

Nursing

Unit C.A.M.C.

Rank Sister Name ETTA HANNAH GARRETT.

OFFICERS' DECLARATION PAPER

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

Original

QUESTIONS TO BE ANSWERED BY OFFICER

(ANSWERS)

1. (a) What is your Surname? Garrett
(b) What are your Christian Names? Etta Hannah
2. (a) Where were you born? (State place and country) London Ontario
(b) What is your present address? 47 Hale St. London Ont.
3. What is the date of your birth? Aug. 7th. 1893.
4. What is (a) the name of your next-of-kin? Alexander Garrett
(b) the address of your next-of-kin? 47 Hale St. London Ont.
(c) the relationship of your next-of-kin? Father.
5. What is your profession or occupation? Graduate Nurse
6. What is your religion? Church of England
7. Are you willing to be vaccinated or re-vaccinated and inoculated? Yes.
8. To what Unit of the Active Militia do you belong? C.A.M.C.
9. State particulars of any former Military Service. None.
10. Are you willing to serve in the
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? Yes.

The undersigned hereby declares that the above answers made by him to the above questions are true.

Etta Garrett (Signature of Officer.)

CERTIFICATE OF MEDICAL EXAMINATION

I have examined the above-named Officer in accordance with the Regulations for Army Medical Services.

I consider ~~him~~ her fit for the CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Date March 12th 1917

Place London Ont.

J.R. LeTouzel Caplt. R.C.M.C.
Medical Officer.

*Insert here "fit" or "unfit".

THE UNIVERSITY OF CHICAGO PRESS
CHICAGO, ILL. U.S.A.

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28
4-3-19

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

7/18
~~DISCHARGE~~ DOCUMENTS

Name *GARRETT, ETTA, Hannah*

Regt. No. _____ Rank *7/18*

Corps *Camp*

Demob.

08696

R. O. No.....

H. Q. No.....

*Doc's Rec'd to Pers
m m 2525
Ref Pers - 1680/4
m 18*

Ret. 2-4-19

*M. F. W. 62-1
Letter of Ind. 1
Dental Certificate 1
D. M. S. 1375
Lab. Report - 1
M. F. W. 62.
50m. - 9-18.
H. Q. 1772-39-935.*

Reg. S. Scotian d-19-2-19,

R 172-1

SURNAME. *Garrett.*

CARD NO. ✓

CHRISTIAN NAMES. *Etta Hannah.*

S.O.S. 18-3-19

R.O. 1811 FOLL. 19
no 889 24-3-19
100

REGL. NO. RANK *Nursing Sister.*

UNIT *C.A.M.C.*

FORMER CORPS *C.A.M.C.*

NEXT OF KIN.

NAMES IN FULL *Garrett, Alexander*

RELATIONSHIP TO SOLDIER *Father.*

ADDRESS *47 Hale St, London, Ont.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH *Canada, London, Ont.* DATE *Aug. 7th. 1893.*

PLACE OF ATTESTATION *London, Ont.* DATE *Mar. 12th. 1917.*

R/C. 1-3-19 272 7/str.

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Graduate Nurse.

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION.

PLACE

London, Ont.

DATE

Mar. 12th. 1917.

Present Address: - 47 Hale St., London, Ont.

Number

Rank

NIS

Surname

GARRETT

Christian Name

ETTA HANNAH

Units

Theatre of War

ENGLAND

Date of Service

27-4-17

610-6pt 203

Remarks

Mrs Etta Hanna Wibe Parkview Pastoret Miss

Latest Address

42 2nd St
U.S.A.

Roll No.

Page 4903

200m.-6-21.

DESP. NOV 8 1928

REC'D. NO. 40505

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

Sheet No. *2* *Mr. Alex Garrett*
 (Assignee)

Name of Soldier *Garrett E.*
Nursing Sister C. A. M. C.

L. L. Job 5470—Req. 6888.

PAYMENTS.

