

DUPLICATE

1st Depot Battn., W. O. R.

M. D. Depot Battalion Regiment

Regtl. No. 3130

Cond
474M
19/12/18

PARTICULARS OF RECRUIT
DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class One)

1. Surname DENMAN
2. Christian name John William
3. Present address 76 Richmond St/ Chatham Ont
4. Military Service Act letter and number 708561A C
5. Date of birth Sept. 3rd, 1896
6. Place of birth Brussells Ont
7. Married, widower or single Single
8. Religion Presbyterian
9. Trade or calling Freight Handler
10. Name of next-of-kin Daniel Denman
11. Relationship of next-of-kin Father
12. Address of next-of-kin Brussells Ont
13. Whether at present a member of the Active Militia No
14. Particulars of previous military or naval service, if any 2 weeks with Militia
15. Medical Examination under Military Service Act:—
(a) Place Chatham Ont (b) Date Oct 4th, 1917 (c) Category a 11

DECLARATION OF RECRUIT

I, John William Denman, do solemnly declare that the above particulars refer to me, and are true.

Jan, 5th, 1918 John William Denman (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age 21 yrs 3 mths.
Height 5 ft 4 3/4 ins.
Chest measurement } fully expanded 36 1/2 ins.
 } range of expansion 34 ins.
Complexion Fair
Eyes Brown
Hair Brown

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

R, E, D. 20/20 L, E, D. 20/20

Hearing R, Normal L Normal

A. J. Milligan Lieut. Colonel
1st Depot Battalion, W. O. R.
O. C. Depot Btlh.

Place London Ont Date JAN 5 - 1918 Regt.

PARTICULARS OF RECRUIT

GRANTED UNDER MILITARY SERVICE ACT, 1917

(Class)

1. Name of recruit

2. Address of recruit

3. Date of birth

4. Height

5. Weight

6. Complexion

7. Eyes

8. Hair

9. Education

10. Trade or profession

11. Religion

12. Marital status

13. Name of wife

14. Name of children

15. Name of father

16. Name of mother

17. Name of next of kin

18. Name of employer

19. Name of commanding officer

20. Name of medical officer

21. Name of medical attendant

22. Name of medical orderly

23. Name of medical sergeant

24. Name of medical private

25. Name of medical corporal

26. Name of medical sergeant major

27. Name of medical quartermaster

28. Name of medical storekeeper

29. Name of medical clerk

30. Name of medical driver

31. Name of medical cook

32. Name of medical barber

33. Name of medical shoemaker

34. Name of medical saddler

35. Name of medical harness maker

36. Name of medical cooper

37. Name of medical cooper

38. Name of medical cooper

39. Name of medical cooper

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41. Name of medical cooper

42. Name of medical cooper

43. Name of medical cooper

44. Name of medical cooper

45. Name of medical cooper

46. Name of medical cooper

47. Name of medical cooper

48. Name of medical cooper

49. Name of medical cooper

50. Name of medical cooper

DECLARATION OF RECRUIT

I, the undersigned, do hereby declare that the above particulars are true and correct.

(Signature of Recruit)

DESCRIPTION ON CALLING UP

1. Height

2. Weight

3. Complexion

4. Eyes

5. Hair

6. Education

7. Trade or profession

8. Religion

9. Marital status

10. Name of wife

11. Name of children

12. Name of father

13. Name of mother

14. Name of next of kin

15. Name of employer

16. Name of commanding officer

17. Name of medical officer

18. Name of medical attendant

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21. Name of medical private

22. Name of medical corporal

23. Name of medical sergeant major

24. Name of medical quartermaster

25. Name of medical storekeeper

26. Name of medical clerk

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45. Name of medical cooper

46. Name of medical cooper

47. Name of medical cooper

48. Name of medical cooper

49. Name of medical cooper

50. Name of medical cooper

Date

(Signature of Recruit)

RECORDED
 INDEXED
 1917

REGIMENTAL DOCUMENTS

S

NAME *Denman John William*

REGT. NO. *3130961*

UNIT

H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

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. 465)

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

M

DEATH

H

Category

11288

DISCHARGE

Category

H

DESERTION

11-22
21-22
33-22
2

4 Bas Card
1 A.F.B. 1237
1 Misc
2 29ms of Will Discharge

mx
10/1/20



NAME

Demman John W. Williams

REGT'L. No. *3130961*

H. Q. FILE NO 649

RANK AND CORPS

Pte. 47th Bn.

FOLLOWS

CABLE

NO. *31* / DATE

NATURE OF CASUALTY

form. W. of 1st Dep
FOLLOWS

*#3134-918 Kin A. Sept 3rd 1918 H. Q. 316
Hof. Daniel Demman (aller)
Brussels. Ont.*

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

L. O. P.

*10.16.14
C266*

*1st Gen. Gen. Hospital 16.2.18
Discharged 8.4.18*

Mumps

649-D-14709

DENMAN, Pte. J. W. #3130961 - 47th Bn

Med & D (Friend)

Miss Pearl M. Briggs
c/o Mr. R. Bonn,
Wallaceburg, Ontario.

M.

P & S (Father)

Daniel Denman Esq.,
Brussels, P.O.
Ontario.

(Serial no. 773172.)

