RANK

Pte.

UNIT

106th

FORMER CORPS

*Nil.**803 M's 8-5-18. 3**Pt II 1347. 14/5/18.**Bn.*

NEXT OF KIN.

NAMES IN FULL

Jones Mrs. Ethel

RELATIONSHIP TO SOLDIER

Wife.

ADDRESS

Truro, N. S.

CHANGE OF ADDRESS



COUNTRY OF BIRTH

*Canada**East Mountain Col. Co. N. S.*

DATE

Mar. 29th 1877

PLACE OF ATTESTATION

Truro, N. S.

DATE

*June 19th 1916**O.S. 15-7-16.**R/C. 14-11-17*

Sailed from Halifax 15/7/16 per S.S. "Empress of Britain"

MARRIED *yes*

SINGLE

WIDOWER

TRADE OR CALLING *Teamster*

RELIGION

Baptist

DESCRIPTION.

APPARENT AGE

39

YEARS

MONTHS

HEIGHT

6

FEET

INCHES

CHEST MEASUREMENT

41

INCHES

EXPANSION

3

INCHES

COMPLEXION

negro

EYES

Brown

HAIR

Black

DISTINGUISHING MARKS

Scar 2" x 1" on right buttock.

MEDICAL EXAMINATION.

PLACE

Truro, N. S.

DATE

June 19th 1916

Present address:

Truro N. S.



CANADIAN OVERSEAS EXPEDITIONARY FORCES

Discharge Certificate

#426329

This is to Certify that No. 716221 (Rank) Private

(Name in Full) Jerry Jones enlisted in

106th Battalion

Canadian Overseas Expeditionary Force, on the 19th of June

1916, and accompanied said unit to France

was returned to Canada, and discharged from the service at Holiston N.S.

on the 8th of May 1918, in consequence of

Being found med unfit

DESCRIPTION ON DISCHARGE

Age 53 years

Height 6 Feet 2 Ins.

Complexion Black

Eyes Black

Hair Black

Trade Farming & Gunster

Signature of Man J. A. Jones

Marks or Scars

Scar 5 Ins long & 1/2 in
surface left forearm

B. W. Ross Lt. Col.

—Officer in charge Discharge Depot.

No. 6. District Depot.

Place and Date Holiston N.S. May 8th 1918

SHOULD THIS DISCHARGE CERTIFICATE BE LOST, NO DUPLICATE OF IT CAN BE OBTAINED.

N. B.—Any person finding this Certificate is requested to forward it in an unstamped envelope to The Secretary, Militia Council, Ottawa, Canada.



CANADIAN OVERSEAS EXPEDITIONARY FORCES

Discharge Certificate

No. 716221

Rank Private

Name Jerry Jones

Unit 106th Battalion

Address on Discharge

Ford Street
Lucas
N.S.

His conduct and character while in the Service have been :

Very Good

Place Halifax N.S.

Date May 8th 1918

Commanding Rev. Brown Lt. Col.
O. C. No. 6. District Depot

Campaigns Present War

Medals and Decorations not awarded



Casualty Form Active Service.

Regiment or Corps RCR
 Rank Cts Surname Gones Christian Name General Geronimo
 Religion _____ Age on Enlistment _____ years _____ months.
 Enlisted (a) 19-6-11a Terms of Service (a) _____ Service reckons from (a) 19-6-11a
 Date of promotion to present rank _____ Date of appointment to lance rank _____
 Extended { _____ } Re-engaged { _____ } Qualification (b) Seamster
 or Corps Trade and Rate _____

Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
		Embarked ... Disembarked...			
<u>18. 8. 14</u>	<u>OC. 2nd CGD</u>	<u>Ceases to be attached to 2nd C. O. D. on return to 26th Res. Bn.</u>	<u>Bramshott</u>	<u>14. 8. 14</u>	<u>P. 2 D. O. No. 159</u> <u>J. P. Pappall</u> <u>OC. 2nd CGD</u>
<u>18/8/17</u>	<u>O.C. 26th Res. Bn.</u>	<u>Taken on Strength.</u>	<u>Bramshott</u>	<u>17/8/17</u>	<u>D. O. PART II No. 195</u>
<u>20/9/17</u>	<u>OC 26th Res Bn</u>	<u>Struck off Strength on Posting to 2nd CGD</u>	<u>Bramshott</u>	<u>20/9/17</u>	<u>D. O. PART II No. 223</u> <u>PR Phelps</u> <u>of ad</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) Signaller, Hoeing-Smith, &c.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Ta B. 21 of from Army Form Army Form A. 36, or official documents
Date	From whom received				
21.9.17	2 C.C.D	attached to 2 C.C.D	Bramshott	20.9.17	Pl 2 D.O. 187.
29.10.17	CC. 2nd CCD	Ceases to be attached to 2nd C.C.D. on return to..... Res. Pa.	Bramshott	28.10.17	Pl. 2 D.O. No. 219 Luffenham Camp 1st Bn. 2nd RR.
20/6/17	H.P.R.D	Command to 2nd C.C.D	Bramshott	20/6/17	Pl. 11 D.O. 103
20/8/17	H.P.R.D	S.O.P. to 26 Res. Pm.	Bramshott	17/8/17	Pl. 11 D.O. 164
21/9/17	H.P.R.D	S.O.P. in command to 2nd C.C.D	Bramshott	20/9/17	Pl. 11 D.O. 194
29/10/17	H.P.R.D	Reported from command & posted to Depot Co.	Bramshott	29/10/17	Pl. 11 D.O. 227
4-11-17	H.P.R.D	Command to C.C.D. Quilon	Bramshott	4-11-17	Pl. 11 D.O. 233. Bramshott CAPTAIN ADJUTANT.
6-11-17	Embarked for Canada from Liverpool				

FOR O.C. NOVA SCOTIA REGIMENTAL DEPOT.



EXAMINATION

BY

STANDING MEDICAL BOARD, BRAMSHOTT.

17-9 1917

No. 716221 Rank Pte. Name Jones J.R.
 Local Unit 26 Res Bn Overseas Unit R.C.R. Age 53
 (His Statement)

Examination held in Bramshott area.

DISABILITY. G.S.W. LEFT ARM.

Overseas—~~Local~~
(scratch one out)

PRESENT CONDITION.

This man had a superficial wound of left forearm - 9-4-17. Now healed, non adherent scars. No muscular atrophy. No disturbance of function. His attested age is 39 - and he looks nearer this than age stated above. Is of good physique.

Board recommends: DT

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



Signatures :

Max. Camm.

Pres.

Members

W. Mayford.
W. Ind Jackson Camm.

Approved.

Bramshott

17-9- 1917

H.L. Burris Max Camm
 for A.D.M.S. and G.O.C.,
 Canadian Troops, Bramshott.

CLINICAL CHART.

