

ATTESTATION PAPER.

No.

No. 2 CONSTRUCTION, B'n. C.E.F.

Folio.

C.E.F.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname? *Falawon*
- 1a. What are your Christian names? *Marlow*
- 1b. What is your present address? *Liverpool Green U.S.*
- 2. In what Town, Township or Parish, and in what Country were you born? *Liverpool Green U.S.*
- 3. What is the name of your next-of-kin? *Mary K. Falawon*
- 4. What is the address of your next-of-kin? *64 Chappel Street Lowell*
- 4a. What is the relationship of your next-of-kin? *Wife*
- 5. What is the date of your birth? *March 17 1882*
- 6. What is your Trade or Calling? *Chappens or Cook*
- 7. Are you married? *yes*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated? *yes*
- 9. Do you now belong to the Active Militia? *no*
- 10. Have you ever served in any Military Force? *no*  
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement? *yes*
- 12. Are you willing to be attested to serve in the } *yes*  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Marlow Falawon*, 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 *Oct 11* 191*6* *Marlow Falawon* (Signature of Recruit)  
*St. Michael* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Marlow Falawon*, 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 *Oct 11* 191*6* *Marlow Falawon* (Signature of Recruit)  
*St. Michael* (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 *Liverpool* this *11<sup>th</sup>* day of *October* 191*6*.  
*William Smith* (Signature of Justice)

Description of Marlow F. Galum on Enlistment.

Apparent Age 34 years ..... months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height ..... 6 1/2 ft. 2 ins.

Chest measurement { Girth when fully expanded ..... 42 ins.  
Range of expansion ..... 4 ins.

*none*

Complexion ..... Swartzy

Eyes ..... Brown

Hair ..... Dark

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye ; his heart and lungs are healthy ; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

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

Date ..... Oct 11 ..... 1914.

Place ..... Quincy NY

Thomas R. Ford  
Medical Officer.

\*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

.....  
.....  
.....  
.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

Marlow F. Galum ..... 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.

C. W. Reis Capt ..... (Signature of Officer)

Date OCT 24 1914 ..... 1914.

REGIMENTAL DOCUMENTS

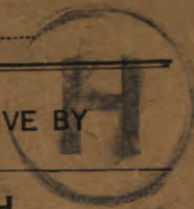
NAME **FALAWN MARLOW**

(SGT.)

REGT. NO. **931319**

UNIT **#2 Cons. Bn**

H. Q. FILE NO.



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY	
2/1 3 ATTESTATION PAPER (M.F.W. 23, 133, or 51)				00758	DEATH	
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)		NI			Category	
TRAINING HISTORY SHEET (M.F.W. 113)						
1 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)						
3 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE	
DENTAL HISTORY SHEET (M.F.B. 465)					Category	
1 MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Demob'd</i>	
1 MEDICAL EXAMINATION (M.F.W. 129)						
1 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)					DESERTION	
LAST PAY CERTIFICATE (M.F.W. 44)						
1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)		H				
PARTICULARS OF CHARACTER (A.F.W. 3226)						
1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)						
1 A.F.W. 3997.					3	
1 M.F.W. 192					19-3	
1 D.M.S. 1375				19-3		
1 C.A.D.C. 5009A				3-3		
1 m. 7 w. 67				3		
[unclear]				3		
[unclear]						
[unclear]						
[unclear]						
[unclear]						



DUPLICATE

931319

To be made out in duplicate.

H.Q. 54-21-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

No. 2 CONSTRUCTION, B'n. C.E.F.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number 931319.....

(3) Full Name of Soldier Marlow Falawa.....

(4) Place of Birth Liverpool Cto 8.....

(5) Are you married, or not? Yes.....

(6) If married, state,  
(a) Full name of your wife Mrs Mary Catherine Falawa.....

(b) Present Postal Address 64 Chapel St Lowell Mass, U.S.A.

(7) Are you a widower? no.....

(8) Have you any children? Yes.....

If so, give number of boys and girls. 3.....

Also their names and ages Gertrude age 12 yrs

Charles age 10 yrs

Mildred age 8 yrs

(9) Is your Father alive? *no*

If so, state name and address \_\_\_\_\_

(10) Is your Mother alive? *no*

If so, state name and address \_\_\_\_\_

(11) If your Mother is a widow \_\_\_\_\_

Are you her sole support, or not? \_\_\_\_\_

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

*\$ 20*

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

*wife*

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

*yes*

(15) Are you insured? *yes*

If so, in what Company? *met life*

Have you made arrangements for payment of your Insurance premium? *no*

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

*C. H. Reis Capt*  
for Officer Commanding.

Date **OCT 24 1916**

FALAWN

931319

Original in No. 2 Const C.E.F.

# MEDICAL HISTORY SHEET

Surname Falawn Christian Name Marlow

Examined { on 11 day of Oct 1914  
 at Liverpool NY  
 Birthplace { City or Town Liverpool NY  
 County Queens

Approved by \_\_\_\_\_  
 Rank Theodore L Ford M.O.

Apparent age 34  
 Trade or occupation Cook & Chauffeur  
 Height 6 feet 2 Inches  
 Weight 195 lbs.  
 Chest measurement { Minimum 35 inches  
 Maximum expansion 4 inches  
 Physical development Good  
 Small-pox Marks nr  
 Vaccination Marks { Arm Right Left  
 Number @ 2  
 When Vaccinated last 30 years ago  
 (a) Marks indicating congenital peculiarities or previous disease nr

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

Date	Result	VACCINATIONS
<u>15/3/14</u>	<u>GR</u>	<u>Dau Murray</u>
		M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection nr

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>25/10/14</u>	<u>GR</u>	<u>H.V. Keel - Major</u>
		M.O.
<u>31/10/14</u>	<u>GR</u>	<u>H.V. Keel - Major</u>
		M.O.
<u>21/11/14</u>	<u>GR</u>	<u>H.V. Keel - Major</u>
		M.O.

Enlisted on 11 day of Oct 1914 at Liverpool NY

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>No 2</u>	<u>931319</u>		<u>10/11/16</u>
Transferred to.....	<u>Construction</u>			
	<u>Batt.</u>			

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT

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





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

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# DENTAL CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO DENTAL OFFICERS

Canadian Printing and Stationery Services, London

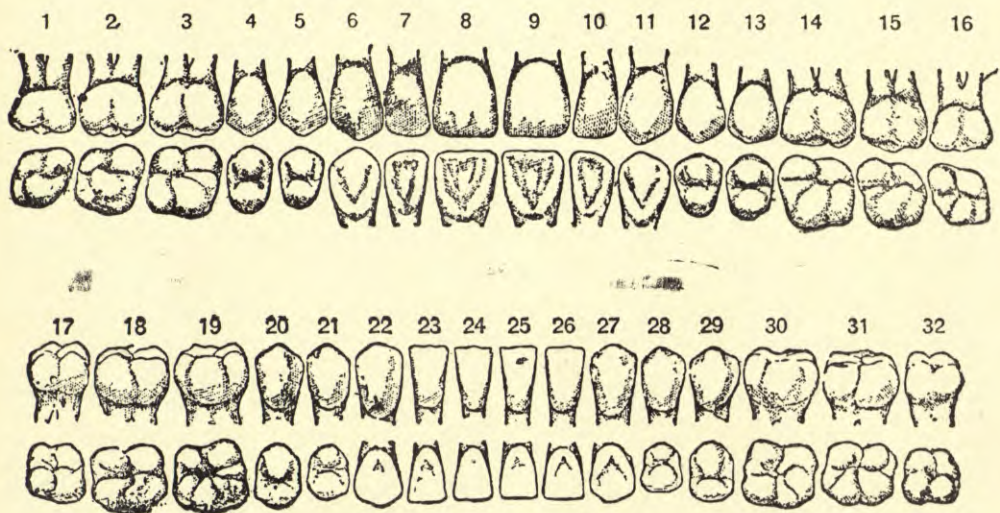
MP. 6.

