

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?.....
2. In what Town, Township or Parish, and in what Country were you born?.....
3. What is the name of your next-of-kin?.....
4. What is the address of your next-of-kin?.....
5. What is the date of your birth?.....
6. What is your Trade or Calling?.....
7. Are you married?.....
8. Are you willing to be vaccinated or re-vaccinated?.....
9. Do you now belong to the Active Militia?.....
10. Have you ever served in any Military Force?..
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?.....
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?]

John White
Goderich Ontario
John White (Father)
Goderich Ontario
Nov 9th 1896
Farming
no
yes
no
no
yes
yes

John White (Signature of Man).
Maldou Douglas (Signature of Witness).
Q. 20154-C

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *John White*, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Date *March 23* 1914. *John White* (Signature of Recruit)
Maldou Douglas (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *John White*, 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.

Date *March 23* 1914. *John White* (Signature of Recruit)
Maldou Douglas (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 *Gallevan* this *23rd* day of *March* 1914

J. A. Smith (Signature of Justice)

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

Herbert [unclear] Lieut. Col. (Approving Officer)

Cmdg. 46th. Battalion, C. E. F.

Description of John White on Enlistment.

Apparent Age 19 years 4 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 9 ins.

Chest measurement { Girth when fully expanded 35 ins.
 Range of expansion 2 1/2 ins.

Complexion Dark

Eyes Grey

Hair Dark

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

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.)

none

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 Nov 23rd 1915

Place Estivari James G. Bright 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.

John White 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.

James G. Bright (Signature of Officer)

Date March 23rd 1914

REGIMENTAL DOCUMENTS

NAME *White John*

REGT. NO. *426972* UNIT

H. Q. FILE NO.

S
4x

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

46
13

M

DEATH

Category

DISCHARGE

Category

DESERTION

- ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- 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)
- MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)
- DENTAL HISTORY SHEET (M.F.B. 465)
- 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)
- LAST PAY CERTIFICATE (M.F.W. 44)
- PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

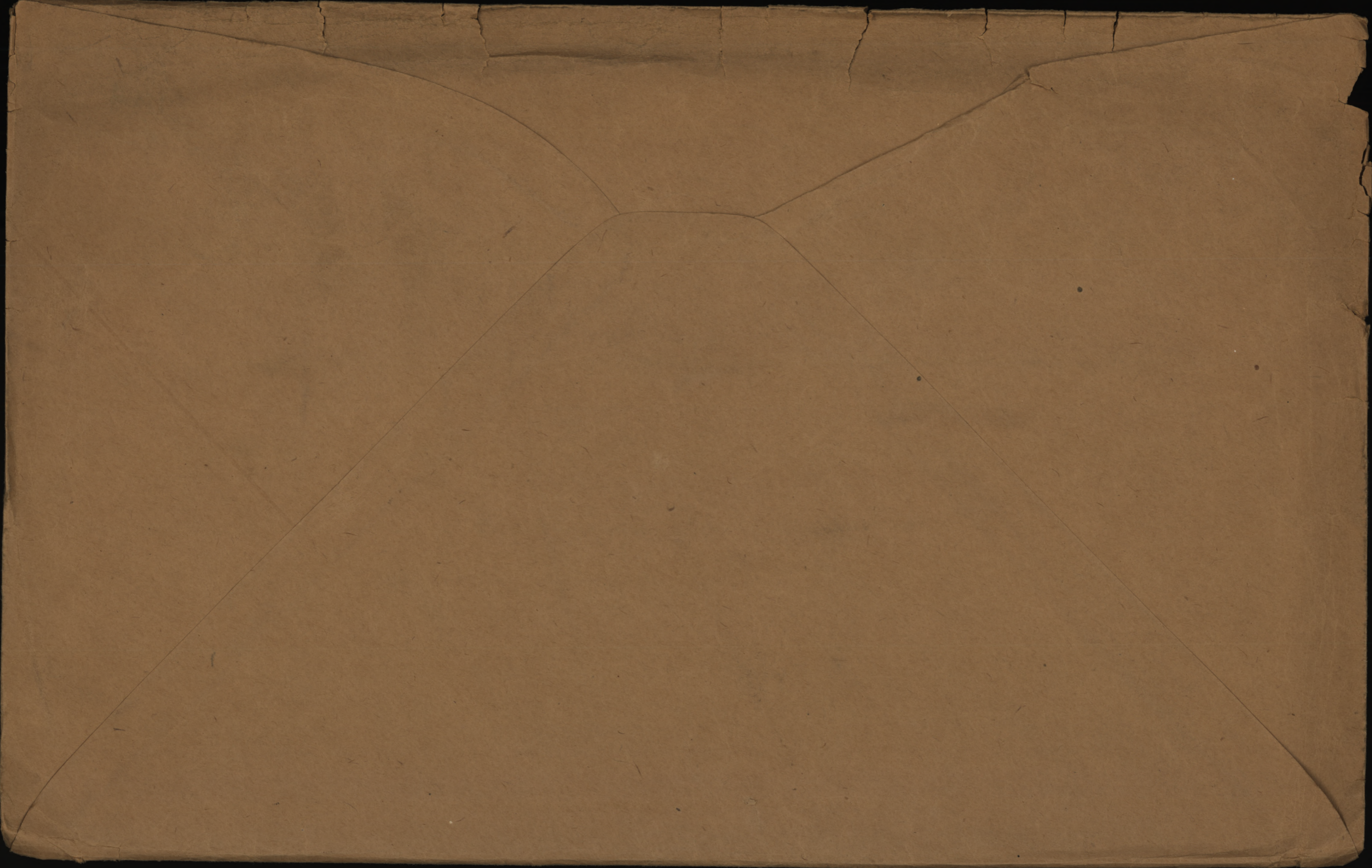
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1
25-21
10-21
5-21
T