Army Form B. 181

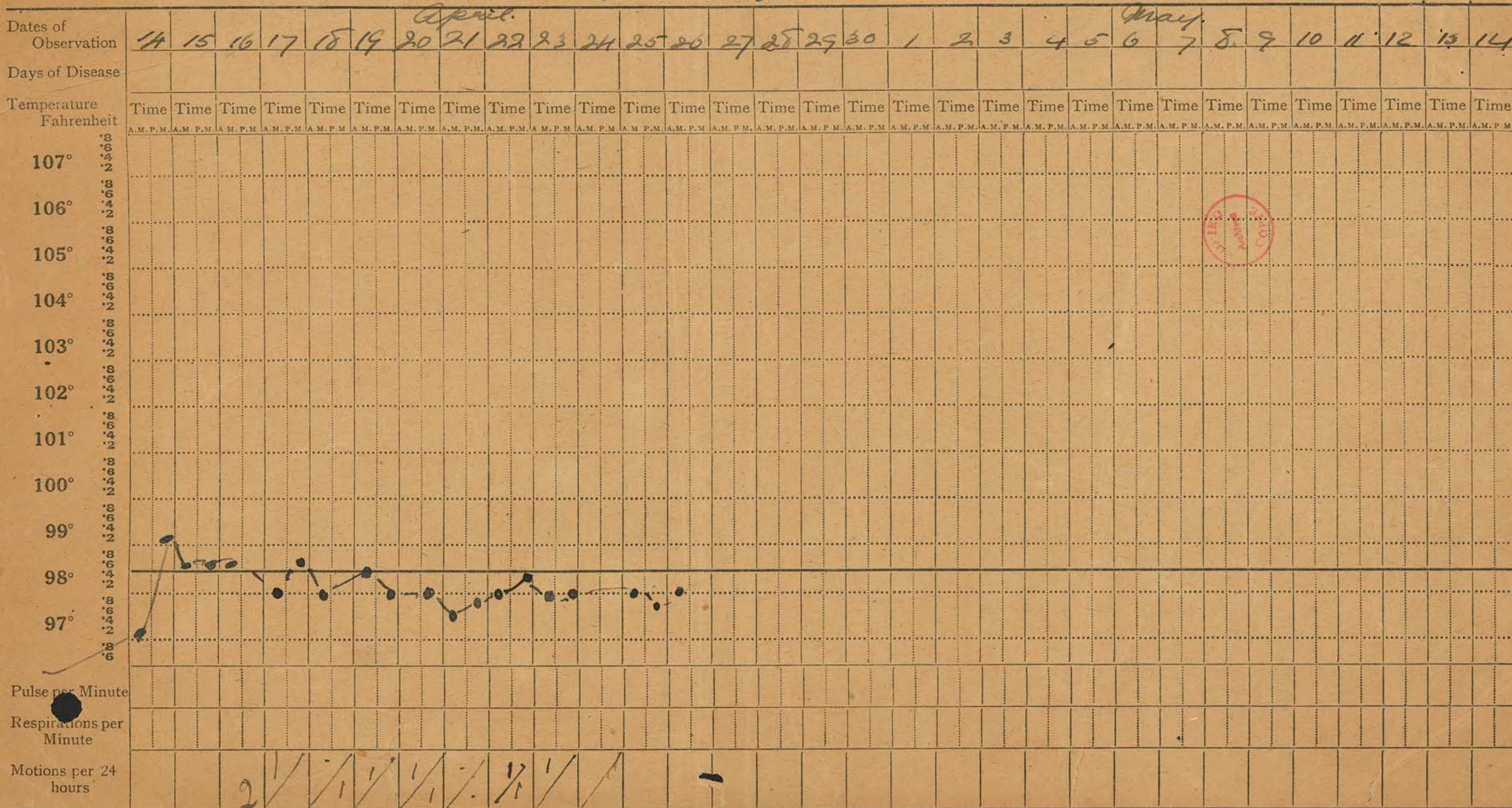
Corps P.C.Q.

(To be attached to Case Sheet.)

Military Hospital London General

No. 716221. Rank and Name P. Jones J.A. Age 45 Service 10 months.

Disease _____ Date of admission 14.4.17. Date of discharge _____ Result _____



EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS.



Date of Payment.	No of Acq. Roll	AMOUNT					Place of Payment.	Name of Paymaster.	Remarks.
		Francs	£	S.	\$	¢			
6/17	126		9	-	43	80	Bramley	WA Ladurie	Nov/17
7/17	484		1	-	4	86	2-1369	F Jones	Nov
27/7/17	562		1	11	7	54	do	do	Nov
13/8/17	643		1	11	7	54	do	F R Wood	9/11/16
15/8/17	547		1	10	7	30	Bramlett	F W Ingram	Nov/17
12/17	599		1	10	7	30	do	do	
2/17	857		1	11	7	54	do		
1/17	944		1	11	7	50	do	F D Patterson	
10/17	991		1	-	4	87	do	WB Kurell	
						98 29			

HEAVY DRAFT HORSES.

HAY	STRAW	OATS	MAIZE	* BRAN	* LINSEED	* CORN	* ROCK SALT		

LIGHT DRAFT, RIDING HORSES AND MULES.

HAY	STRAW	OATS	MAIZE	* BRAN	* LINSEED	* CORN	* ROCK SALT		

* These issues are only Equivalents in lieu of Oats if demanded by Units.

