18th Bn D595

ORIGINAL

407038

ATTESTATION PAPER

No. a/407038

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name? — Frederick Royal Green
2. In what Town, Township, or Parish, and in what Country were you born? — Toronto
3. What is the name of your next-of-kin? — Mother Mrs Mary Green
4. What is the address of your next-of-kin? — 183 Hebert Ave West Toronto
5. What is the date of your birth? — 18th October 1889
6. What is your trade or calling? — Gasfitter
7. Are you married? — —
8. Are you willing to be vaccinated or re-vaccinated? — yes
9. Do you now belong to the Active Militia? — —
10. Have you ever served in any Military Force? 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

Frederick Royal Green (Signature of Man.)

Jas Allen (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, ..., do solemnly declare that the above answers made by me to the above questions 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.

Frederick Royal Green (Signature of Recruit.)

Date JUN 10 1915 191 . Jas Allen (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.

Frederick Royal Green (Signature of Recruit.)

Date JUN 10 1915 191 . Jas Allen (Signature of Witness.)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at Toronto this 10th day of JUN 10 1915 191 .

Nicholas M. Hughes (Signature of Justice.)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

Alfred Ashton Major (Approving Officer.)

M. F. W. 23.
200 M.—3-15.
H.Q. 1772-89-241.

DESCRIPTION OF Frederick Royal Green ON ENLISTMENT.

Apparent Age 25 years 6 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7½ ins.

Chest measurement
- Girth when fully expanded 35½ ins.
- Range of expansion 3½ ins.

Complexion Fair
Eyes Blue
Hair Brown

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

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.)

Scar on back of arm above elbow

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 June 9th 191 5 — W. W. Taylor
Place Niagara on the Lake — Capt. A.M.C.
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

Frederick Royal Green 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.

JUN 10 1915

(Signature of Officer.) Lt. Col.
O. C. 36th Battalion C. E. F.

Date 191 .

C.E.F.

GREEN FREDERICK R. 407038 36 BN 25600

DEMOB.

Deceased. H-3-51

No. a 7038 RANK. Pte NAME Green F. R.

T. O. S. UNIT 36th Battalion

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915 June 10	1915 June 30 July	v n.		

UNIT SAILED
JUN 19 1915

H. Q. FILE No. 649-

NAME Green Frederick Royal REGT'L. No. 407038

RANK AND CORPS Pte. 18th Bn. (2nd Can. Div.)

CABLE		NATURE OF CASUALTY
NO.	DATE	
025-13-	10-10-16	C Rep wounded Sept: 15-th. 1916

L. L. Job 86907- -M. & D. 16065.

M. F. W. 42—50m.-10-15.
H. Q. 1772—39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 235 — 1	No 6 C.F.A. Div Rest Stat	24-5-16	Myalgia (Lumbar)
A 241 — 1	" " " "	29-5-16	" " D/s to duty
A 336.	Rep. from Base.	15-9-16	wounded — shell shock
A 345	Rej. Unit	19-9-16	" on med. Bd.

SURNAME. Green

CHRISTIAN NAMES Frederick Royal

REGL. No. 407038 RANK Pte

UNIT 36th Bn.

FORMER CORPS Mil

R1 CARD NO.

SOS. 24-5-19 Demob
SO. 148 FOLL. 28-5-19
LAD

NEXT OF KIN.

NAMES IN FULL Green, Mrs Mary

RELATIONSHIP TO SOLDIER Mother

ADDRESS 183 Quebec Ave, West Toronto, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, Toronto, Ont. DATE Oct. 18th/18

PLACE OF ATTESTATION Niagara, Ont. DATE June 10th-1915

O/S 19-6-15 125/10

R/C. 22-5-19 329/0-2 Pte

L. L. 94504. M. & D. 65m.

M. F. W. 22. 250m.—2-16. H. Q. 1772-39-338.

From Montreal per S.S. "Corsican" 19/6/15.

MARRIED not stated SINGLE WIDOWER

TRADE OR CALLING Gas Fitter RELIGION Methodist

DESCRIPTION.

APPARENT AGE 25 YEARS 6 MONTHS

HEIGHT 5' FEET 7½ INCHES

CHEST MEASUREMENT 35½ INCHES EXPANSION 3½ INCHES

COMPLEXION Fair EYES Blue HAIR Brown

DISTINGUISHING MARKS Scar on back of arm above elbow.

MEDICAL EXAMINATION. PLACE Niagara-on-the-Lake, Ont. DATE June 9th 1915.

Present address:- not stated

R. 149.

Name GREEN *Rank* Pte. *Reg. No.* 407038
Frederick R.

Unit 18th Bn.

Next of Kin Canada

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
24-5	6 C.F.A. D.R.S.		Myalgia(Lumbar)	A235		
29-5	Disch. to Duty		-do-	A241		
15-9	Repd. from Base		WOUNDED	A336	02515	10-10
19-9	Rejoined Unit		-do- (Shell Shock) AFS 255	A345		

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

a7 RS t.