	Month.	Year.	Cheque No.	Am't	Remarks.
				<i>825 00</i>	<i>MAY 1917</i>
	April	1916			
	May				
	June				
	July				
	Aug.				
	Sept.				
	Oct.				
	Nov.				
	Dec.				
	Jan.	1917			
	Feb.				
	March				
	April				
<i>Cell</i>	May		<i>012573</i>	<i>25</i>	
<i>Cell.</i>	June		<i>V. 17028</i>	<i>25</i>	<i>Am</i>
<i>Cell.</i>	July		<i>K 21850</i>	<i>25</i>	<i>in</i>
	Aug.		<i>F 32770</i>	<i>25</i>	<i>J</i>
	Sept.		<i>R 35569</i>	<i>25</i>	<i>J</i>
	Oct.		<i>C 41757</i>	<i>25</i>	
	Nov.		<i>V 48249</i>	<i>25</i>	<i>AR</i>
	Dec.		<i>S 57755</i>	<i>25</i>	
	Jan.	1918			
	Feb.				
	March				
	April				
	May				
	June				
	July				

MILITIA AND DEFENCE
ASSIGNED PAY
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.				

ASSIGNED PAY.

MILITIA AND DEFENCE

M. F. W. 11.

50m.—6-16.

H. Q. 177-39-818.

SEPARATION ALLOWANCE

Name *Mrs Alex Garrett*Name of Soldier *Garrett E.*

Address

*47 Hale Rd
London
Ond*

Regtl. No.

Rank

Nursing Sister

Corps

C. A. M. C.

Relation to Soldier

\$25.00

wife, child or mother

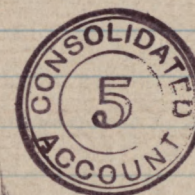
To what Corps belonging

MAY 1917

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				



CANADIAN EXPEDITIONARY FORCE

J.O.F. 1-27.

R.A.P.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Nursing Sister

(Name in full) Sister Hannah GARNETT.

Enlisted in Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE, on the Twelfth

day of March 1917 AND WAS APPOINTED to COMMISSIONED RANK

in Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE on the Twelfth day

of March 1917

He SERVED in CANADA, and England with the C.A.M.C., Kitchener Military

Hospital, 4 10 Canadian General Hospital, 4 16 Canadian General Hospital,
and District Depot No. 2.

and was STRUCK OFF THE STRENGTH on the Eighteenth day

of March 1917 by reason of General Demobilization

Dated at Ottawa, this Twenty Third day

of October 1917

H. G. G. G.
for

Lieut.

Director of Personal Services.

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to certify that (Name) _____
Rank in (Rank) _____
Enlisted in _____
CANADIAN EXPEDITIONARY FORCE, on the _____
day of _____ 191____ AND WAS APPOINTED TO COMMISSIONED RANK
in _____
CANADIAN EXPEDITIONARY FORCE on the _____
day of _____ 191____
HE SERVED IN CANADA _____
and WAS STRUCK OFF THE STRENGTH OF THE _____
day of _____ 191____
by reason of _____
day of _____ 191____
Signed at Ottawa this _____ day of _____ 191____
by _____
Major General _____
Director of General Services

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

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

Casualty Form—Active Service.

250M.—1-16.
H. Q. 1772-39-920.

Unit, Regiment or Corps Army Medical Corps.

Regimental No. _____ Rank Junior Sister Name E. Garrett
C. E. F.

Enlisted (a) 12.3.17 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				
		Embarked <u>Halifax</u>		<u>27/4/17</u>	
		Disembarked <u>Liverpool</u>		<u>6/5/17</u>	
<u>17/5/17</u>	<u>C.A.M.C. D</u>	<u>TAKEN ON STRENGTH</u>	<u>Westknange</u>	<u>6/5/17</u>	<u>Pt II D.O. 137.</u>
<u>9.6.17</u>	<u>"</u>	<u>On Com: to R. 15th Bn Brighton</u>	<u>"</u>	<u>8-6-17</u>	<u>Pt II D.O. 159.</u>
<u>9/7/17</u>	<u>K.M.H.</u>	<u>Duty with Kitchener Mil. Hospl.</u>	<u>BRIGHTON.</u>	<u>8/7/17</u>	<u>Pt. 11. D.O. 57.</u>
<u>15/10/17</u>	<u>106.9.7</u>	<u>T.O.S. on ceasing to be attached Kitchener Hospl</u>	<u>"</u>	<u>5/10/17</u>	<u>Pt II D.O. 5.</u>
<u>26/1/19</u>	<u>"</u>	<u>S.O.S. on proceeding to No 16 GH Orkington</u>	<u>"</u>	<u>27/1/19</u>	<u>Pt II D.O. 4/1919.</u>
<u>19/2/19</u>		<u>Transfer to 684</u>			<u>Major</u>