FOR THE ABOVE RATIONS ON.....DAY, THE.....DAY OF.....191

APPROVED

.....
QUARTER MASTER

.....
OFFICER COMMANDING

DELIVERED TO THE C. I/C. SUPPLIES, ACCOMPANIED BY DAILY PARADE STATE, NOT LATER THAN 10 A.M. DAILY FOR DELIVERIES TO BE MADE ON THE FOLLOWING DAY

File No. 09616J-115

WAR SERVICE GRATUITY.

Register No. J.1112

Reg. No. 716221 Pte
Name Jones, Jeremiah
Address York Sh.

Dependent Mrs. Ethel Jones (wife)
Address Same

Dec'n No W. S. G. File No
Award days at \$ per day \$
S. A. months at \$ per mo. \$
Less P. D. P. Credited \$

Pay Soldier \$
Less further debit balance
Net due paid as below

Pay Dependent \$

TO SOLDIER		TO DEPENDENT	
Ch No	Amount	Ch No	Amount
1			
2			
3			
4			
5			
6			

Days 127 Rate 101.00 Due 127.00
Less P.D.P. credited 175.10

Clerk
Less further Dr. Bal. or overpayment.

Net 224.90

2134
23-2-20



Date	Ck. Order	Total Ck. No.	Amount	Remarks	Date	Ck. Order	Ck. No.	Amount
17/20	53565	1815103	123.90	1815104, 101.00	17/20	53566	1815104	101.00
2				rdg & remainder 12 ³ / ₂₀				
3				17076				
4								
5								
6								

GEN'L AUDITOR
Posting checked by
Date 16-2-20

2134
12³/₂₀

POST DISCHARGE PAY OFFICE

T months pay and allowances after discharge.

9616-J-28

Name Jones, Jeremiah
Surname

Christian Name

Regimental Number 716221 Rank Pte. Address (in full) Ford St.,

Unit 106th Bn. 715 221 Truro, NS.

Original Unit

District where paid M.D.6.

Date of Discharge 8-5-18, 122-6.

P. D. P. Filing Number 16-122-6.

Rates:—Regimental pay \$ 1.00 per diem: Field Allowance \$.10 per diem. Separation Allowance \$ 25.00 per month.

L. L. 22573—M. & D. 8009.

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		
175 10	1635	8-5-18	33 00	1580	8-6-18	64 00	1336	8-7-18	59 10	19 00	156 10

Remarks: Adjustment of S.A.

M. F. W. 127.
60M-617.
1772 30-1140.



MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-4-16.
 1772-39-319.

Sheet No. 2

Mrs Ethel Jones

Wife
PAYMENTS.

Name of Soldier

Jones, Jerry

716221

1061 Batt

L. L. Job 310.-Req. 6574.

Month.	Year.	Cheque No.	Amt.	Remarks.
				20 ⁰⁰ JUL 1 1916
April	1916			
May				
June				
July				
Aug.		B10577	40	
Sept.		E17065	20	
Oct.		E 21520	20	
Nov.		K27013	20	
Dec.		W 33157	20	
Jan.	1917	C 40644	20	
Feb.		C45737	20	
March		W48181	20	20 P.
April		T 2679	20	30 W
May		T 8931	20	
June		M18041 M18140	20 20	D M18140 - cane
July		T 23116	20	340 Cu
Aug.		E 29957	20	
Sept.		S 32240	20	340 Cu
Oct.		E 2687	20	
Nov.		W 48869	20	340
Dec.		L 56519	20	can 8340
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

su

ay



A/c Closed 30/11/17
 Ret'd per... *Olympic*
 Date 4/11/17 to 27/11/17
 Clerk... *E. Thompson*

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

19-6-16

MILITIA AND DEFENCE

M. F. W. 11.
50m.-416.
H. Q. 1772-39-818.

SEPARATION ALLOWANCE

Name	<i>Ethel Jones</i>	Name of Soldier	<i>Jones Jerry</i>
Address	<i>Bureau N. S.</i>	Regtl. No.	<i>715221</i>
		Rank	<i>Pte.</i>
		Corps	<i>106th Bn.</i>
Relation to Soldier	} <i>wife</i>	To what Corps belonging	}
wife, child or mother		when called out	