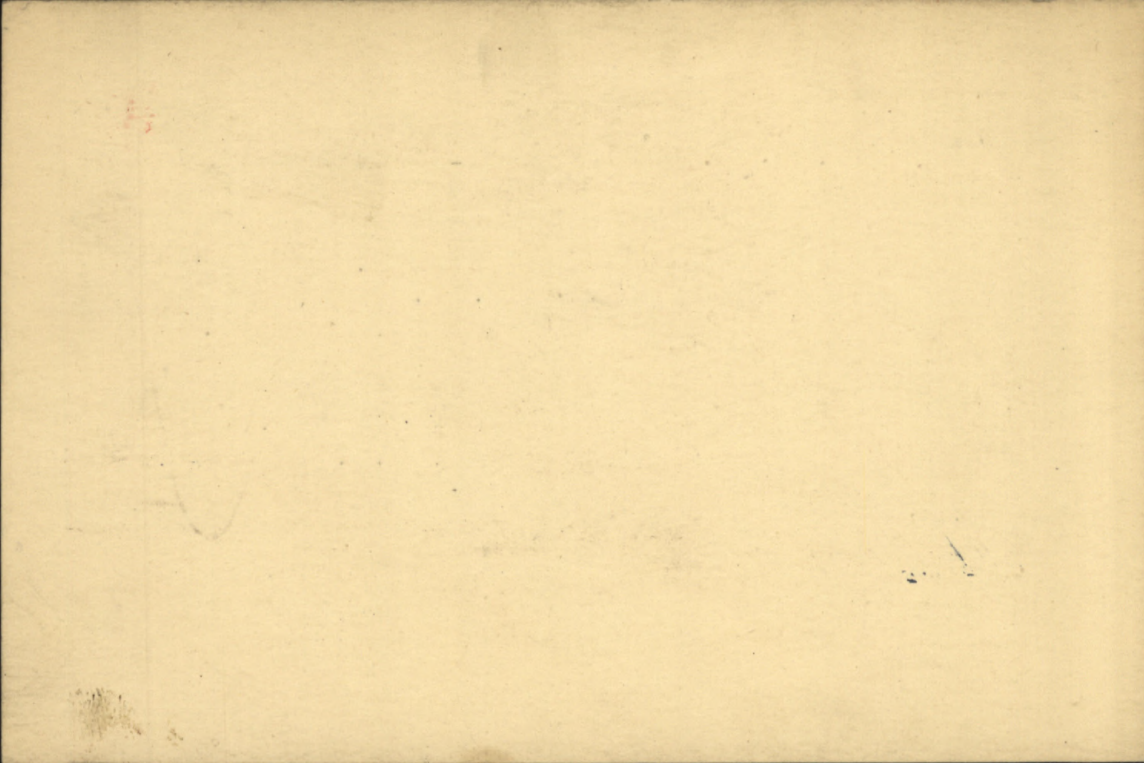
Scroll Desp. 27-1-4 Reqn. No 2-14238

Mem Cross (NIL)

Plague Desp. 31709 Reqn. No P 10694

*Not deliq. 14/15 Star.
Bliq. W.M.
21 " B.W.M.*

Pd.



Com
200

Pte

13

Number 3130961

Rank

Surname DENMAN

Christian Name John William

Units 47th C Inf Theatre of War France

Date of Service 1-6-18

Remarks (Friend) Miss Pearl M Briggs D

Latest Address c/o Mr R Boston
Wallaceburg, Ont.

Roll No. B. Page 216 45.

200m.-2-21.M.

REGT. NO. RANK NAME

UNIT AGE SERIAL NO. IN A. AND D.

TOTAL SERVICE WHERE DATE AND PLACE OF OR
AND HOW LONG

DISEASE OR INJURY

OPERATIONS

RESULT OF OPERATIONS

(A) DATE OF ARRIVAL AT HOSPITAL AS AN ADMISSION

(B) AS A TRANSFER (STATE WHERE FROM)
NAME OF HOSPITAL

DATE OF DISCHARGE TO UNIT IN CA

DATE OF DISCHARGE AS AN INVALID

DATE OF DEATH

DATE OF TRANSFER (STATE WHERE TO)
NAME OF HOSPITAL

OTHER INDEPENDENT CONDITIONS DIAGNOSED

DESP. JAN 4 1923
REGN. NO. 30598

No. 3130961 RANK *Pte.*

NAME *Denman, J. W.*

T. O. S. *5. 1. 18* UNIT *1st. Depot Battalion. W. O. Regiment.*
(S.O. 4 of 4. 1. 18)

M. D. *1*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1918</i> <i>Jan. 5</i>	<i>1918</i> <i>Jan. 31</i>	<i>2.</i>		



25-D-2985

WT

Name DENMAN, John Rank pte William 3130961
 Unit ~~1st Bn. 1st Div.~~ WOR 47th Bn. Reg. No. 3130961
 Next of Kin Canada Daniel Denman
 Brussels
 Ont., Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
16-2-	1st West L. H. L'pool	Mumps		e 167		12644
8-4-	Discharged	"		6266		6980
3-9-18	Killed in Action	(P. I G n 84)		A 316	H 3/5	3184

Surname

Christian Name or Names

Reg. No.

Demman

J. W.

3130961

Rank

Unit

Pte.

47 P.B.

Cas. List.

12.9.18 A316 (2)

Killed in action
3. 9. 18 J.

A.M.D. 2 DEPT.

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

Cas. List.

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

Deamanⁿ.

