

REGIMENTAL DOCUMENTS

me

NAME Chambers Alister

REGT. NO. 21290-6

UNIT 1st SDB m.R.

H. Q. FILE NO. _____

(S)

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY
DEATH

- 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. 178)
- DENTAL HISTORY SHEET (M.F.B. 455)
- 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)

8

(W)

13979

Category

DISCHARGE

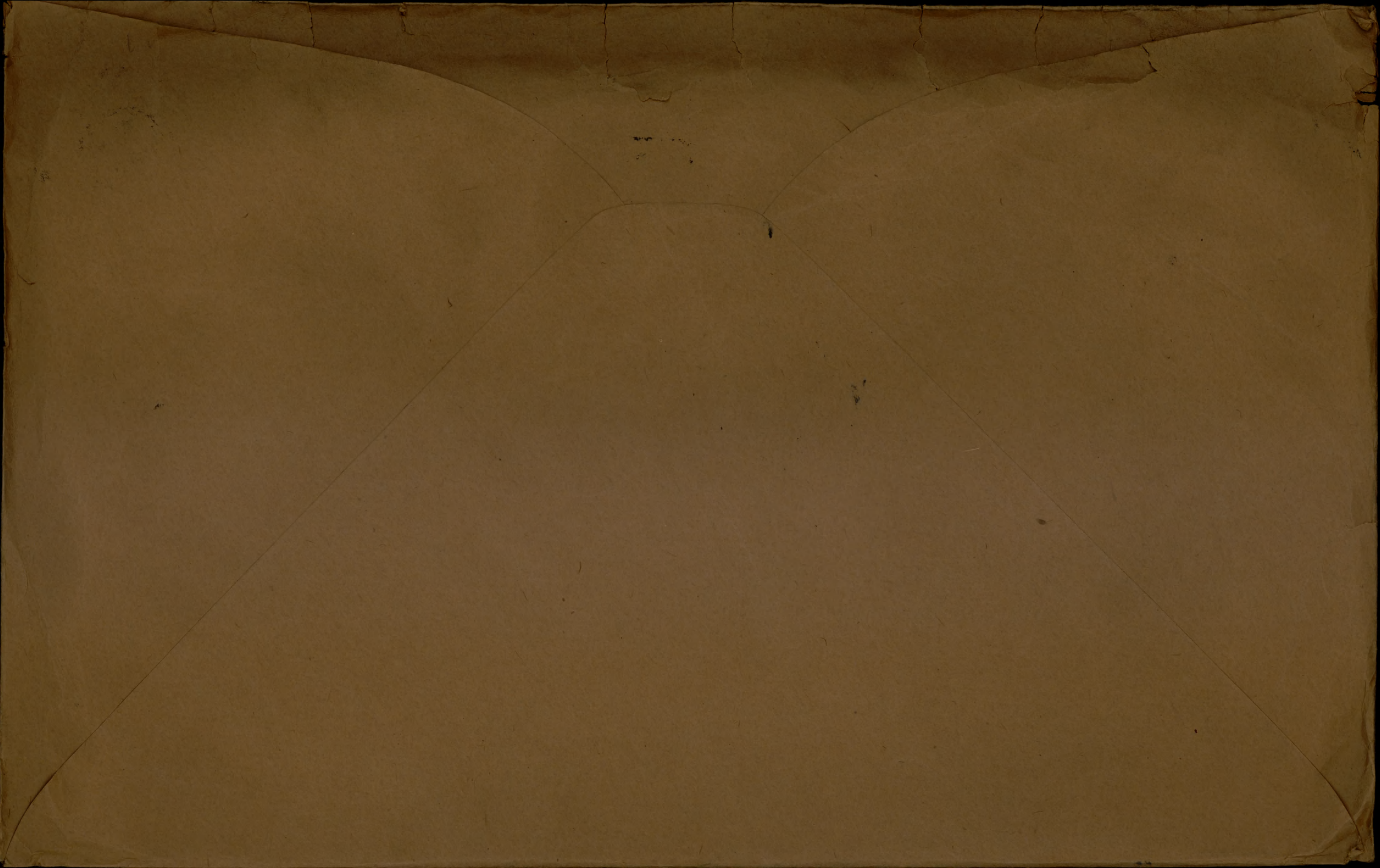
Category

(H)

DESERTION

28-1
16-1
3-2
1

M.F. 11/30 (2)



PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One.)