Number 407038 Rank Pte

Surname GREEN

Christian Name Frederick Royal

Units 18th Bn Can Inf Theatre of War France

Date of Service 15-2-16

Remarks 1224 Davenport Rd.

Latest Address ~~88 Pacific Ave.~~
Toronto, Ont.

Roll No. B. Page 13801.

200m.-2-21.M.

DESP. JUN 17 1922
REGN. No. 42188

D.M.S. 1300.

Surname: Green | Christian Name or Names: F. R. | Reg. No.: 404038

Rank: Pte. | Unit: 18th Bn | Co. | Troop | Batty.

Hospital | Date of Admission

Transferred No 6. C.F. Camb. D.R. Stn | Hosp. 24.5.16

Hosp.

Hosp.

Hosp.

Diagnosis

(1) Myalgia. (Lumbar)

Later Diagnosis (if changed)

(2)

(3) Wd.

Additional Diagnosis: if more than one state present

DISPOSITION

dis to Duty 29.5.16 Date

Rej. unit 19.9.16.

REMARKS

D. 7.6.16 # a/235-(1)

14.6.16 a 241.

10.10.16 a/336(2) Repted from Base

20.10.16. A 745.

A.M.D. 2 DEPT.

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

9

R

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

6 6 C Co 407038

MEDICAL HISTORY SHEET.

Surname Green *Christian Name* Frederick Royal

Examined { on 9 day of June 1915
at Niagara on the Lake

Approved by W. T. Taylor

Rank Capt A.M.C. M.O.

Birthplace { City or Town Toronto
County Ont Canada.

Apparent age 25 yrs

Trade or occupation Gas Fitter

Height 5' Feet 7½ Inches.

Weight 138 Lbs.

Chest measurement { Minimum 32 inches.
Maximum expansion 35½ inches.

Physical development Good

Small-Pox Marks Nil

Vaccination Marks { Arm Right. Left.
Number 1

When Vaccinated last June 9th 1915

(a) Marks indicating congenital peculiarities or previous disease

(b) Slight defects but not sufficient to cause rejection

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.
9.6.15		W. T. Taylor M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
11.6.15	O.K.	M.O.
17/6/15	O.K.	M.O.
16.8.15	O.K.	M.O.

June 1917 T.A.B. R.L. 6-42-15

Enlisted on 9 *day of* June 1915 *at* Niagara on the Lake

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	36th Batt	407038.		
Transferred to..	18th Bn.			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Witley.	22.4.1919	myalgia	A J Hammond Capt

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.

M. F. B. 313.
100M.—1-15.
H. Q. 1772-39-439.

Surname..... Christian Name.....

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
No 6 C.F.A. D.R.S.		24	5	16	29	5	16	Myalgia	5	To duty	A 253-241
Reported from Base		15	9	16	19	9	16	Wounded		Rly Unit	A 336-345.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

NAME OF SOLDIER (Block letters) GREEN Fred. R

REGIMENT 18 Btn RANK Pte No. 407038

Date of Examination in England ..... 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.

1755

PRESENT DENTAL REQUIREMENTS

1. FILLINGS 29.
2. EXTRACTIONS
3. CROWNS 7.8.9.10.
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

CONTENTS NOTED C.A.D.C., M.D. No. 1.

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 Yes

Signature of Dental Officer ..... Capt

25M.—12-18.
H.Q. 1772-39-950

C 4

26910

R—122.

Rank Name GREEN. Frederick. R. Reg'l No. 407038.

Unit 36th Bn, If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Niagara ~~Falls~~. June 10th 1915. Place of Birth Toronto.

Name and Address, Next-of-Kin Mrs Mary Green. 183 Quebec Ave. West Toronto. Ont. Can.

Relationship Mother

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 7714
File No.
Category CAN.OR

Report Date	Report From whom received	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
		Arr^{d} in England		28-6-15	
2.11.15	O.C. 36th	Trans^{f}. 2 days pay - Absence	ser. Sandling	2.11.15	Pt II O. 180
28.1.16	"	7 dys #2 F.P. abs from defaulters	"	28.1.16	" 28.
3.2.16	O/C. 36th	Trans to 18th Bn. Overseas		3.2.16	Pt II 34
21.2.16	O.C. 18th	Arrived from 36th Bn and taken on strength	In Field	5.2.16	Part II G.
7.6.16	18th	106 Can. F. Amb. Div^{l} Rest Stn	"	24.5.16	Cas. List A 235 Myalgia
14.6.16	"	Discharged to Duty	"	29.5.16	" " 241 "
10.10.16	"	Repts from Base wounded	"	15.9.16	Cas List A 336
20.10.16	"	Rejoined Unit	"	19.9.16	" " 345
6-4-19	"	Str to Can Records List	"	4-4-19	Pt " No 33.4 CRL 38 9/11/4/19
10-4-19	P.W. 666	T.O.S. from 18 Bn	Witley	10-4-19	" - 3
		60-K-		15-5-19	

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					
		13 5 19 I Wing SOS To Canada ~~X~~ Witley ~~X~~		13 5 19	D0 28	

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 36th O S Bn

Regimental No. 407038 Rank Pte Name Green F R.