J.W.

3130961

RANK

UNIT

Co.

TROOP

BATTY.

Pvt.

4 Res. W.O.

HOSPITAL

DATE OF ADMISSION

1. 10 Gen. Liverpool - HOSP. 16.2.18.

2. HOSP.

3. HOSP.

4. HOSP.

DIAGNOSIS

Mumps. B.

1.

2.

3.

DISPOSITION

25.3.18. C167.
30.7.18 C266

Dis. 8-4-18

DATE

REMARKS

A.M.D. 2 DEPT.

Bch. of D.G.M.S. U.M.F.C. LONDON.

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

CR. Rank Name DENMAN, John William. Reg'l No. 3130961.
 Unit If in perm. Corps, }
 What Unit? } Married or Single Single.
 Place and Date of Enlistment London, Ont. Jan. 5th. 1918. Place of Birth Brussels, Ont.
 Name and Address, Next-of-Kin Daniel Denman,
 Brussels, Ont., Canada. Relationship Father.

*mt
10/11/20
21*

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

Relationship

Relationship

N/E. R.B. No 10,673
 File R.L. 55-D-2885 1/27/19
 Category K.A

Discharge, Date and Place Reason Character
 H. W. & V., Ltd.—9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		Arrived in England		16-2-18	S/S GRAMPIAN
25.2.18	4th, RES. TO S, From CANADA. B. SHOTT			17.2.18.	PTii 47
3.6.18	"	S.O.S. to 47 Bn 4s	Witley	1.6.18	W/130 47 Bn Bno 46 d/14 78
9-9-18	47 Bn	Killed in Action	Field No	3-9-18	Bno 84

F.B. 103 CHECKE
5 JUN. 1918

Hospital on St. Georgean -

Feb 13th 1915

Name - Pt. Denmark J.W. W.O.R. age 21 - Presbyterian

Diphtheria Membr.

History -

First fell sick on the morning of Feb 9th. Was complaining of pain and soreness on both sides of face - pain on opening the mouth and chewing food. Had slight temperature

Noticed slight swelling on both sides of face on Feb 10th.

Admitted to hospital and isolated Feb 10th.

Both parotid glands were swollen and tender typical of mumps. There had been several cases of mumps in his battalion previous to this. One case being put off the ship before leaving Halifax.

Patient isolated and put in bed.

J.B. McArthur
C.M.D.

THE CANADIAN PACIFIC OCEAN SERVICES LTD

MANAGERS AND AGENTS FOR

CANADIAN PACIFIC RAILWAY OCEAN STEAMSHIP LINES.

THE ALLAN LINE STEAMSHIP COMPANY LIMITED.



R.M.S.

.....19.....

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

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

350M.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps ^{9th Dep} 1st Depot Batta., W. O. R.

Regimental No. 3130961 ✓ Rank Pte Name Dorman John William
C. E. F.

Enlisted (a) 5/1/18 Terms of Service (a) Dep 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. }

Extended Re-engaged Qualification (b) Freight Handler

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				

~~1-1-18 1st Depot Bn. W. O. R. Transferred Overseas, London, Ont. 31-1-18 H. Q. 593-6-7 D/17~~
 EMBARKED CANADA 4/2/18 H. M. T. Lyampian
 DISEMBARKED ENGLAND 16/2/18 H. M. T.

CERTIFIED CORRECT.
 25th JUL 1918
 CAN. RECORDS, LONDON.

O.C. 4th. T.O.S. 4th. Can. Res. Batta. Bracegirdle 17-2-18 Part 2 Order No. 41.
 Res. Bn.

O.C. 4th. Having proceeded o/s as Witley 2-6-18 Ft. 2 D.O. No 130
 Can. Res. Bn to 47th. Bn. is SOS. 4th. Jan. Res

2-6-18 C. I. B. D. T. O. S. 47 TH EN ON ARRIVAL A/Adj for O.C. 4th. Can. Res. Bn.
 17-6-18 C. I. B. D. S. O. S. TO C. C. R. C. FIELD 17.6.18 N. R. 1275
 18-6-18 C. C. R. C. T. O. S. " 18.6.18 N. R. 620
 17.8.18 C. C. R. C. S. O. S. TO UNIT " 17.8.18 N. R. 1375
 17.8.18 UNIT JOINED UNIT " 14.8.18

(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, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. (P.T.O.)

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
5-8-18.	4th Div.Wg. C.C.R.C.	Placed under stoppage of Pay to make good 2/1d.(two shillings & one penny) cost of Govt.property 30-7-18, for "W.O.A.S. Losing by neglect 1 Service cap,value 2/1d.		30-7-18.	B.2069; D.O.75.d/29-8-18.
4-9-18	47 Battn	<u>KILLED IN ACTION</u>		3-9-18	K.I.17/1144. D.O.84 dated 9-9-18-
					<p><i>J. M. Anderson</i></p> <p>Lieut. for Lieut-Col.A.A.G. Canadian Section,</p>

MILITARY SERVICE ACT, 1917.

MEDICAL HISTORY SHEET.

DUPLICATE

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 Denmen Christian name William John William
- 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) 76 Richmond St. Chatham, Kent Co., Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 4th day of October 1917, by the undersigned medical board sitting at Chatham, Kent Co., Ont.