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
5/3/19	HQ Ottawa	TOS CEF Canada Gen Demob	MD #2	19/2 19	CEF RO 1758-19
20/3/19	HQ Ottawa	SOS CEF Canada on Gen Demob	MD #1	18/3/19	CEF RO 1811-19
					<i>D. J. J. J. J.</i> Lieut. for Director Personal Services

Christian Name **ETTA HANNAH.**

Mouheal	27-3-17	no admission
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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 N/S Name ETTA HANNAH Surname GARRETT

Unit or Corps..... *camp.* (If a soldier) Regt. No.

Born at.....*London, Eng*.....on, date.....*7/8/1895*.....

Signature (for identification)..... *G. H. Garrett*

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

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe. *nil*

Weight

140 lbs.

Height

5 ft. 4 1/2 ins.

2. NUTRITION AND DIATHESIS P

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

3. NERVOUS SYSTEM ?

4. RESPIRATORY SYSTEM.

5. HEART ?

Abnormal Sounds?

Abnormal Size ?

Pulse Rate?

Intermittence or irregularity? *no*

6. **ARTERIES.**—Any hardening?

7. DIGESTIVE SYSTEM ?

3. GENITO-URINARY SYSTEM ?

Urinalysis—S.G. ? 1.024 Reaction ? acid Albumen ? nil Sugar ? nil

9. SKIN, MIDDLE EAR, EYE
or any other part?

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

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

No. 78 CANADIAN GENERAL (ONTARIO) HOSPITAL

Examined at.....ORFINGTON, KENT.

Date..... 31 JAN 1979

Signed A. M. Gordon Capt ~~Comd~~ M.O.

Signed W. H. O'Neil W. H. O'Neil

If any disease or impairment of health or physical condition is discovered, 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.

ASSIGNED PAY.

UNIT.

RANK.

NAME OF

RATE OF P. AND A.

Beneficiary

Address

Amount.

\$ 25^{xx}

Separation Allowance issued. Yes or No.....

60 h b.D

Pay 2^{xx} pd

F.A. 60.

Messing/ ^{xx}

ban

1918-19 Add on fit all

DATE

PARTICULARS

CK. NO.

CR.

DR.

1918

Apr 18 a. P. ban

apl Pay R

108

24

Bank

1187.

83

May 19 May Pay R

111 60

13

A. P. ban.

23

Bank

2683

86 60

June June Pay R

108

14

A. P. ban.

24

Bank

4166

83

July July Pay R

111 60

17

A. P. ban

24

Bank

5626

86 60

Aug Aug Pay R

111 60

24

A. P. ban

Bank

7238

86 60

Sep Sept Pay R

108

12

A. P. ban

24

Bank

9187

83

Oct Oct Pay R

111 60

23

A. P. ban

Bank

10404.

86 60

Nov Pay R,

140

a. P. ban.

24

Bank

12521

115

b. Terwd

UNIT.		RANK.		NAME.			
NAME OF	RATE OF P. AND A.	DATE	AUTHORITY				
ban	6A k b.D Pay 2 ^{xx} pd F.A. 60. Messing/ ^{xx}	k.S 7 ⁵ / ₁₇	fr ban. Dk S 60.622 14 ⁵ / ₁₇	Name Garrett. Initials G. Bank of Montreal Trafalgar Sq			
Yes or No.....							
Add outfit allow. 5/9							
PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
				25			
P		108					
Bank	1187		83				
IP1		111 60					
				25			
Bank	2683		86 60				
IP1		108					
ban.				25			
Bank	4166		83				
IP P		111 60					
ban				25			
Bank	5626		86 60				
P		111 60					
an				25			
Bank	7238		86 60				
P.		108					
				25			
Bank	9187		83				
		111 60					
				25			
Bank	10404.		86 60				
R,		140					
Can.				25			
Bank	12521		115				
b. Terwd							

ASSIGNED PAY.

UNIT.

RANK.

NAME OF

RATE OF P. AND A.

DATE

AUTHOR

Beneficiary

Address

Amount.

\$25.00 Can

Separation Allowance issued. Yes or No.....

64mbD.

Pay 2.