C. E. F.

Enlisted (a) 10/6/15 Terms of Service (a) D of W. Service reckons from (a) 10/6/15

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				

TOS No 1 Dist. Depot
Displ. Stn. K. 13-5-19
SOS Dispersed
24,5,19 D.O, No, 148

A. Whittall Lt
for O. C. Dispersal Area Sta. "K."

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

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

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

THIS IS TO CERTIFY that No. 407038 (Rank) Pte.

Name (in full) Frederick Royal Green enlisted in the 36th Btn

CANADIAN EXPEDITIONARY FORCE at Niagara on the 10

day of June 1915

HE served in England & France, 18th Battn.

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 29 Years.

Height 5 ft 7 1/2 In.

Complexion Fair

Eyes Blue

Hair Brown

Marks or Scars Scar on back of arm above elbow.

Signature of Soldier.

Date of Discharge

DISCHARGE SECTION
MAY 24 1919
No. 1 District Depot

Wm Rattall
Issuing Officer.
Lieut
for O.C. Dispersal Area Sta. K.
Rank

Date ..... 19....

NB- 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.

M.F.B. 39A.

(9178)—Wt. W12165—2146.—1,250,000.—2-15.—C. & G. Forms B. 103/1.

Army Form B. 103.

Copy. Certified Correct by Officer i/c Records 10/8/16 (KI 101/129)

Casualty Form—Active Service.

Regiment or Corps 36th Canadian Reserve Battalion

V3 1055

Regimental No. 407038 Rank Pte Name GREEN F.R.

Enlisted (a) 10-6-15 Terms of Service (a) Duration of War Service reckons from (a) _____

Date of promotion to present rank _____ Date of appointment to lance rank _____ Numerical position on roll of N.C.Os. _____

W.S.B. CLASS. "A"

Extended _____ Re-engaged _____ Qualification (b) _____

Report Date	Report 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.
		Transferred to 18th Bn. C.E.F., Feb 3, 1916			
5-2-16	Can Base Depot	Arrived from 36th Can Res Bn, Shorncliffe, and taken on strength of 18th Can Bn.	Can Base Depot	5-2-16	Nominal Roll 5/2/16 Part II Order 9, 21/2/16
15-2-16	do	Proceeded to join unit	In the Fld	15-2-16	Nominal Roll 15/2/16 DCS. 117, 20/2/16.
18-2-16	18th Bn	Joined unit	do	16-2-16	AFB.213, 18/2/16 DCS.119, 25/2/16
27-5-16	5 C.F.A.	Myalgia (lumbar) Adm.	5 C.F.A.	21-5-16	A 36. DCS. 206.
do	do	do Trans. to Div. Rest Stn.		24-5-16	do do
27-5-16	6 C.F.A.D.R.Stn.	Myalgia (lumbar) Adm.	6 C.F.A.D.R.Stn	24-5-16	A 36. DCS. 201.
3-6-16	do	Discharged to duty with unit		29-5-16	do DCS. 207.
27-5-16	4 C.F.A.	Myalgia (lumbar) Adm.	4 C.F.A.	21-5-16	A 36. DCS. 208.

(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.

OVER [P.T.O.

407038 Pte. Green F. R.

Report: Date	Report: 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.
27-5-16	4 C.F.A.	Myalgia (lumbar) Trans.	to 5 C.F.A.	21-5-16	A 36. DCS. 208.
23-9-16	18th Bn.	Wounded.	Not stated	15-9-16	B. 213. DCS. 251.
16-9-16	4 C.F.A.	Shell shock. Adm.	4 C.F.A.	15-9-16	A 36. DCS. 255, 23/10/16.
22-9-16	5 C.F.A.	W-Shell shock. Adm.	5 C.F.A.	15-9-16	A 36. do.
do	do	Discharged to duty with unit		18-9-16	do do
30-9-16	18th Bn.	Rejoined unit	In the Fld.	19-9-16	B. 213. DCS. 253, 16/10/16.
14-7-17	18th Bn.	Granted 10 days leave	to England	7-7-17	B. 213. Pt. II Order 50, 23/7/17.
26-1-18	18 Bn	Granted 14 days leave to England		23-1-18	B.213 Pt II Ord 9, 8/2/18.
11/1/19	do	Granted 14 days leave	to Paris	9.1.19.	B 213. Pt II. 7/1919

A.A.G. Transferred to Cdn. Record List. 4 AVR 1919 Pt. S.O. No. 47

Cdn Emb. Camp Proceeded to England 4 AVR 1919 N.R. Part II Order

28 ~~26~~ ~~24~~ 13 ~~8~~ ~~10~~

P Wing FOR O.C. T.C. TO C.E.F. HEADQUARTERS No. 24 DATED 4.5.19 WITLEY.

