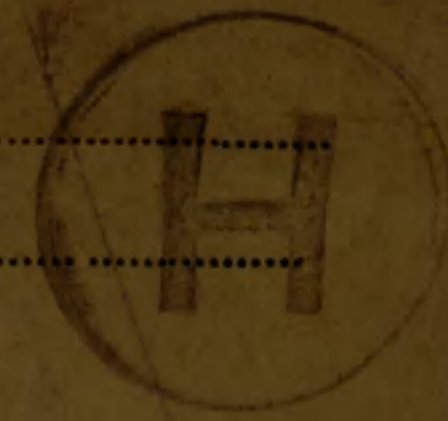


BP. 14-2-19.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....



- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 2
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... 1
- Proceedings on discharge..... 1
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- ~~Disch~~ Certificate..... 1
- Medical Report for Invalids.....
- Medical History Sheet..... 1
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate..... 1
- Inventory of Kit.....
- Last Pay Certificate..... 1

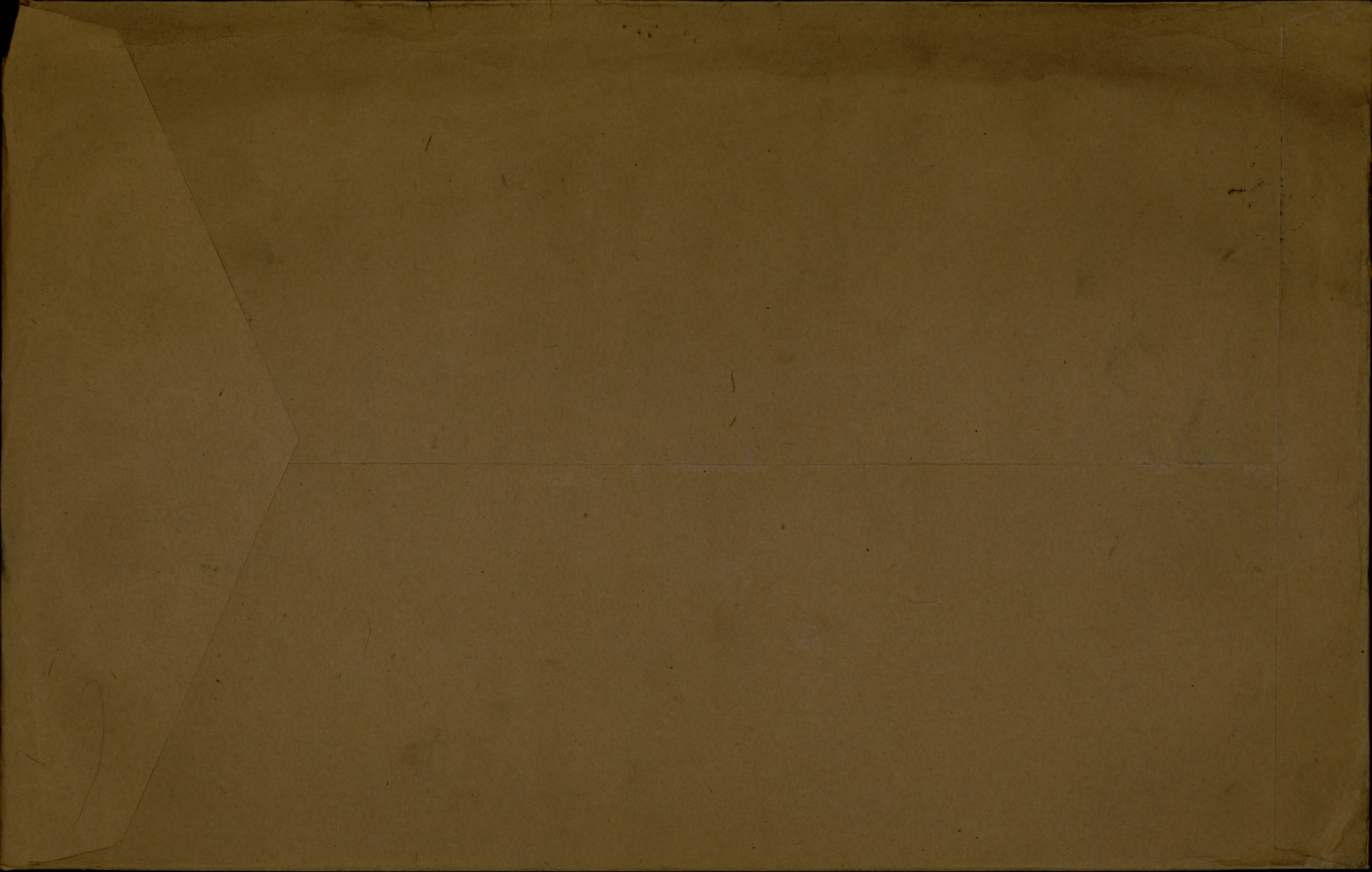
Name CLEAVER, HUGHES.  
 Regt. No. 2365802. Rank A/Sgt.  
 Corps 1st Tank Bn (2. D.D.)  
Demob'n.

24182



Copy for Disch Recd - 1  
 M.D. 122-1  
 M.D. 192-1  
 M.D. 129-1  
 M.D. 465-2







No. 4.

1. BANK BATTALION C.M.G.C. C.E.F.

A two

Canadian.

## ATTESTATION PAPER.

No. 2365802

U. of T. Training Co.,

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

## QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... C L E A V E R
- 1a. What are your Christian names?..... Hughes
- 1b. What is your present address?..... Burlington, Ontario, Canada
2. In what Town, Township or Parish, and in what Country were you born?..... Burlington, Ontario, Canada.
3. What is the name of your next-of-kin?..... Mrs. A riel Cleaver
4. What is the address of your next-of-kin?..... Burlington, Ontario, Canada.
- 4a. What is the relationship of your next-of-kin?..... Wife
5. What is the date of your birth?..... September 12th., 1892
6. What is your Trade or Calling?..... Solicitor and Barrister
7. Are you married?..... ~~Single~~ Married
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. *Naval or*
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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. No
14. If so, what was the nature of the disability? ..
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? .. No
16. If so, what was the reason?.....

## DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Hughes Cleaver, 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 April 24th., 1918 *Hughes Cleaver* (Signature of Recruit)  
*C. Whelock* (Signature of Witness)

## OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Hughes Cleaver, 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 April 24th., 1918 *Hughes Cleaver* (Signature of Recruit)  
*C. Whelock* (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 Toronto Canada. this 24th day of April, 1918

*M. J. M. J.* (Signature of Justice)



U.S. ARMY REGULATION NO. 116  
 Description of Hughes ~~XXXXX~~ Cleaver on Enlistment.

Apparent Age 25 years 7 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 1/2 ins.  
 Range of expansion 2 1/2 ins.

Complexion Fair

Eyes Blue

Hair Brown

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

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.)

birthmark rt calf.

Hearing and throa' Normal  
each eye D 20. deflected septm

**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 April 23rd, 1918 191

Place Toronto Canada.

DECLARED FIT BY MEDICAL BOARD  
 TORONTO MOBILIZATION CENTRE

J. W. Dalrymple  
 Medical Officer. **PRESIDENT**

\*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.**  
Hughes Cleaver.

.....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.

Malcolm D. Wallace (Signature of Officer)

Date April 26, 1918 For O. COMMANDING, U. OF TORONTO O'S COMPANY



# CANADIAN EXPEDITIONARY FORCE

## Discharge Certificate

2365802

This is to Certify that No. \_\_\_\_\_ (Rank) A/Sgt.

Name (in full) CLEAVER, HUGHES. enlisted in

the 1st. Tank. Bn.

CANADIAN EXPEDITIONARY FORCE at Toronto, Ont. on the 24th

day of April 1918.

HE served in England;::::::::::

and is now discharged from the service by reason of "Demobilisation"

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

<p>Age <u>25</u></p> <p>Height <u>5' 9"</u></p> <p>Complexion <u>Fair</u></p> <p>Eyes <u>Blue</u></p> <p>Hair <u>Brown</u></p>	<p>Marks or Scars <u>Vacc. Scars on Left Arm.</u></p>
--	---

Hughes Cleaver  
Signature of Soldier

J. H. Beemer  
Issuing Officer  
O.C. No. 2  
Rank

Date of Discharge Jan. 21st. - 1919

Signed at Toronto, Ont. this 21st. day of Jan. 1919.

in Military District No. No. 2  
JAN 21 1919  
File Reference No. DISTRICT DEPOT

REM.

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

Uniform is not to be worn after expiration of one month from date of discharge, except by special permission of G. O. C. district.

Name of Officer

Rank

Appointment

On demobilization for the particulars of this certificate will not be completed.



# MILITARY SERVICE ACT, 1917. 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 Cleaver Christian name Hughes  
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule \_\_\_\_\_  
3. Consecutive number on schedule of men reporting for service (if he appears on it) \_\_\_\_\_  
4. Address (including street and number, if any) Burlington, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 22nd day of April 1918, by the undersigned medical board sitting at Toronto Ont.

5. Age as stated 25 Years 7 Months. 6. Apparent age 25 Years 7 Months  
7. Height 5 Feet 9 Inches. 8. Weight 142½ Pounds.  
9. Chest measurement { Minimum 33 Ins. 10. Complexion Fair { Eyes Blue  
Maximum 35½ Ins. { Hair Brown  
11. Physical development Fair. { Good  
Fair  
Poor 12. Smallpox marks Nil.  
13. Number of vaccination marks { Right arm Nil 14. When vaccinated last Childhood  
Left arm 1  
15. Distinctive marks and marks indicating congenital peculiarities or previous disease Deflected septum

16. Slight defects but not sufficient to cause rejection \_\_\_\_\_  
The man denies having had { Rheumatism We find no evidence of past { Rheumatism  
Tuberculosis Tuberculosis  
Syphilis Syphilis  
(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**  
17. (a) Vision R. 20 L. 20  
(b) Hearing. R. normal L. normal  
Nose ---throat normal  
President.

W. Morrison Capt Member. Ed. Parry Capt Member.

Signature of Man Hughes Cleaver

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
9/5/18	x	R. M. S. M. O.	1/5/18	x	M. O.
		M. O.	9/5/18	x	M. O.
		M. O.	14/5/18	x	M. O.

Joined 24th day of April 1918 at Toronto Canada.

Joined on enlistment	CORPS	REG'TL NUMBER	HABITS	DATE
Transferred to	<u>U. of T. Training</u>	<u>2365802</u>		<u>24/4/18</u>
	<u>C O.</u>			
	<u>1st TANK BATTALION C.M.G.C. C.E.F.</u>			

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT
<u>Exhibition Camp</u>	<u>Jan 15-19</u>	<u>nil</u>	<u>A. D. Macdonald</u>







DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

OTTAWA, CANADA.



Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

1. Christian Names *Hughes* 2. Surname *Cleaver*
3. Rank *Asst Sgt* 4. Original Unit *1st Can Tank* 5. Reg. No. *2365-802*
6. Address, in full, to which future payments of gratuity are to be forwarded  
*Burlington Ont*
7. Date of enlistment in the C.E.F. *Apr 24 - 1918*
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Mrs Ariel Cleaver*
9. Relationship of such dependent *wife*
10. Address, in full, of such dependent *Burlington Ont*
11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*
12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—  
*Sailed for England on June 2nd with First Canadian Tank Battalion, trained in England with this Batta*
13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *Yes*
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *1st Can Tank Training in England June to December 1918*
15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *April 24th 1918 to Jan 21st 1919 1st Can Tank*
16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *No*
17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *No*



18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *no*

19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid

*I have received cheques for \$70.00 marked 19 pay and wife has received cheques for \$30*

20. Have you been issued with a War Service Badge? If so, what class? *None yet received but one is issued*

21. Have you, during the present war, served in the Imperial Forces? *no*

22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled *no*

23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *no*

(b) If so, was such reversion in consequence of misconduct or inefficiency? *no*

24. Are you now serving in the C.E.F. *no* If not, give:—(a) Date of discharge

*Jan 21-1919* (b) Reason for discharge *Demobilization*

25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit. *no*

26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit.