NAME OF SOLDIER (Block Letters) FALAWIV. M.

REGIMENT No 2. Construction RANK Sgt. No. 931319.

Date of Examination in England 31-12-18 Date of Examination in France

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 4,
2. EXTRACTIONS
3. CROWNS
4. DENTURES
  - (a) Full Upper
  - (b) Part Upper
  - (c) Full Lower
  - (d) Part Lower 17, 18, 28, 29, 30, 31

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

KINMEL PARK,  
NORTH WALES.

Signature of Dental Officer

*John Reid*  
Capt.

MR. P.

FALAVIN. M.

1917

20

1000

B

Chapman

# 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. 931319 Rank Sgt. Surname Salawn  
(Given name in full) Marlow Salawn  
Unit or Corps D. D. 6. Birthplace Liverpool P.S.

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

### 1. GENERAL DESCRIPTION:

Physique good Weight 200 lbs. Height 6 ft. 2 in. Colour of Eyes Brown  
Nutrition good  
Pulse 75  
Condition of arteries good  
Vision Rt. good Left good  
Hearing (conversational voice) Rt. 15 ft.  
Left 5 ft.

Identification marks, scars, or deformities.  
(Give cause and date of origin).  
Nil

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.

114 Gottingen St.  
Halifax  
P.S.

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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 *Halifax* .....(Canada)

Date *4-3-19* ..... Signed *[Signature]* .....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 *[Signature]* .....

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

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

Opinion as to general health and physical condition  
Has Officer or Other Rank ever had any of the following affections?  
(Answer "Yes" or "No") (Selective evidence may be submitted in certain cases)  
Nervous System  
Genito-Urinary System  
Cardio-Vascular System  
Skeletal System  
Respiratory System  
Digestive System  
Mental System  
Other System  
Gonorrhoea and other venereal diseases

If the answer to any part of Section 3 shows "Yes", give full particulars, with dates and date of origin, and also a description of the present condition.

[OVER]

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

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

Rank *1st Lt.* Name *Marlow* Surname *Falson*  
Unit of Corps *M 2 Construction Bn.* (If a soldier) Regt. No. *931319*  
Born at *Liverpool, Mo.* on, (date) *17-3-1883.*  
Signature (for identification) *Marlow Falson*

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

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe. *no - good physique*  
Weight *197* lbs. Colour of eyes *Brown*  
Height *6* ft. *2* in. Identification Marks *Blaze on our Right Side middle third from a brace*

2. NUTRITION AND DIATHESIS? *good.*

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

3. NERVOUS SYSTEM? Is there a history of previous disability? *no*

4. RESPIRATORY SYSTEM? Is there a history of lung trouble? *no*

5. HEART? *no*  
Abnormal Sounds? *no*  
Abnormal Size? *no*  
Pulse Rate? *72* Intermittence or Irregularity? *no no* Muscular Tone? *good*

6. ARTERIES.—(a) Any hardening or nodulation? *no*  
(b) Blood Pressure. *110/60*

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included). *good.*

8. GENITO-URINARY SYSTEM?  
Urinalysis—S.G.? *1070* Reaction? *acid* Albumen? *nil* Sugar? *nil*

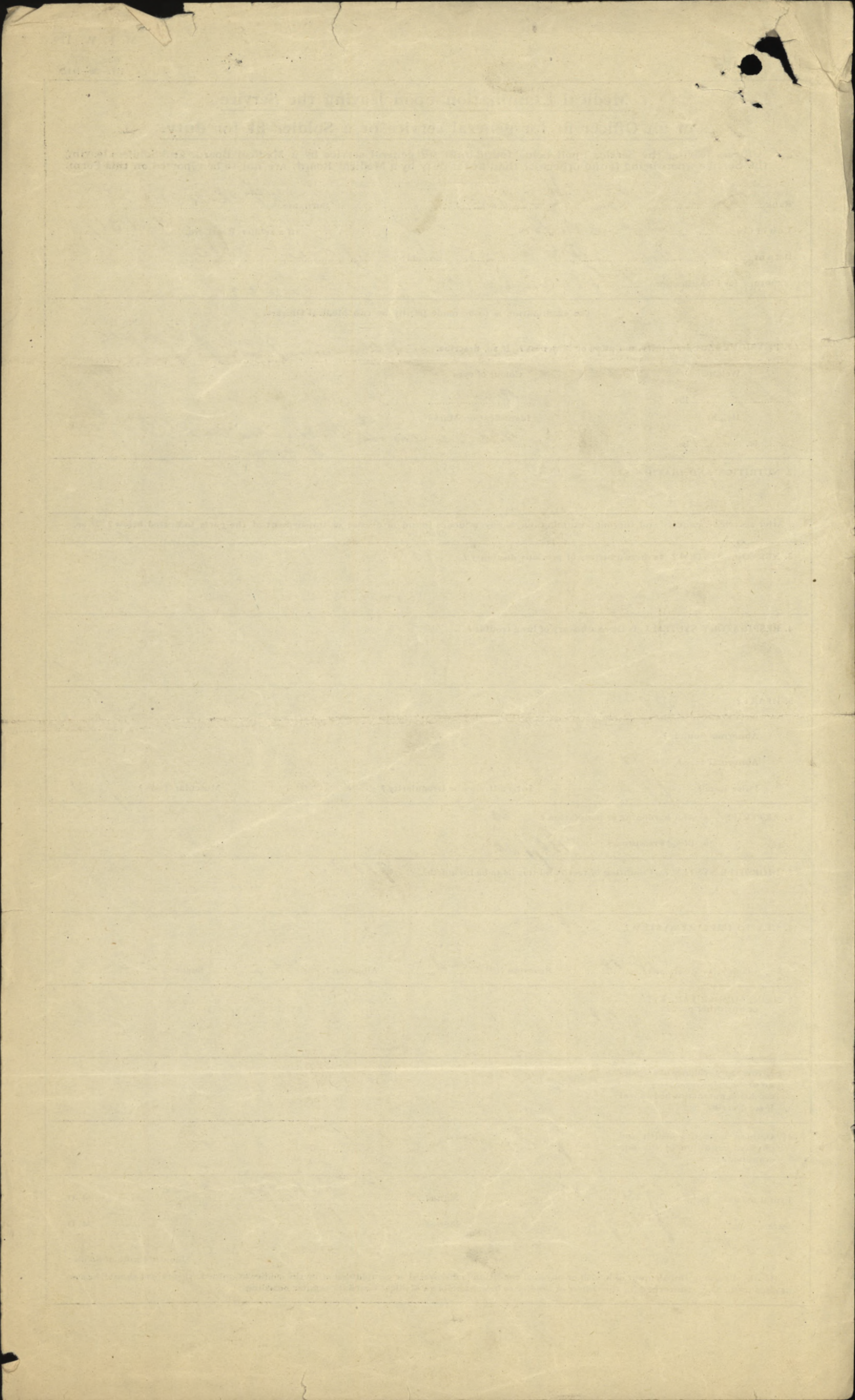
9. SKIN, MIDDLE EAR, EYE or any other part? *no*

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

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

Examined at *Waldorf, Mo.* Signed *W. H. ... Capt. Corne* M. O.  
Date *30/7/19* Signed *Marlow Falson* M. O.  
Signature note of Soldier.