S.S. CANADA/PONIA Sailed L'pool 14-5-19

for Lieut-Col., A.A.G., Cdn Section.

Ken Barden. CAPT. & ADJUTANT, FOR O.C. "P" WING C.C.C. WITLEY.

Rank Private Name GREEN. Frederick. R. Reg'l No. 40 A7038.

If in perm. Corps,
Unit 36th Bn. What Unit? Married or Single Single.

Place and Date of Enlistment Niagara Falls. June 10th 1915. Place of Birth Toronto.

Name and Address, Next-of-Kin Mrs Mary Green. 183 Quebec Ave. West Toronto. Ont. Can.

Relationship Mother

Assigned Pay Monthly $ Payable to

Relationship

Separation Allowance $ Payable to

Relationship

Discharge, Date and Place Reason Character

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
July 1	31	31	1	31 00	31	10	3 10	*10 00	44 10	18 59		5 27 50			32 50	11 60	*Clothing
								86	86	Adj. of exchange						12 46	
Aug 1	31	31	1	31 00	31	10	3 10		34 10	101 149		4 37 29 20			34 07	12 49	
Sept 1	30	30	1	30 00	30	10	3 00		33 00	191 234		2 43 29 20			31 63	13 86	
Oct 1	31	31	1	31 00	31	10	3 10		34 10	296		4 86			4 86	43 10	
Nov 1	30	30	1	30 00	30	10	3 00		33 00			14 60 29 20		2 20	46 00	30 10	130.180 for 2 days pay for absence
Dec 1	31	31	1	31 00	31	10	3 10		34 10			19 47			19 47	44 73	
Jan 1	Jan 31	31	1.00	31 00	31	10	3 10		34 10			19 47 24 33		7 70	51 50	27 33	[illegible]
1-2-16	29-2-16	29		29	29		2 90		31 90	835 822		2 61 2 61			5 22	54 01	From 36th Bn
March		31		31	31		3 10		34 10	879 927		2 62 2 62		35	5 59	82 52	Clothes Chs. 36th Bn. 46 15/3/16
				275 00			27 50	10 86	313 36			220 59		10 25	230 84	82 52	

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						

MARRIED OR SINGLE S

PLACE OF BIRTH Toronto

NAME AND ADDRESS OF NEXT OF KIN Mrs Mary Green

183 Quebec Ave: West Toronto. Ont. Canada

RELATIONSHIP OF NEXT OF KIN Mother

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

ADMISSIONS TO HOSPITAL, &c.

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

REG'L. No. 407038 RANK Private NAME Green, Frederick R. OK

IF IN PERMT. CORPS WHAT UNIT | UNIT 18th Bath | TRANSFERRED TO | DATE | AUTHORITY

PERMANENT FORCE ALLOWANCES | TRANSFERRED TO | DATE | AUTHORITY

PLACE OF ATTESTATION Niagara Ont. | TRANSFERRED TO | DATE | AUTHORITY

DATE OF ATTESTATION June 10th 1915 | TRANSFERRED TO | DATE | AUTHORITY

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

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

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

DATE 1916	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
Mar 31			275				27	50						10 86	313 36												220 59	10 25	230 84	82 52					
Apr. 1-30	30	1mo	30	-	30	10	3	-							33 .	969		1013						261	261				522	110 30				
May 31	31		31		31		3	10							34 10	1056	1475							256					256	141 84				
June	30		30		30		3	00							33 00			1145	5.7.						523					174 84				
July	31		31		31		3	10							34 10.			1178	14.7						261					784	201 10				
Aug	31		31		31		3	10							34 10	1329	28	1169	13.8					262	262				524	229 96				
Sept	30		30		30		3	-							33 -	1369	39/8							261					261	260 36				
Oct	31		31		31		3	10							34 10	1357	21.9							262					262	292 83				
Nov	30		30		30		3								33	1403	10/10	1456	2/11			BR 52 7/11		436	349			4867	56 62	268 31				
Dec	31		31		31		3	10							34 10	1498	26/11							11 33					11 33	291 08				
			5500				5500																												
Jan	31	1mo.	34	10											34 10	1558	30/12							261					261	322 57				
																1669	12/1							267										
Feby	28	1mo	30	80											30 80	1667	29/1							261					523	348 14				
			469	90										10 86	680 76									3655	1656			269 26	1025	3326 2				
			500	00										10 86	680 76																			