5. Age as stated 21 Years 1 Months. 6. Apparent age 21 Years 1 Months

7. Height 5 Feet 4 3/4 Inches. 8. Weight 125 Pounds.

9. Chest measurement { Minimum 34 Ins. Maximum 36 1/2 Ins. 10. Complexion Fair { Eyes Brown Hair Brown

11. Physical development Good { Good Fair Poor 12. Smallpox marks Nil

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

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

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 R.E.D. 20 L.E.D. 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 11 R. Normal L. Normal

Signature of Man *Wm J Denman*

A. B. Reynolds Camp President. *L. B. Wilson* Member. *W. J. Funnell* Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
16-1-18		<i>R. Munro Capt</i> M.O.	16-1-18		M.O.
		M.O.	11-1-18	<i>R. Munro</i>	M.O.
		M.O.	16-1-18	<i>capt case</i>	M.O.

JAN 5 1918

LONDON, ONT.

Joined day of 191 at

CORPS	REG'TL NUMBER	HABITS	DATE
1st Depot Battn., W. O. R.	3130961		JAN 5 1918
Joined on enlistment			
Transferred to.....			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	On Attestation	RESULT
<i>W. J. Funnell</i>	JAN 13 1918		<i>Capt. A. M. C. St. Chapman</i>	<i>Considered</i>

ORIGINAL 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 Denman Christian name William
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)..... 76 Richmond St. Chatham, Kent Co., Ont.

18 APR 1918

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 4th day of October 1917, by the undersigned medical board sitting at Chatham, Kent Co., Ont.

5. Age as stated 21 Years 1 Months.
6. Apparent age 21 Years 1 Months
7. Height 5 Feet 4 3/4 Inches.
8. Weight 125 Pounds.
9. Chest measurement { Minimum 34 Ins. Maximum 36 1/2 Ins.
10. Complexion Fair { Eyes Brown Hair Brown
11. Physical development Good { Good Fair Poor
12. Smallpox marks Nil
13. Number of vaccination marks { Right arm..... Left arm 1
14. When vaccinated last Childhood
15. Distinctive marks and marks indicating congenital peculiarities or previous disease.....

Signature of Man *Wm Denman*

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 30 30
(Strike out disease admitted or suspected.) R.E.D.20 L.E.D.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 1 R.Normal L.Normal

Wm Denman President.
W B Wilson Member.
W J Sumner Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
16-1-18		<i>W J Sumner</i> Capt M.O.	6-1-18		M.O.
		M.O.	11-1-18		M.O.
		M.O.	16-1-18		M.O.

Joined 4 day of JAN 5 1918 191 at LONDON, ONT.

Corps	REG'TL NUMBER	HABITS	DATE
<u>1st Depot Battrn., W. O. R.</u>	<u>313095</u>		<u>JAN 5 1918</u>
Transferred to.....	<u>47 Bw</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	On Attestation	RESULT	considered.....
<u>London, Ont.</u>	<u>JAN 13 1918</u>		<u>W J Sumner</u>	<u>Capt A. M. O.</u>	<u>W J Sumner</u>

N. B.—This sheet is 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.

CANADIAN

FORM OF WILL.

I, John William Demman (Name in full)

Regimental Number 3130961 serving in 1st Depot Battn., W. O. R.

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 my friend.

Miss Pearl M. Briggs } Name and Address of person or persons to receive personal estate*
47 Centre St }
Chatham Ont } (See note).

IMPORTANT NOTE

This must be Signed and Dated by THE SOLDIER HIMSELF.

this fifth day of January, A. D. 1918

William John Demman 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 W. H. King

Address of Witness 1st Depot Battn., W. O. R.

Occupation of Witness Soldier

THE TWO WITNESSES MUST SIGN HERE

Signature of Second Witness Leon Castle

Address of Witness 1st Depot Battn., W. O. R.

Occupation of Witness Soldier

FORM OF WILL

I, _____ of the County of _____ State of _____ do hereby revoke all former Wills by me made and declare this to be my last Will.

I appoint _____ as my sole and lawful executor.

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

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

IMPORTANT NOTE
This form is not valid unless it is signed and witnessed in accordance with the laws of the State of _____

Witness my hand and seal this _____ day of _____ 19____.

[Handwritten mark]

Signature of Testator _____
Address of Testator _____

Signature of Witness _____
Address of Witness _____

Signature of Witness _____
Address of Witness _____

Signature of Witness _____
Address of Witness _____

Signature of Witness _____
Address of Witness _____

Signature of Witness _____
Address of Witness _____

Strike out whichever inapplicable.

ASSIGNED PAY	CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE:-	1/3/18	EFFECTIVE DATE:-	
AMOUNT:-	15 ⁰⁰	AMOUNT:-	

Effective 1-10-18

NAME:- DENMAN John W^m
NUMBER:- 3130961

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 Pearl Briggs 47 Centre St. Chatham Ont.	

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS			
ORIGINAL UNIT:- 1 st Depot Bn. W.P.R. 4 th Co.			
DATE ACCOUNT FIRST OPENED:- 1/5/18			
AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F'D	UNIT TRANSFERRED TO
46	7/6/18	1-7-18	33-7-18 47 Bn.
		21-10-18	7.E. 3 rd Read.

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS							
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
Statement of Unit Rends 5/19/18 L.P.S. Bal 81.17 Ledger Bal 81.17							

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1		10	

PARTICULARS OF RENDERING NON-EFFECTIVE:- K. in A. 3/9/18, b.L.A. 316 12/9/18.