H

2 Form of will
R149
1/1

22-12-20



NAME

*White John*REGT'L NO *426972*

RANK AND CORPS

Pte 13th Battr (Form 46th Bn)

H. Q. FILE NO. 649-

FOLLOWS

NO.

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

*01608 27-9-16**C Killed in action Sept. 4th 1916 ✓**a. 132090a R. 24-9-16**" " " " " "*

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

9470

Rep. from Base

killed in action
4-9-16

✓ ✓ ✓ ✓ ✓
White, J., Pte. 426972 (*form*) 649-W-3988
13th Bn.

Med. & Dec. (Father) ~~F~~ John White, Esq.,
m R. R. No. 2,
Clinton, Ont.

P. & S. (Father) Address as above.
(Serial no. 471347.)

Mem. Cross. (Niles)

note Elicy - for 14-15 star
E. ... N on
E. ... B on

a 40480

aa

Scroll Desp. 24-1-21 Reqn. No. 2-13248

Plague Desp. **APR 27 1922** Reqn. No. pb6356

(649-W-3988)

CARD NO.

✓

SURNAME. *White.*

CHRISTIAN NAMES *John*

FOLL.

D

REGL. NO. *426 972.*

RANK *Pte.*

UNIT *46th.*

Bn.

FORMER CORPS *Mil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL *White John*
RELATIONSHIP TO SOLDIER

ADDRESS ~~*Goderich Ont.*~~

R. R. No 2 Clinton Ont.

with letter 20-12-1867

COUNTRY OF BIRTH *Canada Goderich Ont.* DATE

PLACE OF ATTESTATION *Estevan Sask* DATE *Mar. 23rd. 1915.*

Sailed from Halifax per S.S.

"Lapland" 23-10-15 ²⁴⁴/₁₉

MARRIED

SINGLE

yes.

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

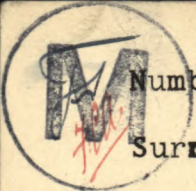
EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE



Number 136972 Rank Clt

Surname WHITE

Christian Name John

Units 13th Bn. Can. Inf. Theatre of War France

Date of Service 16-6-16

Remarks

Latest Address John White, Esq., (F.)