No 407038. Pte Green. H. R.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
			469	90										10 86.	680 76.									36 55	16 56		269 26		10 25	332 62	348 14				
Mch	31	1 21/10	34	10											34 10	748	9/1	1764 1888	7/3 17/3					26Y	5 73 262					10 47	371 77		225 -		
April	30	1	33	00											33 00			8	4/4						261				255	5 16	399 61				OB. No. 3 1st Bn. June 1916. receipts A/R. 1125 May 31/6. chgd. 2.55
May	31	1	34	10											34 10	61	27/4							262						262	431 09		255	176 09	
June	30		33	.											33 -	117	14/5	167	5/6					268	5 36					8 04	456 05		270		
July	31		34	10											34 10								CRm 9/7				97 33			97 33	392 82				
Aug	31		34	10											34 10	232	19/6	287 566	5/7 2/8					2 68	268 267 268					5 36	421 56		300		
Sept	30		33	.											33 .	359	24/7	479 442	4/8	353	75 2.			268 -	268 -	97 33 -				108 04	246 52		315 -		

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER PAY	REDUCE ENG.
1917											
Oct.		~~346 52~~							346 52		390
Oct	31 P.P.	34 10		ar. 603 23/9 15 Bn.	2 68				377 94		390
		34 10			2 68						
Nov	30 ✓	33 .									
				. 654 17/10 ✓	8 03						
				312 21/10 20 Bn. Rec	3 57						
					11 60						
Dec. 31.		34 10		317 25/10 18 Bn	3 57				429 87	360	
1918		67 10			15 17						
Jan		34 10		" 773 19/11 ✓	4 46						
				" 813 26/11 ✓	12 49						
				" 926 28/12 ✓	3 57						
				. 868 21/12 ✓	4 46				438 99	375.	
		34 10			24 98						
Feb 28. ✓		30 80		CP. 81641 24/1/18.	14 60						
				" 88444 5/2.	2 43						
				. 872 38 2/2.	2 43						
				OR 30377 C2. 22/1/18.	58 40						
				. 1011 21/1.	4 46						
				. 989 18/1 ✓	4 46				383 01	390.	
		30 80			86 78						

MONTH	PARTICULARS	DR. 1	DR. 2	DR 3	BR 4	BALANCE	DEFER SE. RED. ALLE. PAY ENG.
	Bal Fwd.					383 01	390
Mch.	34 10						
	OR 1108 11/2/18 18 Bn.	4 46					
	· 1123 21/2 ✓	3 57					
	CP. 85351 30-1-18	14 60					
	OR 1173 7/3 ✓	4 46					405.
	· 1228 18/3 ✓	3 57				386 45	
		30 66					
	(8 14.60 CP. 24/1/18.. 34 10)	30 66					

DUPLICATE 407038

ARMY FORM B. 178.

23

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.
Army Form B. 178A to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname GREEN *Christian Name* Frederick Royal

TABLE I.—GENERAL TABLE.

Birthplace ... Parish Toronto County Ont. Canada

Examined ... ... on 9th day of June 1915,
at Niagara on the Lake

Declared Age ... ... 25 years days.

Trade or Occupation ... Gas Fitter

Height ... ... 5 feet 7½ inches.

Weight ... ... 138 lbs.

Chest Measurement — Girth when fully Expanded 35½ inches.
Range of Expansion 3½ inches.

Physical Development ... good

Vaccination Marks — Arm ... Right Left
Number 1

When Vaccinated ... ... June 9/15

Vision ... ... (R.E.—V=
(L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a)

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

Approved by (*Signature*) W.H. Taylor
(*Rank*) Capt.
Medical Officer.

Enlisted ... ... at Niagara on the Lake
on 9th day of June 1915.

Joined on Enlistment ...	Corps.	Regtl. No.
	36th Res. Battln.	407038
Transferred to	18th Bn.	

Became non-effective by ...

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

on day of 191.

(*Signature*)
(*Rank*) Lieut.-Col.
In Charge of Records,
Canadian Contingent.

(4887.) W. 9597/1588. 500M. 9/15. O.P., Ltd.

Forms B. 178 89

P.T.O.

Table II.—Only for Admissions to Hospital or to the Sick List in

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number of days in Hospital	Remarks bearing on use. In case subsequent p be given in
	Day	Month	Year	Day	Month	Year			
No 6 C. F. Amb. D.R.S.	24	5	16	29	5	16	Myalgia	5	To du
Rep from Base	15	9	16	19	9	16	Wounded		Rej

the Sick List in the case of Warrant Officers treated in quarters.

Number of days in Hospital	Remarks bearing on the cause, nature, or treatment of the case, likely to be of interest or of future use. In cases of syphilis, admissions and re admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, &c., will be given in the special syphilis case sheet.	Signature of Med cal Officer
5	To duty	A253-241
	Kit Admit	A336-345

Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.

