

Search
No. 16.
30/8/16

Duplicate

931096

ATTESTATION PAPER.

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... *Franklin*
- 1a. What are your Christian names?..... *Peter*
- 1b. What is your present address?..... *No 6 Falkland St Halifax N.S.*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Lequill Annapolis Co. N.S.*
- 3. What is the name of your next-of kin?..... *Elisabeth Jane Franklin*
- 4. What is the address of your next-of-kin?..... *No 6 Falkland St Halifax N.S.*
- 4a. What is the relationship of your next-of-kin?..... *Mother*
- 5. What is the date of your birth?..... *November - 15 - 1885*
- 6. What is your Trade or Calling?..... *Labourer*
- 7. Are you married?..... *Single*
- 8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... *yes*
- 9. Do you now belong to the Active Militia?..... *no*
- 10. Have you ever served in any Military Force?..... *no*
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *yes*
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Peter Franklin*, 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.

Peter Franklin (Signature of Recruit)

Date *July 31st* 1916. *Robert B. Bueck Sergt* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, 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.

Peter Franklin (Signature of Recruit)

Date *July 31st* 1916. *Robert B. Bueck Sergt* (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 *Halifax* this *31* day of *July* 1916.

W. H. [Signature] (Signature of Justice)

Description of Peter Franklin on Enlistment.

Apparent Age 31 years 8 months.

(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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

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

Height 5 ft. 7 1/4 ins.

Chest measurement. { Girth when fully expanded..... 34 ins.
Range of expansion..... 38 ins.

Complexion Dark

Eyes Brown

Hair Black

Religious denominations. { Church of England.....

Presbyterian.....

Methodist.....

Baptist or Congregationalist..... yes

Roman Catholic.....

Jewish.....

Other denominations.....
(Denomination to be stated.)

Weight 165 lbs

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..... July - 31st 1916..... B. Johnson

Place..... Halifax, N.S...... Capt. A.M. Co.
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.

Peter Franklin.....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.

B. Johnson..... (Signature of Officer)
..... L.T. COL.

O. Comd'g No. 2 Construction Battalion, C. E. F.

AUG 9 1916

Date..... 1916

REGIMENTAL DOCUMENTS

NAME **FRANKLIN PETER.**

(PT)

REGT. NO. **931096**

UNIT **2 Const Co ps**

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)		M			DEATH
✓ CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
TRAINING HISTORY SHEET (M.F.W. 113)					
✓ FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)				17745	
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 129)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
✓ MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					Category
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Demob</i>
✓ 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)					DESERTION
✓ PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)		H			
PARTICULARS OF CHARACTER (A.F.W. 3225)					
✓ COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>sent Cert for demob</i>					
<i>dispersal Cert</i>					
<i>MFW 67.</i>					
<i>PT</i>					



* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME:
EFFECTIVE DATE:- 1-4-17		EFFECTIVE DATE:-		NUMBER:
AMOUNT:- \$15 ⁰⁰		AMOUNT:-		
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.		
<i>M^{rs} Jennie Bell Franklin, Wife PO Limerburg, N.S.</i>				
<i>Dis 1/3/19</i>				
		<i>\$850 Bal apud at 30-9-18</i>		

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
27 ¹ / ₉	3090	10 Dis	8 73				
5 ² / ₉	3630+	18 ⁶ CRB	£7.00				
10 ² / ₉		Ldn	£2.00				
13 ² / ₉		"	£1.00				
17 ² / ₉	3774	18 ⁶ Res	£2.00				

PARTICULARS OF RENDERING NON-EFFECTIVE: *Dis to Canada 28⁷/₉ Author W/R 3252³*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS
Mar	Balance Forward			
April	P. Pay	33		Can A Pay 49R43 12-4-18 10 Dist CFC.
May	P. Pay	33 34 10		Can A Pay 49R329 13-5-18 10 Dis CFC. " 544 28-5-18 "
June	P. Pay	34 10 33		Can A Pay 49R650 14-6-18 10 Dis CFC " 766 21-6-18 "
July	P. Pay	33 34 10		Can A Pay 49R1835 16-7-18 3 Echr " 307 6-7-18 Details 766 " 2094 2-7-18 3 Echr " 1242 24-6-18 2.9 BA " 1087 29-7-18 10 Dis CFC. " 702 13-7-18 766 CFC
Aug	P. Pay	34 10 34 10		Can A Pay 49R1134 20-7-18 766 CFC " 1305 15-8-18 10 Dis CFC. " 1456 30-8-18 "
Sept	" "	34 10 33		Can A Pay 49R1611 16-9-18 Dis 10 " 1955 26-9-18 "
Oct	"	33 34 10		Can A P. A.R. 1938 15-10-18 10 Dist

NUMBER 931096

RANK Plé

NAME FRANKLIN

Peter

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE
1918									
Oct.				a.R. 2176 30-10-18 31 Coy	373				19344
		3410						15	
Nov	Plés Pay	33		a.R. 2840 6-11-18	4664				
				2223 3-11-18 10 Dist	933				
				3844 13-11-18 Can Det Paris	1866				
				3479 11-11-18 "	3731				
				C.A.P.				15	
Dec	" "	3410		C.A.P.				15	
				a.R. 2542 28-11-18 10 Dist	1306				
				3033 8-11-18 Paris	1866				
				2518 4-11-18 "	4664				
				2799 14-12-18 10 Dist	746				
Jan	" "	3410		C.A.P.				15	5188
		10120						45	
Feb	" "	3080		C.A.P.				15	6768
				aR 3090 24-1-19 10 Dist	373				
				aR 3634 6-2-19 18 Res Bn	3407				
				CP 30468 10-2-19 London	973				
				32960 13-2-19 "	489				
				aR 3774 17-2-19 18 Res	973				
				aR 3247 10-3-19 Rhyl	973				
				Q 4005 # B828 19-2-19 55 Co.	370				
								15	788
									788

A.S.M. FORM REVISED
 DISCHARGED TO EFFECT
 PAY BOOK VERIFIED
 AUTHORITY N.R. 3202
 1/3/19
 28/2/19
 Canada
 Disposal
 20.2.19
 556
 20.2.19
 1/2 departure MD 6.