R.R. # 2, Clinton

Roll No. B. Page 22629. Ont.

2m-10-21.M.243.

R

D

DESP. FEB 7 1923
REGN. *[Signature]*
36175

Surname

Christian Name or Names

Reg. No.

White

J.

426 972

Rank

Unit

Co.

Troop

Batty

Pte
Hospital

13 Batt

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)

Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

Pte from base killed in action 4.9.16

DISPOSITION

Date

28.9.16 A440

REMARKS

A.M.D. 2 DEPT.
Ch. of D.G.M.S. O.M.F.C. London.



EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

ORIGINAL.

MEDICAL HISTORY SHEET.

L 8

Surname White Christian Name John

Examined { on 23 day of March 1915
 at

Birthplace { City or Town Goodrich
 County Ontario

Apparent age 19 years & 4 months

Trade or occupation Farmer

Height 5 Feet 9 Inches

Weight Lbs.

Chest measurement { Minimum 32 1/2 inches
 Maximum expansion 2 1/2 inches

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right Left
 Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

Approved by Wm. Creighton

Rank Captain M.O.

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

Date	Result	VACCINATIONS.
<u>4/4/15</u>		<u>B. du Boy</u> M.O. ✓
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1/5/15</u>		<u>B. du Boy</u> M.O.
<u>1/5/15</u>		M.O.
<u>2/5/15</u>		M.O.

Enlisted on 23 day of March 1915 at Estevan

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>46th</u>	<u>426972</u>	<u>Good</u>	<u>23/3/15</u>
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective ; the date and cause being stated on next page.

Surname *White* Christian Name *John*

STATION.	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				

Casualty Form—Active Service.

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

Regiment or Corps

46th Battalion Corp

Regimental No.

4269/2

Rank

Pte.

Name

White John

Enlisted (a)

Mar 23/15

Terms of Service (a)

D.W.

Service reckons from (a)

Mar 23/15

Date of promotion
to present rankDate of appointment
to lance rankNumerical position on
roll of N.C.Os.

Extended

Re-engaged

Qualification (b)

(Farmer)

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				
		Embarked, Halifax, Canada. 21. Octr. 1915. Disembarked, Devonport, England. 30. Octr. 1915.			
		<i>Provided overseas for service with 13th Bn 16/6/16</i>			
	O. C. B. D.	Landed in France. Taken on strength 60th Cdn. Bn. 17/6/16	Nom. Roll of Pt II D 26	30/6/16	LIEUT: COLONEL COMDG: 46th BATTN: CANADIAN INFANTRY.
18/6/16	do.	Left for Unit	18/6/16	Nom. Roll of	
23/6/16	O. C. 13 th Bn.	Arrived Unit for duty	19/6/16	B. 213 d/	
15/9/16.	O. C. 13th Battn.	Killed in Action. -----	Field.	4/9/16.	A.F.B. 213. D.C.S. 408, 24/9. Pt. II Crd. No. 48, 24/9/16. Capt., for Lt-Col., A.A.G., Can. Section, 3rd Ech.

(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.]

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				

Rank _____ Name **WHITE John** Reg'l No. **426972**
 Unit **46th Bn.** If in perm. Corps, }
 What Unit? } Married or Single **Single**
 Place and Date of Enlistment **Estevan. Sask. 23rd March. 1915** Place of Birth **Godrich. Ont.**
 Name and Address, Next-of-Kin **John White,** **Godrich, Ontario. Canada.**
 Relationship _____
 Assigned Pay Monthly \$ _____ Payable to _____
 Relationship _____
 Separation Allowance \$ _____ Payable to _____
 Relationship _____