PAYMENTS

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



Date of Enlistment

19-6-76

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

Date of Assignment

Jul. 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20			
----	--	--	--

RATE OF ASSIGNMENT

20			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. 716221 (715221)
 Rank Pto. Promoted Reverted Discharge
 Soldier's Name Jerry Jones
 Battalion 106th
 Beneficiary Mrs Ethel Jones
 Relationship Wife
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Ethel Jones (Wife)
 Address Truro, N.S.
 Change of Address
 1
 2
 3
 4

2568 32

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917 80031		368.	340	708.	<p>S A Paid to 31 ¹²/₁₇ A/c Closed retd to Olympic 6 ¹¹/₁₇ Ptd 27 ¹¹/₁₇ A P Paid to 30 ¹¹/₁₇ A/c Closed 30 ¹¹/₁₇</p> <p>* 20 A.P. overpayment - for Nov 17 Rec by Cas Authy A.L. 649-G-3700 on file 09616-G-115- Jr C.P. F.S. 26/12/17.</p>



Wife

MILITIA AND DEFENCE

M. F. W. 11a.
50m.-4-16.
1772-89-813.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2. *Ethel Jones*

L. L. Job 310.—Req. 6574.

PAYMENTS.

Name of Soldier *Jones Jerry*
Pte 715221

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July		<i>61020128</i>	<i>28</i>	
Aug.		<i>9138251</i>	<i>20</i>	
Sept.		<i>776060</i>	<i>20</i>	
Oct.		<i>A 19797</i>	<i>20</i>	
Nov.		<i>F 22694</i>	<i>20</i>	
Dec.		<i>F 26114</i>	<i>20</i>	
Jan.	1917	<i>L 26570</i>	<i>20</i>	
Feb.		<i>L 29992</i>	<i>20</i>	
March		<i>L 33609</i>	<i>20</i>	
April		<i>M 1405</i>	<i>20</i>	
May		<i>M 4861</i>	<i>20</i>	
June		<i>O 7699</i>	<i>20</i>	
July		<i>M 11512</i>	<i>20</i>	
Aug.		<i>V 14964</i>	<i>20</i>	
Sept.		<i>Y 18157</i>	<i>20</i>	
Oct.		<i>H 20639</i>	<i>20</i>	
Nov.		<i>M 23904</i>	<i>20</i>	
Dec.		<i>Q 26633</i>	<i>20</i>	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

A/c 24

368



..... A/c Closed 31-12-17.
 Ret'd per... *Olympic*
 Date *6-11-17* F. X. *27-11-17*.
 Clerk... *E.H. Collier*

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mrs. Ethel Jones*
 Address *Truro
 Nova Scotia*

Wife
 By Whom Assigned *Jones Jerry*
 Regtl. No. *716221*
 Rank *Pte*
 Corps *106 Batt*

Rate *20 ⁰⁰/_{xx}*

JUL 1 1916

PAYMENTS

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				



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

~~JERRY JONES~~

Jerry

716221

12078

Deceased on or about 23. 11. 50

M.H.

4944

~~406873~~



ORIGINAL

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins..... 106th. "Overseas" Bn. C.E.F.
 "NOVA SCOTIA RIFLES"

(2) Regimental Number # 716 221

(3) Full Name of Soldier..... Jeremiah Jones

(4) Place of Birth..... East Mountain, Col. Co. N.S.

(5) Are you married, or not?..... Yes

(6) If married, state,
 (a) Full name of your wife..... Ethel Jones
 Truro, N.S.

(b) Present Postal Address.....

(7) Are you a widower?..... No

(8) Have you any children?.....
 If so, give number of boys and girls..... 3 boys 2 girls
 Also their names and ages..... Gwennie age 16 years, Willie age 13 years
 Rosie, #age 6# age 6 years, Victor age 4 years.
 Elmore age 2 years old



(9) Is your Father alive?..... **No**
If so, state name and address

(10) Is your Mother alive?..... **No**
If so, state name and address

(11) If your Mother is a widow.....
Are you her sole support, or not?.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.
.....
.....