COMPILED BY [Signature]
 CHECKED BY [Signature]

Corrected Bal. toward H. 1782
 { P. 868 read 4/4/19 }
 { Dr a/c. with 3.70 }
 Correct Bal. Dr 782

S.O.S. to Can. 28.3.19. MR. 6
 S.L. 35

Ple

NAME FRANKLIN

Peter

CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
		a.R. 2176 30-10-18 31 Coy	373				19344		
3410			746			15			
33		a.R. 2840 6-11-18 Case Details Paris	4664			15			
		2223 3-11-18 10 Dist	933						
		3844 13-11-18 Case Det Paris	1866						
		3479 11-11-18 "	3731						
		C.A.P.				15			
3410		C.A.P.				15			
		a.R. 2542 28-11-18 10 Dist	1306						
		3033 8-11-18 Paris	1866						
		2518 4-11-18 "	4664						
		2799 14-12-18 10 Dist	746						
3410		C.A.P.				15	5188		
10120			19776			45			
3080		C.A.P.				15	6768		
		AR 3090 24-1-19 10 Dist	373						
		AR 3634 6-2-19 18 Res Bn	3407						
		CP 30468 10-2-19 London	973						
		✓ 32960 13-2-19 "	487						
		AR 3774 17-2-19 18 Res	973						
		AR 3247 10-3-19 Rhyt	973						
		Q 4005 # B828 19-2-19 55 Co.	370						
3080			7183 7556			15	788		

5-56

S.O.S. to Can. 28-3-19. MR. 6
S.L. 35

DUPLICATE

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.

(1) Name of Overseas Unit which Soldier joins *No. 2 CONSTRUCTION BATTAL C.E.F.*

(2) Regimental Number *931096*

(3) Full Name of Soldier *Peter Franklin*

(4) Place of Birth *Annapolis Sequeira Nova Scotia*

(5) Are you married, or not? *Single*

(6) If married, state, (a) Full name of your wife *X*

(b) Present Postal Address *X*

(7) Are you a widower? *No*

(8) Have you any children? *X*

If so, give number of boys and girls *1*

Also their names and ages *7*

(9) Is your Father alive?

Yes: Henry Thomas Franklin
Annapolis, Sequeira, D.S.

If so, state name and address

(10) Is your Mother alive?

Yes
Mrs Elizabeth Jane Franklin
Annapolis, Sequeira, N.S.

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.

(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.

(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.

(15) Are you insured?

Yes
Metropolitan Life

If so, in what Company?

Have you made arrangements for payment of your Insurance premium?

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

D. J. Lawrence
Capt
Lient-Col.
No. 2 Construction Batt'n, C. E. F.

Officer Commanding.

Date MAR 6 - 1917

DUPLICATE 9310.46

MEDICAL HISTORY SHEET

Surname *Franklin* Christian Name *Peter*

Examined { on *31st* day of *July* 1916
at *Halifax N.S.*
Birthplace { City or Town *Lequell.*
County *Annapolis Co. Md.*

Approved by *B. Johnson*
Rank *Capt. U.S.A.* M.O.

Apparent age *31 ⁸/₁₂*
Trade or occupation *Laborer*
Height *5'* feet *7 1/2* Inches
Weight *165* lbs.
Chest measurement { Minimum *34* inches
Maximum expansion *38* inches
Physical development *good*
Small-pox Marks *nil*

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT

Vaccination Marks { Arm ~~Right~~ Left
Number *—*

Date	Result	VACCINATIONS
<i>5/3/16</i>	<i>R.P.R.</i>	<i>Smallpox</i>

When Vaccinated last
(a) Marks indicating congenital peculiarities or previous disease

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<i>2/10/16</i>	<i>L.P.R.</i>	<i>W. Vent. Magnum</i>
<i>4/11/16</i>	<i>R.P.R.</i>	<i>W. Vent. Magnum</i>
<i>11/11/16</i>	<i>L.P.R.</i>	<i>W. Vent. Magnum</i>

(b) Slight defects but not sufficient to cause rejection

Enlisted on *31st* day of *July* 1916 at *Halifax N.S.*

CORPS	REG'TL NUMBER	HABITS	DATE
<i>No. 2 CONSTRUCTION, B.N. C.E.F.</i>	<i>931096</i>		<i>7/31/16</i>

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.

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. 931096 Rank PTE Surname FRANKLIN
(Given name in full)
PETER
 Unit or Corps 18th RES. Birthplace LEQUILL

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

I. GENERAL DESCRIPTION:

Physique good Weight 170 lbs. Height 5 ft. 10 in. Colour of Eyes Brown
 Nutrition good
 Pulse normal
 Condition of arteries normal
 Vision Rt. normal Left normal
 Hearing (conversational voice) Rt. 20 ft.
 Left 20 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.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at Seaford.....(Overseas)

Date 18-2-19.....

Signed A. E. Raleigh Capt......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 P. Frankuli.....

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

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)

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 a Medical Board.)

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

War Veterans Allowance

Name: Peter, Franklin

No: 931096

1. THEATRES OF SERVICE

(1) South African War

Date and port of disembarkation:

(2) World War I *Canada, U.K., France.*

IF CANADA) Date(s) disembarked in U.K.
AND)
U.K. ONLY) Date(s) S.O.S. in U.K. for Canada
Period(s) of desertion in U.K.