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



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 *Marlowe*..... 2. Surname *Halawon*.....
3. Rank *Sgt.*... 4. Original Unit *no. 2. Con. Bn.* 5. Reg. No. *98/319*..
6. Address, in full, to which future payments of gratuity are to be forwarded .....  
*114 Gattingers St. Halifax N.S.*
7. Date of enlistment in the C.E.F. *11/9/16*.....
8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Mrs M.C. Halawon*.....
9. Relationship of such dependent *Wife*.....
10. Address, in full, of such dependent *64 Chapel St. Lowell Mass. U.S.A.*.....
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:—  
*no. 2. Con. Bn. 8/4/17 to 12/1/19*.....
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? *no*.....
14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *no*.....
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 *no. 2. Con. Bn. 11/9/16*  
*Con. Eng. (France) to*.....
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 ..... *not applicable*
20. Have you been issued with a War Service Badge? If so, what class? .....
21. Have you, during the present war, served in the Imperial Forces? ..... *no*
22. Are you entitled 'o 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? *not applicable*
24. Are you now serving in the C.E.F. .... If not, give:—(a) Date of discharge ..... *7-3-19* (b) Reason for discharge ..... *Demob'n*
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..... *yes: no 2 con. ren. 17/5/17. to 12/12/18*
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: *M. Talbot*  
 Place of Residence: *114 Göttinger St, Halifax, N.S.*  
 Declared before me at: *Halifax, N.S.*  
 This *5<sup>th</sup>* day of *March* 191*9*.

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

*R. Huarte*  
 A Commissioner of the Supreme Court in and for the Province of Nova Scotia.

**POST DISCHARGE PAY.**

Date paid	Paid Soldier	Paid Dependenc	War Service Gratuity	Net amount due
		<i>29. 3/19</i>	<i>153 day 5 mos W.S. G.</i>	<i>350.00</i>
			<i>Linn 23 day 5/4 inch W.S. G.</i>	<i>150.00</i>
				<i>500.00</i>
				<i>93.00</i>
				<i>407.00</i>

Certified Correct.  
*W.D. [Signature]*  
 District Paymaster.  
 Paymaster No. 6 District Depot

*[Signature]*  
 CAPT

6461 L. EVIN



# Proceedings on Discharge.

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

No.	931319	<b>M</b>
Rank	Sergeant	
Surname	Falawu	
Christian name	Marlow	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.		
Corps (Squadron, Battery or Company)	No 2 Construction Bn.	
Date of discharge	March 7, 1919	
Place of discharge	Halifax N.S.	

### 1. DESCRIPTION AT THE TIME OF DISCHARGE.

	Descriptive marks
Age <u>37</u> years..... months.	
Height <u>6</u> feet..... <u>2</u> inches.	
Complexion <u>Swarthy</u>	<u>Nil</u>
Eyes <u>Brown</u>	
Hair <u>Dark</u>	
Trade <u>Chaffeur or Cook</u>	
Intended place of residence <u>114 Gottingen St Halifax</u>	
(To be given as fully as practicable.)	

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

Demobilization

Authority for discharge.....

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

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

N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.

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

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

M. F. B. 218.

200M.—5-18.  
H. Q. 1772-39-113.

(OVER)

*a.m.k.*  
*11-4-19*

5. He is in possession of the following number of G. C. Badges

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

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

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

(Place) *Halifax N.S.*

(Date)..... Commanding.....

8. Certificate to be signed by the Soldier on Discharge

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

(Place) *Halifax N.S.* *Marion Talbot* (Signature of Soldier.)

(Date) *Nov 5/19* *Edmondson* (Signature of Witness.)

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

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

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

..... (Signature of Soldier.)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

(Place) *Halifax N.S.*

(Signature) *[Signature]* LIEUT. COL.  
No. 6 DISTRICT DEPOT.

(Date) *March 7, 1919*

**Reservations referred to at Para. 8.**

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

*nil*

*M. L. Law*

## List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron }          Battery } Conduct Sheet, " B. 263a          Company }          or          Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged "Medically unfit."</p> <p>‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23          or          Particulars of Recruit " W. 133</p> <p>Proceedings on Discharge " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="text-align: center;">(a) Proceedings on Discharge.</p> <p style="text-align: center;">(b) Attestation.</p> <p style="text-align: center;">(c) Medical History Sheet.</p>
--	---

Documents not accompanying this form should be crossed out.

*I hereby certify that the following documents are unobtainable.*

*Officer Commanding.*

*N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.*

920

# CANADIAN EXPEDITIONARY FORCE Discharge Certificate

This is to Certify that No. 931319 (Rank) Sergeant  
 Name (in full) Marlow Talawon enlisted in  
 the No 2 Construction Battalion  
 CANADIAN EXPEDITIONARY FORCE at Liverpool on the 11<sup>th</sup>  
 day of October 1916  
 HE served in France  
 and is now discharged from the service by reason of Demobilization

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

Age 37 years  
 Height 6 feet 2 inches  
 Complexion Swarthy  
 Eyes Brown  
 Hair Dark

Marks or Scars  
Nil

Marlow Talawon  
 Signature of Soldier

C W Macdonald CAPTAIN,  
 O. C. DISCHARGE SECTION DISTRICT DEPOT.

Date of Discharge March 7, 1919

Rank

Signed at Halifax this 6<sup>th</sup> day of March 1919

Appointment

in Military District No. Six

File Reference No. \_\_\_\_\_

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

CANADIAN EXPEDITIONARY FORCE  
Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.  
Uniform not to be worn after Date of Discharge unless authority has first been obtained from G. O. C. District

920

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps 2nd Ldn. Ban. Coy Regimental Number 931319

\*Substantive Rank Sgt. Surname Falwin Christian Names Marlow

\*Acting Rank \_\_\_\_\_  
(\* To be entered in pencil to facilitate alteration.)

To be folded on this line.  
Nothing to be written in this margin.

A1834 W. 6425-P16 500,000 10/18 G.W.P. Co. 3973.

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
3.3.19	no 2 bbn	D.O. 5	Transferred to <del>2nd Bn</del> & posted to Sgt. Field		14 <sup>12</sup> / <sub>18</sub>	
20 <sup>12</sup> / <sub>18</sub>	W.R.D.	" 309.	To S. fr. 2nd Bbn & added to 2 bbn fr. Q.R.	Sgt. Bst. Lt.	14 <sup>12</sup> / <sub>18</sub>	
27 <sup>12</sup> / <sub>18</sub>	W.R.D.	" 313	Ofc. to 600. Rhyl.	" Pipon	27 <sup>12</sup> / <sub>18</sub>	
25 <sup>1</sup> / <sub>19</sub>	"	" 18	Leaves Ofc to Rhyl his S.O.S to 600 in ban	" Pipon	12 <sup>1</sup> / <sub>19</sub>	

*[Handwritten signature]*

THE LT. COL. IN CHARGE G. G. M. F.

(SERVICE AND CASUALTY FORM FOR II)

Regimental Number \_\_\_\_\_  
Substantive Rank \_\_\_\_\_  
Acting Rank \_\_\_\_\_  
To be entered in case of alternate promotion

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I, 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
---------------	--	---	--	-----------------------------	---	---


Nothing to be written in this margin.  
Nothing to be written in this margin.  
Nothing to be written in this margin.

Nothing to be written in this margin.



W.S.B. "a"

920

*Autw...*

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

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

350m.—5-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps

No. 2 Construction Batt'n, C. E. F.

Regimental No. 931-319

Rank pte

Name

Marlow ~~James~~ FALAWN.

C. E. F.

Enlisted (a) 11-10-16

Terms of Service (a) period of war

Service reckons from (a) 11-10-16

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)

Date	From whom received	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
------	--------------------	---	-------	------	---

Embarked, Canada

Halifax N.S.

25/3/17

Disembarked, England

Liverpool

7/4/17

Proceeded Overseas

Seaford

17/5/17

Pt 2. W.O. #

appt<sup>d</sup> as Sgt upman at in England.

10-4-17

Auth: Chief Paymaster

P2.F. 14914. df 14-9-17. & Cancelled R.R. # 65-67. over R2.H2. 28817 of 28/9/17

File K.G. 16-19841 P2 of 129 of 22-9-17.