Date	Brief details, and signature
9/6/15	Vaccinations W.H. Taylor
11/6/15	Anti-Typhoid Inoculations
17/6/15	"
16/8/15	"

June 1917 T.A.B. R.L. 6-43-18.

Table IV.—Service Table.

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

I certify the foregoing to be a true copy of an original entry on a Medical History Sheet of this man.

C.A.M.C.
For the Officer in Charge of Records
Canadian Contingents.

Group 2/3. Original

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID 2/3

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Whitby DATE Apr 22/19

1. 1 (a) Unit 18 Bttn (b) Regimental No. W.O.R. 407038 (c) Rank Pte

(d) Surname Green (e) Christian name Frederick Hazel.

(f) Home address 85 Pacific ave Toronto.

(g) Next of Kin Mary Green (h) Relationship Mother.

(i) Address of Next of Kin 85 Pacific ave Toronto.

2. Age last birthday 29 Years Date of birth 19 oct 1889

3. Enlistment, or Appointment (if an Officer) (a) Place Niagara (b) Date 9-6-15

4. Personal description:

(a) Height 5ft 7½ins. (b) Weight 125 3rd lbs (stripped) (c) Complexion Dark

(d) Colour of hair Black (e) Colour of eyes Blue (f) Identification marks, Scars, etc. Nil

5. Former trade or occupation Painter

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3	317

	Periods	
	From	To
Canada	9-6-15	18-6-15
England	18-6-15	3-2-16
France or other theatres of War	3-2-16	9-4-19 To date

7. Original disease, or injury MYALGIA.

(a) Date of origin 27-5-16 (b) Place of origin France.

(c) Cause Active Service Conditions

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Pain in back.
(Myalgia)

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

No objective findings.
Patient can do all movements well and without pain. No tenderness.
States that on standing or exposure a severe aching pain develops across lumbar region causing him great uneasiness.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System No. Cardio-Vascular System (If pulse rate is abnormal, B. P. will be taken.) No. Genito-Urinary System (Albumen and Sugar will be excluded.) No.

Special Senses No. Respiratory System No. Integumentary System No.

Disturbances of Mentality No. Digestive System No. Muscular System No.

Osseous and Joint Systems No. Any other general condition No.

10. (a) History (of the condition referred to in Section 9 (a).)

In May 1917 developed Myalgia Was in hospital four days. Reported to unit. Later was back up and ever since then he states he has had considerable pain on exposure & standing. Has carried on full duty.

23-9-16

10.—(*b*) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (*a*).)

15-9-16 Wounded Shell shock recovered

(*c*) (Here give a description of wounds, scars and deformities.

Nil

11.—(*a*) Did the disabling condition have its origin before enlistment? (a) No

(*b*) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

(b) N.A.

12. Was the disability caused, or aggravated; (*a*) by intemperance, or improper conduct; or (*b*) by unreasonable refusal to accept treatment? (a) no (b) no.

The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Hospital treatment

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? No
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? Yes.
(If not, briefly state why)

17. Recommendations

Wilbur Lowry Capt CAMC
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned Frederick Roy Lowry have heard the description of my disability and present condition read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.)

I complain in addition of

Frederick Roy Lowry DD
Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

yes.

19. Is the invalid fit for

(*a*) General service,	(Category A)	(Yes or No.) Yes
(*b*) Service abroad, not general service,	(" B)	(Yes or No.)
(*c*) Home service (Canada only),	(" C)	(Yes or No.)
(*d*) Temporarily unfit.	(" D)	(Yes or No.)
(*e*) Unfit for service in Categories A, B and C	(" E)	(Yes or No.)

20. It is certified that the invalid

(*a*) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

(*b*) Does not require treatment.
(*c*) ~~Should pass under his own control.~~
(*d*) ~~Should not pass under his own control.~~
(Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

K.T.C. Auth - Aug. Tel. 9083. J 11. 11. 18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

W. McEachern Capt. President.

PLACE Worthy Camp. J. Thomson Lieut Capt. } Members

DATE 22.4.1919

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the Invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

.....*President.*

PLACE..... } Members

DATE.....

APPROVED BY

Assistant Director of Medical Services.

DATE.....

APPROVED BY

Director-General of Medical Services.

DATE.....

HEADQUARTERS A.D.M.S. 23 APR 1919 CANADIAN TROOPS

5-6-3J

WAR SERVICE BADGE
CLASS "A" No. 261574

D. A. K.
D. G. 2

P

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. 407038.
2. Rank. Pte.
3. Name. GREEN. Fredrick. Royal.
4. Unit. 18th Battn. C.W.O.R.
5. Date of Discharge MAY 24 1919 Place London. Ontario
6. Reason for Discharge Demobilization.
7. Authority. P.O. 1894
8. Proposed Residence after Discharge 55 Pacific Ave. Toronto

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.?

