

card
M.A.P.

ATTESTATION PAPER.

No. 180381

Folio.

DUPLICATE

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

2/1/18

- 1. What is your surname? *Wilkinson*
- 1a. What are your Christian names? *Noel*
- 1b. What is your present address? *Tungoon P.O. Van Island.*
- 2. In what Town, Township or Parish, and in what Country were you born? *Goldborough (Yorkshire).*
- 3. What is the name of your next-of-kin? *Edith Wilkinson*
- 4. What is the address of your next-of-kin? *Tungoon P.O. Van Island.*
- 4a. What is the relationship of your next-of-kin? *Wife*
- 5. What is the date of your birth? *Dec 25th 1872*
- 6. What is your Trade or Calling? *Fruit Grower*
- 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 CANADIAN OVER-SEAS EXPEDITIONARY FORCE? *Yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Noel Wilkinson*, 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.

Date *Dec 20 - 1915* *Noel Wilkinson* (Signature of Recruit)
W.B. Rogers (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Noel Wilkinson*, 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 *Dec - 20 - 1915* *Noel Wilkinson* (Signature of Recruit)
W.B. Rogers (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 *Victoria* this *20* day of *Dec* 191*5*

H. Rossell (Signature of Justice)
Lieut.-Col Commanding

194

Description of Goel Wilkison on Enlistment.

Apparent Age 23 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 5 8 1/2 ft. ins.

Chest measurement { Girth when fully expanded 36 1/2 ins.
 Range of expansion 3 1/2 ins.

Complexion Buddy

Eyes Hazel

Hair Black

Religious denominations { Church of England C of E
 Presbyterian
 Methodist
 Baptist or Congregationalist
 Roman Catholic
 Jewish
 Other Denominations
(Denomination to be stated)

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 declares that he is not subject to fits of any description.

I consider him* fit for the **Canadian Over-Seas Expeditionary Force.**

Date Dec 20 1918

Place Victoria

H. P. O'Connell
Capt. C.M.E.

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.

..... Goel Wilkison 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.

..... H. J. Connolly (Signature of Officer)

Lieut.-Col. Commanding
 8th Battalion (Victoria Fusiliers) C.E.F.

Date Dec 20 1918

REGIMENTAL DOCUMENTS

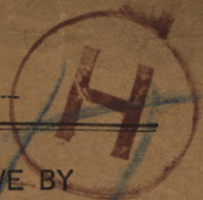
NAME *WILKINSON Noel*



REGT. NO. *180381*

UNIT *88th Batta.*

H. Q. FILE NO.



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DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

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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)

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MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

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5 Misc.

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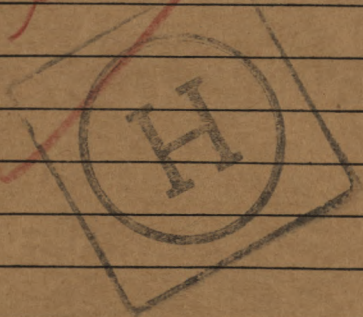
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1 M.F.W. 2502

Forwarded 20-3-58

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DEATH

Category

DISCHARGE

Category

Demob.

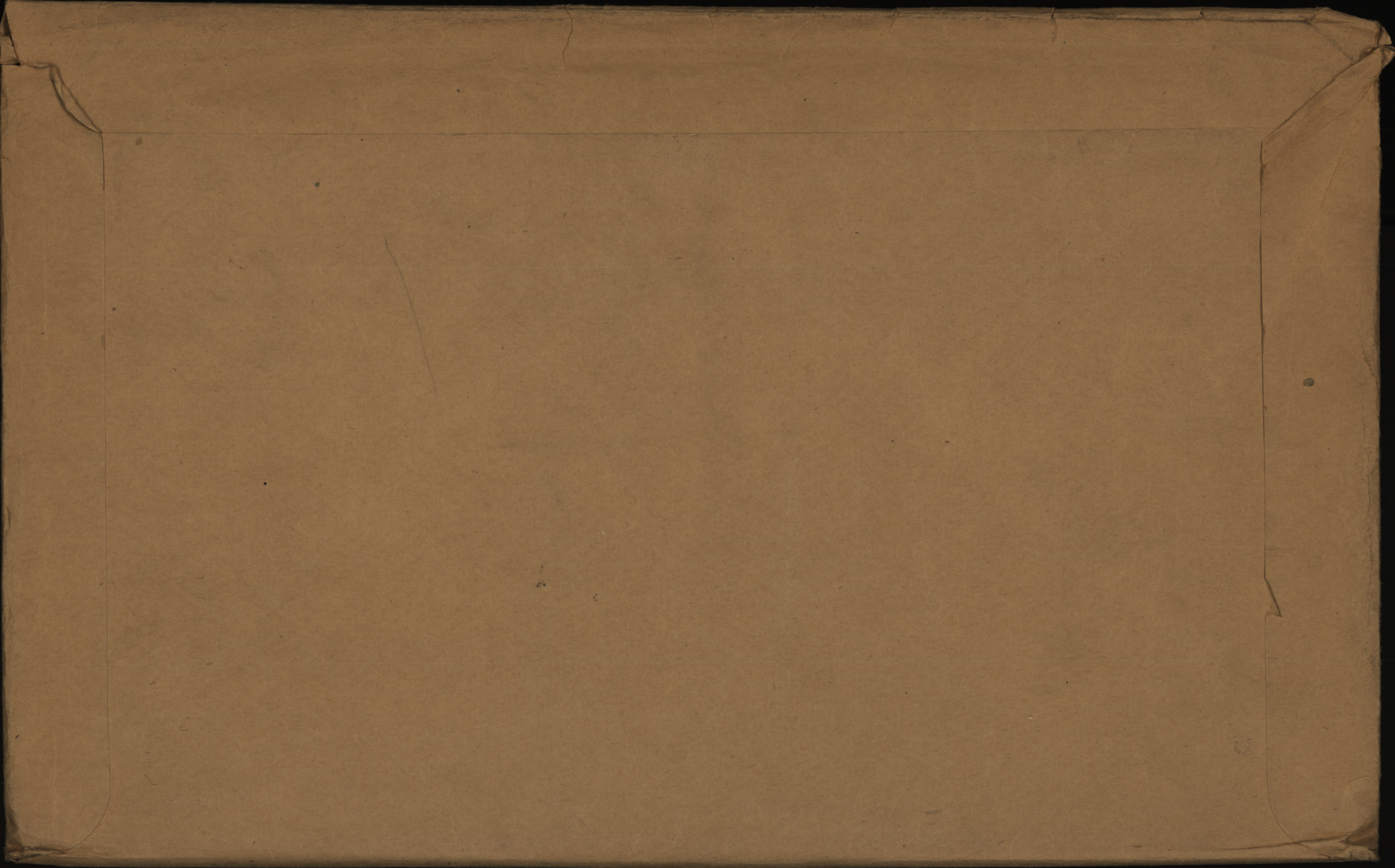
DESERTION

8 29

8 29

7 29

2



Name WILKINSON. Noel Rank Pte.