J.H. Barnhill, Lieut.  
Adjutant, No. 2 Construction Batt'n, C.E.F.  
Captain

Landed in France

17-5-17 N.R.

17/5/17 oc

appt<sup>d</sup> as Lt/Cpl with pay.

16/5/17

Pt 2 of 135 df 20-10-17

" " "

" as Lt with pay

30.6.17

N.R. & file K.G. 16/25295.

" " "

" as Sgt with pay.

24.7.17

14-9-17 Chief Paymaster

P2 of 135 is cancelled this mco Proceeded to France with rank of as Sgt

Letter to P2. 714917. df 14/9/17

(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.

CENTRAL RECORDS, CAN. RECORDS, 6 JUN. 1917

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				
2-1-18	Jura Hosp.	2' head ill infected w. adm.		2/1/18	W 3034 / 86496.
5/1/18	occurit	20 hospital.		5/1/18	B213
15/1/18	oc Jura Hosp	Infected w. 2' head Discharged.		15/1/18	W 3034 / 680167.
19-1-18	occurit	Repd unit from hosp.		15-1-18	B213
9/4/18	occurit	granted 14 days leave to wk.		7/4/18	B213 P29510 d/18/7/18
23/2/18	oc	Repd unit from leave.		22-7-18	B213
30-8-18	Jura Hosp	diarrhea admitted.		30-8-18	W 2221
31-8-18	oc	To Hospital Field		30-8-18	B213
7-9-18	oc unit	Conferred w. rank of Sergeant		17-5-17	B213 p 50. 52 of Sept 1918
12-9-18	Jura Hosp	diarrhea Discharged.		12-9-18	44163
14-9-18	oc unit	Returned from Hospital Field.		12-9-18	B213
12-2-19	A.A.G.	P.D.P. C.B.B (Col) on trans to Gen to Record List		12-2-19	Cdr Det. G.H.2 3rd Echelon Pt II O3. d/12-2-19
"	"	To Gen Record List on trans from C.B.B (Col)		12-2-19	Cdr Det G.H.2 3rd Echelon Pt II O12, d/14-2-19
3-3-19	S.A.A.G.	above entry cancelled Proceeded to England		14-12-18	18-75914 (A) A) File K-3-2) Pt II. O. 17 d/4-3-19

C. A. Howell Lieut.  
1st Lt. Col., A.A.G.,  
Canadian Section

920

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

M. F. W. 54. (A. F. 103.)  
350M.—5-16  
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 931319 Rank Sgt. Name Halawen M.  
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				
12.1.19	O'Leary. 1/0/S. No. 6 D. D. Dept.		Casyl. Co.	22.1.19	Do 29. A. M. Ferguson Lieut ASST. ADJT. No. 6 DISTRICT DEPOT
13.2.19	Casyl. Coy	Trans. to Hosp. Sec.	Halifax	20.4.19	R. L. Hayte Capt O. C. CASUALTY COMPANY No. 6 DISTRICT DEPOT
21-2-19		Trans. to bas. Coy.	Halifax	21-2-19	Do 53 CAPTAIN O. C. HOSPITAL SECTION No. 6 DISTRICT DEPOT
7-3-19		DISCHARGED at Halifax, N. S			Do 65 CAPTAIN. O. C. DISCHARGE SECTION No. 6 DISTRICT DEPOT.

(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.]



920

JM

Rank \_\_\_\_\_ Name **FALAWN, Marlow.** Reg'l No. **931319.**  
 Unit **No. 2 Const. Bn.** If in perm. Corps, }  
 What Unit? } Married or Single **Married.**  
 Place and Date of Enlistment **Liverpool. 11th Oct 1916.** Place of Birth **Liverpool, N.S.**  
 Name and Address, Next-of-Kin **Mary K. Falawn.**  
**64 Chappel Street, Lowell, Mass., U.S.A.** Relationship **Wife.**  
 Assigned Pay Monthly \$ \_\_\_\_\_ Payable to \_\_\_\_\_ Relationship \_\_\_\_\_  
 Separation Allowance \$ \_\_\_\_\_ Payable to \_\_\_\_\_ Relationship \_\_\_\_\_

N/E. R.B. No. **6636**  
 File R.L. \_\_\_\_\_  
 Category **OR CAN**

*Box*

Discharge, Date and Place \_\_\_\_\_ Reason \_\_\_\_\_ Character \_\_\_\_\_

H. W. & V., Ld.-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.				
<i>C.</i>					
		Arrived in England. S.S. Southland		4.4.17	<i>AWW.</i>
22.9.17	2 <sup>nd</sup> L.L. Bn	Appth. A/Sgt. on arrival in England	Pte Field	19.4.17	PT # 129
14.6.17	2 <sup>nd</sup> Lon Bn	Arrived in France	Leeds	14.5.17	PT # 115
20.10.17	"	Appth. A/Sgt. with pay	"	30.6.17	PT # 135
20.10.17	"	Appth. A/Sgt. with pay	"	24.7.17	PT # 135
21.9.18	"	Promoted sergeant	A/Sgt	17.5.17	NO. 52. <i>tax</i>
20.12.18	NSRD.	T.O.S. from 2 <sup>nd</sup> CC Coy. 7. att'd. to 2 <sup>nd</sup> CCD for Q. & R.	Sgt. Bihott	14.12.18	NO 309 <del>PT # 135</del>
27.12.18	N.S.R.D	O/C to C.D.D. Rhye	-	27.12.18	D. 6313
25.1.19	NSRD	cease of c/o Rhye	Ripon	12.1.19	18
		Q.S.O.S to C.E. & Canada			

A.F.B. 103 CHECKED  
 29 MAY 1951

Cancelled by  
 PT # 138 d. 7.11.17

920

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.				
3.3.19	No. 2. b. b. b.	Transf to Eng & posted to N.S.P.D.	Sqr. 4th	14 <sup>12</sup> / <sub>18</sub>	No S

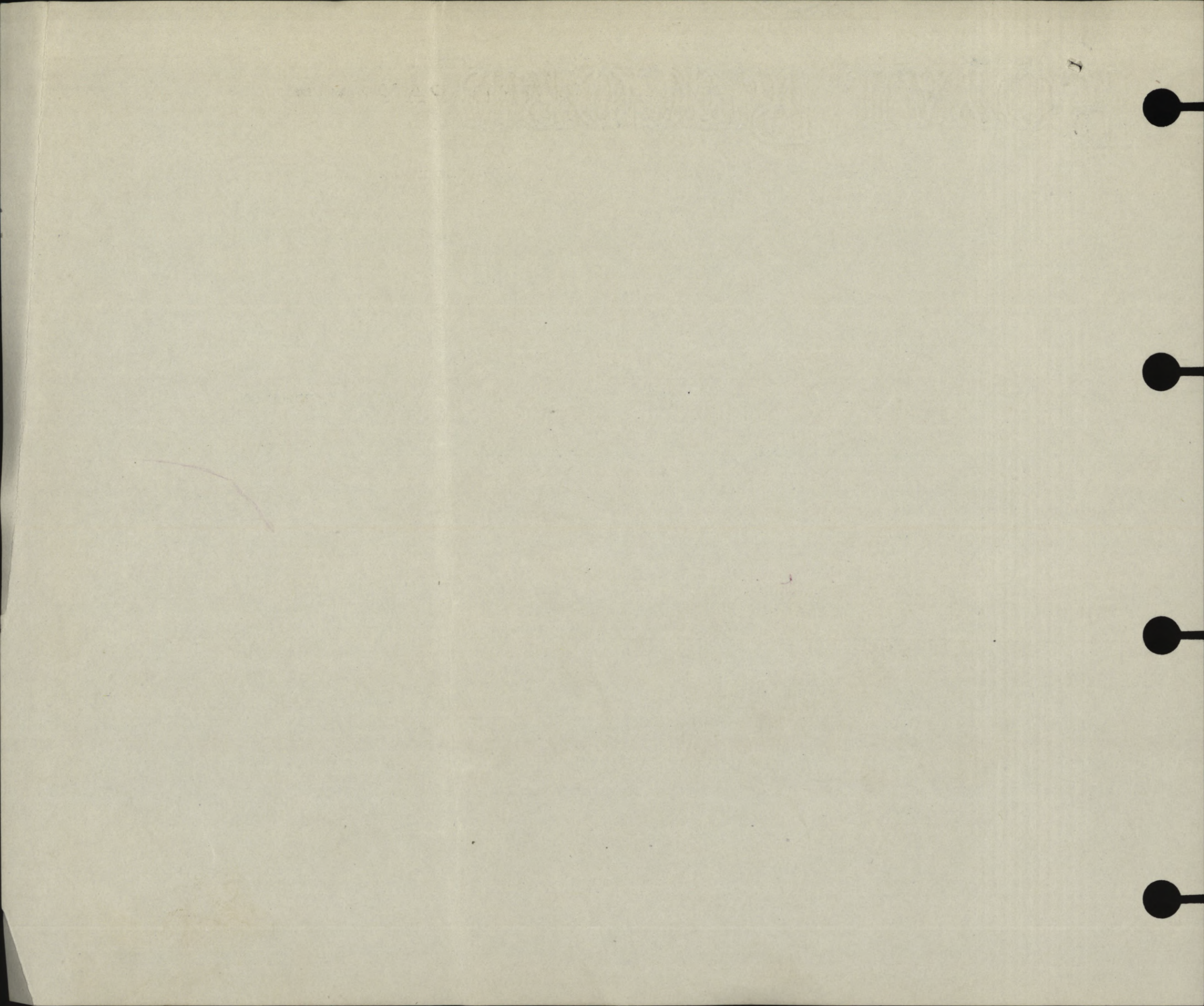
MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