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
3/3/18	Bal forward.								46.40		
	30 PP.	33		Leab.				15			
				AR 90. 12/4/18 4 th Co.	4.30						
				- 293 27/4/18	9.73				47.37		
		33			17.03			15			
May 31		34.10		bal P				15			
				- 558 15/5/18 4 th Co.	9.73						
				- 764 27/5/18	29.20				27.54		
		34.10			38.93			15			
June 30		33		bal P				15			
				- 825 7/6/18 6.1. B.A.	4.46						
				Q. 1005. 6. 30/5/18 4 th Co.	.57				40.51		
		33			5.03			15			
July Pte. P+a.		34.10		ban: A.P.				15			
				A. J. M. 3069 30.6.18 6.1. B.A.	3.71						
				AR 734. 1.7.18. 4 th W. Co. Bn.	3.57						
				" 873. 17.7.18. "	4.46				51.21		
		34.10		A.P. ban:	8.40			15			
		34.10		AR 1027. 4.8.18. "	3.57						
Aug: Pte. P+a.				" 568. 22.8.18. 10.6.1. B.A.	3.57				63.17		

UNIT AND TRANSFERS

ORIGINAL UNIT - 1st Depot Co. W.P. 4Re.
 DATE ACCOUNT FIRST OPENED - 1/5/18

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S F O	UNIT TRANSFERRED TO
116	7/6/18	1-7-18	33-7-18 47 On
			21.10.18 N.E. 3 Dead.

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
		Statement of Unit Rends 5/19/19				Ledger Bal 81.17	

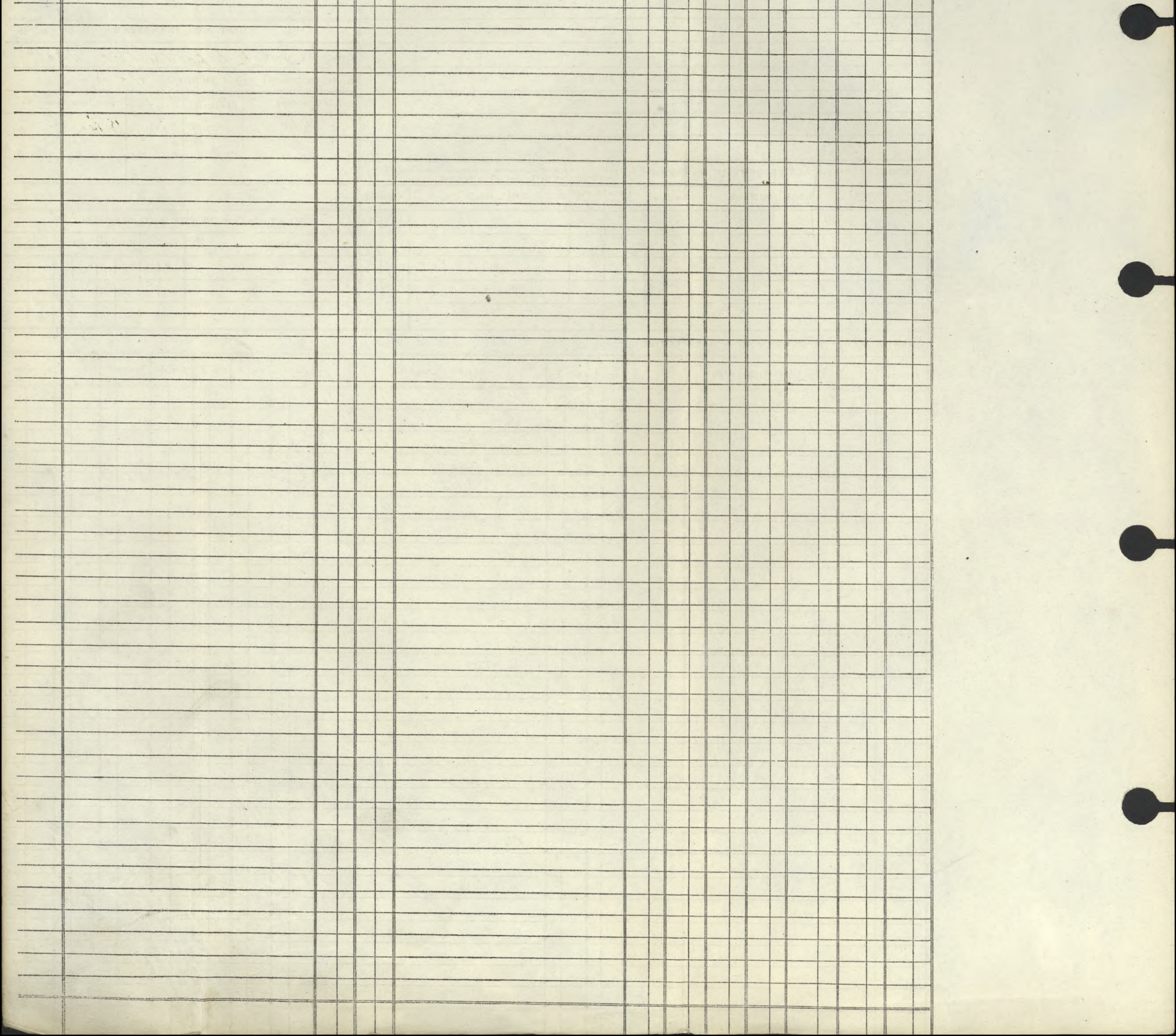
DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1		10	

PARTICULARS OF RENDERING NON-EFFECTIVE: - K. in A. 3/9/18, b.L.A. 316 12/9/18.