(3) World War II

Date of embarkation:

(4) Korean War

Date of embarkation:

2. Date and place of all enlistments:

30 July 1916, Halifax, N.S.

3. Date of all discharges and reason:

14 April 1919, Demobilization

4. Date and place of birth as per attestation paper:

*15 November 1885, Lequill
Annapolis Co. N.S.*

5. Marital status: If married, name in full of wife:

married: Mrs Jennie Bell Franklin.

6. Any other military service: *nil*

7. Decorations, if any. *nil*

Halifax
16/7/58
Clerk's Initials: *[Signature]*

1. TREATY PROVISIONS

The following provisions are

relevant to the present discussion:

(a) Article I

(b) Article II

(c) Article III

(d) Article IV

(e) Article V

(f) Article VI

(g) Article VII

(h) Article VIII

(i) Article IX

(j) Article X

(k) Article XI

(l) Article XII

(m) Article XIII

(n) Article XIV

(o) Article XV

(p) Article XVI

Number 931096 Rank Pte.

Surname FRANKLIN

Christian Name Peter.

Units C.F.C. Theatre of War France.

Date of Service 23-6-17

Remarks

Latest Address Annapolis Royal,
U.S.

Roll No. B Page 15689.

200m.-2-21.M.

~~B~~
~~V~~

DESP. AUG 10 1922

REGN. No. *SpV* 49853

SURNAME.

Franklin

CARD NO.

B 6
Soldier 14-4-19
DD. 106. 15-4-19
FOL.
No 6. 10 D

CHRISTIAN NAMES

Peter.

REGL. No. *931096.*

RANK *Pte.*

UNIT ~~*No 2. Construction (coloured.)*~~

No 6 10 D

Bn.

FORMER CORPS *Nil*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Franklin, Mrs Elizabeth Jane

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

No 2. Falkland St, Halifax. N.S.

COUNTRY OF BIRTH

Canada *Leguill Annapolis* *Co. 2 S.*

DATE

Nov 15th 1885.

PLACE OF ATTESTATION

Halifax. N.S.

DATE

July 31st 1916.

R 16 10. 4. 19
300
9. Pte.

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

MARRIED

SINGLE

yes

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Baptist

DESCRIPTION.

APPARENT AGE

31 YEARS

8 MONTHS

HEIGHT

5 FEET

7 1/2 INCHES

CHEST MEASUREMENT

34 INCHES

EXPANSION

4 INCHES

COMPLEXION

Dark

EYES

Brown

HAIR

Black

DISTINGUISHING MARKS

Not Stated

MEDICAL EXAMINATION.

PLACE

Halifax, N.S.

DATE

July 31st 1916

Present Address

No 2 Falkland St. Halifax, N.S.

No. 931096 RANK Pte

NAME Franklin Peter

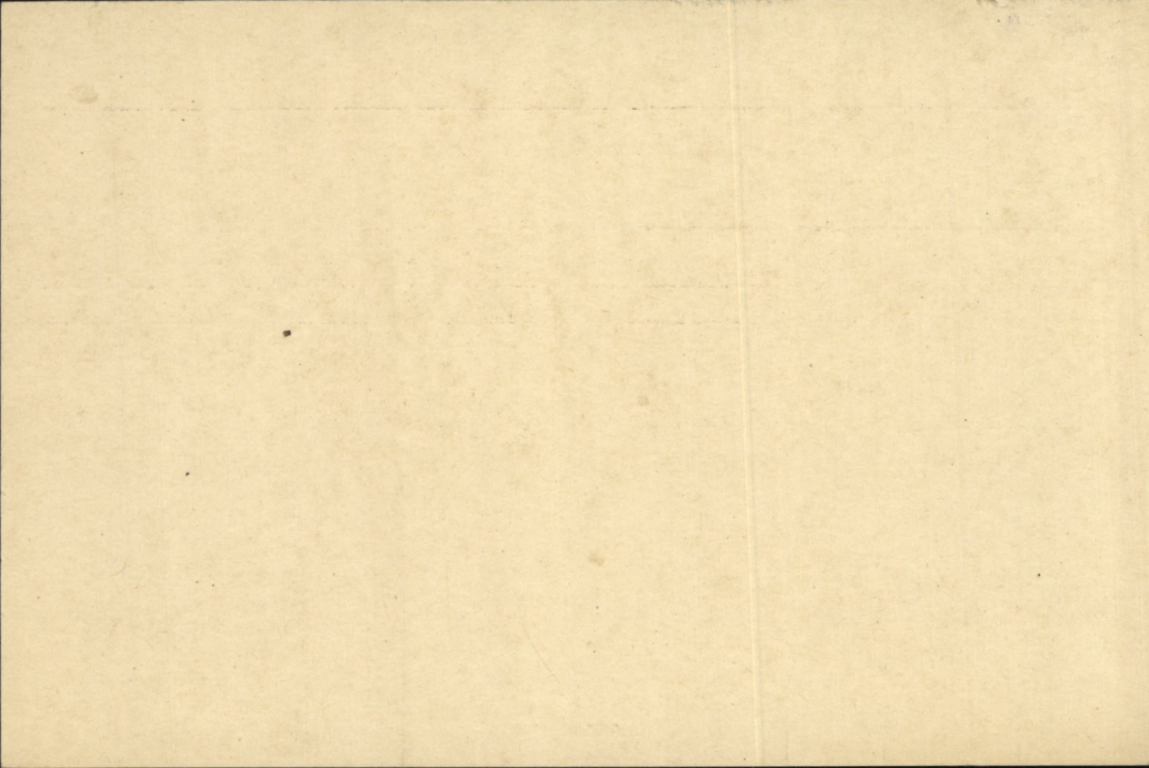
T. O. S. 30-7-16
D. O. B. 7-8-16

UNIT

No 2. Construction Battalion

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 July 30	1916 Aug 31	n.		
	Sept.	n		
	Oct.	n.		
	Nov.	✓		
	Dec.	✓		
1917	Jan 1917	✓		
	Feb.	✓		
	Mar.	n		