To Whom *Mrs Bessie Davidson* By Whom Assigned *Faltawn. M.*  
 Address *114 Gottingen st* Regtl. No. *931319*  
*Halifax* Rank *ajsgt*  
*ns.* Corps *2 Con Bn.*  
 Rate *\$ 25 00*

SPECIAL REMITTANCE

*Sched 462-20-11-17* PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.		<i>247789</i>	<i>25-</i>	
Jan.	1916			
Feb.				
March				





MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

M. F. W. 12  
50m.—7-16  
H. Q. 1772-39-819

To Whom *Wife*  
*Mrs. Mary C. Jalawon*  
Address *64 Chapel St*  
*Lowell Mass*  
*U. S. A*  
Rate *20<sup>00</sup>*

By Whom Assigned *Jalawon Marlow*  
Regtl. No. *931319*  
Rank *Plt of Sgt*  
Corps *Inf const. Bn.*

*APR 1917*

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>@ asp. P. 2 L. 251017-25/10/17 to 13/11/17</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



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MILITIA AND DEFENCE  
**ASSIGNED PAY**

M. F. W. 12a.  
 50m.—7-16  
 1772—39—819.

Sheet No. 2 *Mrs Mary C. Talawon*  
 (Assignee) *Wife*

Name of Soldier *Talawon Marlow*  
*Platoon 2 const Bn*

PAYMENTS.

*No 931319*

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>20<sup>00</sup></i>	<i>APR 20 of Sgt</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>Z 4806</i>	<i>20</i>	
May		<i>K 7850</i>	<i>20</i>	<i>20 W.</i>
June		<i>J 19573</i>	<i>20</i>	<i>20. Rec.</i>
July	<i>026767</i>	<del><i>Q 21642</i></del>	<del><i>20</i></del>	<i>B. Q 21643 Can Ws</i>
Aug.		<i>B 33429</i>	<i>20</i>	<i>6</i>
Sept.	<i>obs. 8/24</i>	<del><i>A 38616</i></del>	<del><i>20</i></del>	<i>6</i>
Oct.		<i>M 42807</i>	<i>20</i>	<i>6</i>
Nov.		<i>W 46665</i>	<i>20</i>	
Dec.		<i>R 56781</i>	<i>20</i>	<i>180</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE  
**ASSIGNED PAY**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier \_\_\_\_\_

**PAYMENTS.**

Month.	Year.	Cheque No.	Amt.	Remarks
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

## SEPARATION ALLOWANCE

Name

*Mary C. Falawn*

Name of Soldier

*Falawn Marlow*

Address

*64 Chapel St  
Lowell, Mass*

Regtl. No.

*931319*

Rank

Corps

*Sgt 1/3/17  
Prom to 1st Lt 16/5/17  
Prom to 2nd Lt (Pay) 24/7/17  
To what Corps belonging }  
Construction Bn  
5-707-m-21  
w.f. 23-17*

Relation to Soldier

wife, child or mother

*wife*

when called out

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.	1915			
Dec.				
Jan.				
Feb.	1916			
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.				
Feb.				
March				



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2011 . 1  
2011 . 1

133  
35  
120 8  
33

## SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2

*Mary C. Falawn*

PAYMENTS.

Name of Soldier

*Falawn Marlow*

L. L. Job 4503.-Req. 6332.

Month.	Year.	Cheque No.	Amt.	<i>Sgt</i>	Remarks.
April	1916				
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.		<i>F 24306</i>	<i>33</i>	<i>33</i>	
Dec.		<i>Y 28050</i>	<i>20</i>	<i>20</i>	
Jan.	1917	<i>H 27954</i>	<i>20</i>	<i>20</i>	
Feb.		<i>K 30204</i>	<i>20</i>	<i>20</i>	
<i>5</i> March		<i>K 34425</i>	<i>20</i>	<i>20</i>	<i>-5</i>
<i>5</i> April		<i>h. 850</i>	<i>20</i>	<i>20</i>	<i>RETE rante</i>
<i>-3</i> May		<i>L 3950</i>	<i>35</i>	<i>35</i>	<i>J. T.</i>
<i>-5</i> June		<i>P 7646</i>	<i>25</i>	<i>25</i>	
<i>-5</i> July		<i>Q 10246</i>	<i>25</i>	<i>25</i>	
Aug.		<i>J 13731</i>	<i>25</i>	<i>25</i>	
Sept.		<i>S 17134</i>	<i>25</i>	<i>25</i>	
Oct.		<i>y 19870</i>	<i>25</i>	<i>25</i>	
Nov.		<i>A 13345</i>	<i>25</i>	<i>25</i>	
Dec.		<i>126050</i>	<i>25</i>	<i>20</i>	<i>PRE-PAID No Canceled</i>
Jan.	1918				<i>20 adv Rev &amp; Pwm</i>
Feb.					<i>22</i>
March					<i>25</i>
April					<i>22860</i>
May					
June					
July					

*ap 13**A19981**Rev**20**20*

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*20*

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*20*

*20*

*20*

*20*

MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**  
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

**PAYMENTS.**

Name of Soldier.....

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				



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REGT'L. No. 931319  
H. Q. FILE No. 649

NAME *Halawn. Marlow.*

RANK AND CORPS *A/Sgt. 2nd. Construction Bn.*

FOLLOWS  
No. \_\_\_\_\_  
FOLLOWS

CABLE

NO. DATE

*U.S.A.* NATURE OF CASUALTY

*5-1*  
*Q29* *18-1-18.*

*Adm. to Jura Hospital Champagne  
Jan. 2nd. 1918. infected wound  
forehead. ✓*

LIST NO.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

a 115.	Jura, Champagnole, Jura	2-1-18.	Inj. Hd. L <sup>1</sup> Head, (Nova Scotia Rest)
--------	-------------------------	---------	--

a 120	" " " " " "	Dise 15-1-18	" " " " " "
-------	-------------	--------------	-------------

a 312 <sup>2</sup>	Can. For. Corps La Joux Jura	30-8-18	Diarrhea
--------------------	------------------------------	---------	----------

a 321 <sup>2</sup>	Dise. " " " " " "	" 12-9-18	" " " " " "
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SURNAME

*Falawn*

6 · CARD NO. 1

CHRISTIAN NAMES

*Marlow*

FOLL.