ORIGINAL

1. Surname.....CHAMBERS
 2. Christian name.....Allistar
 3. Present address.....Minto, Manitoba, Canada.
 4. Military Service Act letter and number.....300102 JR
 5. Date of birth.....May 14th, 1895
 6. Place of birth.....Cambray, Ontario, Canada.
(town, township or county and country)
 7. Married, widower or single.....Single.
 8. Religion.....Presbyterian
 9. Trade or calling.....Farm Labourer.
 10. Name of next-of-kin.....William Chambers
 11. Relationship of next-of-kin.....Father.
 12. Address of next-of-kin.....*CM* Cambray, Ontario, Canada.
 13. Whether at present a member of the Active Militia.....No.
 14. Particulars of previous military or naval service, if any.....Nil.
 15. Medical Examination under Military Service Act:—
 (a) Place.....Brandon, Manitoba (b) Date.....Oct. 29, 1917. (c) Category.....A2
 Canada.

DECLARATION OF RECRUIT

I, Allistar Chambers, do solemnly declare that the above particulars refer to me, and are true.

Allistar Chambers (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age.....22 yrs.....8 mths.
 Height.....5 ft.....7 ins.
 Chest measurement } fully expanded.....39 ins.
 } range of expansion.....2½ ins.
 Complexion.....Red
 Eyes.....Gray
 Hair.....Brown

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

Large brown mole right side abdomen
 Nil

Charles Whelley Major
 Brandon Detachment,
 O. C. 1st Depot Btln.
 ?Manitoba Regt.

Place Brandon, Manitoba Date January 5th, 1918.
Canada.

ORIGINAL
MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

Single

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar

1. Surname Chambers Christian name Alister
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 300102 JOP
3. Consecutive number on schedule of men reporting for service (if he appears on it) 79
4. Address (including street and number, if any) Wm's Manitoba Canada

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 29th day of October 1917, by the undersigned medical board sitting at Brandon, Man. itoba Canada

5. Age as stated 22 Years 5 Months. 6. Apparent age 24 Years - Months
7. Height 5 Feet 7 Inches. 8. Weight 148 Pounds.
9. Chest measurement { Minimum 36 1/2 Ins. Maximum 39 Ins. 10. Complexion Red { Eyes Grey Hair Brown
11. Physical development Good { Good Fair Poor 12. Smallpox marks Nil

13. Number of vaccination marks { Right arm 1 Left arm 0 14. When vaccinated last 1905

15. Distinctive marks and marks indicating congenital peculiarities or previous disease Large brown mole on right side of abdomen

16. Slight defects but not sufficient to cause rejection Nil
The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis Vision R. Eye 20/80 L. Eye 20/20 Hearing R. Ear Normal L. Ear Normal
(Strike out disease admitted or suspected.)

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category A2

W J Edwards Member, W J Edwards President, W J Edwards Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>25-1-18</u>	<u>Pos.</u>	<u>W. S. L. Luffford M.O.</u>	<u>9-1-18</u>	<u>1</u>	<u>W.S.L.</u> M.O.
			<u>22-1-18</u>	<u>2</u>	<u>W.S.L.</u> M.O.
			<u>25-1-18</u>	<u>3</u>	<u>W.S.L.</u> M.O.

Joined 5th day of January 1918 at Brandon, Manitoba, Canada

CORPS	REG'TL NUMBER	HABITS	DATE
<u>1st Depot Batt. Manitoba Regt</u>	<u>2129026</u>		<u>5-1-18</u>
<u>18th CAN RES BN</u>			<u>APR 8 1918</u>
<u>8th Bn.</u>			<u>AUG 14 1918</u>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

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

Canada
Alister Chambers
No. 6
Ord. to Schedule by AW

MILITARY SERVICE ACT, 1917.

