

ATTESTATION PAPER.

No.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Harris.*
- 1a. What are your Christian names? *Jacob Henry.*
- 1b. What is your present address? *39 Kirk Street*
2. In what Town, Township or Parish, and in what Country were you born? *Chatham Kent Co. Ont.*
3. What is the name of your next-of-kin? *Mary Elizabeth Harris*
4. What is the address of your next-of-kin? *39 Kirk St Windsor, Ont. Canada*
- 4a. What is the relationship of your next-of-kin? *wife*
5. What is the date of your birth? *June 1894 (22)*
6. What is your Trade or Calling? *Labourer*
7. Are you married? *yes.*
8. Are you willing to be vaccinated or re-vaccinated and inoculated? *yes*
9. Do you now belong to the Active Militia? *no*
10. Have you ever served in any Military Force? *no*
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? *yes*
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Jacob Henry Harris*, 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.

Jacob H Harris (Signature of Recruit)

Date *Dec 23* 191*6* *Sgt W H Snowden* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *J H Harris*, 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.

Jacob H Harris (Signature of Recruit)

Date *Dec 23* 191*6* *Sgt W H Snowden* (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 *Chatham* this *23* day of *Dec* 191*6*

John McCorve (Signature of Justice)

71.00

Description of Jacob Henry Harris on Enlistment.

Apparent Age.....22 years6 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 1/2 ins.

Chest measurement. { Girth when fully expanded.....38 ins.
Range of expansion.....2 1/2 ins.

Scar about 1/2" long over left knee

Complexion.....Sauk

Eyes.....Brown

Hair.....Black

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

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date.....Dec 23 1916.

F. W. Hall

Place.....Chatham Cant

St. Paul

Medical Officer.

*Insert here "fit" or "unfit."

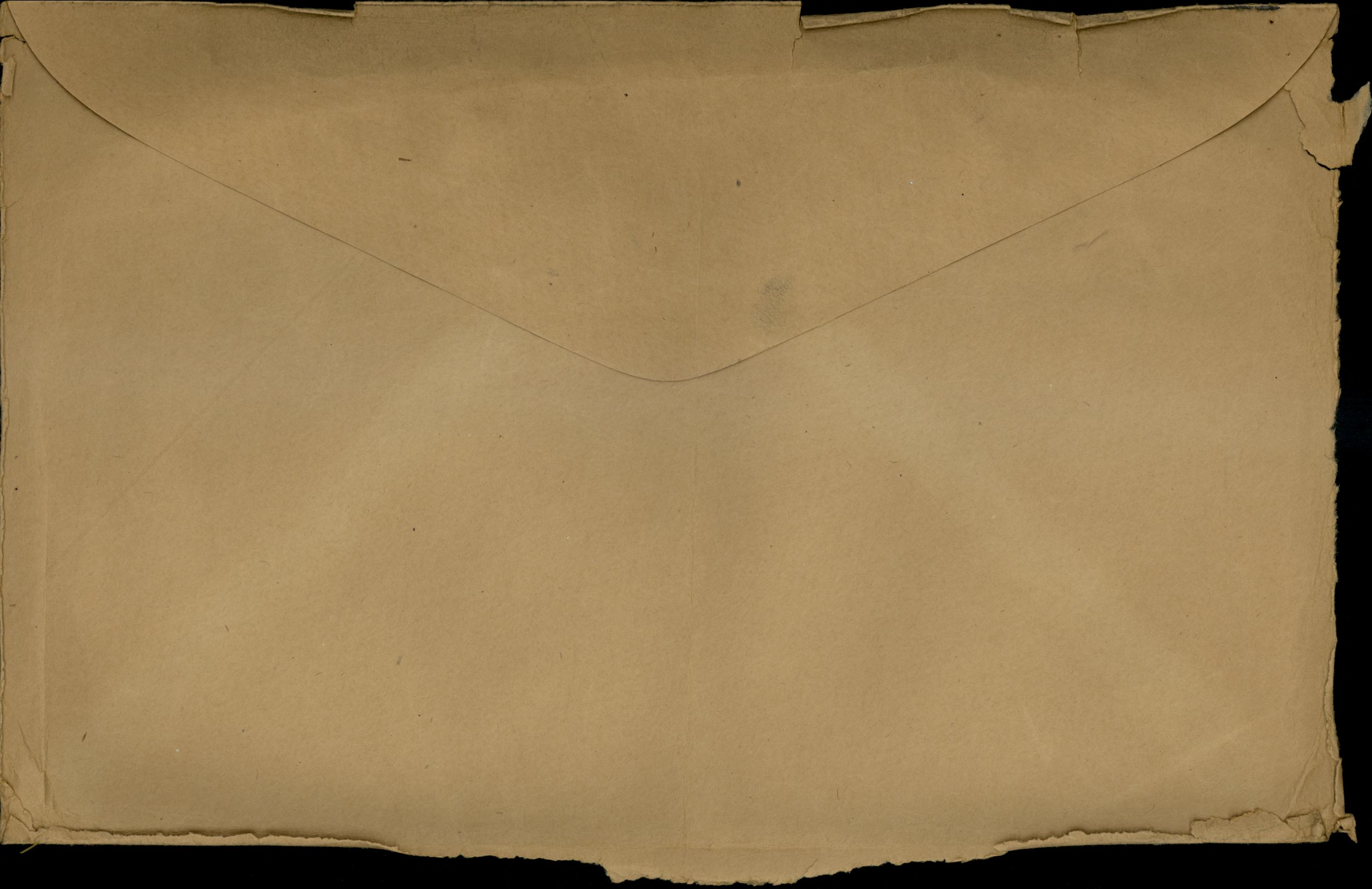
NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