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place London Ont

Date MAY 24 1919

Signature Wm Nuttall Lieut
for (O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-89-113.

O.K.

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 (A.F.B. 122.)
7. Proceedings on 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. Dispersal Certificate (C.D.S.).
11. Equipment Statement Q.M.G. Form (D.O.S. 2),
    and Clothing
12. Last Pay Certificate (P.S.C.) + slip.
13. Pay Book (A.B.64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group 53 Bfld

Checked by No. 14

Date 6-5-19

1 PM 10-G1-226

AUDITOR | PAYMASTER

M. OR S. — PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES — REGT. No. 407038 RANK Pte. NAME (IN FULL) GREEN Frederick Royal (BLOCK LETTERS SURNAME FIRST)

221

ORIGINAL UNIT C.E.F. 36 Bn — IF IN P.F. WHAT UNIT? 85 Pacific Ave Toronto Ont.

PLACE OF ATTESTATION — TRANSFERRED TO T.O.R. DD #1 — DATE 13-5-19 — AUTHORITY 20148

DATE OF ATTESTATION 10-6-15. — TRANSFERRED TO — DATE — AUTHORITY

NEXT OF KIN — RELATIONSHIP — ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE — Paid and Closed by Ottawa

TO WHOM PAID — RELATIONSHIP — ADDRESS — Nil

ASSIGNED PAY $ — DATE EFFECTIVE — Paid and Closed by Ottawa

PAYABLE TO — RELATIONSHIP — ADDRESS — Nil

ANY CHANGE IN ASSIGNEE OR ADDRESS

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE London — DATE 24-5-19 — REASON Dem — AUTHORITY 20148 — IF ENTITLED TO POST DISCHARGE PAY

PARTICULARS	EFFECTIVE DATE	AUTHORITY

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	BALANCE CREDIT $	C.	Relo	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																						S.S. Saronia 21-5-19
30-4-19							55-4	27	55-4	27					38995																							BAL. ENG. L.P.C. 30-4-19
1-5-19 29-5-19	29	1-10	31	90	33- 70				136	90							487		5-		66183						1947				691	17			Q		PAY TO ESTIMATED DATE OF DISCHARGE
																																					29-5-19 CLO. ALLOT. 1ST PAYMENT OF W.S.G.
																																					BOAT MONEY TRAIN MONEY
																																					923 Adv. PCCC 28-4-19
																																					924 Do. 9-5-19
																																					A.R. Mortimer Army
					WSG	5a											WSG	5a													Soldier	Dependent						Last Pay in WSG as above
183 days			420	00					420	00							70														350	00						
																																						Chgs to adjust to date of discharge 5 days @ 1/10
																	64	50			5	50									344	50						JUN 25 1919 296497
																	70														280	00						18/7/19 109715
																	70														210							22/8/19 121288
																	70														140							SEP 20 1918 116996
																	70	00													70	00						OCT 20 1919 1179060
																	70														0							
			420				420										414	50			5	50							420		H. Gleisner Capt.							

WAR SERVICE GRATUITY

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ENGLAND OR CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:–	EFFECTIVE DATE:–
AMOUNT:–	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.

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
6/4/19	331		466			Belgian Money Paid 4/5/6	
11/4/19	394	A. Platts	73				

PARTICULARS OF RENDERING NON-EFFECTIVE Leave to Canada 1/5/19 T.R.O.B.

MONTH	PARTICULARS	CR 1	CR 2.	PARTICULARS
31.3.18	Bal Frd.			
April	P.P.	33 –		A.R. 10 7-4-18 18th B.
				a.R. 64 17-4-18 "
May	Pte. Pay	33 34 10		AR. 171 14/5/18 "
June	Pte. Pay	34 10 33 –		AR. 189 4/6/18 "
				AR. 242 22/6/18 "
July	Pte Pay	33 34 10		AR. 377. 9-7-18 ✓
				AR. 3988 – 29-6-18 3rd A. Sc
				✓ 491. 24-7-18 18th
Aug.	Pte. Pay	34 10 34 10		✓ 604 19-8-18
Sept.		34 10		
	"	33.		722 6/9.
				846 26/9
		33.		
OCT	✓	34 10		✓ 963 14/10
				– 1171 26/10
		34 10		
Nov		33		✓ 424 16/11
				– 733 25/11
Dec		34 10		
1919 Jan		34 10		
		101 20		
				AR 1749 13/1/19 Dist Pay
				✓ 1465 16/12/18 18 Bn
				– 1713 26/12 ✓

FORWARD

* ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
	EFFECTIVE DATE:-	
	AMOUNT:-	

NAME:- GREEN, Frederick R

NUMBER:- 407038

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte.