*M x
22-12-16
ac*



Discharge, Date and Place Reason Character

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
		<i>S.S. Lapland Arrived in England.</i>		<i>2 11/15</i>	<i>Letter 8/6/16</i>
<i>22-6-16</i>	<i>Adjt 46th Bn</i>	<i>Proceeded overseas for service with 13th Bn</i>	<i>16-6-16</i>	<i>MI 20 145</i>	<i>Auth 10th Bde</i>
<i>30.6.16</i>	<i>of 13th</i>	<i>Taken on strength</i>	<i>Field</i>	<i>17.6.16</i>	<i>" 26</i>
<i>28.9.16</i>	<i>13th</i>	<i>Killed in Action</i>		<i>4.9.16</i>	<i>C.H. 0470</i>
<i>24.9.16</i>	<i>"</i>	<i>"</i>		<i>4.9.16</i>	<i>P.H. 045</i>

Rank *Private* Name

WHITE JOHN
If in perm. Corps,
What Unit?

Reg'l No **426972**

Unit *13th*
4th Bn.

Married or Single **Single**

Place and Date of Enlistment **Estevan, Sask. 23rd March. 1915** Place of Birth **Godrich, Ont.**

Name and Address, Next-of-Kin **John White,** **Goderich, Ontario, Canada.**

Relationship

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

Discharge, Date and Place *Called in action* Reason *Gr 470* Character
4-9-16 *28-9-16*

PAY OFFICE, N. E. BRANCH
NOV 21 1916
Entered on N.E. Card Index
Checked by *J. J. Johnson*

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc	
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date							
1915																		
Nov	30 ⁴	30	1	30	30	10	3		33			31 63			31 63	1 37		
Dec	31 ²¹	31	1	31	31	10	3 10	1 37	35 47			32 06			34 06	1 41		
Jan	31 ¹⁹¹⁶	31	1	31	31	10	3 10	1 41	35 51			19 46			19 46	16 05		
Feb	29	29	1	29	29	10	2 90	16 05	47 95			17 03			17 03	30 92		
Mar	31	31	1	31	31	10	3 10	20 92	65 02			19 46			19 46	45 56		
		152		152	15 20				167 20						121 64	45 56		

BALANCE TRANSFERRED TO NEW LEDGER.

Checked *R.H.H.*

Settled

Cash found in effects *N.R.*

Statement of
APR 20 1917
Account rendered

MARRIED OR SINGLE *S.*

PLACE OF BIRTH *Goderich. Ontario*

NAME AND ADDRESS OF NEXT OF KIN *John White
Goderich. Ontario*

RELATIONSHIP OF NEXT OF KIN

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Killed in Action</i>	<i>4 9/16</i>	<i>Cliff 470 9/16</i>

ADMISSIONS TO HOSPITAL, &c.			
DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. No. *426972* RANK *Pte* NAME *White John*

IF IN PERM. CORPS | UNIT *46 Battn* TRANSFERRED TO *10. Batt.* DATE *1/7/16* AUTHORITY *R.O. 148*
WHAT UNIT | TRANSFERRED TO *NEB* DATE *5/9/16* AUTHORITY *Cliff 470-289*
76

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY
PLACE OF ATTESTATION *Estevan, Sask.* TRANSFERRED TO DATE AUTHORITY
DATE OF ATTESTATION *28 March 1916* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON *7*

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE) *5/9/16*

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)