*no. Simply training in England.*

27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment? *no*

(b) If so, are you in receipt of full pay and allowances from that Department? *no*

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *[Signature]*

Place of Residence: *Burlington*

Declared before me at: *Burlington Ont*

This *15<sup>th</sup>* day of *Feb* 19*19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths.

*[Signature]*  
*Atomb*

POST DISCHARGE PAY.				
Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....

Certified Correct.  
District Paymaster.



# CANADIAN CONTINGENT EXPEDITIONARY FORCE

M. D. 2  
No. 58

## 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. 2365 802 Rank ass Name Bleaver H.

Corps No. 2 Dist. Cent. who was\* DISCHARGED

On JAN 21 1919 191... to...  
\*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Jan 1 191...  
to JAN 21 191..., the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month			Balance Cr. from prev. month <u>LPC</u>	<u>2</u>	<u>30</u>
Advances by Cheques } No. ....			Reg'tl. Pay <u>21</u> days at \$ <u>1</u> c.	<u>21</u>	
Assigned Pay and Sep'n Allee. No. <u>16641</u>	<u>20</u>	<u>35</u>	Field Allow. <u>21</u> days at \$ <u>1</u> c.	<u>21</u>	<u>11</u>
Other charges			Separation Allowance* (Monthly)	<u>20</u>	<u>35</u>
Payment on transfer or discharge No. <u>16640</u>	<u>72</u>	<u>40</u>	Other Allowances* <u>Pub's</u>	<u>12</u>	
Bal. Cr. (to be paid by the new unit)			Other Credits* <u>Block</u>	<u>35</u>	
<b>Total</b>	<u>92</u>	<u>75</u>	<b>Total</b>	<u>92</u>	<u>75</u>

\*Give particulars.

A monthly stoppage of \$ 20 (†) has... (‡) been paid on account of Assigned Pay for the month of Dec 191... and Sep'n Allee. for month of Jan 191... (to) Assignee Mrs. A. Bleaver  
(Address) Burlington Ont

(†) 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.

Out 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..... authority 6017
- (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 JAN 21 1919  
Place TORONTO, ONT.  
Harold C. Cochran CAPT.  
PAYMASTER, No. 2 DISTRICT DEPT.

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.







# DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

DISTRICT 7

NAME OF SOLDIER *P. Cleaver*

REGIMENT *1st Regt.*

No. *9365862*



## INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

Condition on first Examination	Date	Amalgam Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhoea	Synthetic Porcelain	Extracting	DENTURES			Gold Clasp	Gold Filling	CROWNS		Bridge Work	OPERATOR	Military District	REMARKS
											U	L	P			Gold	Porcelain				
<p>DISCHARGE EXAM. } Certificate issued for</p> <p>CASUALTY Co. # 2 D.D. } Date <u>JAN 15 1919</u></p> <p style="text-align: center; opacity: 0.5;">DENTALLY FIT</p> <p style="text-align: right; font-style: italic; font-size: 1.2em;">Ow Canning Capt</p>																					















A,

# 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. 2365802 Rank Sgt Surname CLEAYER  
(Give name in full)

Unit or Corps H320 Depot Birthplace Hughes Burlington Ont

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

### 1. GENERAL DESCRIPTION:

Physique good Weight 148 lbs. Height 5 ft. 9 in. Colour of Eyes Blue  
Nutrition good  
Pulse 70  
Condition of arteries normal  
Vision Rt. 20/20 Left 20/20  
Hearing (conversational voice) Rt. 21 ft. Left 21 ft.

Identification marks, scars, or deformities.  
(Give cause and date of origin.)  
One vaccination scar on left arm. Brown birthmark 1" below head of left fibula

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 no Integumentary System no Respiratory System no  
Disturbance of mentality no Muscular System no Digestive System no  
Osseous and Joint System no Any other general condition no

### 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.

No hernia, varicose veins or varicocoele  
External piles slight. Existed prior to  
Enlistment - no service aggravation.



MEDICAL EXAMINATIONS. OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

**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.....(Canada)

Date Jan 15-19 ..... Signed D. J. Macdonell 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 [Signature] .....

(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.)

APPROVED  
16-1-19  
[Signature]  
Capt.  
D. J. Macdonell M.D. 2

[OVER]



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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) bleaves H.

REGIMENT 1<sup>st</sup> Bn Parachute Coy RANK Sgt No. 7365802

Date of Examination in England Dec 6<sup>th</sup> 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

*nil*  
*nil*

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
- (c) In France

*nil*

Signature of Dental Officer H. Cowan



DEPARTMENT OF AGRICULTURE  
BUREAU OF PLANT INDUSTRY  
WASHINGTON, D. C.

1. Name of the plant  
2. Botanical name  
3. Locality  
4. Date of collection  
5. Collector's name

6. Description of the plant  
7. Uses of the plant  
8. Remarks

9. Distribution  
10. Cultivation

11. *Handwritten notes*

12. *Handwritten notes*

13. *Handwritten notes*

14. *Handwritten notes*

*Handwritten signature*



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

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

250M.—1-16.  
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 1<sup>st</sup> B. S. S.

Regimental No. 2365802 Rank A/Sgt Name Cleaver Hughes  
C. E. F.

Enlisted (a) \_\_\_\_\_ Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_

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) \_\_\_\_\_

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				
4-10-19.	B. S. S.	TOS on posting from 1 <sup>st</sup> T. B. w/c. (R.L. 12-41-49-R.2-L. 19-V-19)	Buxton	5-12-18	Pt. IV DO. 231

*[Handwritten Signature]*  
For S of R.

(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.



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				



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

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

500M.—9-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps. *L. I. I.*

Regimental No. *2365802* Rank *a/sgt.* Name *Cleaver Hughes*  
C. E. F.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

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).....

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>4-10-19</i>	<i>L. I. I.</i>	<i>SOS to L. I. I. Canada Buxton</i>	<i>Buxton</i>	<i>12-12-18</i>	<i>Do. 231</i>
		<i>(R.L. 12-41-49.R.21 d/ 19.7.19</i>			

*W. Ritchie*  
*for J. J. R.*

(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. I.P.T.O.