.....Jacob H. Harris.....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.

D. M. Sturthevant.....LT. COL.....(Signature of Officer)
Comd'g No. 2 Construction Battalion, C.E.D.

Date.....Jan 4/1/17 1917.



931678
I.D. number
No. d'identification

Harris
Surname
Nom de famille

Jacob Henry
Given names
Prénoms

NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu

Box 24090

« CONTENTS CONFIDENTIAL »
« CONTENU CONFIDENTIEL »



NAME

Harris J. H.

RANK AND CORPS

Plt J. S. Reg.

REGT'L No.

931678

H. Q. FILE No. 649.

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

NO.

FOLLOWS

7100

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

a75 ⁽¹⁾	Jura, Champagne	Jura	19.11.17	Myalgia, Back
a80 ⁽²⁾	Discharged		24.11.17	" "
	4 th Can. Gov. Corps,	La Joux	Jura 5-5-18	
a219 ⁽³⁾	Discharged		14-5-18	Influenza
a373 ²	Can Forestry Corps	La Joux	Jura 8-11-18	Sinov Kneel.
a373 ²	Disc		10-11-18	" "

Jacob Henry

Name Harris

Rank

Pfc

Reg. No. 931678

Unit

2nd Constr Co

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918 5-5	C.F.C.H. La Tour	Influenza		A 212		1193/4
14-5	Discharged	do		A 219		1345/9
8-11-18	L.F.C.H. La Tour	Dysentery		A. 373		5576-3
10-11-18	Discharged	"		A. 373		5612-8

SURNAME.

Harris 649-7-139387

CARD NO.

I

X

CHRISTIAN NAMES

Jacob Henry

5058-2-19 Demob

FOLL.

2038 of 7-2-19. 8910
W.D.#1/.

REGL. NO.

931678

RANK

Pte.

UNIT

No. 2. Construction Bn.

FORMER CORPS

Nil

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Harris, Mrs. Mary Elizabeth

RELATIONSHIP

ADDRESS

*291 Wellington St.
Chatham, Ont.*

S.A.A.P. 2-1-19

COUNTRY OF BIRTH

Canada, Chatham, Ont.

DATE

June 22nd 1894

PLACE OF ATTESTATION

Chatham, Ont.

DATE

Dec. 23rd 1916

R/C 17-1-19 ²⁵⁴/₂₁ P/O 1

From Halifax, P.S.S. "Southlaw" 28/3/17.

MARRIED? Yes.

SINGLE

WIDOWER

TRADE OR CALLING

Labourer

RELIGION

Methodist

DESCRIPTION.

APPARENT AGE

22 YEARS

6 MONTHS

HEIGHT

5 FEET

7 1/2 INCHES

CHEST MEASUREMENT

38 INCHES

EXPANSION

2 1/2 INCHES

COMPLEXION

Dark

EYES

Brown

HAIR

Black

DISTINGUISHING MARKS

knee.

Scar about 1 1/2" long over left

MEDICAL EXAMINATION.

PLACE

Chatham, Ont.

DATE

Dec. 23rd 1916.

Present address: 39 Kirk St., Chatham
Ont.