Reg. No. 180381.

Unit 24th. Battalion.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
23-12-16.	CRS DRS. <i>VCPA</i>	Myalgia back.	A417.			
5-1-17.	20. G.H. Camiers.	"	A419.		<i>In my hand</i>	<i>#5829</i>
13-1-17.	East Leeds	W.H. Leeds.	"	B271.		
14-2-17.	Can C.H.	Epsom.	"	B297.		
6-3-17.	Discharged.	"	"	B314.		

79
LIST No. *B*

HOSPITAL

DATE OF
ADMISSION

REMARKS

B
K

Number *180,381* Rank *A/L/Cpl*

Surname *WILKINSON*

Christian Name *Noel*

Unit *47th Bn. Can Div* Theatre of War *France*

Date of Service *2/8/16* *1031 Chamberlain*

Remarks *Victoria*

Latest Address *BC*

Surgeon P.O.

Van. Island, B.C.

Roll No. *Page 4527*

REGT. NO.

NAME

RANK AND UNIT

NEXT OF KIN

CABLE

NO.

DATE

NATURE OF CASUALTY

32960 *adm*

AUG 25 1921

ga

NAME *Wilkinson. Noel.*

*S.O.S. Dis 10-7-1914
80.1937 12-7-1914
180381
Dundee*

RANK & No. *Pte.*

CORPS *89th.*

Batt.

ENLISTMENT, PLACE *Victoria. B.C.*

DATE *Dec. 20th. 1915.*

FORMER CORPS *nil.*

COUNTRY OF BIRTH *England. Goldsborough. Yorks.*

NEXT OF KIN *Wilkinson. Mrs. Edith. (Wife)*

ADDRESS OF NEXT OF KIN *~~Furgose. V.I. B.C.~~*

P.M.D. J. Furgose P.O. South Saanich,

DISCHARGE, PLACE *Victoria, B.C.*

DATE *5.20 p. 25.5.17. cc.*

Sailed From Halifax

*R/C 25/1/19 $\frac{206}{97} \frac{13}{13}$
Per S.S. *Albatross*
M.F.W 22. 100 m. - 9.15.
H. Q. 1772 39 839.*

31-5-16448

REMARKS:

REGT'L NO 180381

H. Q. FILE NO. 649-

NAME Wilkinson Jr

RANK AND CORPS ppe 24th Battn.

FOLLOWS

NO.

FOLLOWS

CABLE

No.

DATE

NATURE OF CASUALTY

LIST No	HOSPITAL	DATE OF ADMISSION	REMARKS
a 417	Corps Rest Stat. 4 C. S. A.	23-12-14	Myalgia Back
a 419 To	No 20 Gen. Carriers	5-1-17	" " "
B 271	East Leeds War Leeds	13-1-17	" " "
B 297 To	Can. Conv. Widcoty Pk Epsom	14-2-17	Myalgia
B 314	Discharged	6-3-17	Myalgia

(This form to be filled in by all ranks on voyage to Canada.)

M.D. No. 11

NUMBER	RANK	SURNAME	INITIALS	UNIT
180381	Lieut	Wilkinson	NX	24 th Batt

Full postal address. TURGOOSE P.O. NE VICTORIA. B.C.
(Street) (City or Town) (Province)

Name of one person to be notified of arrival. MRS N. WILKINSON.

Address. TURGOOSE P.O. NE VICTORIA B.C.

Railway Station in Military District to which a furlough warrant is required. SLUGGETTS.
 B.C. ELECTRIC Railway