*S.O.S. Demob 7.3.19*

REGL. No.

*931319*

RANK

*Pte. Sgt.**DO. 65-6-319 #60N.*

UNIT

*No. 2. Construction**Bn.*

FORMER CORPS

*nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Falawn, Mrs. Mary K.*

RELATIONSHIP TO SOLDIER

*Wife*

ADDRESS

*64 Chapel St., Lowell, Mass.,  
U.S.A.*

COUNTRY OF BIRTH

*Canada Liverpool, N.S.*

DATE

*Mar. 17<sup>th</sup> 1882.*

PLACE OF ATTESTATION

*Liverpool, N.S.*

DATE

*Oct. 11<sup>th</sup> 1916**R/c 25-1-19  $\frac{256}{66}$  Sgt*

*From Halifax per S.S. "Southland" 28/3/17.*

MARRIED *Yes.*

SINGLE

WIDOWER

TRADE OR CALLING *Chauffeur & Cook.*

RELIGION *Methodist.*

DESCRIPTION.

APPARENT AGE *34* YEARS MONTHS

HEIGHT *6* FEET *2.* INCHES

CHEST MEASUREMENT *42* INCHES EXPANSION *4.* INCHES

COMPLEXION *Swarthy* EYES *Brown* HAIR *Dark.*

DISTINGUISHING MARKS *nil.*

MEDICAL EXAMINATION. PLACE *Liverpool, N.S.* DATE *Oct. 11<sup>th</sup> 1916.*

*Present address. Liverpool, Queens Co., N.S.*

Marlow

920

Name *FALAWN.* Rank *1st Sgt.* Reg. No. *931319.*  
 Unit *2nd Const. Co.*  
 Next of Kin *U.S.A.*

Date	Movement	Place	Casualty	List No.	Notified N/K O	W.O. List
2-1-18	<i>Jura N. Champagne Jura</i>	<i>Jura</i>	<i>Inf w/7' head</i>	<i>A115</i>	<i>29</i>	<i>9</i>
15-1-18	<i>Discharged:-</i>		<i>do</i>	<i>A120</i>		<i>9</i>
30-8	<i>C. J. N. La Jout</i>	<i>Manitoba</i>		<i>A312</i>		<i>3746-16</i>
12-9	<i>Dischgd</i>			<i>A321</i>		<i>4090-16</i>



com

Number 931319

Rank

Sgt

Surname FALAWN

Christian Name Marlow

Units

~~CC~~ CORP.C.

Theatre of War

France

Date of Service

14. 5. 17

Remarks

Latest Address

114. Gottingen St

Halifax

Roll No.

2 Page 16641

MS

200m. 2-21.M.

DATE

HISTORY

Handwritten blue and red markings, possibly initials or a signature.

(FILES)

CASUALTY BRANCH

NAME \_\_\_\_\_ H. Q. \_\_\_\_\_

NO. \_\_\_\_\_ RANK \_\_\_\_\_ M. D. \_\_\_\_\_

UNIT (C.E.F.) \_\_\_\_\_ UNIT \_\_\_\_\_

ADDRESS \_\_\_\_\_

NEXT OF KIN \_\_\_\_\_

ADDRESS (KIN) \_\_\_\_\_

10601  
 10701  
 SEP 29 1922  
 DEF  
 REG

HISTORY

DATE



No. 931319. RANK Pte.

NAME Falawn. Marlow.

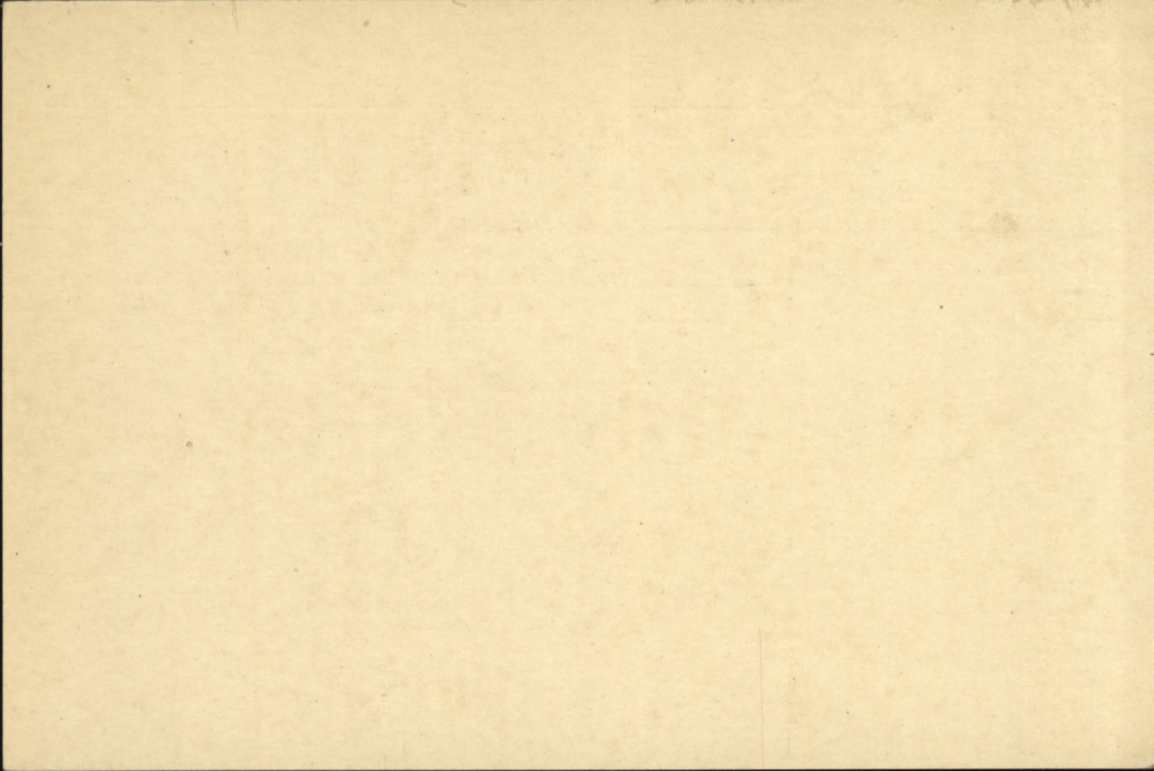
T. O. S. 11-10-16 UNIT

D. O. 50 13-10-16

No 2. Construction Battalion.

M. D. 6

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1916 Oct. 11.	1916 Oct. 31.	m.		
	Nov.	✓		
	Dec.	✓		
1917 Jan	1917 Feb.	✓		
	Mar	✓		
		sw	Prom. Priv. Sgt. 1-3-17	D. O. 58. 8-3-17



LEDGER No.

682

SERIAL No.

77.56

920

REG. No.

931319

NAME

Falawn M.

RANK

Sgt.

CORPS

6th Bn.

AGE

35

SERVICE

$\frac{36}{12}$

HOSPITALS

DATE OF ADMISSION

1

Cogswell Mil Halifax

11.2.19

2

3

DIAGNOSIS

Scabies

TRANSFERRED TO

DISPOSITION

21.2.19

CATEGORY

M.F.W. 2553.

1126-D.P.-50M-12-18.

1772-39-1332.

P.T.O.



SURNAME

CHRISTIAN NAME OR NAMES

FORM D.M.S. 1300

REG. NO.

*M*  
*Jalawon*  
RANK UNIT

*M.*

CO. TROOP BATTY.