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
3/3/18	Bal forward.								46 40		
	30 9P.	33		bal				15			
				AR 90 12/4/18 4 Res.	4 30						
				- 293 27/4/18	9 73				47 37		
		33			17 03			15			
May 31		34 10		bal				15			
				- 558 15/5/18 4 Res.	9 73						
				- 764 29/5/18	29 20				27 54		
		34 10			38 93			15			
June 30		33		bal				15			
				- 825 7/6/18 6 I.P.S.	4 46						
				AR 005 6 30/5/18 4 Re.	57				40 51		
		33			5 03			15			
July	Pte. P+a.	34 10		ban: 1P.				15			
				A. 7 M 3069 30.6.18 6 I.P.S.	37						
				AR 734 1.7.18 4 M. 60 Rb.	3 57						
				" 873 17.7.18 "	4 46				51 21		
		34 10			8 40			15			
Aug:	Pte. P+a.	34 10		al. ban:				15			
				AR 1027 4.8.18 "	3 57						
				" 568 22.8.18 10 6 I.P.S.	3 57				63 17		
		34 10			7 14			15			
Sep:	Pte. P+a.	33		al. ban:				15	81 17		
		33						15			

NON EFFECTIVE, ACT.



MARRIED OR SINGLE

PLACE OF BIRTH

NAME OF NEXT OF KIN

ADDRESS

Single.
Brussels, Ontario.
Daniel Deiman RELATIONSHIP *Wife*
Brussels, Ontario.

PARTICULARS			EFFECTIVE DATE

NAME OF NEXT OF KIN

RELATIONSHIP

ADDRESS

DATE ADMITTED	ADMISSIONS DATE DISCH'D	V. OR A.	TO HOSPITAL, &c. NAME OF H.

SEPARATION ALLOWANCE.

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE (DATE)

STOPPED EFFECTIVE (DATE)

PAYABLE TO

REASON

RELATIONSHIP

AUTHORITY

AUTHORITY FOR ISSUE

REMARKS

SEPARATION ALLOWANCE MONTHLY \$

EFFECTIVE DATE

STOPPED EFFECTIVE (DATE)

PAYABLE TO

REASON

RELATIONSHIP

AUTHORITY

AUTHORITY FOR ISSUE

REMARKS

NEW PAYBOOK ISSUED

NEW PAYBOOK ISSUED

PERIOD		PAY AND FIELD ALLOWANCE			WORKING PAY			SEPARATION ALLOWANCE	ASSIGNED PAY CREDITS	ANY OTHER CREDITS	TOTAL CREDITS	SEPARATION ALLOWANCE		CASH PAID DURING THE PERIOD	
FROM	TO	NO. OF DAYS	RATE	\$	C.	NO. OF DAYS	RATE	\$	C.	\$	C.	\$	C.	1	2
														\$	\$

MONTH PARTICULARS CR.1 CR.2 PARTICULARS DR.1 DR.2 DR.3 DR.4 BALANCE

JAN 31 1913

Bal. from Canada.

March. P.P. Deiman 64 90
64 90

bal. Deiman

1150
4640
30 4640
30
i

MENTS.
D REVERSIONS.

REG'L. No. *3130961* RANK *Pte* NAME *Denman John William.*
PLACE OF ATTESTATION *London, Ontario.* DATE OF ATTESTATION *5/1/18.* ORIGINAL UNIT *1st Depot Bn: W.O.R.*
H^{ts} Can. Res.

ASSIGNED PAY

PRESENT UNIT
PARTICULARS OF TRANSFERS

PER MONTH \$ *15⁰⁰* (1) DATE EFFECTIVE *1/2/18.* AUTHY.

STOPPED EFFECTIVE (1)

TO UNIT EFFECTIVE DATE AUTHORITY

PAYABLE TO *Miss Pearl Briggs. 47.*

CAUSE

Centre St. Chatham Ontario. RELATIONSHIP (2)

DATE A3M FORMS REND. (2)

PER MONTH \$ DATE EFFECTIVE AUTHY.

STOPPED EFFECTIVE (2)

PAYABLE TO

CAUSE

RELATIONSHIP (3)

DATE A3M FORMS REND. (3)

PER MONTH \$ DATE EFFECTIVE AUTHY.

STOPPED EFFECTIVE (3)

PAYABLE TO

CAUSE

RELATIONSHIP (4)

DATE A3M FORMS REND. (4)

PER MONTH \$ DATE EFFECTIVE AUTHY.

STOPPED EFFECTIVE (4)

PAYABLE TO

CAUSE

RELATIONSHIP

DATE A3M FORMS REND.