Single

MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar

1. Surname *Chambers* Christian name *Allister*
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule *300102 JR*
3. Consecutive number on schedule of men reporting for service (if he appears on it) *79*
4. Address (including street and number, if any) *Wm's Manitoba Canada*

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the *29th* day of *October* 1917, by the undersigned medical board sitting at *Brandon, Manitoba Canada*

5. Age as stated *22* Years *5* Months. 6. Apparent age *24* Years — Months
7. Height *5* Feet *7* Inches. 8. Weight *178* Pounds.
9. Chest measurement { Minimum *36 1/2* Ins. 10. Complexion *Red* { Eyes *Grey*
Maximum *39* Ins. { Hair *Brown*
11. Physical development *Good* { Good Fair Poor 12. Smallpox marks *Nil*

13. Number of vaccination marks { Right arm *1*
Left arm *0* 14. When vaccinated last *1905*

15. Distinctive marks and marks indicating congenital peculiarities or previous disease *Large brown mole on right side of abdomen*
Nil

16. Slight defects but not sufficient to cause rejection
The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis
(Strike out disease admitted or suspected.) *21/80*
20/20

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category *A-2*
W. J. E. Smith Member. *Ed. Cotton* Member.
President. *L. Ear* *Normal*
Hearing R. Ear *Normal*
L. Ear *Normal*

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<i>25-1-18</i>	<i>PS</i>	<i>A. S. Guthrie</i> M.O.	<i>9-1-18</i>	<i>1</i>	<i>whb</i> M.O.
		M.O.	<i>22-1-18</i>	<i>2</i>	<i>whb</i> M.O.
		M.O.	<i>25-1-18</i>	<i>3</i>	<i>whb</i> M.O.

Joined *5th* day of *January* 191*8* at *Brandon, Manitoba, Canada.*

CORPS	REG'TL NUMBER	HABITS	DATE
<i>1st Depot Batt.</i>	<i>Manitoba Regt 2129026</i>		<i>5-1-18</i>

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

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

Allister Chambers
Sturm Lator
Canada
Signature of Man

287

FORM OF WILL.

I, Allistar Chambers (Name in full)
Regimental Number 2129026 serving in 1st Depot Batt. Man. Regt.
of the Canadian Expeditionary Force, do hereby revoke all former Wills by me
made and declare this to be my last Will.

I bequeath all my real estate unto

NIL } Name and Address
of person or
persons to whom
it is to go.

absolutely, and my personal estate I bequeath to

Miss Ethel Graham (Friend) } Name and Address
Minto P.O. Box 65 Manitoba Canada } of person or
persons to receive
personal estate*
(See note).

**IMPORTANT
NOTE**
This must be Signed
and Dated by
THE SOLDIER
HIMSELF.

this 9th day of February A. D. 1918

Allistar Chambers Signature of Soldier.

*N.B.—Personal estate includes ~~pay, effects, money in bank, insurance policy, in fact~~ everything
except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence
of us both present at the same time, who in his presence, at his request, and in
the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness cc Good
Address of Witness 317 20th Street Sacramento Calif. U.S.A.

**THE TWO
WITNESSES
MUST
SIGN HERE**

Occupation of Witness Pte. "G" Coy. 1st Depot Batt. Man. Regt.

Signature of Second Witness K. Williams

Address of Witness 240 Louise Ave. Brandon, Manitoba Canada

Occupation of Witness Pte. "G" Coy. 1st Depot Batt. Man. Regt.

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

M. F. W. 54. (A. F. B. 103.)

Casualty Form—Active Service.

250M.—1-18.
H. Q. 1772-39-920.

Unit, Regiment or Corps 4th Spt 1st Depot Battalion, Manitoba Regiment

Regimental No. 2129026 Rank Private Name CHAMBERS, Allistar

Enlisted (a) 5-1-18 Terms of Service (a) C.E.F. @ of War Service reckons from (a) 5-1-18

Date of promotion to present rank. } Date of appointment to lance rank } Numerical position on roll of N. C. Os. }
Civil : Farm Laborer
Military : _____

Extended _____ Re-engaged _____ Qualification (b) _____

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				

CERTIFIED CORRECT,
 23 AUG 1918
 CAN. RECORDS, LONDON.

*Embarked
 Disembarked*

*Halifax 8/4/18
 Liverpool 19/4/18*

✓

1/19/18
 o/c 18th Res Batt

Taken on strength on arrival from CANADA

18/4/18
 Seaford

Part 2 D.O. 121 ✓

15 1918
 18th Res: Bn

Optd to 8th Bn.

AUG 14 1918
 SEAFORD

Part II D.O. 227. ✓
B. J. Thomas
 Captain,
 Asst. Adj. 18th. Can. Res. Batt.

AUG 15 1918

Lo. J. S. B.

Seaford

NR. 1350 4th 88 of 21/18

24. 8. 18.

Arr. Unit.