*920*  
*931319.*

*a/Sgt.*  
HOSPITAL

*N.S. 2. Co.*

DATE OF ADMISSION

*Jura. St. Lechampaquole jura. 2-1-18*  
*S.C.F.C. La Jura jura HOSP. 30.8.18*

2.

HOSP

3.

HOSP.

4.

HOSP.

DIAGNOSIS

1

*Inf. wd. of head*  
*Diarrhoea.*

2.

3

DISPOSITION

*Ch. 18.1-18 a/15(2)*  
*" 24-1-18 a/20*  
*7.9.18 a. 3/2.2*  
*18.9-18 a 321-2*

*Dis. 15-1-18*  
*Dis. 13-9-18*  
REMARKS

DATE

A.M.D. 2 DEPT.  
A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

Name FALAWN, Marlow Rank Sgt. Regtl. No. 931219

Fyle Depot 74-F-371

Original unit N.S.R.D. Present unit #6 D.D. M. or S. M. Age 36 Religion Meth Ref. H.Q.

Port, ship and date of arrival Halifax, N.S. 22-1-19 Emp. of Britain.

Next of kin Wife

Address on leave 114 Gottingen, St., Halifax, N.S.

Address on discharge

Transportation issued  Yes  No Date  Character on discharge

Previous occupation Chauffeur or cook Date and place of enlistment 11 Oct. 1916 Liverpool

Diagnosis  Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
12-1-19	T.O.S. #6 District Depot	29
22-1-19	Posted to Casualty Company	29
12-2-19	Trans. to Hosp. Section <i>(Cogn 14)</i>	45
22-2-19	Transferred to Casualty Company, 21-2-19. HS:DO.	53
7-3-19	DISCHARGED at Halifax, N. S.	65

Name will be given in full; surname first.

(over)

Date.

Remarks

Pt. 2 Order No.



ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.  
EFFECTIVE DATE: 1<sup>st</sup> April 1917  
AMOUNT: ~~20<sup>00</sup>~~ 20<sup>00</sup>

**FALAWN**  
NAME: ~~FALAWN~~ Marlow  
NUMBER: 931319

NAME, ADDRESS, RELATIONSHIP & AUTHORITY

Mr. Mary C. Falawn, wife  
64 Chapel St. Lowell, Mass. U.S.A.

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
Do. 135	20 <sup>10</sup> /17	As Sgt with pay
Do 52	2 Cons 2/9/18	Confirmed Rank of Sgt

*Stopped off 1-1-19*

UNIT AND TRANSFERS  
ORIGINAL UNIT: - 2 Construction Bn  
DATE ACCOUNT FIRST OPENED: - 1<sup>st</sup> April 1917

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'S'D	UNIT TRANSFERRED TO
<i>Canada Section</i>			

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
1/15	2093	Cye	5.60				
1/15	3332		18.66				
2/15	44515		94.33				
1/15	3545	B.R.S.	119.94				
			131.32				

DAILY RATES OF PAY AND ALLOWANCES				
AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1.35	15		

PARTICULARS OF RENDERING NON-EFFECTIVE *Desc Canada 3/2/18. Auth. 26/164 2522 Ledger B-249 99 208 118-65*

1918 MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
MAR	Bal. Ford								64.25		
apl	As Sgt Pay	45		Asst Pay				25			
				AR 4. 8/4. CFC Juna	446						
				AR 266. 22/4 - " -	446				75.33		
May		45		Asst Pay	892			25			
	As Sgt Pay	46.50		AR 4. 6/7 9/5. CFC Juna	446			25			
		46.50		AR 4. 21. 23/5 - " -	446			25	87.91		
June	As Sgt Pay	45		Asst Pay				25			
		45		AR 708 7/6 CFC 5	446						
				✓ 870 27/6	446			25	98.99		
July	Sgt Pay	46.50		Canal P.				25			
		46.50		AR 948 10/7 CFC 5	535						
				AR 1092. 25/7	535			25	109.79		
Aug	Sgt Pay	46.50		Canal P.				25			
		46.50		AR 1255 10/8 CFC 5	535						
				AR 1481 25/8	446			25	121.48		
Sep	Sgt Pay	45.00		Canal P.				25			
	and/or credit. (May 1917 15 days C 35	5.25		AR 1672. 5/9 CFC 5	535			20			
	Do 52 2 Cons June 29	10.15		AR 1875 24/9	535						
	21/9/18 July 23	6.30									
	Aug 31	1.40									
	Sep 30	1.50									
	AR note 10795. Canal P. 1/1/18 31 8.18	46.00									
	8/10/18. chg 25. paid 20 pm 1/1/18										
Oct	Sgt Pay	71.05	46.00	Canal P.		10.70		20	201.83		
		46.50						20			

CANADIAN  
ASSIGNED PAY AUDITED  
DATE 10/3/19  
AUDIT CLERK: [Signature]

NUMBER 931319

RANK Sgt

NAME FALAWN

M

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION		
Oct		46	50	Bretford.				20	201.83				
				AR 2249 17/10. C.F.C.S.	5.60								
				AR 2319 26/10 ✓	5.60				217.13				
		46	50		11.20			20					
Nov	Seep Pay	45		AR 2902 - C.F.C.S. - 26/10/18	18.66								
Dec	"	46	50	Cap. Per				20					
				Cap Dec				20	249.94				
				ARC 26 - C.F.C.S. 2/12/18	9.73								
				AR 3332 - CAP - 10/11/18	18.66								
				" 3575 " 18/12/18	9.73				124.25				
		41	50		144.38			40					
				AR 2004 Kim. Pk 10/11/19 (L.P.C.E)	9.73				114.52				
March 19				AR. 2093 8.10.18	5.60				109.92				
					5.60								
				S.O.S. Canada Bo 18 25/1/19 Eff 12/1/19									

P. 559  
MARRIED OR SINGLE *M*

PLACE OF BIRTH *Liverpool W. S.*  
 NAME AND ADDRESS OF NEXT OF KIN *Mary C. Falawon  
 64 Chapel St Lowell Mass*  
 RELATIONSHIP OF NEXT OF KIN *wife*

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY \$ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
<i>Pro Serv. in Canada</i>		
<i>applic. to 16.5.17 with pay</i>	<i>16.5.17</i>	<i>Do. 135. 20.10.17</i>
<i>" of Serv. with pay</i>	<i>24.7.17</i>	<i>Do. 135. 20.10.17</i>
<i>applic. to 30.6.17. with pay.</i>	<i>30.6.17.</i>	<i>" " " "</i>
<i>Do. 135. Suborden. 1. Comm. 1.17.</i>		<i>Do. 135. 7.1.17.</i>

REG'L No. *931319* RANK *Sgt. 4cp* NAME *Falawon Marlow*

IF IN PERM. CORPS) UNIT *3 low Bn* TRANSFERRED TO DATE AUTHORITY  
 PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY  
 PLACE OF ATTESTATION *Liverpool W.S.* TRANSFERRED TO DATE AUTHORITY  
 DATE OF ATTESTATION *11 Oct 16* TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *25.00* DATE EFFECTIVE *1-4-17*

PAYABLE TO *Mrs. Mary C Falawon, 64 Chapel St. Lowell, Mass U.S.A.* RELATIONSHIP *Wife*

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE

PAYABLE TO

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE)