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

M. F. W. 54. (A. F. B. 193.

500M.—9-76

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 1st TANK BATTALION C.M.G.C. C.E.F.

Regimental No. 2365802 Rank Private Name CLEAVER - Hughes

Enlisted (a) 24/4/18 Terms of Service (a) Duration of War Service reckons from (a) 24/4/18

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) Solicitor & Barrister

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				
		TRANSFERRED FROM C.O.T.C, TORONTO TO 1ST TANK BATTALION, C.M.G.C. — 1/5/18.			
		Embarked <u>Canada June 3/18</u> Disembarked <u>England June 21/18</u>			D.O. - 36, 3/6/18.
Bovington Camp, Wareham.		PROMOTED acting Corporal (with pay) (Auth. Estab. Canadian Tank Bn. A.G. 7/1/221-AG-3-D)	Bovington Camp.	23/10/18	D.O. #153, Sub. #3, 23/10.18.
		PROMOTED Acting Sergeant with pay. (Auth. Est. Can Tank Bn. A.G. 7/1/221-A.G.-3-D)	Bovington Camp.	9/11/18.	D.O. #168, 9/11/18.
		Transferred from 1st Bn. Can. Tank Corps to Can. Discharge Depot. (Auth. Letter AG.3B.2-C-3504.)	Bovington Buxton	6-12-18.	D.O. #191, Sub. #1, December 6th, 1918.
					<i>[Signature]</i> Capt. & Adj. 1ST TANK BATTN C.E.F.

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

6/12/18

Attached C.D.D. Buxton for return to Canada, Part II Order No. 289  
 Ceases to be attached C.D.D. Buxton on embarking for Canada.

*Maurice Olivier* Lt. for Lt. Col.  
 Commanding Canadian Discharge Depot.

DEC 12 1918

*o/s*

T.O.S. No. 2 District Depot, Part II, D.O. No. 257

*A. H. Hume* Lt. and Asst. Adj.  
 For O.C. No. 2 District Depot

Dis. #2 D.D. Jan. 21st-1919. Pt. 11. #17.

*Wrigley*  
 Capt

O. C. Discharge Section  
 No. 2 District Depot

24.9.19.

C.S.C.D.

T.O.S. from 1st. T. Bn. & will be shown on command to 1st. C.D.D. Buxton wfe, 5.12.18.

AO. 1. d. / 24. 9. 19.

24. 9. 19.

C.S.C.D.

Ceases on Command to 1st. C.D.D. Buxton & is s.o.s. of the O.M.F. of C. to Canada. wfe.

12.12.18.

AO. 1. d. / 24. 9. 19.  
*Rayman*  
 For D. of R.



G.H. Rank Name **CLEAVER, Hughes.** Reg'l No. **2365802.**  
 Unit **1st TANK Bn. to C.M.G.** If in perm. Corps, }  
 What Unit? }  
 Married or Single **Married**  
 Place and Date of Enlistment **Toronto. April 24th 1918.** Place of Birth **Burlington Ont**  
 Name and Address, Next-of-Kin **Mrs. Ariel Cleaver,**  
**Burlington Ont. Canada.** Relationship **Wife.**  
 Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship  
 Discharge, Date and Place Reason Character

*Handwritten scribble in blue ink, possibly initials or a signature.*

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.				
		<b>Arrived in England</b>		<b>21-6-18</b>	<b>C/S CASSANDRA</b>
23-10-18	1st Tank Bn.	<u>To be 7/Plt, with pay.</u>	Plt. Bovington	23-10-18	Pr. 153
9-11-18	1st Tank Bn.	<u>To be 7/Sgt, with pay.</u>	Plt. Bovington	9-11-18	Pr. 168
6-12-18	1st Tank Bn	Sob to C S D Buxton for return to Canada	Plt. Bovington	5-12-18	Pr 191
21-12-18	1st Tank Bn <b>OMP</b>	Pr 191 amended to read Sob to C T B D	Plt. Bovington	5-12-18	Pr 205
24-9-19	CTCD	Los from <sup>Chick Sew</sup> 1st T.Bn <b>Called 12-12-18. M.D. 2.</b>	Witley	do	af. or. 1
do	do	Sob to Canada	do	12-12-18	af. or. 1

*1st Tank*

*af. or. 1*








\*Name **L CLEAVER, Hughes** Rank **A/S** Regtl. No. **2365802**  
 Original unit Present unit **C.T. Corps** M. or S. Age **26** Religion **Meth.** Fyle Depot.....  
 Ref. H.Q.....  
 Port, ship, and date of arrival **St. John Corsican 25-12-18.**  
 Next of kin **Wife, Mrs. A. Cleaver Burlington, Ont.,**  
 Address on leave **same**  
 Address on discharge **Burlington, Ont.**  
 Transportation issued Yes No Date **22-1-19** Character on discharge **Burlington, Ont**  
 Previous occupation **Solicitor and Barrister** Date and place of enlistment **Toronto, Ont. Apr. 24-18.**  
 Diagnosis **Demobilization** Date of Medical Boards

Date. T.O.S	Remarks	Pt. 2 Order No.
14-12-18	Posted to Cas. Co. Ex. Camp 25-12-18	
	Leave from 27-12-18 to 10-1-19.	
	Subs " " "	#257
<i>Granted extension till 14-1-19</i>		



Date.

Remarks.

Pt. 2 0  No.

21-1-19 SOS DISCHARGED "DEMOCRAT" 21 days PDP & C.A.

17



SURNAME.

*bleaver*

CHRISTIAN NAMES

*Hughes*

REGL. NO.

*2365802*

RANK

*Pte.*

UNIT

*Univ. of Toronto (In. Co.)*

FORMER CORPS

*nil.*

*23* CARD NO. ✓  
*PL. II 124-4-5-18*  
*O/S. 21. Coy. 6. G.P.C. 88C.*  
*Dis 21-1-19. 2 Demob.*  
*DD. 17717-1-19 #2 DD.*

*J.O.S. April. 24<sup>th</sup>. 1918*  
*R.O. Pt. II no. 117*

NEXT OF KIN.