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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) FRANKLIN, P.
REGIMENT 18 R^{es} RANK Pte No. 931096

Date of Examination in England 17 FEB 1919 Date of Examination in France



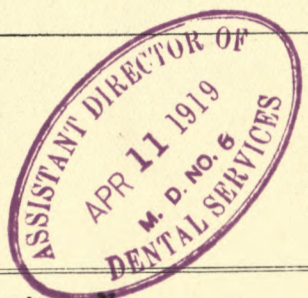
DIRECTIONS TO DENTAL OFFICERS

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



HAS HE EVER REFUSED DENTAL TREATMENT? No

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 Yes

Signature of Dental Officer *[Handwritten Signature]*



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()

Has the
Has the
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WAR SERVICE BADGE.
CLASS "A" No.

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

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

250M.—1-16.

H. Q. 1772-39-920.

Casualty Form Active Service.

Unit, Regiment or Corps *No. 2 Construction Bn. C.E.F.*

Regimental No. *931096*

Rank *pte*

Name

Peter Franklin

Enlisted (a) *31-7-16*

Terms of Service (a) *period of war*

Service reckons from (a) *31-7-16*

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) *Labour*

Report Date	From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 38, 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. 38, or other official documents.
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17/5/17

*J.C. No 2
Constn
Bath*

Embarked, Canada

Halifax 25/3/17

Disembarked, England

Liverpool 7/4/17

Proceeded overseas

Seaford 17/5/17

PT 2 D.O. No

J. Barnhill Lieut.

(Adjutant, No. 2 Construction Batt'n, C.E.F. Captain.

80th RESERVE BATTALION

attached from 2nd cond. Co.

Seaford.

17-5-17 B. O.P. II - 168.

MAY 23 1917

17-8-17 *OC 7th Res. Ceases to be attached*

Seaford

17-5-17 pt 2 D.O. 194.

*from the 26th Reserve Bn
on proceeding to C.F.C. H.Q. London*

Harjack

Lt & Adj

7th Reserve Battalion.

16-8-17

*6th Res. D. L.C. S. & shown as
a patent in
command of H. 2. for Capt.*

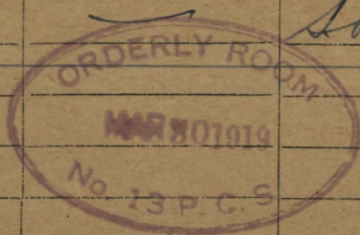
Branch

R 2. D.O. 160

(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., 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				
15@10-17.	N.S.R.D.	Ceases to be shown on command to H.Q. Cam. For. Corps, London & is S.O.S. on proceeding to Cam. For. Corps H.Q., France.	Bramshott.	22-6-17.	Pt.2.D.O.215. <i>G. H. Burgess</i> CAPTAIN & ADJUTANT, FOR O.S. NOVA SCOTIA REGIMENTAL DEPOT.
29-8-17.	2 nd bond. Bn.	S.O.S. to N.S.R.D.	Field	17-5-17.	M-II, D.O. 125.
25-6-17.	b.f.b. B.O.	att. for Hdqrs. France	S. Dale	22-6-17	50.
28-8-17	48 boy. b.f.b.	T.O.S. on arrival from Eng	Field	23-6-17	5
18-9-17	48 boy. "	S.O.S. to 55 th boy. b.f.b.	Field	14-8-17	8
19-9-17	55 boy. "	T.O.S. from 48 th boy. b.f.b.	Field	14-8-17	4
					Tr.
					<i>D. D. Russell</i> LIEUT: FOR LT: COL: I/C RECORDS, C.O.M.F.
10-11-1917	55 th Coy b.f.b.	S.O.S. on transfer to HQ no 10 District b.f.b.	Field	1-11-1917	B213, P/O no 16 of 20-12-1917
10-11-1917	HQ no 10 Dist	Taken on strength HQ no 10 Dist. b.f.b. on transfer from no 55 Coy b.f.b.	Field	2-11-1917	B213 P/O no 2 of 19-12-1917.
29-12-1917	HQ no 10 Dist	on command latest date from 6 am. 19-12-17 to 6 am 21-12-1917	Field	19-12-17	B213
9-2-1918	HQ. no 10 Dist	S.O.S. on transfer to no 31 Company b.f.b.	Field	5-2-1918	B213 P/O no 4 of 22-2-1918
9-2-1918	31 Coy b.f.b.	T.O.S. no 31 Coy b.f.b. on transfer from HQ no 10 Dist b.f.b.	Field	6-2-1918	B213 P/O no 8 of 22-2-1918.
22.6.18.	31 Co b.f.b.	on command to School of Cookery. Rouen.	Field	23/6/18	B213.
3-8-1918	31 Coy	Rejoined unit from School of Cookery Rouen	Field	29.7.18	B213.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36 or other official documents
Date	From whom received				
4.2.19 FEB 25 1919	18 th Res. Bn. do	SOS. C.F.C. SOS to Wing 6 Kinnel Park for P.T.C.	Seaford	2.2.19. 18 th Res. C.F.C. P.T.C. FEB 25 1919	
					4 4 4 4 4 6
					Lieut for s. Adjutant, 18th Res. Bn.
		S. D. O. M. F. B. on trans. 6 E. H. 1. 2. Camp			
		L. D. Rydberg. LIEUT. OFFICER IN CHARGE RECORDS M.D. 6			
		Embarked S.S. Saturday Classy March 30'19			
30/3/19	O/S	Sod. 6 S.O. posted to disp. Stab.	Hq.	11.4.19.	S.O. 105
14.4.19		S.O. on Discharge			S.O. 105
					Bellet No 4 Records