DISCHARGE DATE AND PLACE

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS				
	No. OF DAYS	RATE	AMOUNT	No. OF DAYS	RATE	AMOUNT				No. OF DAYS	RATE	AMOUNT	1	2	3	4	1				2	3				4	CREDIT	DEBIT	
									17 20	17 20																			
<i>Apr/30</i>	<i>30</i>	<i>1 50</i>	<i>46 00</i>							<i>45 00</i>												<i>25</i>			<i>25 -</i>	<i>37 20</i>		<i>37 20</i>	<i>Bal from Canada.</i>
<i>MAY 1.31</i>	<i>31</i>	<i>1 50</i>	<i>46 50</i>							<i>46 50</i>	<i>57 1/5</i>			<i>9 73</i>								<i>25</i>		<i>44 46</i>	<i>39 24</i>		<i>39 24</i>		
<i>June 1.30</i>	<i>30</i>	<i>1 15</i>	<i>34 50</i>							<i>34 50</i>	<i>19 14/5</i>			<i>4 87</i>								<i>25</i>	<i>5 25</i>	<i>35 12</i>	<i>38 62</i>		<i>38 62</i>	<i>Other charges 5.25; 10 Aug @ 35 may</i>	
<i>July 1.31</i>	<i>31</i>	<i>1 15</i>	<i>35 65</i>							<i>35 65</i>												<i>20</i>		<i>20 -</i>	<i>54 27</i>		<i>54 27</i>		
<i>Aug</i>	<i>-</i>	<i>-</i>	<i>35 65</i>							<i>35 65</i>												<i>20</i>		<i>20 -</i>	<i>69 92</i>		<i>69 92</i>		
<i>Sep 1.20</i>	<i>20</i>	<i>-</i>	<i>34 50</i>							<i>34 50</i>												<i>20</i>		<i>31 60</i>	<i>72 82</i>		<i>72 82</i>		
			<i>731 80</i>						<i>17 20</i>	<i>249 00</i>				<i>194 269 292</i>								<i>20</i>		<i>176 18</i>	<i>72 82</i>				
MONTH	PARTICULARS		CR.1	CR.2	PARTICULARS		DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. SER. PAY	SER. ALLG. ENG.																
<i>Sep</i>	<i>Bal</i>										<i>72 82</i>																		
<i>Oct</i>	<i>SP.</i>		<i>46 50</i>		<i>AR 571 27 1/2 bank 12m att. C.F.C</i>		<i>4 46</i>				<i>- 20</i>																		
	<i>30 7/16 23 7/16 24 7/16 25 7/16 26 7/16 27 7/16 28 7/16 29 7/16 30 7/16</i>		<i>1 20</i>		<i>- 460 13 7/16</i>		<i>4 46</i>																						
	<i>20 7/16 21 7/16 22 7/16 23 7/16 24 7/16 25 7/16 26 7/16 27 7/16 28 7/16 29 7/16 30 7/16</i>		<i>20 70</i>																										
			<i>63 40</i>				<i>8 92</i>				<i>112 30</i>																		
											<i>90 40</i>																		



2000. 12-1-19 100.129

AUDITOR PAYMASTER

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S. \_\_\_\_\_ REGT. No. **931319** RANK **Serjt** NAME (IN FULL) **Foster Falawn M.**

ORIGINAL UNIT C.E.F. **N.P.R.D.** IF IN P.F. WHAT UNIT? \_\_\_\_\_ (BLOCK LETTERS SURNAME FIRST)

ADDRESS **ASSIGNED PAY & SEPARATION ALLOWANCE** PLACE OF ATTESTATION \_\_\_\_\_ TRANSFERRED TO \_\_\_\_\_ DATE \_\_\_\_\_ AUTHORITY \_\_\_\_\_

DATE OF ATTESTATION \_\_\_\_\_ TRANSFERRED TO \_\_\_\_\_ DATE \_\_\_\_\_ AUTHORITY \_\_\_\_\_

IS SEPARATION ALLOWANCE PAID? \_\_\_\_\_ DATE EFFECTIVE **AP. 20<sup>00</sup> to 31-1-19** ASSIGNED PAY \$ \_\_\_\_\_ DATE EFFECTIVE \_\_\_\_\_

TO WHOM PAID **Mrs Mary Falawn** RELATIONSHIP \_\_\_\_\_ PAYABLE TO \_\_\_\_\_ RELATIONSHIP / ANY CHANGE IN ASSIGNEE OR ADDRESS \_\_\_\_\_

ADDRESS **64 Chapel St. Lowell Mass U.S.A.** ADDRESS **114 Cottage St. City**

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE \_\_\_\_\_ EFFECTIVE \_\_\_\_\_

DISCHARGED \_\_\_\_\_ PLACE \_\_\_\_\_ DATE **7/3/19** REASON **Demob** AUTHORITY **5065** IF ENTITLED TO POST DISCHARGE PAY \_\_\_\_\_

BALANCE FROM PREVIOUS ACCOUNT

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGI-MENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT		CREDITS		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	S	C.	S	C.	S	C.	S	C.	S	C.	
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.											
Jan					11 20															11 15			Subs 29
1-1-19					11 15																		C. Jan
28/2/19	59	150	88 50		49 05				100 00			164 21	50 00			11 -				148 74			G. 4 PC. overpaid on TRs
3/3/19	7	150	10 50		30							18 44	30							75 50			
					35							18 43	70							70			
					153																		
					350	150	500 00																War Service Gratitude S.P.O. 70 00 73 00
																							delin. Expenses 780 00 127 00
																							20 00 37 00
																							69 96 30
																							70 30
																							70 30
																							279 96 127
																							70 04 vs. 500
																							all payments made



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

11-10-16

Separation and Assigned Pay Branch

F

208 April 1<sup>st</sup> 17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

25.	30.		
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RATE OF ASSIGNMENT

25-	20		
-----	----	--	--

1-9-18  
fl. 2753  
no 37249

PARTICULARS OF SEPARATION ALLOWANCE

No. 931319  
 Rank *Sgt.* Promoted Reverted Discharge  
 Soldier's Name Marlow Fabawn  
 Battalion # 2. Const. Battr  
 Beneficiary Mary. C. Falawn  
 Relationship wife  
 Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Mary. C. Falawn *wife*  
 Address 64 Chapel St.  
 Change of Address Lowell.  
 1 Mass. U.S.A.  
 2  
 3  
 4

MFW 2554-13-8-18 rec'd 23-11-18

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
Dec 1917		338	180	518	
Jan	F 6313 8	25	20	45	L.
Feb.	U 72108	30	20	50	
March	A. 131965	25	20	45	0.1.1918 cancelled and should pay SA at Sgt's rate from Mar/1917 per file 5707-M-2
March	Y 943891	25	20	45	
Apr	Q. 9340	25	20	45	PM
May	Q 15758	25	20	45	PM
Apr	H 215		15	15	PM
June	Z 9836	25	20	45	P
July	Z 20943	25	20	45	P
Aug.	Z 33117	25	20	45	P
Sept.	Z 46480	25	20	45	P
Oct	Z 61097	25	20	45	P
Nov	Z 75641	25	20	45	P
Dec	Z 88756	45	20	65	L
Jan	Z 106456	30	20	50	L
		693	455		

5707-M-2

La Sgt. 1<sup>st</sup> (Rev to Sept. 16<sup>th</sup> 17. Prom to Sgt. 24<sup>th</sup> 17.)  
 U 72108 mailed 6-2-18 adj. Rev & Prom, 10  
 0 PM 25 17  
 H 215 Mailed 27-4-18 today. AP see file.  
 M.R.O. 61291 rec'd 28. 1. 19  
 61281

ASSIGNED PAY AUDITED  
 To 30/1/18  
 W. A. Moreland  
 AUDIT CLERK  
 DATE 26/5/19

A/c Closed 31. 1. 19  
 Ret'd per *Empress of Britain*  
 Date 25/1/19 M.F.W. 187  
 Closed *M. J. Gault*



M. F. W. 128  
 400M. - 6-17-1772-89-141  
 L. L. 22320 - M. & D. 7583.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

# Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

*[Signature]*

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Rank

Promoted

Reverted

Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

Name

Address

Change of Address

1

2

3

4

*DISCH*

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
	8 001				
	4 18081				

M. F. W. 128.  
400 M. C. 17-1772 30-1141  
L. L. 22520-M. & D. 7663.