AUG 15 1918

B 713

OCT - 1 1918

WOUNDED TO HOSPITAL

29. 9. 18

at 7. A 36/K 5345

3. 10. 18.

23 lbs. Died of wounds received in action

2. 10. 18

PII No 121 of 6/18.

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

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				
					<p><i>Known for</i> <i>1st Lt. Col. A.C.</i> <i>Canadian Section</i></p>

LTR

Rank **4th Dft IstBn MANITOBA** Name **CHAMBERS, Allistar** Reg'l No. **21 29026**
 Unit **MANITOBA** If in perm. Corps, }
 What Unit? } Married or Single **Single.**
 Place and Date of Enlistment **Brandon, Jan. 5th, 1918.** Place of Birth **Cambray Ont.Can.**
 Name and Address, Next-of-Kin **William Chambers.**
Cambray Ontario Canada Relationship **Father.**

Assigned Pay Monthly \$

Payable to

Separation Allowance \$

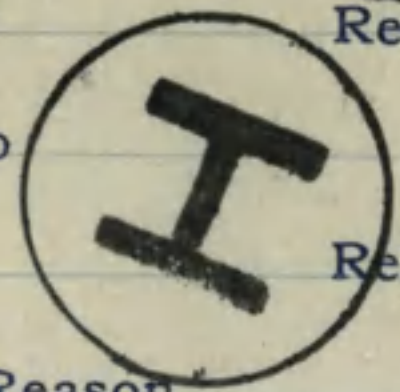
Payable to

Discharge, Date and Place

Reason

Character

N/E. R.B. No. **12876**
 File R.L. **25-C-5911**
 Category **DW**



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.				
	C. Arrived in England			19-4-18 S/S TUNISIAN	
I. 3, I 4	18 Res T.O.S FROM Canada		19.4.18. Pt II O I2I		
15-8-18	---	SOS to 8th Bn specio	Pte Seaford	14/8/18	Pt O. 227. 8th Bn P.I.O. 884/21/18.
6-10-18	8th Bn	Died of Wounds	Pte Field	2-10-18	Pt O. 121.
8-10-18	"	Died of Wounds	"	2-10-18	6 LA 339

Date of Enlistment *5.1.18.*

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

C

4035
4036 April 1918.

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>15</i>			
-----------	--	--	--

3944

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

1129026
9/18

No. *2129026*

Rank Promoted Reverted Discharge

Soldier's Name

Battalion *1st Depot Bn., Man. Reg. 4th Draft.*

Beneficiary

Relationship

Address

Name *Miss Ethel Graham,*

Address

Change of Address

1

2

3

4

MISS ETHEL GRAHAM,
MINTO,
MAN. *15* *15.00*
% 2129026 PTE ALLISTAR CHAMBERS
FIFTEEN DOLLARS

Date 1918	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Apr</i>	<i>y 8891</i>		<i>15</i>	<i>15</i>	
<i>May</i>	<i>g 19896</i>		<i>15</i>	<i>15</i>	
<i>June</i>	<i>g 20938</i>		<i>15</i>	<i>15</i>	
<i>July</i>	<i>y 30902</i>		<i>15</i>	<i>15</i>	
<i>Aug</i>	<i>E 30412</i>		<i>15</i>	<i>15</i>	
<i>Sept</i>	<i>g 42239</i>		<i>15</i>	<i>15</i>	
<i>Oct</i>	<i>g 51432</i>		<i>15</i>	<i>15</i>	
			<i>105</i>	<i>105</i>	

File 03041-a-19

KILLED IN ACTION }
DIED OF WOUNDS } DATE *2-10-18*
C. L. No. *329 folio 7* DATE *12-10-18*
M. R. O. *7181* TO DESTROY RENDERED *18-10-18*
B. P. C. FORM 1 & C. F. X. COMPLETED ON FILE
03041-a-19
CLERK *A. Hunt* DATE *18-10-18*

E2X-10-6-19

AUTHORITY FOR NEW ACCT.

M. F. W. 128
400M-6-17-1772-39-1141
L. L. 22320-M. & D. 1993.

AUTHORITY FOR NEW ACCT. }
M. A. MID. 10. B. 1.
M. Hollerand
25.4.18.

Surname

Christian Name or Names

Reg. No.

Chamber **S.**
Rank

A.
Unit

2129076

pte

Man. F.

Cas. List.

Died of Wds;

2-10-18.