DISCHARGE DATE AND PLACE

ACCOUNT TRANSFERRED TO N.E. BRANCH (DATE)

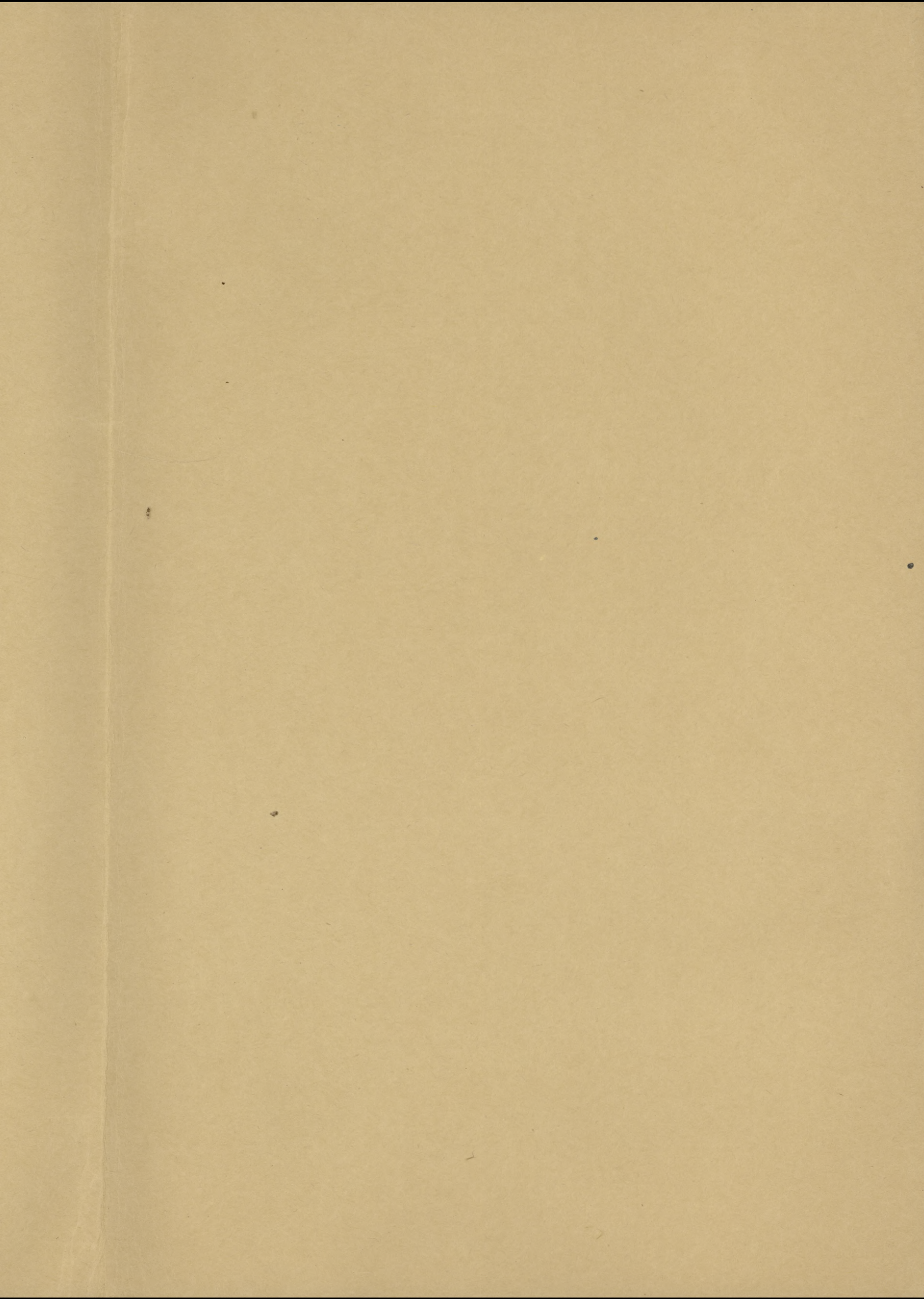
REASON AND AUTHORITY

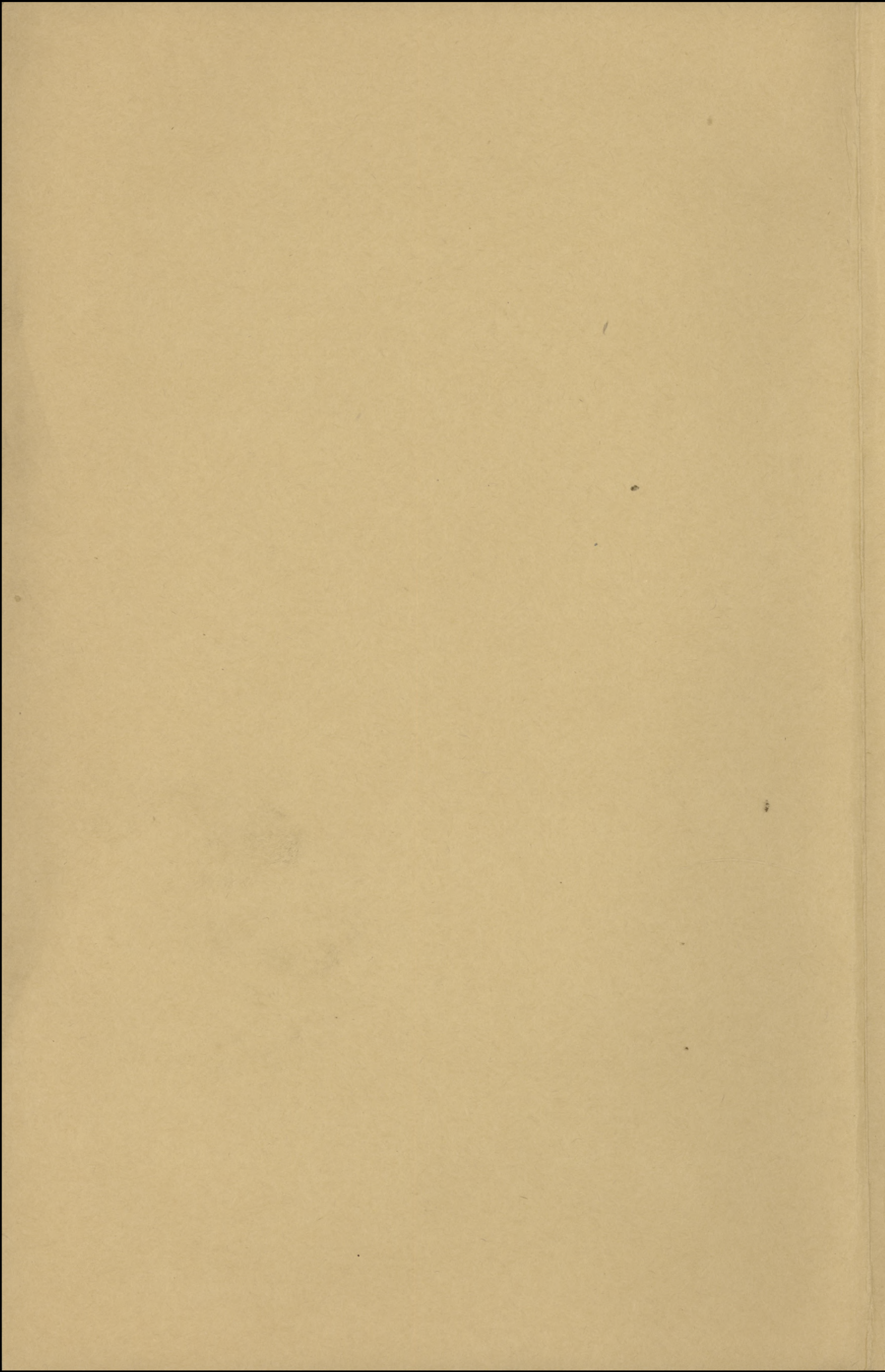
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

CASH PAYMENTS DURING THE MONTH				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CARRIED FORWARD		NUMBER OF ACQUITTANCE ROLLS		NUMBER OF S.A. AND A.P. CHEQUE	REMARKS. ALL CASUALTIES, PROMOTIONS, &c., TO BE NOTED. ALSO PARTICULARS OF "OTHER CREDITS" OR "OTHER CHARGES"
1	2	3	4				CREDIT	DEBIT	1	2		
c.	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.				

50
40
40

3130961 Denman, John William
47th Battalion





MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	3130961.	P. E.	Deuman	J. W.
Year	Unit.		Age.	Service.
1918.	Western Ontario Rifles.		21	2/12.
Station and Date.	Disease <u>measles.</u>			
Spann Hall Fazakerly	Orest (e.) 9 th			
16-2-18.	6-3. Recd for discharge to Unit.			
	<u>measles.</u>			
	7-3. Recovery, resumed.			
	? Scabies.			
	Cured with <u>unq. sulphur.</u>			
29-3-18.	M in condition improved			
20-4-18	Recommended for discharge <u>discharge approved</u>			

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

Station
and Date.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Enlisted 5-1-18

3058

1.2.18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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AUTHORITY FOR NEW ACC'T.