If married, is your wife on board. No - Number of children on board. Nil

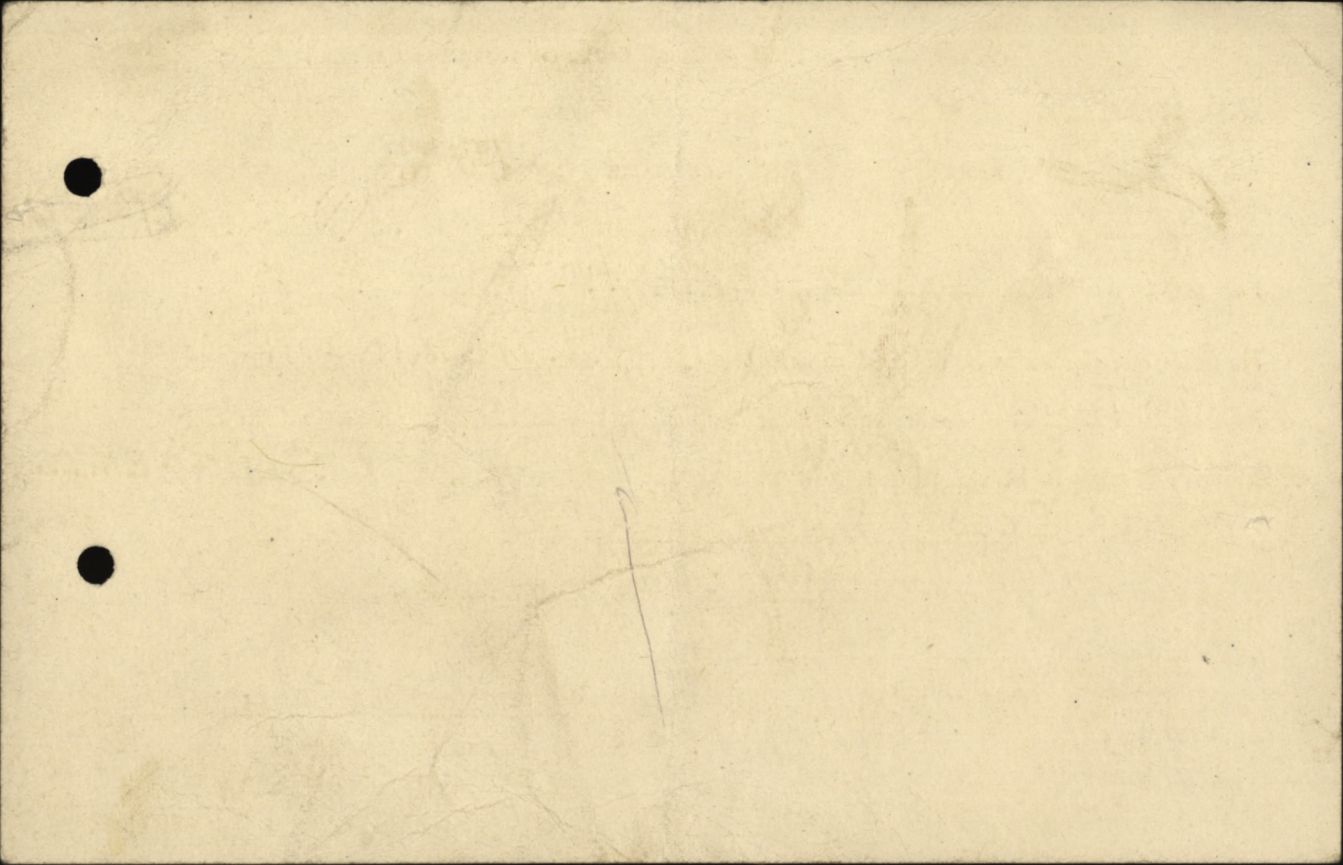
Their destination. _____

(Sgd.) N. Wilkinson.

M. F. W. 2502

50 M. - 4-18
 1772-39-1269

Civil Occupation Rancher & Fruit Grower.



Surname *Wilkinson* Christian Name or Names *W.* Reg. No. *180381*
 Rank *Pte.* Unit *24th Bn.* Co. Troop Batty.
 Hospital *Corps Rest Sta. 4 Can. I. Amb.* Date of Admission *23.12.16*
 Transferred *no 20 S.H. Camiers,* Hosp. *5-1-17*
East Leeds War. Hosp. Leeds, Hosp. *13-1-17*
Epsom Convalescent Hosp. *14.2.17*
 Hosp.

Diagnosis

Myalgia, Back.

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Disc. 6-3-17

Date

REMARKS

6.12.17 A417

" 15-1-17 Q418

" 19-1-17 B271

20.2.17 B297

" 12-3-17 B314

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London

OK

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

*Name Wilkinson Noel Rank Sgt Regtl. No. 180381

Original unit 88th Present unit 99th M. or S. N Age 47 Religion Cath Fyle Depot 6751 Ref. H.Q. _____

Port, ship, and date of arrival Compass of British

Next of kin Wife M^{rs} E. Wilkinson, Surgeon B.C. U.S.

Address on leave _____

Address on discharge Surgeon B.C. U.S.

Transportation issued Yes No _____ Date _____ Character on discharge _____

Previous occupation Fruit Grower Date and place of enlistment 20.12.15, Victoria B.C.

Diagnosis Dermatidiazation Date of Medical Boards 7-7-19.

Date.	Remarks	Pt. 2 Order No.
JUL 5 1919	adm staff DD <u>sub depot</u> T.O.S. from Coy <u>Posted to Gas Coy. 6/7/19 Leave</u>	186/2 h
12-7-19	to discharge section 12/7/17	193/3

*—Name will be given in full; surname first.

WAR SERVICE BADGE CLASS "A" WAR SERVICE BADGE CLASS B

No. 304215 ISSUED

No. 6.66930 ISSUED

Date

Remarks.

Pt. 2 Order No.

M.F.W. 192.
233-D.P.-200M-3-19.
1772-89-1243.

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

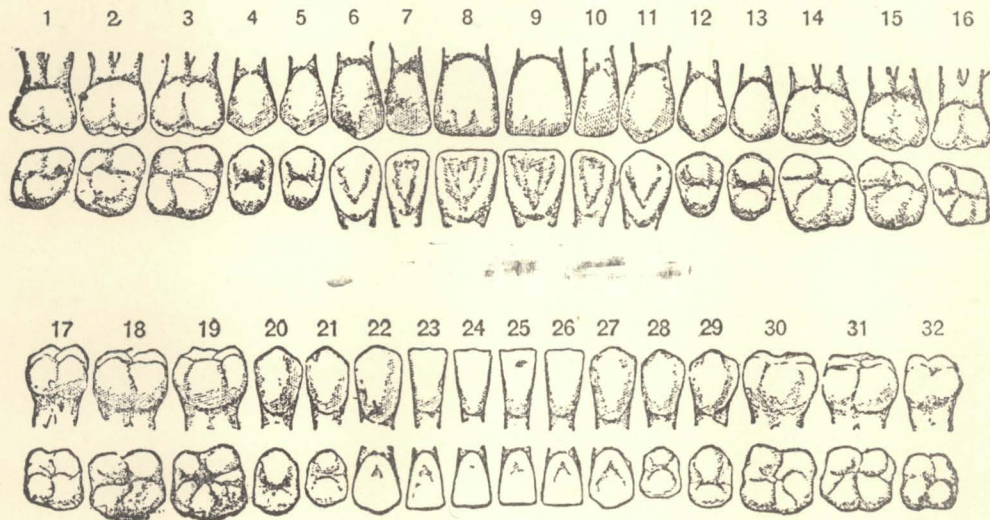
DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) WILKINSON, N. M. D. II.

REGIMENT 24th Btn. RANK L/cpl. No. 180381

Date of Examination in England 19/12/18 Date of Examination in France _____



DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.

PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES

- (a) Full Upper
- (b) Part Upper
- (c) Full Lower
- (d) Part Lower

adjust.

[Signature]
Cpl. G. J. Foley
 For A. D. D. S., M. D. No. 11.

JUL 10 1919

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In ~~Canada~~
- (b) In England *Yes*
- (c) In ~~France~~

KINMEL PARK, NORTH WALES.

Signature of Dental Officer *W. Kennedy*
Lieut.

WILKINSON M. D. H.
1901

1901

1901

1901

1901

1901

1901

1901

1901

**Medical Examination upon leaving the Service
of an Officer fit for general service or a Soldier fit for duty.**

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank *Pte* Name *A. H.* Surname *Wilkinson*
 Unit or Corps *23 Res.* (If a soldier) Regtl. No. *180381*
 Born at *Goldsborough Eng* on date *Dec 25 1872*
 Signature (for identification) *A. H. Wilkinson*

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. *no*

Weight
146 lbs.
 Height
5 ft. *8* ins.

2. **NUTRITION AND DIATHESIS?** *good*

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?** *no*

4. **RESPIRATORY SYSTEM.** *no*

5. **HEART?**

Abnormal Sounds? *no*

Abnormal Size? *no*

Pulse Rate? *60*

Intermittence or irregularity? *no*

6. **ARTERIES.**—Any hardening? *no*

7. **DIGESTIVE SYSTEM?** *no*

8. **GENITO-URINARY SYSTEM?** *no*

Urinalysis—s.g.? *1.020*

Reaction? *acid*

Albumen? *no*

Sugar? *no*

9. **SKIN, MIDDLE EAR, EYE**
or any other part? *no*

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. *no*

11. Opinion as to the health and physical condition of the one examined? *good*

Examined at *Kinnel Park*

Signed *Dr. J. H. ...* M.O.