23 C.C.S.

8-10-18 A 339

Sw Back. 2/3

2-1-19 A410³

Note Ref A 339. Surname should read "Chambers"

A.M.D. 2 DEPT.

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

No. 2129026 RANK *Pfc*

NAME *Chambers, A.*

T. O. S. *5-1-18* UNIT *1st Depot Battalion Man. Regt.*

nos of 5-1-18.

M. D. *10*

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PAID
FROM

PAID
TO

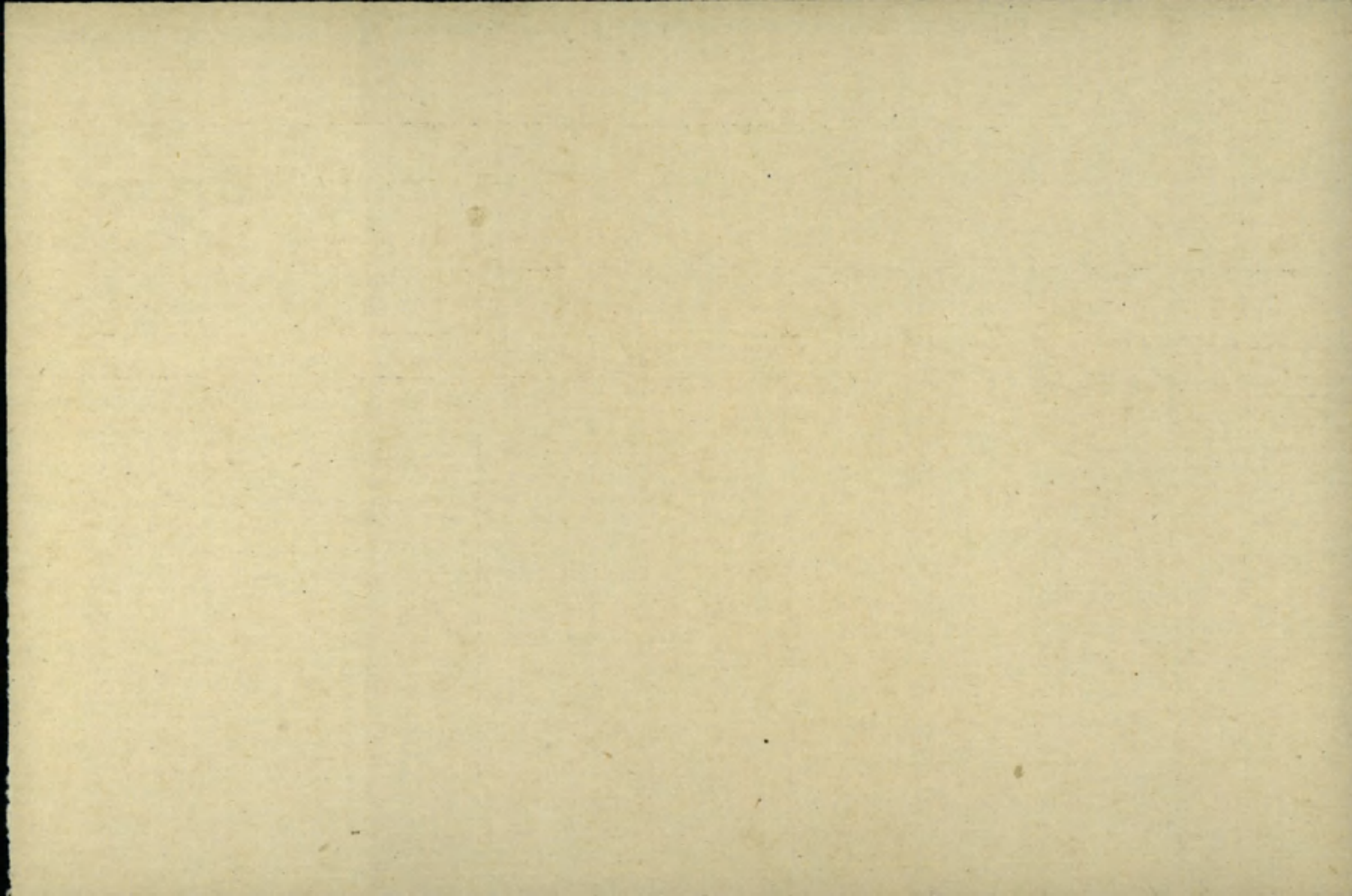
SIG.
OR
REC'T

PARTICULARS

AUTHORITY

1918 1918
Jan 5 Jan 31

v



P.O. Chambers,

149. C-25200
A. ~~Clister~~

212902⁶

8th Br. ✓
Medals
&
Decorations

Name & Address of Legatee

Miss Ethel Graham (friend)
Box 65
Niuta, Man.