NAMES IN FULL

*bleaver, Mrs. Ariel*

RELATIONSHIP TO SOLDIER

*Wife*

ADDRESS

*Burlington Ont.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

*Canada, Burlington*

DATE

*Ont. Sept. 12th 1892*

PLACE OF ATTESTATION

*Toronto Ont.*

DATE

*Apr. 24th. 1918*

*O/S 9-6-18 1271/5*

*R/O 25-12-18 245-2*



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



*2365802*  
J Number *2365802* Rank *A/Sgt*  
Surname *CLEAVE*  
Christian Name *Hughes*  
Units *1st Cav. Tank Bn.* Theatre of War *England*  
Date of Service *21-6-28*  
Remarks  
Latest Address *Burkington*  
*Co.*

Roll No. *A Page 4816*



# GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA

RECEIVED  
DEC 30 1922  
11368



Reg. No. <b>2365802</b>	Rank. <b>CPT</b> <b>Sgt.</b>	Surname <b>CLEAVER</b>	Category. <b>A. 2</b>	Dentally Unfit.
Christian Names (1) <b>Hughes</b>		(2).....	(3).....	Date <b>6/24/18</b>

Place of Enlistment: <b>Toronto</b>	Date of <b>4/24/18</b>	Taken on from <b>USPT. HQ Co</b>	Religion <b>Meth.</b>	Inoculations <b>1/5/18, 7/5/18, 14/5/18</b>	Company <b>A.</b>
Province: <b>Ont.</b>	Age on <b>25-7</b>	Date <b>1.5.18</b>		Vaccination <b>9/5/18</b>	

On Command.....	Hospital.....	Permanent Cadre	Employed as
		Date taken on	
Date Proceeding	Date Admitted		

Record of Overseas Service:	Profession or Trade (Civil) <b>Solicitor &amp; Barrister</b>
Reason for Return:	Transferred or Posted to Date.....

Married or Single <b>Married</b>	LEAVE.		
Address of Next of Kin <b>Mrs. Ariel Cleaver</b> <b>Burlington ont</b>	No. of Pass Issued.	FROM.	To.
		<b>9.11.18</b>	<b>9.11.18</b>
Country <b>Canada</b>			Free Transportation. <b>Yes</b> <b>1/2</b>







No 2365-802 RANK

Pte.

NAME

Cleaver W.

T. O. S.

UNIT

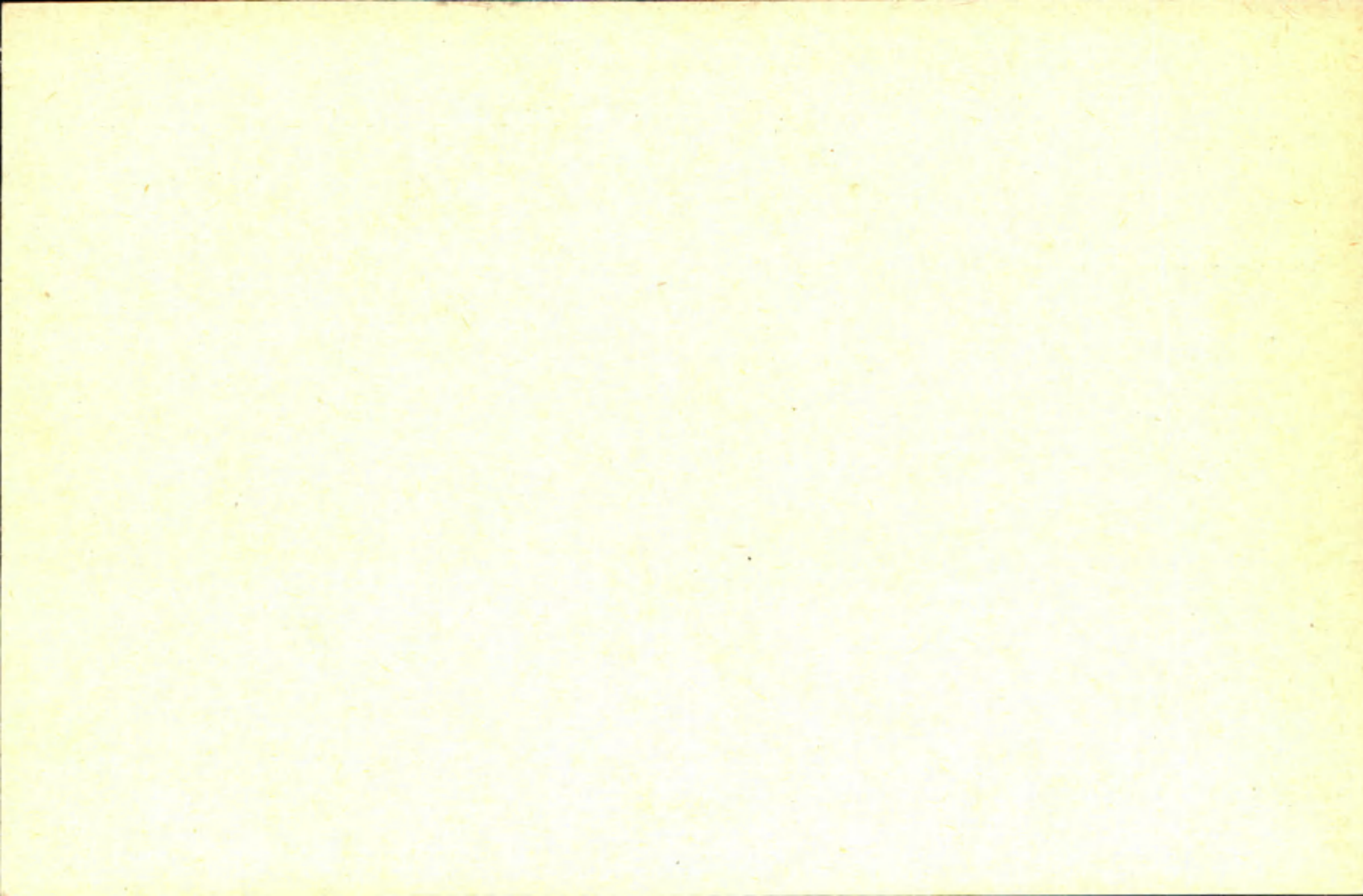
M. O. O's Training Depot

M. D.

2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 May 1	1918 May 1	M.	Attached 30/4/18 Returned to Unit 1/5/18	(D.O. 121) (D.O. 122) & 129)







No. 2365002 RANK Pte.