RECORD OF SERVICE

IN THE

CANADIAN ARMED FORCES

THIS REPORT
IS NOT VALID
WITHOUT THE
IMPRINT OF
THE OFFICIAL
STAMP OF THE
DEPARTMENT

Service Rank and/or Number..... 931096 Name..... Peter FRANKLIN

1. Branch of Service: CANADIAN EXPEDITIONARY FORCE.
2. Date and Place of Birth: 15th November, 1885. Lequill, Annapolis, N.S.
3. Date and Place of Appointment, Enlistment or Enrolment: 30th July, 1916. Halifax, N.S.
4. Unit on Appointment, Enlistment, or Enrolment: No. 2. Construction Battalion.
5. Theatres of Service: CANADA ENGLAND & FRANCE.
6. Date and Place of Retirement or Discharge: 14th April, 1919. Halifax, N.S.
7. Reason for Retirement or Discharge: "Demobilization".
8. Rank on Retirement or Discharge: Private.
9. Medals and Decorations: BRITISH WAR & VICTORY MEDALS.
10. Remarks: Nil

DESCRIPTION AT TIME OF RETIREMENT OR DISCHARGE

Sex: Male Age: 33 Years 5 Months Height: 5 Feet 7½ Inches.
Eyes: Brown Hair: Black Complexion: Dark

Marks or Scars: Nil

Ottawa, Ont., Canada
WAR SERVICE RECORDS
9th October, 1951
OTTAWA - CANADA 19 51.

THIS RECORD
IS NOT VALID
WITHOUT THE
APPROPRIATE
OFFICIAL
STAMP OF THE
DEPARTMENT

DEPARTMENT OF VETERANS AFFAIRS
RECORD OF SERVICE
IN THE

CANADIAN ARMED FORCES

Service Rank and Number Name

1. Branch of Service

2. Date and Place of Birth

3. Date and Place of Appointment
Enlistment or Entry

4. Unit or Appointment, Regiment
or Formation

5. Theatres of Service

6. Date and Place of Retirement
or Discharge

7. Reason for Retirement or Discharge

8. Rank on Retirement or Discharge

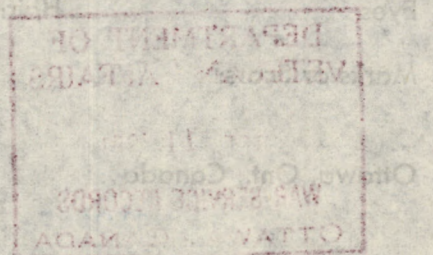
9. Medals and Decorations

10. Remarks

DESCRIPTION AT TIME OF RETIREMENT OR DISCHARGE

Sex Age Years Months Height Feet Inches

Complexion



CANADIAN EXPEDITIONARY FORCE

M. D.
6.

DISCHARGE CERTIFICATE

War Service Badge Issued,
Class. A No. 147110

THIS IS TO CERTIFY that No. 931096 (Rank) Pte

Name (in full) Franklin Peter enlisted in

the No 2 Construction Bⁿ

CANADIAN EXPEDITIONARY FORCE at Halifax NS on the 31st

day of July 1916

HE served in France & Belgium, 48th Coy C.F.C.

and is now discharged from the service by reason of Demobilization.
Medical Unfitness.

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

Age 33 4/12 yrs

Height 5ft 7 1/2 in

Complexion Dark

Eyes Brown

Hair Black

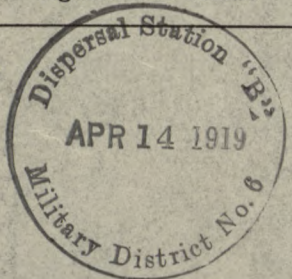
Marks or Scars

None

P Franklin
Signature of Soldier

W. M. [Signature] Major
O. C. Dispersal Station "B"
Issuing Officer

Date of Discharge



Rank

Date APR 11 1919 March 1st 1919

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.

JM

Rank _____ Name **FRANKLIN, Peter.** Reg'l No. **931096**
 Unit **No. 2 Const. Bn.** If in perm. Corps, }
 What Unit? } **Single.**
 Married or Single
 Place and Date of Enlistment **Halifax N.S. 31st July 1916.** Place of Birth **Lequille, N.S.**
 Name and Address, Next-of-Kin **Elisebeth Jane Franklin.**
No. 2, Falkland St., Halifax, N.S. Relationship **Mother.**