N.R.

RATE OF ASSIGNMENT

<i>15⁰⁰</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. *3130.961*

Rank *Pte* Promoted Reverted Discharge

Soldier's Name *Dorman, John William*

Battalion *1st Depot Batta W. O. Rgt*

Beneficiary

Relationship

Address

Name *Miss Pearl Briggs*

Address *47 Leuter Street, Methuen, Ont*

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Mar 1918</i>	<i>M 76868</i>		<i>30</i>	<i>30</i>	<i>A MRO'at Remund</i>
<i>Apr</i>	<i>B 6093</i>		<i>15</i>	<i>15</i>	
<i>May</i>	<i>O 14851</i>		<i>15</i>	<i>15</i>	<i>R</i>
<i>June</i>	<i>I 25938</i>		<i>15</i>	<i>15</i>	<i>P</i>
<i>July</i>	<i>Q 30610</i>		<i>15</i>	<i>15</i>	<i>K</i>
<i>Aug</i>	<i>L 39855</i>		<i>15</i>	<i>15</i>	<i>G</i>
<i>Sept</i>	<i>N 42801</i>		<i>15</i>	<i>15</i>	<i>R</i>
				<i>120</i>	

KILLED IN ACTION / DIED OF WOUNDS } DATE *3-9-18*

C. L. No. *305* DATE *18-9-18*

M. R. O. *14708* TO DESTROY RENDERED *23/9/18*

B. P. C. FORM 1 & C. F. 2 COMPLETED ON FILE

4516-9-22

CLERK *S. Roche 22/9/18*

E F X 8/5/19

H. J. Martin 6-3-18

M. F. W. 138.
400M. 5-17-1772 30-1141
L. L. 22320-M. & D. 7993.

*11 L10195
S.K.*

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

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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
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M. F. W. 126.
400M. 17-1772 53-1141
L. L. 2330—M. & D. 7393.