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.
..... **Wife**

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.
..... **No**

(15) Are you insured?..... **Yes**
If so, in what Company?.....
Have you made arrangements for payment of your Insurance premium..... **No**.....



If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

[Handwritten signature in blue ink]
.....
Officer Commanding.

Date.....



FORM TO BE USED INSTEAD OF BLANK SPACE ON ARMY FORM 179

PROCEEDINGS OF MEDICAL BOARD AT DISCHARGE DEPOT.

Number, Rank, Name, Name & Corps of disabled Soldier:-

716221 / Lt Jerry A. Jones. R. C. R's.

Previous civilian occupation:- Farmer.

Is he able to resume previous civilian occupation:- No

Cause of disability:- Wounded by shrapnel L. arm + L. side

Condition, in detail, which prevents the Soldier from earning a full livelihood:-

An April 9th 1917 was wounded in the left forearm, about the middle third, also a small wound a little above the left hip. No at all severe. was in hospital about 2 months. the wound in the arm healed up but is weak yet, though all gaining. is also cold. and at times pains, which chilling in England he ruptured himself on the left side. the hernia is very painful especially at times. he general health is good for a man 30 years old.

OPINION OF THE BOARD

Degree of incapacity - (please state in fractions) 30%

Disability due to Service:- 30%

Probable duration of incapacity:- partly permanent.

Does it render him permanently unfit for Military Service:- yes

Would operation, special treatment or the use of appliances etc., lessen incapacity:- Yes, operations.

Recommendation of Medical Board:- Convalescent home

Station:- Halifax, N. S.

Category:- DIII

Date Nov 16 - 1917

J. R. Keane Capt. President

W. J. Burton Capt. Member

J. H. Crawford Capt. Member

APPROVED

Date 16-11-17

Asst. Director Medical Services.

Date

Director General Medical Services.



716221 *Pro Jones. Jeremiah (CAP)*

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS						
	NO. OF DAYS	RATE	AMOUNT \$	C.	NO. OF DAYS	RATE				AMOUNT \$	C.	NO.	DATE	NO.	DATE	NO.	DATE	NO.	DATE	
B.F.			334	40					22 30	356 70					70	56	14	59	8	72
June 1/20	10	10	110	22						22										
21/30	10		356	40						778 70										
			11							11										
July 1/31	31		34	10						34 10										
Aug 1/31	31		34	10						34 10										
Sept 1/30	30		33							33										
			468	60						22 30	490 90									

CBD RR
12798 13/3

4 36
13 06

MONTH	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER. SER. PAY	SER. ALLER. ENG.
Sept 30	107 80	Balance Forward					107 80		
Oct 1/30	33	Can a.p.				20	87 80		
	33	AR 599 26 Res 15/17	7 30			20	120 80		
Nov		AR 126 17/17 B.B. Brown	43 80				213 50		
		" 484 14/17 2 C.C.D.	4 87						
		" 547 31/17 26 Res Rev	7 30						
		" " 562 27/17 2 C.C.D.	7 54				119 99		
1918 Jan 1/31		AR 857 27 9 17 2 C.C.D.	7 54						
		" 944 15 17 2 C.C.D.	7 54						
		" 991 28 17 - -	4 87						
		" 643 8 17 2 C.C.D.	7 54				22 49		

Balance transferred to N. E. Branch NIL

1820⁰⁰

EVENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			
872	487	200 -		298 74	57 96				
		20			48 73				
		220		20	59 96				
				318 74	50 73				
					70 96				
		20		20	85 06				
436		20		24 36	94 80				
		20		20	107 80				
1308		250		383 10	107 80				

Transfer to N.S.B. D. 21/6/17

A3M FORM REN^d *stop* EFFEC. *11/1/17*
 DISCHARGED TO *Gau* DATE *30/1/17*
 PAYBOOK VERIFIED *12/1/17*
Ad BAL 22nd L.P.O. REN^d *31/1/17*
 AUTHY *Prof 60* 21/1/17

Disposal

Checked *[Signature]* *to P.B.*