Assigned Pay Monthly \$ _____ Payable to _____

Relationship _____

Separation Allowance \$ _____ Payable to _____

Relationship _____

N/E. R.B. No.	10619
File R.L.	_____
Category	ORGAN

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>Arrived in England. S.S. Southland 7.4.17.</i>					
<i>14.7.17</i>	<i>7th Res. Bn.</i>	<i>Attached to 7th Res. Bn. Pt. Seaford</i>	<i>Seaford</i>	<i>17.5.17</i>	<i>PT II 168</i>
<i>1.9.17.</i>	<i>" "</i>	<i>Ceases att on proc. to C.F.C. N.A. London</i>	<i>Seaford</i>	<i>17.5.17</i>	<i>PT II 183 + 194</i>
<i>16.8.17</i>	<i>N.S. R.D. T.O.S. from 2nd Const. Bn.</i>	<i>on command at H.Q. Foresty Corps London. Pte.</i>	<i>Bishott</i>	<i>21.5.17</i>	<i>PT II 160</i>
<i>29.8.17.</i>	<i>2nd Const. Bn.</i>	<i>S.O.S. to M.S.R.D. Spr. Field.</i>	<i>Field</i>	<i>17.5.17</i>	<i>PT II 125</i>
<i>15.10.17</i>	<i>M.S.R.D.</i>	<i>Ceases on command to H.Q. C.F.C. London & to S.O.S. on proceeding to C.F.C. H.Q. France.</i>	<i>Bishott</i>	<i>22.6.17</i>	<i>PT II 215</i>
<i>25.6.17</i>	<i>676 B.D.</i>	<i>att^d for Hdqrs France</i>	<i>" S. Dale</i>	<i>22.6.17</i>	<i>" 50. abs sent 24/7</i>
<i>28.8.17</i>	<i>48 Coy. C.K.</i>	<i>T.O.S. on arrival from Eng.</i>	<i>Field</i>	<i>23.6.17</i>	<i>" 57</i>

01

FRANKLIN PETER 931096

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.				
18. 9. 17	48 boy.	S.O.S. to 55 Coy. 676. Pk	Field	14.8.17	Pt II 4 of 19. 9. 17 of 55 th Coy C76 TOS
19. 12. 17	10 Dist Hq.	T.O.S. from 55 Coy "	DO.	2.11.17.	- 2. Pt II 16 of 20. 12. 17 55 th Coy SOS.
22. 2. 18.	"	SOS. to 31 Coy 676. "	DO.	5.2.18	- 4. Pt II 8 of 22. 2. 18. 31 Coy TOS.
		SOS to BDCFC, 1 2. 19			
		31 Coy D 15 1. 4. 2, 19 &			
		TOS BDCFC Seaford			
		18th Res DO 1, d 4 2 19			
25-2-19	CFC Per 18 Res.	SOS to CCC. Dist. 6. Rlyl ✓	Seaford.	25-2-19.	Pt II 0.6.
29-2-19.	6 MDCW Dec. 1. CFC.	T.O.S. from 18 Res. CFC Per. ✓	Rlyl.	25-2-19.	— 58.
3-4-19.	✓ Aug 6 CFC	DO O to C & Canada ✓	✓	30-3-19	— 93.
		35-13-6		20-3-19	
29-3-19	5. M.D.K.P.	S.O.S. of PC. to M.D.G. for disposal to Canada "	Rlyl	29-3-19	- 17

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Mrs. Jennie Bell Franklin* By Whom Assigned *Franklin Peter*
 Address *Lumbury P.O., N.S.* Regtl. No. *931096*
 Rank *Pte*
 Corps *no 2 const. Bn.*
 Rate *15-00* APR 1917

PAYMENTS

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



N 317 0

↑ 17/0 1 3 17 .

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2

Mrs Jennie Bell Franklin
(Assignee)

Name of Soldier

Franklin Peter

PAYMENTS.

no 931096

Pl no 2 const Pn

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks
			<i>15⁰⁰</i>	<i>APR 1917</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>Z 4818</i>	<i>15</i>	
May		<i>J 8480</i>	<i>15</i>	<i>15⁰⁰</i>
June		<i>V 15617</i>	<i>15</i>	<i>15⁰⁰</i>
July		<i>W 21947</i>	<i>15</i>	<i>Cu</i>
Aug.		<i>I 28609</i>	<i>15</i>	<i>Cu</i>
Sept.		<i>K 35572</i>	<i>15</i>	<i>OB</i>
Oct.		<i>Z 43428</i>	<i>15</i>	<i>7103</i>
Nov.		<i>V 47858</i>	<i>15</i>	
Dec.		<i>G 54244</i>	<i>15</i>	
Jan.	1918			
Feb.			<i>135</i>	
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.				

Married 15-3-17

MILITIA AND DEFENCE

M. F. W. 11.

50m.—6-16.

H. Q. 177-39-813.

SEPARATION ALLOWANCE

Name Jennie B. Franklin

Name of Soldier Franklin, Peter

Address Lunenburg P. O.
N. S.

Regtl. No. 931096

Rank Pte

Corps No 2 Const Batt

Relation to Soldier

To what Corps belonging

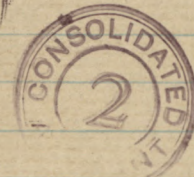
wife, child or mother

Wife

when called out

PAYMENTS

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



11/10/15

Married 15-3-17

MILITIA AND DEFENCE

M. F. W. 11a.

50m. - 6-16.

1772-39-318.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Jennie B. Franklin

Wife

Name of Soldier

Franklin, Peter

PAYMENTS. *Pte*

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

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May		<i>F7021</i>	<i>50</i>	<i>50 R</i>
June		<i>W7329</i>	<i>20</i>	<i>20</i>
July		<i>V10692</i>	<i>20</i>	<i>20</i>
Aug.		<i>b 4605-</i>	<i>20</i>	<i>R</i>
Sept.		<i>C 18199</i>	<i>20</i>	<i>20</i>
Oct.		<i>H 20230</i>	<i>20</i>	<i>T</i>
Nov.		<i>G 22586</i>	<i>20</i>	<i>T</i>
Dec.		<i>M 25567</i>	<i>20</i>	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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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.				

26 FEB 1919

pl 3

67
M. D.
6
H

WAR SERVICE BADGE. PROCEEDINGS ON DISCHARGE.
CLASS "A" No 147110
(Demobilization.)