RELATIONSHIP
Entered on N.E. Card Index

Checked by *W. Lilloston*
RELATIONSHIP

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS			
	No. OF DAYS	RATE	AMOUNT \$	C.	No. OF DAYS	RATE				AMOUNT \$	C.	No. OF DAYS	RATE	AMOUNT \$	C.	1 No.	2 DATE				3 No.	4 DATE				1	2	3
<i>1916</i>																												
<i>Mar</i>									<i>167 20</i>																			
<i>Apr 1/30</i>	<i>30</i>	<i>100</i>	<i>30</i>	<i>10</i>	<i>3</i>			<i>33</i>	<i>502 10/4/16-24 20/4/16</i>					<i>7 30</i>	<i>9 73</i>					<i>17 03</i>	<i>61 53</i>							
<i>May 1/31</i>	<i>31</i>		<i>31</i>		<i>2 10</i>			<i>34 10</i>	<i>588 12/1/16-634 20/1/16</i>					<i>9 74</i>	<i>9 73</i>					<i>19 47</i>	<i>76 16</i>							
<i>June 1/30</i>	<i>30</i>		<i>30</i>		<i>3</i>			<i>33</i>	<i>689 10/1/16</i>						<i>4 86</i>					<i>14 86</i>	<i>104 30</i>							
<i>July 1/31</i>	<i>31</i>		<i>31</i>		<i>3 10</i>			<i>34 10</i>	<i>1405 3/7</i>						<i>261</i>					<i>18 61</i>	<i>135 79</i>							
<i>Aug 1/31</i>	<i>31</i>		<i>31</i>		<i>3 10</i>			<i>34 10</i>	<i>441 1/7 149 15/8</i>					<i>262</i>	<i>261</i>					<i>15 73</i>	<i>164 66</i>							
<i>Sept 30</i>	<i>30</i>		<i>30</i>		<i>3 -</i>			<i>33 -</i>	<i>1531 2/8</i>					<i>261</i>						<i>14 61</i>	<i>195 05</i>							
<i>Oct</i>																				<i>1 28 60</i>	<i>28 60</i>	<i>166 45</i>						
<i>June 19</i>																					<i>166 45</i>	<i>166 45</i>						

Checked *[Signature]*

Checked *[Signature]*

*28 overpaid 76 days of 16
Sept 1916
Transf 28.9. 5/7 Cliff 470
76 20/1/16*

To Ottawa for Settlement 19/5/17

Statement of
APR 20 1917
Account rendered

Cash found in effects *N.R.*

Small Ledger Sheet

DUPLICATE

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178^A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname W H I T E Christian Name John

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Gosditch County Ont: Canada

Examined ... { on 23rd day of March 1915,
at _____

Declared Age ... 19 years 4 months days.

Trade or Occupation ... Farmer

Height ... 5 feet 9 inches.

Weight ... _____ lbs.

Chest Measurement { Girth when fully Expanded 35 inches.

{ Range of Expansion 2 1/2 inches.

Physical Development ... _____

Vaccination Marks { Arm ... _____ Right _____ Left _____
Number _____

When Vaccinated ... _____

Vision ... { R.E.—V= _____
L.E.—V= _____

(a) Marks indicating congenital peculiarities or previous disease ... { (a) _____

(b) Slight defects but not sufficient to cause rejection ... { (b) _____

Approved by (Signature) W. Creighton
(Rank) Captain Medical Officer.

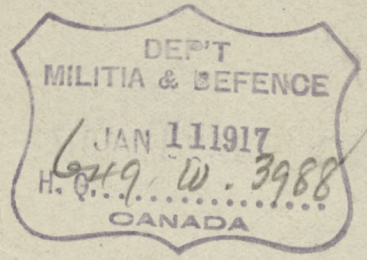
Enlisted ... { at Estevan
on 23rd day of March 1915.

Joined on Enlistment	Corps.	Regtl. No.
	<u>46th Batt:</u>	<u>426972</u>
Transferred to		

Became non-effective by ... _____

This Medical History Sheet has been compared with _____
now on the Attachment Paper, and copies made in red ink _____
taken from the _____
(Signature) _____
(Rank) _____

On _____ day of _____ 1915.



No. 426972. Pte. John White,
46th. Batt. C.E.F.

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 426972

Name John White

Unit 46th Batt. C.E.F.

Military Will.

I hereby bequeath all
money to my credit
from Army to my
Sister. Miss
Maggie White
Benmiller Ont.
Canada

Signature J. White

Rank and Regt. Private 46th Batt

Date 29/2/16

(M)

7

18051

Gray
11-1-19
R. C. JAN 11 1917



645

No. 48892. The John White
with...

[Faint, mirrored text from the reverse side of the paper, appearing as bleed-through. The text is largely illegible but seems to include names and possibly dates.]