Date *Dec 17 18*

Signed *Dr. J. H. ...* M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

W. Johnson

1871

1871

1871

28

1871

6751

psa

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 180381 Rank Act. Corp. Surname Wilkinson
(Given name in full)

Unit or Corps UD Signal (24Bⁿ) Birthplace Hull England

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. GENERAL DESCRIPTION:

Physique good Weight 140 lbs. Height 5 8 1/4 ft. Colour of Eyes brown
Nutrition good
Pulse 70
Condition of arteries good
Vision Rt. 20/20 Left 20/20
Hearing (conversational voice) Rt. 5 ft. Left 20 ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
long scars h. leg
operation on Varix.

Opinion as to general health and physical condition good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no
Special Senses yes Integumentary System no Respiratory System yes
Disturbance of mentality no Muscular System no Digestive System no
Osseous and Joint System no Any other general condition yes

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

Scarlet fever in childhood and Otitis Media st. ear - deaf in st. ear since that time -
Pleurisy Jan 1916 - no effusion -
Measles fever Jan. 1917 - Moderate
pains in legs when cold.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at (Overseas)

Date Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at VICTORIA, B.C. (Canada)

Date JUL 7 1919 Signed Meadows M.O. capt.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature N. Wilkinson

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
19 Year 1914	180381	Pvt.	Wilkinson	W
	Unit.	Age.	Service.	
	24 th Grenadier Bty	44	1 1/2	
Station and Date.	Disease			
EAST LEEDS WAR HOSPITAL General Road Jan 14	Myalgia			
	He has had Pleurisy last Feb but no other illness			
	He was all right until Dec 15 when he had pains in the lower part of his back, it gradually became stiff - but he afterwards complained of pains in both legs extending from the sole up the shin. Heart normal. Temp normal.			
				R. G. James
Jan 20	Temp 99.4	RCJ		
Jan 23	Temp Normal	RCJ		
Jan 26	Canadian Hospital	RCJ		
Feb 2 nd	Chest normal	RCJ		

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

02 of 43081

CERTIFIED CORRECT.

29 AUG. 1916

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

W.S.R.

M. F. W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

CAN. RECORDS, LONDON.

Unit, Regiment or Corps 88th BATTALION VICTORIA FUSILIERS C.E.F.

Regimental No. 180381 Rank Private Name Wilkinson Noel
C. E. F.

Enlisted (a) 20/12/15 Terms of Service (a) D.O. Service reckons from (a) 20/12/15

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) First Trower.

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	Queretaro	20/12/15	
8/6/16	288th Bn	Arrived Liverpool	8-6-16	8-6-16	Part II 137 C.
18/7/16		Admng Lance Corp	8-6-16	18 JUL 1916	D.O. 3884 Part II 179.
18.8.16	1/30th	Reverts to Ranks at own request	East Sandling	20.8.16	Part II 214/1
20.8.16		DRAFT TO 47th BATTALION C.E.F.	Overseas	20 AUG 1916	Part II 216/1 Capt. & Adjutant. t. F.
21.8.16	4/247th	Arrived in France	Laure	21.8.16	R.R.
21.8.16	4/247th	Taken on Strength 47th	In the field	21.8.16	Part II D. no 190 D 31.8.16
1-10-16	4/247th	Life spent in the field	In the field	1-10-16	transferred 1-10-16
4.10.16	4/247th	Transferred to 24th	In the field	4.10.16	Part II D.O. no 224. dt. 12.10.16
OCT 20. 1916	24th Bn Batt.	Arrived & Taken on Strength	Field	OCT 8 1916	B213
22.12.16		Lumbago	not stated	16.12.16	B213 267 dt 8/11/14
22.12.16	5 CFA	Myalgia Back	5 CFA	23.12.16	A36 267 dt 8/11/14
22.12.16			CRS 4 CFA	23.12.16	A36 267 dt 8/11/14

(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.]

Casualty Form—Active Service.

Regiment or Corps 23rd CanadianRegimental No. 180381 Rank Pte Name Wickinson NoelEnlisted (a) 20.12.15 Terms of Service (a) DP. II Service reckons from (a) 20-12-15Date of promotion } Date of appointment } Numerical position on }
to present rank } to lance rank } roll of N.C.Os. }Extended _____ Re-engaged _____ Qualification (b) Fruitpower

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				
<u>10-12-18</u>	<u>23rd Can. Res. Bn.</u>	<u>On Command to Segregation Camp, Rhyl</u>	<u>Bransford</u>	<u>10-12-18</u>	<u>DP. II O. 344</u>
	<u>do</u>	<u>On Command to Segregation Camp, Rhyl, ceases</u>	<u>Rhyl</u>		
	<u>do</u>	<u>S.O.S. on transfer from C.M.F. of C. to the C.M.F. Canada.</u>			
			<u>P. R. Jackson</u>		<u>Lieutenant Adjutant</u>
			<u>23rd Canadian Reserve Bn.</u>		
<u>30/1/19</u>	<u>Wickinson</u>	<u>T. O. S. District Depot XI.</u>	<u>Hastings Park Vancouver B.C.</u>	<u>13/1/19</u>	<u>D. G. P. II 30/1/19 1919</u>
<u>DISCHARGED</u>		<u>DEMobilIZATION</u>	<u>VANCOUVER, B.C.</u>	<u>10-7-19</u>	<u>D.O. 193/70.</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 taken from Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.

(b) e.g.: Signaller, Shoing 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				

Surname Wilkinson Christian Name Goel

Examined { on 20 day of Dec 1915
 at Victoria

Approved by L.F. Hampton
 Rank Capt. came M.O.

Birthplace { City or Town Goldborough
 County Yorkshire

Apparent age 43 years

Trade or occupation Fruit Grower

Height 5 Feet 8 1/2 Inches.

Weight 145 Lbs.

Chest measurement { Minimum 33 inches.

{ Maximum expansion 3 1/2 inches.

Physical development Fair

Small-Pox Marks

Vaccination Marks { Arm Left 2
 Number

When Vaccinated last Childhood

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		1.9 JAN 1917 M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS.
2/16	+	L.F.A. M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
10/4/16	0.75	L.F.A. M.O.
		L.F.A. M.O.
11/5/16	0.75	L.F.A. M.O.