9c
7m8

Number.....

93,648

Rank.....

Spr Pte



Surname.....

HARRIS

Christian Name.....

Jacob Henry



Units.....

C.O.R.C.C

Theatre of War.....

France

Date of Service.....

17-5-17

Remarks.....

229 King St East.

Latest Address.....

~~33. Stane St~~

Chatham, Ont.

Roll No.....

B

200m.-2-21.M.

Page 14102

DESP. JUN 19 1922

REGN. No

7621933

No. 931678 RANK Pte.

NAME

Harris. J. 86

T. O. S. 23-12-16

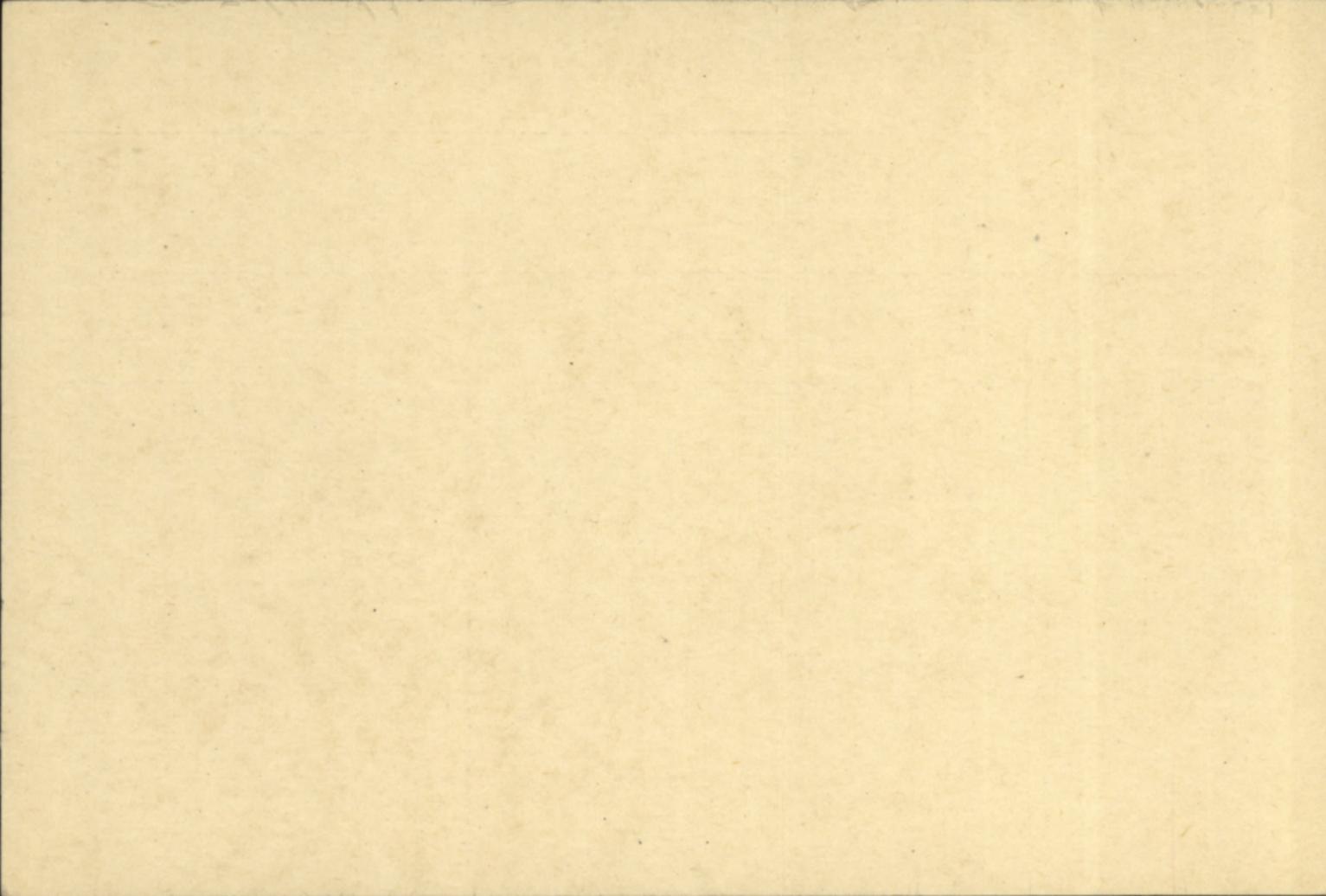
UNIT

D.O. 2. 2.1.17

No. 2. Construction Battalion

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Dec 23	1917 Jan 31	✓		
Feb.		✓		
Mar.		—		