Colonel
(M)

1. No. 921096

2. Rank. Pte

3. Name. Franklin Pete

4. Unit. Res A.C. Orig 2 Coast. Coops.

5. Date of Discharge 14-11-19 Place Halifax N.S.

6. Reason for Discharge Decrot.
Rest of King Matthe
Occup Sailor.
Service in France 23 **22**

Embarked 5 Dec 1918
Arrived March 30 1919
City N/1

7. Authority. **R. O. 1420**

8. Proposed Residence after Discharge Annapolis Royal N.S.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate
M. F. W.?

P. Franklin
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place HALIFAX, N.S. APR 11 1919

Date

Signature [Signature] Major
O. C. Discharge Station
(O. C. Discharging Unit.)

LIST OF DISCHARGE DOCUMENTS

No.	Name	Rank	Company	Regiment	Branch	Discharge Date	Remarks
1	John A. Smith	Private	1st	10th	Infantry	1864	
2	James B. Jones	Sergeant	2nd	15th	Infantry	1864	
3	William C. Brown	Private	3rd	20th	Infantry	1864	
4	Robert D. White	Private	4th	25th	Infantry	1864	
5	Thomas E. Green	Private	5th	30th	Infantry	1864	
6	Charles F. Black	Private	6th	35th	Infantry	1864	
7	Henry G. Gray	Private	7th	40th	Infantry	1864	
8	George H. King	Private	8th	45th	Infantry	1864	
9	Edward I. Lee	Private	9th	50th	Infantry	1864	
10	Franklin J. Hall	Private	10th	55th	Infantry	1864	



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

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178).
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a),
6. Field Conduct Sheet (M.F.B. 122.)
7. Proceedings of Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
(Enclosed in special envelope (260M)).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Disposal Certificate (M.D. 3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2),
12. Last Pay Certificate (P. 851).
13. Pay Book (P. 64).
14. War Service Gratuity Form (M.F.W. 2595).
15. Sundry Documents.

Group..... **A**

Checked by No. **24**

HAM

Date..... **29/3/19**

Saturday 10/4/19

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

M. OR S. REGT. NO. 931096 RANK *Plt.* NAME (IN FULL) *Franklin P*

ORIGINAL UNIT C.E.F. *656* IF IN P.F. WHAT UNIT? (BLOCK LETTERS SURNAME FIRST)

ADDRESS: *U.S. 30-3-19 No 105* PLACE OF ATTESTATION: TRANSFERRED TO: DATE: AUTHORITY:

DATE OF ATTESTATION: TRANSFERRED TO: DATE: AUTHORITY:

IS SEPARATION ALLOWANCE PAID? *Yes 3000* DATE EFFECTIVE: *1.5.19* ASSIGNED PAY \$: *15.00* DATE EFFECTIVE: *1.5.19*

TO WHOM PAID: *James as At.* RELATIONSHIP: *Charles to City*

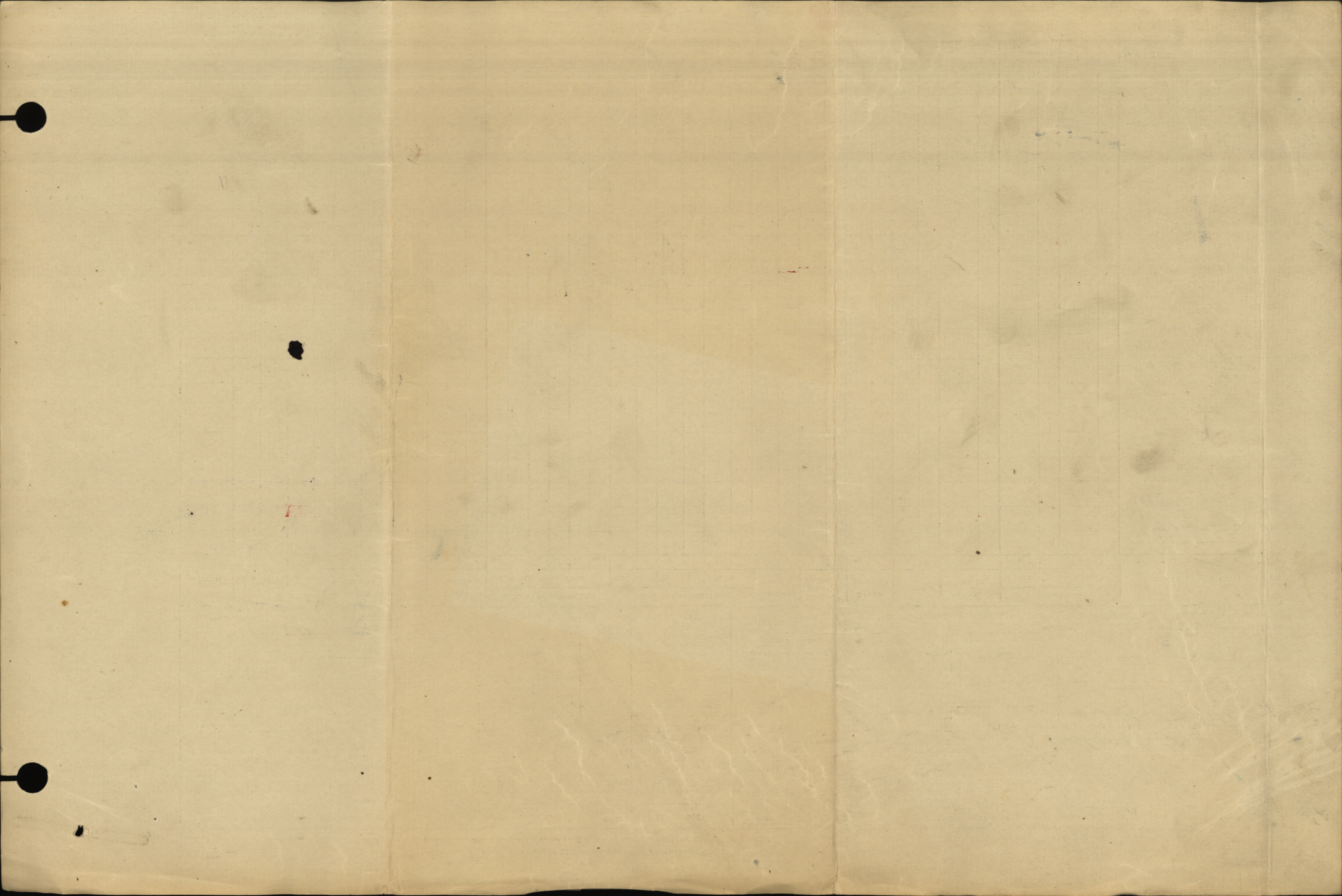
ADDRESS: *PO Lunenburg Ms* ANY CHANGE IN ASSIGNEE OR ADDRESS: *Bank of Montreal Annapolis Md*