S. 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.

UNIT AND TRANSFERS

ORIGINAL UNIT:-

DATE ACCOUNT FIRST OPENED:-

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			18 Bn.
	1/6/19		Cantee

M ACTIVE SERVICE PAY-BOOKS { UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
	466			Belgian Money Paid	4 56
Pett	7 3				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALLCE
	1	10		

OF RENDERING NON-EFFECTIVE Trans to Canada 1/5/19 A.R. B.6866. Trans to Pran 16/4/19 = M.D.1 = P.C. = 554 27

PARTICULARS	CR 1	CR. 2.	PARTICULARS	DR. 1	DR 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Bal Frd.								386 45	405	
	33 -		A.R. 10 7-4-18 18th Bn.	4 46						
			A.R. 64 17-4-18 "	3 57				411 42	429	
	33 34 10		AR. 171 14/5/18 "	8 03 4 46				441 06	435	
	34 10 33 -		AR. 189 4/6/18 "	4 46 8 03						
			AR. 242 22/6/18 "	12 49				453 55	450	
Pay	33 34 10		AR. 377. 9-7-18 ✓	20 52 4 46						
			AR. 3988 - 29-6-18 3rd A. Sch. of Cookery	3 57						
			✓ 491. 24-7-18 18th Bn.	3 57				476 04	465	
Pay	34 10 34 10 34 10		✓ 604 19-8-18 ✓	11 60 3 57 35 7				506 57	480	
	33.		722 6/9. "	3 57						
			846 26/9 "	3 57				532 43	495	
	33.			7 14						
	34 10		✓ 963 14/10 - 4	3 73						
			- 1171 26/10 - 9	3 73				559 07	510	
	34 10			7 46						
	33 -		✓ 424 16/11 ✓ 3	3 73						
			- 733 7/11 ✓ 3	3 06						
				16 79						
	34 10									
	34 10							643 48	555	
	101 20			16 79						
			AR 1749 13/1/19 Det Pars ✓ 1	29 85						
			✓ 1465 16/12/18 18 Bn ✓ 1	6 49						
			✓ 1713 26/12 ✓ 1	1 30						
			FORWARD	37 64						

NUMBER 407038 RANK Pte NAME GREEN Frederick R.

MONTH	PARTICULARS	Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.
1919.					37 64			
Feb	P P	30 80		AR 2282 10/1/19 H6 JB	3 10 69			
				✓ 2152 15/1/19 Let Paris	3 18 66			
				✓ 1026 17/1/19 ✓	3 23 32			
				✓ 1049 19/1/19 ✓	3 23 32			
				✓ 3152 26-1-19 H6 JB	6 7 46			
				✓ 3642 10-2-19 18 BN	12 3 73			
				✓ 4132 24-2-19 ✓	19 3 73			
				✓ 4640 7-3-19 ✓	21 3 65			
Mar.	✓	34 10		AR 5787. 1-2-19. OSB.	22 5 60			
				✓ 5176 12-3-19	25 18 25			
				✓ 5485 19-3-19 18 BN	27 3 65			
		64 90			159 70			
					159 70			
Apr.	Sgt. on Dep. Pay	33 -		AR. 394. 11-4-19. S/Wing 1.	73 00			
		50 25		✓ 337. 5-4-19. C. Emb 6 Hauts	4 56			
				✓ 1541. 28-4-19 (End) S/Wing 6	9 73			
				✓ 2776. 9-5-19 (End) ✓ 8	9 73			
		83 25			97 02			
					97 02			

To S D Can 13/5/19 Sh 60 100 R

P/6

NAME GREEN Frederick R.

Cr. 1.	Cr. 2.	Particulars	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	Balance	Deferred	Separation
			37 64				643 48	555	
30 80		AR 2282 10/1/19 H63B	5 10 69						
		✓ 2152 15/1/19 Lcl Paris	3 18 66						
		✓ 1026 17/1/19 ✓	3 23 32						
		✓ 1049 19/1/19 ✓	3 23 32						
		✓ 3152 26-1-19 H63B	6 7 46						
		✓ 3642 10-2-19 18/BN	12 3 73						
		✓ 4132 24-2-19 ✓	19 3 73						
		✓ 4640 7-3-19 ✓	21 3 65						
34 10		CR. 2787. 1-2-19. OSB.	22 5 60						
		✓ 5176 12-3-19	25 18 25						
		✓ 5485 19-3-19 18BN	27 3 65				548 68	585	
64 90			159 70						
33 -		AR. 394. 11-4-19. Rwing 1.	73 00						
50 25		✓ 337. 5-4-19. C. Emb. & Haut. 2	4 56					555	
		✓ 1541. 28-4-19. (End) Rwing 6	9 73						
		✓ 2776. 9-5-19. (End) ✓ 8	9 73				534 91		
83 25			97 02						

AOSB Can 13/5/19 Sh 60 1800K

5/8.68
50 25
33.
631.93

1766

* 584.27