F.A. /

Messing /

N/S

7/7.

add outfit allow 19/19

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

1919

Dec.

Dec. Pay (R)
a. P. Can

124

25

18

Bank

13792

99

Jan 23

a. P. Can
Pay. (R)

124

25

20

Bank

15564

99

Feb 7.

Adv Feb P. a

Cash.

16009

87.

11

A Pay Can
Pay R

112

25

Bank

112

RANK.	DATE	AUTHORITY	NAME.
RATE OF P. AND A. Pay 2. F.A. / Messing /	8/8 75/7		Name <i>Garrett.</i> Initials <i>E.</i> Bank of Montreal <i>Lafulger Square</i>

add outfit allow 19/19

CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
	124					
13792		99	25	<i>✓</i>		
			25			
	124					
15564		99		<i>✓</i>		
16009		87.				
			25			
	112			<i>✓</i>		
		112				

RETURNED TO CANADA
 TO 28/2/19
 TRANSFER TO N.E. LEDGER

12

From Ledger 5 11 3/19

ASSIGNED PAY.

UNIT.

RAN

Beneficiary

Address

Canada

NAME OF

DATE

AUTHORITY

C.A.M.C. D

Pay #200pd
7 la 60
mess 1.00

Amount. \$ 25⁰⁰ fr. 1.57.17 ✓

Separation Allowance issued. Yes or No.....

917-18

DATE

PARTICULARS

CK. NO.

CR.

1917

June 8th Pay 1-31st (31 days) Mess 1-31st (25 days) less A.P. \$25⁰⁰ Bank. 6251

" 8 P.O. Canada mess fr. 17⁵⁰ Dm. \$6.622 1/4 17⁵⁰ P.O. eff 17⁵⁰ 105⁰⁰ 60

" 11 A.P. Canada. (2 months)

" 14 June Pay (R) 108

" 22 Bank. 900H

July 5 Trav exps 75-78 1/17.

" 19 July Pay (R) 111 60

" 12 A.P. Canada.

" 24 Bank. 13092

Aug. 18 Aug. Pay (R) 111 60

A.P. Can

" 21 Bank. 19361

Sept. 17 Sept Pay (R) 108

" 12 A.P. Canada.

" 21 Bank. 21863

Oct. 9 October Pay (R) 111 60

" 12 A. Pay. Canada.

" 30 Bank. 26291

Nov 16 November Pay (R) 108

" 15 A. Pay. Canada

" 20 Bank. 30763

Dec 7 Dec Pay (R) 111 60

" 8 A.P. Can.

" 14 Bank. 35096

barried 701

AY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

Limit
DATE

AUTHORITY

C.A.M.C.D.

Pay #200pd
7/1/60
Mess 1.00

n/s.

4-5-14. From Canada
D.M.S.C.O #622.
d/14-5-14.

Name

Garrett

Initials

E

Bank

of Montreal.
Trafalgar Sq 17825⁰⁰ f: 1-5-14. ✓
Advance issued. Yes or No.....

917-18

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

SPECIAL AUTHORITIES
To be initialled by P.M. in every case.

INITIALS

1/9 (31 days) Mess 1.00 7-31/9 (25 days) less A.P. 25⁰⁰ Bank. 6251n/s. Mess 1.00 7/17 D.M.S.C.O 622 d/14/17 P.M. Eff 1/17 Eff 1/16
108854 105⁰⁰ 60

P. Canada. (2 months)

June Pay (R)

Bank. 900H.

91

mess 75-78 4/17.

July Pay (R)

A.P. Canada.

Bank 13092

Aug. Pay (R)

P. Can

Bank. 17361

Pay-1 R1.

P. Canada.

Bank 21863

er Pay-1 R1

ay. Canada.

Bank. 26291

mber Pay (R)

Canada

Bank. 30763

Pay (R)

P. Can.

Bank 35096

barried 701

ASSIGNED PAY.

UNIT.

RANK.