HARRIS Jacob Henry

Name Rank **Pte.** Regtl. No. **931678**

Fyle Depot **IDD-10-H-374**

Original unit **2 Con.Bn** Present unit **2 Cons.Bn.** M. or S. **S.** Age **24** Religion **Meth** Ref. H.Q. **ID 30-H-1330**

Port, ship and date of arrival **Halifax Olympic 17-1-19**

Next of kin **Wife. Mary Elizabeth Harris Windsor.Ont.**

Address on leave

Address on discharge **33 Scane St. Chatham, Ont.**

Transportation issued Yes No Date Character on discharge

Previous occupation **Labourer** Date and place of enlistment **Dec. 23rd. 1916. Chatham, Ont.**

Diagnosis **NA.** Date of Medical Boards **London, Ont. Feb. 5/19.**

Date.	Remarks.	Pt. 2 Order No.
T.O.S.		
10-1-19	No.1.D.D.	
20-1-19	Posted To Cas. Co. and granted furlough with subs. allow. to 5-2-19	28
8-2-19	Discharged from H.M.S. On Demobilization (P.D.P.)	38

*—Name will be given in full ; surname first.

Date.

Remarks

Pt. 2 Order No

M. F. W. 192

150m.—5-18

1772-39-1243

7100

SURNAME

CHRISTIAN NAME OR NAMES

FORM D.M.S. 1300

REG. NO.

HARRIS.

J.H.

931678.

RANK
Pte.

UNIT

CO. TROOP
N.S. 2Con.

BATTY.

HOSPITAL

Jura Hospt. Champagnole Hura.

DATE OF ADMISSION

19-11-17

1. Can. Form Corps. H

HOSP. 5. 5. 17.

2. Can. Form Corps. La Joux. Jura.

HOSP. 8. 11. 18.

3.

HOSP.

4.

HOSP.

DIAGNOSIS Myalgia. Back. HD

1.

Infuenza

2.

Synov. R. Knee. a.s.

3.

DISPOSITION

V.L. 29-11-17. A75.

5. 12. 17 A80 @

14. 8. 18 A 212 - 2

22 - 5 - 18 A 210

18. 11. 18 @ 373 @

Disch 24. 11. 17.

DATE

Dis. 14 - 5 - 18

REMARKS

Dis. 10. 11. 18.

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

7100

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 931678 (Rank) PRIVATE

Name (in full) HARRIS, Jacob Henry, enlisted in

the 2nd CONSTRUCTION BATTALION, C.O.M.F.

CANADIAN EXPEDITIONARY FORCE at CHATHAM, ONT. on the THIRTY-THIRD

day of DECEMBER 16

HE served in FRANCE (WITH 2CONSTRUCTION BATTALION)

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

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

Age 5' 7 1/2"

Marks or Scars N I L

Height DARK

Complexion BROWN

Eyes BLACK

Hair

Signature of Soldier

[Handwritten Signature]

Issuing Officer

Date of Discharge

LIZUT.

DISCHARGE SECTION
FEB. 8 1919
No. 1 District Depot

O.C. DISCHARGE SECTION, NO. 1 D.D.

SIXTH MAY

19

Date 19.....

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.

W.S.B.C. "A"

7160

AWWA

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

M. F. W. 54. (A. F. B. 10)

350M.—5-16

H. Q. 1772-30-920.

Casualty Form—Active Service.

505
8-2-19
7-2-19
28
22

Unit, Regiment or Corps #2 Construction Battalion, C E F

Regimental No. 931678 Rank Private Name Jacob Henry Harris

C. E. F.

Enlisted (a) 23/12/16 Terms of Service (a) Duration of War Service reckons from (a) 23/12/16

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) Laborer

CERTIFIED CORRECT.
6 JUN 1917
CAN. RECORDS, LONDON

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. 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
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6 JUN 1917	O.C. and Constn Bath.	Embarked, Canada Disembarked England Proceeded Overseas	Halifax Liverpool Seaford	25/3/17 7/4/17 17/4/17	Adjutant, No. 2 Construction Batt
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25/5/17	O.C.	Landed in France 17-5-17 N.R. Forfeits 5 days pay for Making away with Iron Rations	Sea	21/5/17	20069 P119. 25/17
---------	------	--	-----	---------	-------------------

30/8/17	O.C.	5 day FP No 2 for AW leave from 10 Pm. 26-8-17. until 6 Pm 27-8-17. Forfeits 2 days pay under R.A.		27/8/17	Brook
---------	------	--	--	---------	-------

24-11-17	O.C.	adm to corps		19-11-17	B21
16-11-17	Qua. Mgr	Myalgia Back (M.) Dischgd		24-11-17	W 3034/6139

30 JUN 1917
D.O.#
MAY 2 1917
CONDITION

(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.