M
Plaque
&
Scroll

Name & Address of Next of Kin

Serial No. 792541
William Chambers (F)

MAH 18 1921

Cambray
Out

Serial Disp

Rec. No. 1.29778

P4504

Plaque Disp

Memorial C.
M.C.

Name & Address of Female Next of Kin

Mrs. Margaret Chambers (M)
Cambray Out

745

M 1220

scroll ret'd 22-3.21-

212

Number *2129026*

Rank *Plt*

(Handwritten mark)

Surname *CHAMBERS*

Christian name *Allister*

Units *8th Bn C Inf* Theatre of War *France*

Date of Service *14.8.18* *III*

Remarks *(Friend) Miss Ethel Graham*

Latest Address *Box 65*

Winton, Man.

Roll No. *B. Page 21213*

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

RANK

SURNAME

INITIALS

UNIT

Home address.....
(Street) (City or Town) (Province)

Name of person to be notified of arrival.....

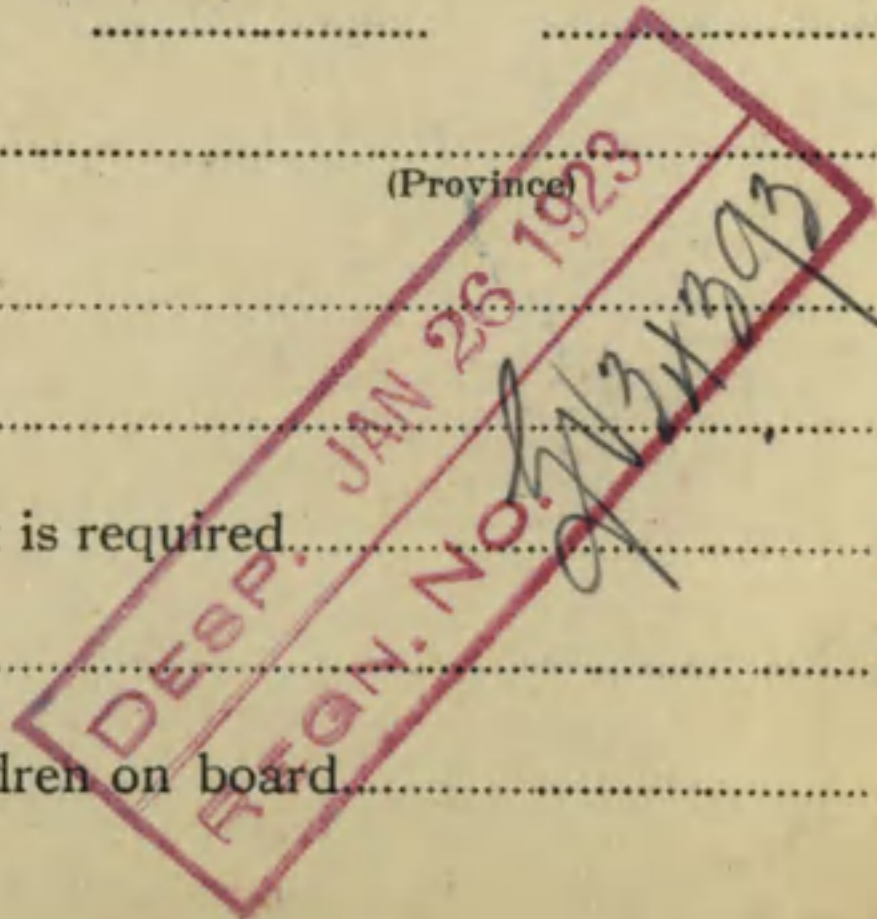
Station in Military District to which a furlough warrant is required.....

..... Railway.....

..... is your wife on board..... Number of children on board.....

..... Destination.....

(Sgd.).....



Allister &

Name **CHAMBERS** Rank **Plt** Reg. No. **2129026**

Unit **80th Can** **25-C-5211.**

Next of Kin **William Chambers**
Cambridge Ont Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918 2-10	23 CCS	SW BACK				2756
	DIED OF WOUNDS			A 339H	276	
	Name on A 339 should be Chambers					
	not Chambers as published			A H 11		

M. S. A. D. ¹²/₁₄ Chambers
SURNAME.

CARD NO. M. 6. 10 ✓

CHRISTIAN NAMES Allistar

FOLL.