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE: EFFECTIVE: *14-4-19*

DISCHARGED: *Ar U.S.* PLACE: *Denol* DATE: *Do 105* REASON: *Do 105* AUTHORITY: *Do 105* IF ENTITLED TO POST DISCHARGE PAY: *#363*

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY		REGIMENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS		
	NO. OF DAYS	RATE	AMOUNT		CREDITS		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.	\$	C.	\$	C.	\$	C.	\$	C.			
			\$	C.	\$	C.	NO.	DATE	NO.	DATE	NO.	DATE												\$	C.
Mar-Apr 14	45	1.10	49.50	70.00	35.00	70.00				487	500	97.03	15.00	15.00			37.00	97.35	97.35	16.00			556	16.00	by Bal atk Col 1st Regt. USR Col 1st Regt. Advance Boat Col 3. They Bal on dis Asst pay Master Plt at 4005 10 CRB Advances furnished First Payment with as above
	153				350	150	500.00						70.00				16.00			280.00	134.00			WAR SERVICE GRATUITY <i>WAR S.A.</i> Mar 25	
					350	150	500						70	44						210	90			70/44 70/30 70/30 70/30	
					350	150	500						350	134	16					70	30			70/30 70/30	
																								500	

All payments made
by Charon
complete



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Married 15-3-17

Separation and Assigned Pay Branch

F

5-043

~~5151~~

Apr-1/17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

<i>20</i>	<i>25</i>	<i>30</i>	
	<i>1/13/17</i>	<i>19.18</i>	

RATE OF ASSIGNMENT

<i>15</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *931096*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *Peter Franklin*
 Battalion *No. 2. Const. Bn.*
 Beneficiary *Jennie B. Franklin*
 Relationship *Wife*
 Address *M.F.W 255H 22-8-18*

PARTICULARS OF ASSIGNMENT

Name *Mrs. Jennie Bell Franklin*
 Address *Lunenburg, P. O. U.S.*
 Change of Address
 1
 2
 3
 4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec. 31.</i>		<i>190</i>	<i>135</i>	<i>325</i>	<i>6338-P-1</i>
<i>Jan-18</i>	<i>M 68410</i>	<i>30</i>	<i>15</i>	<i>45</i>	<i>H</i>
<i>Feb</i>	<i>7 96583</i>	<i>25</i>	<i>15</i>	<i>40</i>	<i>H</i>
<i>Mar</i>	<i>A 136393</i>	<i>25</i>	<i>15</i>	<i>40</i>	<i>S'</i>
<i>Apr</i>	<i>S 13635</i>	<i>25</i>	<i>15</i>	<i>40</i>	<i>b</i>
<i>May</i>	<i>S 12600</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>June</i>	<i>M 23096</i>	<i>25</i>	<i>15</i>	<i>40</i>	<i>b</i>
<i>July</i>	<i>M 30463</i>	<i>25</i>	<i>15</i>	<i>40</i>	<i>c</i>
<i>Aug</i>	<i>M 38511</i>	<i>25</i>	<i>15</i>	<i>40</i>	<i>c</i>
<i>Sept</i>	<i>R 50734</i>	<i>25</i>	<i>15</i>	<i>40</i>	<i>c</i>
<i>Oct</i>	<i>R 54777</i>	<i>25</i>	<i>15</i>	<i>40</i>	<i>c</i>
<i>Nov</i>	<i>R 575-89</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Dec</i>	<i>M 65755</i>	<i>45</i>	<i>15</i>	<i>60</i>	<i>✓</i>
<i>Jan</i>	<i>Q 76071</i>	<i>30</i>	<i>15</i>	<i>45</i>	
<i>FEB</i>	<i>Y 73078</i>	<i>30</i>	<i>15</i>	<i>45</i>	<i>L</i>
<i>Mar</i>	<i>W 85719</i>	<i>30</i>	<i>15</i>	<i>45</i>	
<i>April</i>	<i>Z 329</i>	<i>30</i>	<i>15</i>	<i>45</i>	<i>C</i>
		<i>635</i>	<i>375</i>	<i>1010</i>	

M. F. W. 128
400M-6-17-1772-39-141
L. L. 22320-M. & D. 7593.

M. R. O. 91331. "Destroy" 16.4.19

.....A/c Closed *30.4.19*
 Ret'd per.....*Saturnia*
 Date *19.4.19* F.X. *16.4.19* M.D. *6*
 Clerk.....*S. Chambers*

AUDITED.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

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. 128
 400M-647-1772-89-141
 L. L. 22320-M. & D. 1483.