7100

Report		Record of promotions, decorations, 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.	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received			
20-11-17	Jura Hosp	admission myalpa	19-11-17	W 3024/5539
17/1/18	oc unit	Rept this from hosp	24 16/1/18	B 213 file KG 17/797
5.5.18	b. for Hos.	Influenza. Adm.	5.5.18	F. 381. W. 407.
11.5.18	oc unit	To Hosp.	5.5.18	B 713.
14.5.18	Jura Hos.	Influenza. Disch.	14.5.18	F 1651. W 1339.
18.5.18	oc unit	Reg. from Hosp.	14.5.18	B 713.
7-9-18	oc	Granted 14 day leave	7-9-18	B 213 per 52 of Feb 1918
28-9-18	oc	Report from leave	23-9-18	B 213
17.10.18	oc	7 days of No 2. 14-10-1918. Improper conduct (Leaving his work without permission)		B 213 W 5058 of Oct 1918
9-11-18	oc unit	To Hospital	8-11-18	B 213
8-11-18	Jura Hos	Approaches knee	8-11-18	W 1449.
10-11-18	oc	to oc	10-11-18	W 1987
16/11	OC	Returned	10/11	B 213
17/11	oc	Trans to Eng & ported to N. S. Reg report	17/11	W 1987

G. H. O. 3rd Echelon, D. E. F.
 Lt. for Lt.-Col., A. A. G.
 Campaign Section

LSM

Certified True Copy.

H-274

7100

Army Form B. 103-2.
Part II.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps In 2 Const Bn Regimental Number 931673

*Substantive Rank _____ Surname Harris Christian Names Jacob Henry

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

Date of Enlistment: 23 Dec 1916

DoF War

To be folded on this line.

Nothing to be written in this margin.

(re26983.) Wt. W. 9583-P.2068. 500,000. 3/19. S. & S. Ltd. E. 4602.

RECORDED
MAY 1919
INDEXED
CORRECT
RECORDS, LONDON.

(A) Report.		(B)	(C)	(D)	(E)	(F)
Date.	From whom received.	Authority of Part II. of Orders.	Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	Place of casualty.	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer.
			Arrived in England "SS Southland"		7.4.17	
14.6.17	2 Con Bn	Pt II 115	Arrived in France	Field	17.5.17	
28.10.17	NSR	CL 2 75	Jura Hoop Champagne	Jura	19.11.17	Myalgia (back)
4.12.17	-	- 80	Disch	-	24.11.17	-
3.3.19	2 Con Bn	Pt II 5	Trans to Eng posted to NSR	Field	14.12.18	
16.12.18	NSRD	- 305	TOS from 2 Con Bn	B' shott	14.12.18	
27.12.18	-	- 313	On Comm to CDI Phyl	-	27.12.18	
19.1.19	-	- 16	SOS to CEF Canada	-	9.1.19	

A. Mander Lieut

For Lt Col Can Records O.M.F.C.

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

7100
M. F. W. 54. (A. F. B. 103.)

500M.—9-16
H. Q. 1772-39-9:0.

Casualty Form—Active Service.

NO. 1 DISTRICT DEPT

Unit, Regiment or Corps.....

Regimental No. *931678* Rank *Pte* Name *Harris, J. H.*

Enlisted (a)..... Terms of Service (a) *D of W.* 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				

10-1-19 From O/S

Taken on strength No. 1 District Dept *London, D.O. 29*

J. A. Herman Lieut
For O/C. NO. 1 DISTRICT DEPT

LONDON, ONT. DISCHARGED FEB - 8 1919 ON DEMOBILIZATION

C. C. C. C.

O. C. Discharge Section, No. 1 D. D.
for

(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, Shoing Smith, etc., etc., also special qualifications in technical Corps duties. [P.T.O.]