Enlisted on 20 day of Dec 1915 at Victoria

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>88. Reg. V.F.</u>			
Transferred to..	<u>88. Batt. C.E.F.</u>	<u>180381</u>		<u>Dec. 20/15</u>
	<u>47th. Bn.</u> <u>23rd BATTALION C.E.F.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
			<u>OK</u> <u>Goel</u>

CANADIAN

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.

19 515

Surname *Wolkinson* Christian Name *Wol*

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				
<i>Victoria, B.C.</i> EAST LEEDS WAR HOSPITAL <i>200 Feet</i> Marshalls Road, Leeds	<i>20/12/15</i>	<i>31</i>	<i>1</i>	<i>16</i>	<i>5</i>	<i>2</i>	<i>16</i>	<i>Phlemy</i>	<i>6</i>	<i>posted to here.</i> <i>9/10</i> Pains in limbs but nothing definite found Discharged well	<i>R. Jamieson C.M.P.</i>
		<i>13</i>	<i>1</i>	<i>17</i>	<i>13</i>	<i>2</i>	<i>17</i>	<i>Myalgia</i>	<i>32</i>		
<i>C.C.D. Epsom</i>		<i>13</i>	<i>2</i>	<i>17</i>	<i>6</i>	<i>3</i>	<i>17</i>	<i>- do -</i>		<i>1 Week P.T.</i> <i>Transferred to C.C.D. E. as fit</i> <i>for duty.</i>	<i>M. B. ...</i> <i>Capt. C.C.D. E.</i>

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate



This is to Certify that No. 180381 (Rank) L/Cpl.

Name (in full) Noel Wilkinson enlisted in
the 88th Bn.

CANADIAN EXPEDITIONARY FORCE at Victoria BC on the 20th
day of December 1915

HE served in France with 47th Bn.

and is now discharged from the service by reason of **DEMOBILIZATION**

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age 47 yrs
Height 5' 8 1/2"
Complexion Ruddy
Eyes Hazel
Hair Black

Marks or Scars Long scars left leg

N. Wilkinson
Signature of Soldier

V. A. MacLean
Issuing Officer

Date of Discharge July 10, 1919

Captain
Rank
For O.C. D.D. No. XI
Appointment

Signed at Vancouver this 10th day of July 1919

in Military District No. Eleven

File Reference No. DD W. 6751

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE
Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

.....
Name of Officer

.....
Rank

.....
Appointment

WAR SERVICE BADGE CLASS "A" WAR SERVICE BADGE CLASS "B"

No. 304215 ISSUED

No. 666930 ISSUED

KF

R-122

182

Rank

Plt

Name

WILKINSON. Noel.

Reg'l No. 180381

Unit 88TH BN

If in perm. Corps,
What Unit?

Married or Single *Married*

Place and Date of Enlistment *Victoria B.C. 20th Dec 1915.* Place of Birth *Yorks England.*

Name and Address, Next-of-Kin *Edith Wilkinson. Fingoose. P.O. Vancouver B.C. Canada* Relationship *wife*

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R.B. No. 17691
File R.L.
O R CANADA
Category

Discharge, Date and Place

Reason

Character *1/3*

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>Arrived in England</i>		<i>8 JUN 1916</i>	
<i>8-6-16</i>	<i>88th Bn</i>	<i>Appointed Acting Sclpl with pay</i>	<i>Otterpool.</i>	<i>8-6-16</i>	<i>Pt II D.O. #137.</i>
<i>18.7.16</i>	<i>88th En</i>	<i>tfd to 30th Res Bn</i>	<i>E. Sandling</i>	<i>18.7.16</i>	<i>Pt II. 179</i>
<i>17.7.16</i>	<i>Ofc 30</i>	<i>Taken on strength</i>	<i>"</i>	<i>14th/16</i>	<i>" 182</i>
<i>20.8.16</i>	<i>.</i>	<i>Transf. to 47th Bn</i>	<i>Overseas</i>	<i>20th/16</i>	<i>" 216</i>
<i>31.8.16</i>	<i>47th En</i>	<i>T-O-S. from 30th Bn</i>	<i>Field</i>	<i>21-8-16</i>	<i>Pt-II-190</i>
<i>18.8.16</i>	<i>30th Res Bn</i>	<i>Reverts to the ranks at own request on proceeding overseas.</i>	<i>Shorncliffe</i>	<i>20-8-16</i>	<i>Pt II D.O. 214</i>
<i>12.10.16</i>	<i>47th Bn</i>	<i>Trans to 24th Bn</i>	<i>In the field</i>	<i>7.10.16</i>	<i>Pt II D.O. 224</i>
<i>16.10.16</i>	<i>24th Bn</i>	<i>Taken on strength</i>	<i>"</i>	<i>8.10.16</i>	<i>" " 64.</i>
<i>P2.12.16</i>	<i>24th Bn.</i>	<i>adm. Corps Rest Sta. 4 Can. Fld. Ambulance.</i>	<i>"</i>	<i>23.12.16</i>	<i>CL A 417 Myalgia back</i>

A.F.B. 103 CHECKED
25 AUG 1916
WR

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.				
15.1.17	24 th Bn.	To 20 Genl. Hosp. Coy. 4 Can. Fed. Amb. Corps. Rest Station	Camero	5.1.17	C/Lt A419 Myalgia Back
19.1.17	"	Adm. East Leeds. War Hosp.	Leeds.	13.1.17	" B271 " "
18.1.17	"	Sick held to clear. Shoreham on Sea.	Field	12.1.17	RV " 5 S.
26-1-17	C.C.C.C	Taken on strength.	Nastings	13-1-17	" " 44
20-2-17	24 th Bn	Trans C.C.A. Hosp Woodcote P/H	Epsom	14-2-17	C/Lt B297 " "
7.3.17	23 rd R. Bn	T.O.S. from ccac	Shoreham	6.3.17	PT 100. 63.
14.3.17	1st Lieut R.D.	T.O.S. from ccac	Woodcote Pk	10.3.17	" " " 6
12.3.17	24 th Bn G.L.	Disch Can Con Hosp	Epsom	6.3.17	C/Lt B314 Myalgia
28.3.17	1st Lieut R.D. 23 rd R. Bn	Sol. to 23 rd Res Bn.	Shoreham	10.3.17	PT 100. 20
8.9.17	23 rd R. Bn.	To be Lance Corporal	Sham	8.9.17	PT 100. 248.
10-1-18	- " -	granted 1 good conduct stripe	26pl. Dist/20	9-1-18	- " - #10.
23-1-19	"	Sol. On F6 to CCF Canada m 8 "	" "	12-1-19	" 23

R M D #1
 Turgoose P.O.
 South Saanich
 near Victoria B.C.