REGL. No. 2129026 RANK Pte

UNIT Man Regt. 1st Spo Bn.
FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Chambers William

RELATIONSHIP TO SOLDIER Father

ADDRESS Cambray, Ont

COUNTRY OF BIRTH Canada Cambray Ont. DATE May 1st 1895

PLACE OF ATTESTATION Brandon, Man. DATE Jan 5th 1918

0/5.9-4-18- 115-2

MARRIED

SINGLE

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

NAME *Chambers Allistar*

REGT'L. No. *2129026*

RANK AND CORPS *Pte. 7th Bn. form Man Regt 1st Div. P. Bn.*

H. Q. FILE NO 649

FOLLOWS
NO.
FOLLOWS

CABLE

NATURE OF CASUALTY

NO. DATE

²²⁻²
H 376 9-10-18

*D. of W. 23 l. l. s. Oct 2nd 1918
G. S. W. back.*

*M. of W. William Chambers "Father"
Cambray, Ont.*

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

A339.

23 G G S.

2-10-18

Wop ro. Sew back

* Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND or CANADA.	SEPARATION ALLOWANCE.	ENGLAND or CANADA.
EFFECTIVE DATE:-	1/4/18	EFFECTIVE DATE:-	
AMOUNT:-	1500	AMOUNT:-	

NAME:- *CHAMBERS, Allistar*
 NUMBER:- *2129076*

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.

Miss E. Graham
(Friend)
Minto, Man

AS P.B. verified

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>etc.</i>
	<i>2/10/18</i>	<i>Died of Wounds. C.No. A339 8/10/18</i>

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN REP.

DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT

UNIT AND TRANSFERS

ORIGINAL UNIT:- *4th Draft 1st Det Bn*

DATE ACCOUNT FIRST OPENED: *2-4-18*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
			<i>18th Res Bn</i>
<i>88</i>	<i>1/9/18</i>	<i>20/9/18</i>	<i>8 Bn</i>
	<i>1/10/18</i>		<i>Non Off B</i>

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
<i>etc.</i>	<i>100</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE:-

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>2-4-18</i>	<i>Bal from Canada</i>								<i>1270</i>		
<i>May</i>	<i>3/4/18 to 3/5/18 P.P.</i>	<i>6490</i>		<i>b.a.p. Apr & May</i>				<i>30</i>			
				<i>AR 209 - 6/5/18 - 18 Res</i>	<i>2433</i>						
		<i>6490</i>		<i>484 27/5/18</i>	<i>487</i>			<i>30</i>	<i>1790</i>		
					<i>2920</i>						
<i>JUN</i>		<i>33</i>		<i>6 a.p.</i>				<i>15</i>			
				<i>701 13.6.18</i>	<i>973</i>						
		<i>33</i>		<i>834 27.6.18</i>	<i>973</i>			<i>15</i>	<i>1644</i>		
					<i>1946</i>						
<i>JUL</i>		<i>3410</i>		<i>6 a.p.</i>				<i>15</i>			
				<i>AR 982 15/7/18</i>	<i>973</i>						
		<i>3410</i>		<i>AR 1024 22/7/18</i>	<i>973</i>			<i>15</i>	<i>1608</i>		
					<i>1946</i>						
<i>AUG</i>		<i>3410</i>		<i>6 a.p.</i>				<i>15</i>			
				<i>AR 1306 12/8</i>	<i>973</i>						
		<i>3410</i>		<i>8 a.p. 27 24/8</i>	<i>357</i>			<i>15</i>	<i>2188</i>		
					<i>1336</i>						
<i>Sept</i>	<i>Private Pay</i>	<i>33</i>		<i>6 a.p.</i>				<i>15</i>			
				<i>AR 436 15/9/18 8 Res</i>	<i>357</i>						
		<i>33</i>			<i>357</i>			<i>15</i>	<i>3631</i>		
<i>Oct</i>		<i>3410</i>		<i>6 a.p.</i>				<i>15</i>	<i>5541</i>		
		<i>3410</i>						<i>15</i>			

NON EFFECTIVE ACT.
Has Recd 2/2/19
cr Bal 5541