Beneficiary

Address

ban

Amount. \$25

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY DATE

Pay #20pd
7a 60
mess 1.00

7/5

1917-18

DATE PARTICULARS CK. NO. CR. DR. ASSIGNED PAY PAID IN CANADA BA

1918							
Jan 15	Jan Pay (R) A P. ban		111 60			25	
22	Bank R	39501		86 60			
Feb 11	Feb Pay (R) A P. ban		100 80			25	
20	Bank	40996		75 80			
Mar 11	March Pay (R) A P. ban		111 60			25	
22	Bank			86 60			

OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
		Pay #20pd 7a 60 Mess 1.00	H/S.			Name <i>Garrett.</i> Initials <i>L.</i> Bank <i>of Montreal</i> <i>Trafalgar Sq 178</i>

1917-18

CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
	111 60					
ank R 39501		86 60	25	~~0~~		
	100 80					
ank 40996		75 80	25	~~0~~		
	111 60					
ank		86 60	25	~~0~~		

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

M. OR S.

REGT. No.

RANK

NAME (IN FULL)

GARRETT, Ethel

NEXT OF KIN

RELATIONSHIP

PARTICULARS

EFFECTIVE
DATE

AUTHORITY

ORIGINAL UNIT
C. E. F.IF IN P. F.
WHAT UNIT?

(BLOCK LETTERS, SURNAME FIRST)

ADDRESS

PLACE OF
ATTESTATION

TRANSFERRED TO

DATE OF
ATTESTATION

TRANSFERRED TO

ASSIGNED PAY, \$

DATE EFFECTIVE

IS SEPARATION ALLOWANCE PAID?

DATE EFFECTIVE

TO WHOM PAID

RELATIONSHIP

PAYABLE TO

RELATIONSHIP

ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS

ADDRESS

STOP PAYMENT FORM
ASSIGNED PAY
RENDERED, DATE

PLACE

DATE

REASON

AUTHORITY

IF ENTITLED TO
POST
DISCHARGE
PAY

DISCHARGED

London

18-3-19

10883

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	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2					COL. NO. 3	DEBIT	

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[illegible]

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

G 1184

May 1/17

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

25+			
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PARTICULARS OF SEPARATION ALLOWANCE

No. _____
 Rank *N.S.* Promoted _____ Reverted _____ Discharge _____
 Soldier's Name *C. E. Garrett*
 Battalion *C. E. M. C.*
 Beneficiary _____
 Relationship _____
 Address _____

PARTICULARS OF ASSIGNMENT

Name *Mrs Alex Garrett*
 Address *47 Hale St., London*
 Change of Address *Ont.*
 1 _____
 2 _____
 3 _____
 4 _____

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917 Dec 31</i>			<i>200</i>	<i>200</i>	
<i>Jan 1/18</i>	<i>68235 B</i>		<i>25</i>	<i>25</i>	<i>Fin</i>
<i>Feb</i>	<i>798917</i>		<i>25</i>	<i>25</i>	<i>S</i>
<i>Mar</i>	<i>138701 G</i>		<i>25</i>	<i>25</i>	<i>S</i>
<i>Apr</i>	<i>158701 G</i>		<i>25</i>	<i>25</i>	
<i>May</i>	<i>150475</i>		<i>25</i>	<i>25</i>	
<i>June</i>	<i>25434 M</i>		<i>25</i>	<i>25</i>	
<i>July</i>	<i>32833 M</i>		<i>25</i>	<i>25</i>	
<i>Aug</i>	<i>40937 M</i>		<i>25</i>	<i>25</i>	
<i>Sept</i>	<i>43719 T</i>		<i>25</i>	<i>25</i>	<i>B</i>
<i>Oct</i>	<i>51716 W</i>		<i>25</i>	<i>25</i>	
<i>Nov</i>	<i>60189 W</i>		<i>25</i>	<i>25</i>	
<i>Dec</i>	<i>69003 V</i>		<i>25</i>	<i>25</i>	
<i>Jan</i>	<i>71221 W</i>		<i>25</i>	<i>25</i>	
<i>Feb</i>	<i>75257 Y</i>		<i>25</i>	<i>25</i>	<i>b</i>
<i>MAR</i>	<i>87762 L</i>		<i>25</i>	<i>25</i>	<i>B</i>
			<i>575</i>	<i>575</i>	

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

A/c Closed

Ret'd per

Date

Clerk

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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

No.	
Rank	Promoted
	Reverted
	Discharge
Soldier's Name	
Battalion	
Beneficiary	
Relationship	
Address	

PARTICULARS OF ASSIGNMENT

Name	
Address	
Change of Address	
1	
2	
3	
4	

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