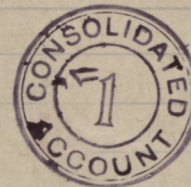
MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12.
 50m.—4-16.
 H. Q. 1772-39-819.

To Whom Edith M. Wilkinson By Whom Assigned Wilkinson Noel
 Address ~~Turgoose P.O. B.C.~~ Regtl. No. 180381
~~1714 Pleasant Ave B.C.~~ Rank L/Cpl.
~~Duke Bay Victoria B.C.~~ Corps 88th Batt #4 Coy
 Rate \$15.00 JUN 1 1916 B.C.

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				



MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.
 50m.—4-16.
 1772—39—819.

Sheet No. 2.

Edith Wilkinson *wife*
 OVERSEAS CONTINGENTS
 PAYMENTS.

Name of Soldier

Wilkinson Noel

L. L. Job 310.—Req. 6574.

Le 180381
\$ 15.00

Month.	Year.	Cheque No.	Amt.	Remarks.
				JUN 1 1916
April	1916			
May				
June		A 6917	15	
July		B 11500	15	
Aug.		R 15259	15	
Sept.		B 19257	15	
Oct.		B 23864	15	
Nov.		Z 29612	15	
Dec.		O 34303	15	
Jan.	1917	O 42252	15	
Feb.		N 48885	15	
March		Q 53324	15	
April		Q 6008	15	15 R
May		Q 12364	15	
June		P 19666	15	B.
July		V 26484	15	
Aug.		32794 32794	15	32794 cancelled
Sept.		Q 40144	15	
Oct.		A 22365	15	
Nov.		Y 49293	15	
Dec.		W 60859	15	
Jan.	1918			
Feb.				285 ⁰⁰ / _{XY} @ 31 ¹² / ₁₇
March				
April				
May				
June				
July				

Ref.

6

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.				

20/12/15
MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name *Edith M. Wilkinson* Name of Soldier *Wilkinson Noel*
 Address ~~*Four Fourgouse P.O.*~~ Regtl. No. *180381*
~~*Fourgouse P.O. V.I. B.C.*~~ Rank *Pte.*
~~*1214 Pleasant Ave, Oak Bay*~~ Corps *88th Battr*
 Relation to Soldier } *wife* To what Corps belonging }
 wife, child or mother } *Victoria, B. C.* when called out }
Fourgouse P.O. ✓ ✓

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.		<i>K 23876</i>	<i>47 -</i>	<i>47</i>
March		<i>027753</i>	<i>20 -</i>	<i>20</i>



67

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MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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.				

ASSIGNED PAY ~~ENGLAND~~ CANADA.

SEPARATION ALLOWANCE.

ENGLAND or CANADA.

NAME: *WILKINSON, Noel*

EFFECTIVE DATE: *1-6-16*

EFFECTIVE DATE: -

NUMBER: *180381*

AMOUNT: *15.00 Stopped 1-1-19*

AMOUNT: -

PARTICULARS OF RANK OR APPOINTMENT

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

AUTHORITY

DATE EFFECTIVE

RANK OR APPOINTMENT

*Mrs Edith Wilkinson
Turgoose P.O. B.C.
(Wife) A 2 m Term*

Pte.

UNIT AND TRANSFERS

ORIGINAL UNIT: *88th Bn.*

DATE ACCOUNT FIRST OPENED: *1-6-16*

AUTHORITY

DATE EFFECTIVE

DATE LEDGER SHEET T'S'D

UNIT TRANSFERRED TO

1st QRD

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS

UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
<i>15/1/18</i>	<i>2004</i>	<i>23 Res.</i>	<i>9.73</i>				
<i>28/1/18</i>	<i>2162</i>	<i>"</i>	<i>7.30</i>				
<i>4/2/18</i>	<i>2221</i>	<i>"</i>	<i>17.03</i>				
<i>L.P.O. Cr Bal 19.32 31-12-18.</i>							

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY

PAY

F.A.

P.F.A.

SUBS'CE ALL'CE

1.00 - 10

PARTICULARS OF RENDERING NON-EFFECTIVE: *Res to Canada 1-1-19 Auth Ref. nr. 4. 5/12/18. Disposal.*

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>1918</i>											
<i>March</i>	<i>Balance Forward</i>			<i>Can. ap. - apr.</i>				<i>15 -</i>	<i>24.54</i>		
				<i>AR 106. 23 Res. 15/4/18.</i>	<i>9.73</i>						
<i>April</i>	<i>Pte Pay</i>	<i>33 -</i>		<i>" 231 " 30/4/18</i>	<i>9.73</i>				<i>23.08</i>		
		<i>33</i>			<i>19.46</i>			<i>15</i>			
<i>May</i>	<i>Pte Pay</i>	<i>34 10</i>		<i>Can. ap. May</i>				<i>15</i>			
				<i>AR 401 23 Res 25/5/18</i>	<i>9.73</i>				<i>32.45</i>		
				<i>AR 589 do 31/5/18</i>	<i>9.73</i>				<i>22.72</i>		
		<i>34 10</i>			<i>19.46</i>			<i>15</i>			
<i>June</i>	<i>Pte Pay</i>	<i>33 -</i>		<i>Can. ap. June</i>				<i>15</i>	<i>40.72</i>		
				<i>AR 774 23 Res 15/6/18</i>	<i>9.73</i>				<i>30.99</i>		
				<i>" 879 " 27.6.18</i>	<i>9.73</i>				<i>21.26</i>		
		<i>33</i>			<i>19.46</i>			<i>15</i>			
<i>July</i>	<i>Pte Pay</i>	<i>34 10</i>		<i>Can. ap.</i>				<i>15</i>	<i>40.36</i>		
				<i>AR 946 23 Res 9/7/18</i>	<i>9.73</i>				<i>30.63</i>		
				<i>AR 1153 " 27/7/18</i>	<i>9.73</i>				<i>20.90</i>		
		<i>34 10</i>			<i>19.46</i>			<i>15</i>			
<i>Aug.</i>	<i>Pte Pay</i>	<i>34 10</i>		<i>Can. ap.</i>				<i>15</i>	<i>40.00</i>		
				<i>AR 1170 23 Res 10/8/18</i>	<i>14.60</i>				<i>25.40</i>		
				<i>AR 1345 do 30/8/18</i>	<i>7.30</i>				<i>18.10</i>		
		<i>34 10</i>			<i>21.90</i>			<i>15</i>			
<i>Sept.</i>	<i>Pte Pay</i>	<i>33 -</i>		<i>Can. ap.</i>				<i>15</i>	<i>36.10</i>		
				<i>AR 1447 23 Res 14/9/18</i>	<i>9.73</i>				<i>26.37</i>		
				<i>AR 1560 do 30/9/18</i>	<i>9.73</i>				<i>16.64</i>		
		<i>33</i>			<i>19.46</i>			<i>15</i>			
<i>Oct</i>	<i>Pte Pay</i>	<i>34 10</i>		<i>Cap</i>				<i>15</i>	<i>25.74</i>		
				<i>AR 1756 " 31-10-18</i>	<i>9.73</i>				<i>26.01</i>		
				<i>" 1879 " 31-10-18</i>	<i>9.73</i>				<i>16.28</i>		
		<i>34 10</i>			<i>19.46</i>			<i>15</i>			