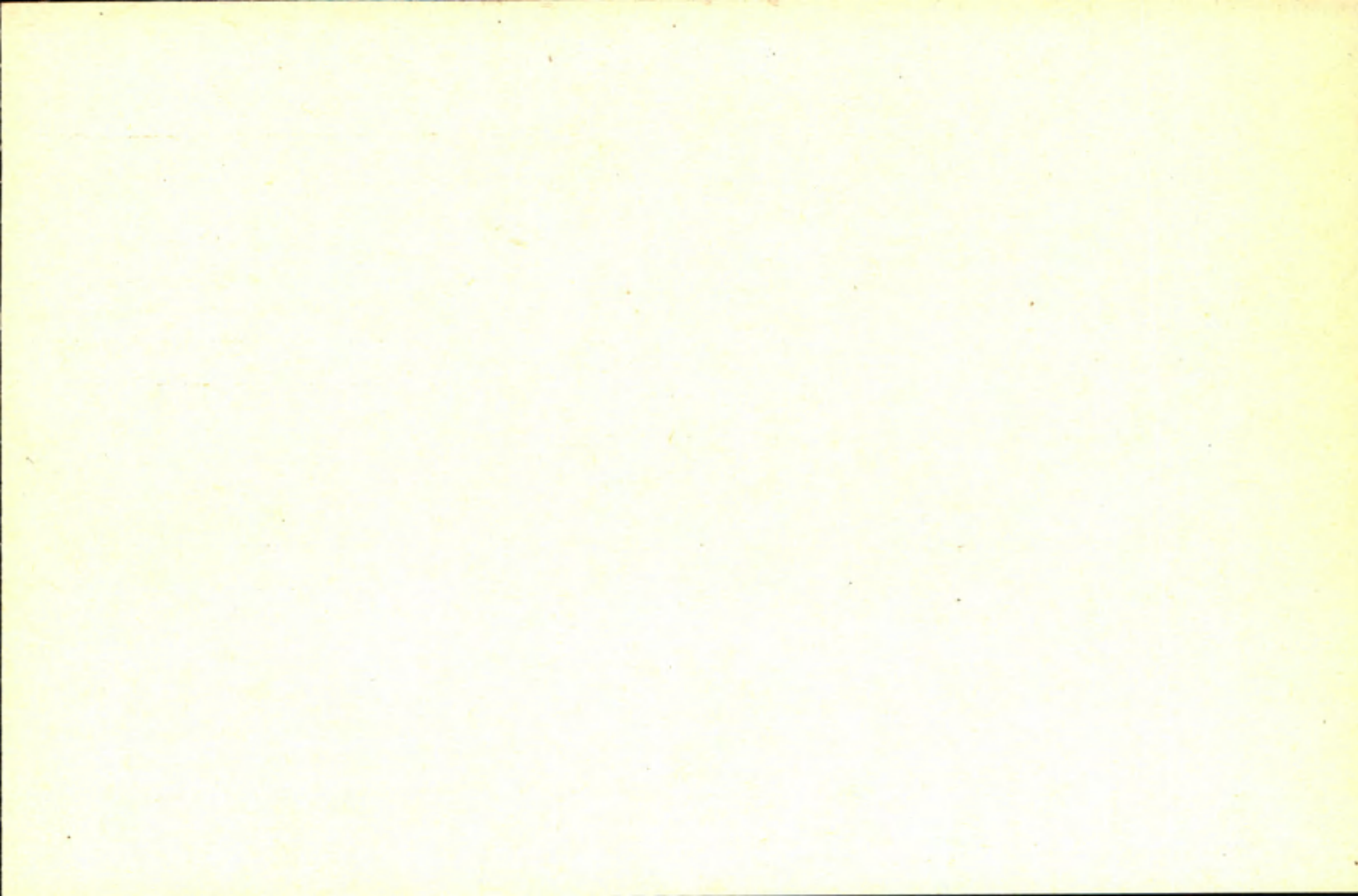
NAME Cleaver H.

T. O. S. 24 4-18 UNIT Gen. Officers Training Cps. University of Toronto.  
(D.O. 117 of 27 4-18)

M. D. 2.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918. Apr. 25.	1918. Apr. 30.	7.	Transfd. to 1st Tank Bn. C. M. G. C. 31 4-18.	(D.O. 124 of 4 5-18.







No. 2365'802 RANK Pte

NAME Cleaver H.