NUMBER 180381

RANK

DE

NAME WILKINSON Joel

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
OC	Bal 31								16 28		
Nov	RPay	33		Cap				15	34 28		
				AR 2004 33 Res 15-11-18	9 73				24 55		
				" 2165 " 30-11-18	7 30				17 25		
				" 2221 " 5-12-18	17 03				- 22		
Dec	RPay	34 10		Cap				15	19 32		
		67 10			34 06			30			
				AR Nigg. Kiv. Pk 22-11-18	9 73				9 59		
Feb				AR C 1791 " 9/1/9	9 73						14 X R Condor
					19 46						

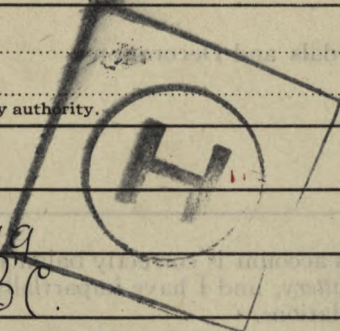
This space to be for numbers.



Proceedings on Discharge.

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

No.	180381
Rank	Lt Col.
Surname	Wilkinson
Christian name	Moel
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	88 th Bn.
Date of discharge	July 10 1919
Place of discharge	Nanaimo B.C.



1. DESCRIPTION AT THE TIME OF DISCHARGE.

	Age..... years..... months.	Descriptive marks
Age	47	
Height	5 feet 8 1/2 inches.	
Complexion	Ruddy	Long scars left leg
Eyes	Grey	
Hair	Black	
Trade	Unit graver	
Intended place of residence	26 Gurgoose St. J. B. C.	
(To be given as fully as practicable.)		

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

W.D.O. 193/42. **DEMobilIZATION** Under R.O. 1420 c 2/12/18
 Authority for discharge.....

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

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

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 soldiers and the Officer Commanding his Squadron, Battery or Company.

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

Sailed for Canada.
 Empress of Britain
 13th Jan. 1919.

M. F. B. 218.

200M.—5-18.

H. Q. 1772-39-113.

WAR SERVICE BADGE CLASS "A"
 No. 304215 ISSUED

WAR SERVICE BADGE CLASS "B" (OVER)
 No. 666930 ISSUED

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.....

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

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

(Place).....

(Date).....

Commanding.....

8. Certificate to be signed by the Soldier on Discharge

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

(Place) 10. 1919

(Date)

S. Wilkinson (Signature of Soldier.)

B. F. Richman (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....(Signature of Soldier.)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

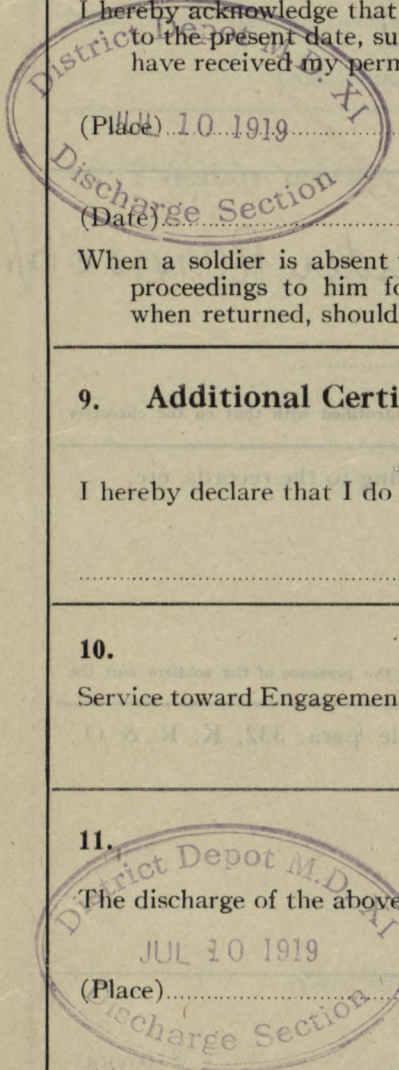
The discharge of the above-named man is hereby confirmed.

(Place).....

(Date).....

A. Maclean Capt. (Signature).....

District Depot, XI



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.)

None.

N. Wilkinson.

<p>Arrestation Paper Particulars of Recruits Proceedings on Discharge</p>	<p>W. 33 W. 138 B. 312</p>	<p>Medical Report for Invalids Dental History Sheet Last Pay Certificate Duplicate Discharge Certificate Form of Will</p>	<p>B. 322 B. 403 W. 44 W. 304 W. 82</p>
<p>Proceedings on Discharge</p>	<p>W. 178</p>	<p>Copies of Convictions, by C. T.</p>	<p>W. 31</p>
<p>Arrestation Paper</p>	<p>W. 31</p>	<p>Medical Report for Invalids</p>	<p>W. 31</p>
<p>Particulars of Recruits</p>	<p>W. 31</p>	<p>Medical Report for Invalids</p>	<p>W. 31</p>
<p>Proceedings on Discharge</p>	<p>W. 31</p>	<p>Medical Report for Invalids</p>	<p>W. 31</p>

I hereby certify that the following documents are indispensable to a complete discharge of the above named soldier.

Documents not accompanying this form should be traced and returned to the proper authorities.

Officer Commanding

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.

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a Company } or Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged "Medically unfit."</p> <p>‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23 or Particulars of Recruit " W. 133</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="padding-left: 40px;">(a) Proceedings on Discharge</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet.</p>
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Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

~~201215~~ 1/9/18

Separation and Assigned Pay Branch

June 1/16

OVERSEAS CONTINGENTS

W 6123

RATE OF SEPARATION ALLOWANCE

20	\$ 25.00	30
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1-12-17
P.C. 3257

Pb 2753
M.P.O. 40654

RATE OF ASSIGNMENT

15		
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PARTICULARS OF SEPARATION ALLOWANCE

No. 18 0381

Rank ~~L/Cpl.~~ Promoted

Reverted

Discharge

Soldier's Name

Noel Wilkinson

Battalion

88 Batty # 4. Coy

Beneficiary

Mrs. Edith M. Wilkinson

Relationship

(Wife)

Address

M.F.W. 2554 July 30/18
ret OK 22/18

PARTICULARS OF ASSIGNMENT

Name

~~C. Smith~~ Edith Wilkinson

Address

~~R.M.D. # 1 Surgeon P.O.~~

Change of Address

~~m. Victoria B.C.~~

1

R.M.D. # 1 Surgeon P.O.

2

Saanich Victoria B.C.

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec	—	489	285	772	
Jan 18	Y 66732	30	15	45	
Feb	F 67909	25	15	40	0076
Mar	X 94272	25	15	40	✓
Apr	W 16421	25	15	40	✓
May	W 22413	25	15	40	✓
June	T 25262	25	15	40	
July	B 25409	25	15	40	
Aug	V 39595	25	15	40	
Sept.	V 49939	25	15	40	✓
Oct.	X 53750	25	15	40	
Nov	L 59704	25	15	40	
Dec	P 63669	45	15	60	✓
Jan 19	N 76196	30	15	45	
		\$ 42	480		

19108-N-5

Notation rendered re underassignment 90-7-18

M. F. W. 128.
40 MC 6-7-1-72-38-1141
L. L. 22320-M & D. 1992

M.D. # 11

A/c Clerk
Revd
Date
M.F.W. 18
21-1-19
Empress of Britain
28/19

M.D. 53259 Aestray Road K.D. 28/19
OK WOB.



Britain 22-1-19
 PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING
 DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 180381 RANK *Capt.* NAME (IN FULL) *WILKINSON, N.*

M. OR S. *M.*

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?	(BLOCK LETTERS SURNAME FIRST)
ADDRESS		<i>Eng 7 PB</i>			PLACE OF ATTESTATION	TRANSFERRED TO <i>Admin Staff DD XI</i>	DATE <i>20-2-19</i>
		<i>adj to</i>	<i>3/12/18</i>		DATE OF ATTESTATION	TRANSFERRED TO	DATE <i>19-2-19</i>
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$	DATE EFFECTIVE	
TO WHOM PAID <i>Mrs Edith Wilkinson</i>	RELATIONSHIP <i>Wife</i>	<i>DO 43</i>	<i>1-1-19</i>	<i>DO 43</i>	<i>15.00</i>	<i>To be continued by unit from 1-2-19</i>	
ADDRESS <i>R.M.D. #1</i>		<i>Discharged 19-2-19</i>		<i>DO Cancelled</i>	PAYABLE TO <i>Mrs Edith Wilkinson</i>	RELATIONSHIP <i>Both the Same</i>	
		<i>from Corporal</i>	<i>20-2-19</i>	<i>60.64</i>	ADDRESS <i>R.M.D. #1</i>		
					<i>Turgooel P.O. Saanich B.C.</i>		
					STOP PAYMENT FORM RENDERED, DATE	EFFECTIVE	
					DISCHARGED <i>without Victoria</i>	DATE <i>10/7/19</i>	REASON <i>Demob</i>
							AUTHORITY <i>50193</i>
							IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGIMENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT	
<i>9-12-18</i>		<i>1.10</i>		<i>19.32</i>												<i>19.32</i>	
<i>Jan 31</i>	<i>31</i>		<i>34.10</i>	<i>53.42</i>				<i>9.73</i>	<i>9.73</i>		<i>15.00</i>			<i>74.33</i>	<i>20.91</i>		
<i>Feb 19</i>	<i>19</i>		<i>20.90</i>	<i>11.20</i>				<i>4.87</i>	<i>30.00</i>	<i>5.00</i>				<i>79.10</i>	<i>20.91</i>		<i>Discharge Cancelled</i>
				<i>35.-</i>				<i>70.-</i>						<i>186.10</i>	<i>100.-</i>		<i>Do 43-14 Subs</i>
<i>Feb 28</i>	<i>28</i>		<i>30.80</i>	<i>11.20</i>				<i>6.09</i>					<i>20.91</i>	<i>77.-</i>			<i>Do 43-14 Subs</i>
<i>MAR</i>		<i>1.20</i>	<i>37.20</i>	<i>90.30</i>				<i>23.10</i>						<i>68.10</i>			<i>Do 64 - Cpl. 20-2-19</i>
<i>Apr</i>			<i>26.-</i>	<i>30.-</i>				<i>15.-</i>	<i>6.-</i>		<i>145.-</i>			<i>66.-</i>			<i>Do 64 - Cpl. 20/28-2-19</i>
<i>May</i>			<i>34.20</i>	<i>30.-</i>				<i>10</i>	<i>12.20</i>		<i>145.-</i>			<i>64.20</i>			<i>Subs. allow from 20-2-19</i>
			<i>80.80</i>	<i>80.80</i>					<i>80.80</i>					<i>80.80</i>			<i>10.31.5.19 = \$80.80</i>
<i>June</i>			<i>36.-</i>	<i>30.-</i>				<i>15.-</i>	<i>30.-</i>		<i>145.-</i>			<i>90.-</i>			
<i>July 10</i>	<i>10</i>		<i>12.-</i>	<i>10.-</i>					<i>125.-</i>		<i>40.-</i>			<i>165.-</i>	<i>100.-</i>	<i>600.-</i>	
				<i>180</i>					<i>3 years</i>		<i>40.-</i>	<i>30.-</i>		<i>100.-</i>	<i>350</i>	<i>150</i>	
			<i>420</i>	<i>180</i>					<i>1140.264-8</i>		<i>70</i>	<i>30</i>		<i>100</i>	<i>280</i>	<i>120</i>	
									<i>11562.67-8</i>		<i>70</i>	<i>30</i>		<i>100</i>	<i>210</i>	<i>90</i>	
									<i>600</i>					<i>300</i>	<i>210</i>	<i>90</i>	

Approved
 Certified that all payments have been made on this account in full which covering authority has been received to date.
 Paymaster, Demobilization Pay

Approved
 I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the M.F.W. 2595 received.
 M.D. No. *11*

183 days. W.S.G.

* 180381

Coyl.

WILKINSON. N.

MONTH	PAY AND F.A.		OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS	
	NO. OF DAYS	RATE			AMOUNT	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT		CREDIT
						\$	C.	\$	C.	\$					C.			
				600									300	210	90			
													100	140	60			
													100	70	30			
													100					
				600									600					

Forward

Oct 10 1574896-7 70 - 30 - 4
 Nov 10 1584530-1 70 - 30 - 5
 Dec 10 1599046-7 70 - 30 - 7

300 - 210 - 90 -
 100 R.M. 140 - 60 -
 100 R.M. 70 30
 100 R.M. /

600

600 R.M.