T. O. S.

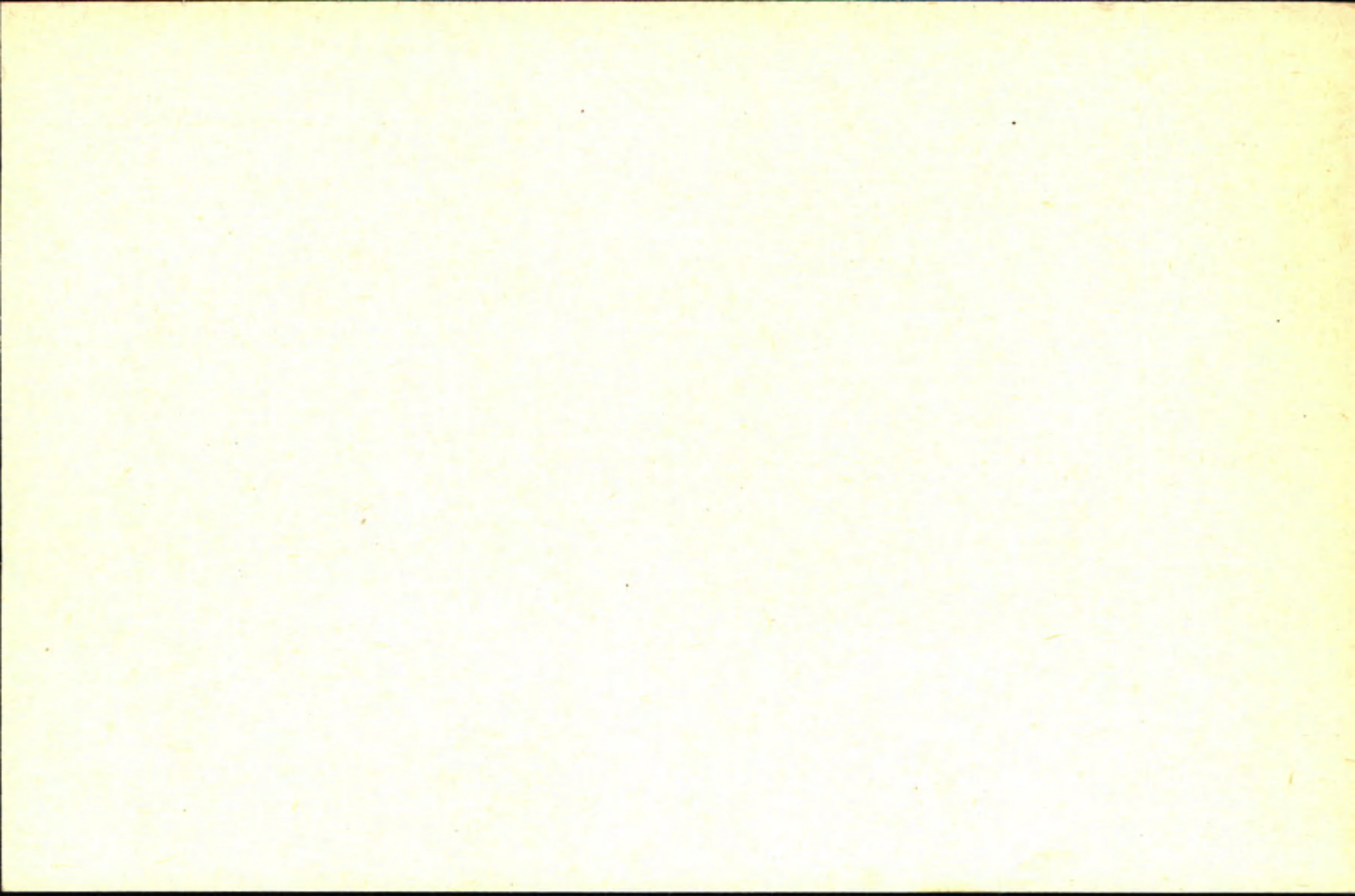
UNIT 1st Can. Tank Battalion

*Transf. from U. of T. C. D. T. C.  
D. O. of 2. 5-18.*

M. D. H. C.

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1918 May 1	1918 May 31	✓		







Date of Enlistment 24-4-18

MILITIA AND DEFENCE

Date of Assignment

1st. June 18

# Separation and Assigned Pay Branch

C 7492  
-7492

1st. June 18

OVERSEAS CONTINGENTS

### RATE OF SEPARATION ALLOWANCE

25 <sup>00</sup>	30		
------------------	----	--	--

1-9-18  
P.C. 2753  
NO 28167

### RATE OF ASSIGNMENT

20 <sup>00</sup>			
------------------	--	--	--

### PARTICULARS OF SEPARATION ALLOWANCE

No. 2365802

Rank Tk. Pte Promoted Reverted Discharge

Soldier's Name Cleaver Hughes.

Battalion 1st. York Bathn. C.M.G.C.

Beneficiary Mrs Ariel Cleaver

Relationship wife

Address Burlington, Ont.

MFW 2554 - 26<sup>7</sup>/<sub>9</sub>

Name

Address

Change of Address

1

MRS. ARIEL CLEAVER,  
BURLINGTON,  
ONT.

2

20 25

45.00

% 2365802 TK. PTE HUGHES CLEAVER  
FORTY FIVE DOLLARS

4

NOV 23 Rec'd

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1918					
June	V 25964	25	20	45	✓
July	T 33571	25	20	45	✓
Aug	S 36730	25	20	45	✓
Sept	G 45127	25	20	45	✓
Oct	I 54329	25	20	45	✓
Nov	J 54313	25	20	45	✓
Dec	D 64591	45	20	65	✓
1919					
Jan		195	140	335	

3285-H-16-30<sup>12</sup>/<sub>18</sub>

CANADIAN  
ASSIGNED PAY AUDITED

AUDIT CLERK  
DATE 23/5/1918 Lane

A/c Closed 31-12-18

Ret'd per Corsican

Date 25-12-18 M.F.W. 187 30-12-18

Closed 20 Lapointe

M.D 2 MR 0213 56199

M.F.W. 128  
400M.-617-1772-38-114  
L.L. 25320-M. & D. 1986.

AUTHORITY M.R.  
FOR M.H. 3-B-6  
NEW ACCT G. Raymond 13/6/18



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

## PARTICULARS OF SEPARATION ALLOWANCE

## PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
------	------------	------------	------------	-------	---------

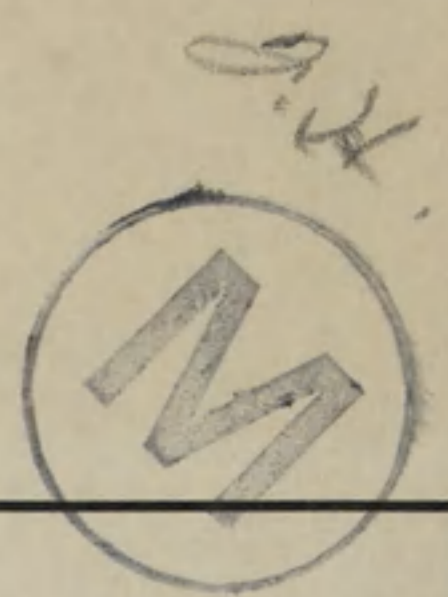
M. F. W. 128  
 400M-6-17-1772-39-1141  
 L. L. 22220-M. & D. 1983.



LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate..... Militia Form W. 23  
 or Particulars of Recruit..... Militia Form W. 133  
 Field Conduct Sheet..... Militia Form W. 178 or A.F.B. 122  
 Casualty Form..... Militia Form W. 54 or A.F.B. 103  
 Last Pay Certificate..... Militia Form W. 44  
 Certificate that missing documents are unobtainable.....  
 Medical History Sheet..... Militia Form B. 313 or A.F.B. 178  
 Proceedings of Medical Board..... M.F.B. 227, A.F.B. 179 or A.F.A. 45  
 Dental History Sheet..... Militia Form B. 465  
 Medical Report..... M. F. W. 129 or D. M. S. 1375  
 Regimental Conduct Sheet..... Militia Form B. 263  
 Company Conduct Sheet..... Militia Form B. 263a

SHORT FORM.  
 PROCEEDINGS ON DISCHARGE.  
 (Demobilization.)



1. No.	2365802
2. Rank.	A/SGt.
3. Name.	Cleaver. Hughes.
4. Unit.	1st. Tank Bn. (#2 D.D.)
5. Date of Discharge	Jan. 21st.-1919
Place	TORONTO, ONT.
6. Reason for Discharge	ON GENERAL DEMOBILIZATION
7. Authority.	D.O. D.D. #2 Pt. 11. #17
8. Proposed Residence after Discharge	Burlington, Ont.
9.	<p>CERTIFICATE TO BE SIGNED BY SOLDIER.</p> <p>I hereby acknowledge that at the undernoted place and date I received my discharge Certificate</p> <p>M. F. W. ?</p> <p><i>Heather Cleaver</i>                  _____                  Signature of Soldier.</p>
10.	<p>CONFIRMATION.</p> <p>The discharge of the above named man is hereby confirmed.</p> <p>Place Toronto, Ont.</p> <p>Date Jan. 21st.-1919.</p> <p>Signature _____                  (O. C. Discharging Unit.)</p> <p><i>W. H. G. [Signature]</i>                  (O. C. Discharging Unit.)</p>



Blank lined page with horizontal ruling lines.

Blank page with faint horizontal lines, possibly bleed-through from the reverse side.











Strike out whichever inapplicable.

ASSIGNED PAY	ENGLAND OR CANADA	SEPARATION ALLOWANCE	ENGLAND OR CANADA
EFFECTIVE DATE: 1/6/18		EFFECTIVE DATE: -	
AMOUNT: \$20 <sup>00</sup>		AMOUNT: -	

NAME: *CLEAVER, HUGHES*  
NUMBER: *2365802*

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.

*Mrs. A. Cleaver (Wife) n/r.  
Burlington Ont.*

PARTICULARS OF RANK OR APPOINTMENT			
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT	
<i>Can LRC</i>		<i>Pte</i>	
<i>Pt J.B. 153</i>	<i>23 10/18</i>	<i>23 10/18</i>	<i>apch</i>
<i>Pt " 168</i>	<i>9 11/18</i>	<i>9 11/18</i>	<i>ajogh</i>

UNIT AND TRANSFERS

ORIGINAL UNIT: *1st TANK BATTALION C.M.G.C. C.E.F.*

DATE ACCOUNT FIRST OPENED: *1/6/18*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T 5 P D	UNIT TRANSFERRED TO

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>1/6/18</i>	<i>33</i>	<i>Tank Depot</i>	<i>9.43</i>

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALLCE
<i>Can LRC</i>	<i>1.10</i>	<i>10</i>		
	<i>1.35</i>	<i>15</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE: *L.R.C. rendered null & void by letter 6/17/18 despatch to Canada Compo Grounds 62.17*

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
<i>31/5/18</i>	<i>Bal from Can</i>								<i>9.60</i>		
<i>June</i>	<i>Rest</i>	<i>33</i>		<i>alg 1st TK Bn 30/6/18</i>	<i>4.87</i>				<i>37.73</i>		
		<i>33</i>			<i>4.87</i>						
<i>July</i>	<i>Her P.</i>	<i>34/10</i>		<i>bal. June/July</i>				<i>40.</i>	<i>31.83</i>		
				<i>199 J.B. 25/7</i>	<i>4.87</i>						
				<i>97 " 12/7</i>	<i>4.87</i>				<i>22.09</i>		
		<i>34/10</i>			<i>9.74</i>			<i>40.</i>			
<i>Aug</i>	<i>Ptes 9</i>	<i>34/10</i>		<i>bal</i>				<i>20.</i>	<i>36.19</i>		
				<i>335 J.B. 16/8</i>	<i>4.87</i>						
				<i>46r " 30/8</i>	<i>4.87</i>				<i>26.45</i>		
		<i>34/10</i>			<i>9.74</i>			<i>20.</i>			
<i>Sept</i>	<i>Ptes 9</i>	<i>33</i>		<i>bal</i>				<i>20.</i>			
				<i>576 J.B. 16/9</i>	<i>4.87</i>						
				<i>705 " 27/9</i>	<i>4.87</i>				<i>29.41</i>		
		<i>33</i>			<i>9.74</i>			<i>20.</i>			
<i>Oct</i>	<i>✓</i>	<i>34/10</i>		<i>bal</i>				<i>20.</i>			
	<i>Adjmt act: Promt 9 days @ 10¢ Pt 153 T.O. 23 10/18</i>	<i>90</i>									
				<i>888 J.B. 15/10</i>	<i>4.87</i>						
				<i>1035 " 31/10</i>	<i>12.17</i>				<i>27.67</i>		
		<i>35</i>			<i>17.04</i>			<i>20.</i>			
<i>Nov</i>	<i>lepls Pay</i>	<i>36</i>		<i>ap</i>				<i>20.</i>			
	<i>adjmt act: Promt 22 days at 30¢ Pt 168 TA 9 1/2</i>	<i>6.60</i>		<i>1731 " 13/11</i>	<i>4.87</i>						
<i>Dec</i>	<i>On to pay</i>	<i>46.50</i>		<i>ap</i>				<i>20.</i>			
				<i>1456 " 30/11</i>	<i>9.73</i>				<i>67.17</i>		
					<i>14.60</i>			<i>60.</i>			

CANADIAN ASSIGNED PAY AUDITED

AUDIT CLERK  
DATE: *23/5/19 F. Lane*