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—I.
Part I.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PT 1150 IM 5/18 G.W.P.Co. (34'96)

(1)*Substantive rank *Acting rank [To be entered in pencil to facilitate alteration.] (4) Surname (5) Christain Names (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
---	-----------------------	----------------

(10) Enlistment (b) (12) Service reckons from (date) (14) Any subsequent variations (if any) } of conditions of service }	(11) Engagement (c) (13) Special conditions (if any) of enlistment (d) (Authority) (date)	Initials and Rank of an Officer.
--	---	-------------------------------------

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin (18) Demobilizer (f) (19) Pivotal-man (f) (20) Qualifications (g)	(Place) (Date) or (21) Corps trade and rate	(Signature of Posting Officer)
(22) Extended {		(23) Re-engaged {
(24) Miscellaneous entries:—		

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoing-smith, &c.

Harri's Jacob Henry

931678. 7100

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

17-12-18	H.S.R.D.	305.	T.O.S. attached to 2nd C.C.D. for 13 shots		14-12-18	
12-2-19	A.A.G.		2nd Lt. 666 (Col) on trans to Gen Record List		12-2-19	Cdw Sect 9112 3rd Ech Pt II 03 d/12-2-19
"	"		To Gen Record List on trans from 666 (Col)		13-2-19	Cdw Sect 9112 3rd Ech Pt II 01 d/14-2-19
9-2-19	15a Gen		Exostosis Rt Femur To England		9-2-19	3034 N 7170
3-3-19	5a a.g.		Entry Pt II 0.12 d/14 7/19 cancelled Proceeded to England		18-2-19	14 (R) P. J. K. 3-2 Pt II 0.17 d/14 7/19
27th. 12. 18	NSRD	Do 313.	d to 605 Rhyt.	Pre Bishop.	14-12-18	C. S. Howell Lieut. for Lt. Col., AAG., Casualty Section
19-1-19	"	" 16.	So to 687 in Gen.	"	9-19	2-12-18

W. Turner

Nothing to be written in this margin.

7100

J.P. Rank _____ Name **HARRIS, Jacob Henry** Reg'l No. **931678.**
 Unit No2. Const Bn. _____ If in perm. Corps }
 What Unit? } Married or Single **Married.**
 Place and Date of Enlistment **Chatham. 23rd. Dec. 1916.** Place of Birth **Chatham. Kent. Co. Ont.**
 Name and Address, Next-of-Kin **Mary Elizabeth Harris.**
WINDSOR. ONT. Relationship **Wife.**

Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____
 Category **OR CAN**

Discrepancy

Discharge, Date and Place _____ Reason _____ Character _____

H. W. V., Ld.-9:46-16.

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.				
C		Arrived in England "ss Southland"		7-4-17	<i>Curwicz</i>
14-6-17	2 nd Con. Bn	Arrived in France	Field	14-5-17	PL 20 115.
28-11-17	NSR	Jura Hosp. Champagnois	Jura	19-11-17	CL ^a 75 (Myalgia Back)
4-12-17	(2 nd Con) Dischd			24-11-17	CL ^a 80 (✓ ✓)
16-12-18	NSRD	TOS. from 2 nd Decoy	PK6	14-12-18	- 305
27-12-18	N.S.R.D	O/C to C.D.D. Rhyl	-	27-12-18	- 313
19 JAN. 1919	NSRD	SOS to CEF in	PK		Bshott
		CANADA			19 JAN 1919 PT2DO 16
3-3-19	2 nd Con. Bn.	Went to Eng & posted to N.S.R.D.	"	4 th	14 1/2 18 - 5

A.F.B. 103 CHECKED
29 MAY 1919

7100

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. 931678 Rank Pte. Surname Harris
(Given name in full)

Jacob Henry

Unit or Corps 1. D. D. Birthplace Chatham, Ont.

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

1. GENERAL DESCRIPTION:

Physique Good Weight 162 lbs. Height 5 ft. 8 1/4 in. Colour of Eyes Brown

Nutrition Good

Pulse 80

Condition of arteries Good

Vision Rt. 20x20 Left 20x20

Hearing (conversational voice) Rt. 21x ft.

Left 21x ft.

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

Opinion as to general health and physical condition Good, Category A2.

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 Yes

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.

Had LaGrippe in Feb. 1918, in hospital 2 weeks, no disability.
No disability due to service.

7100

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date SignedM.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

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

THIS SECTION FOR USE IN CANADA—

Examined at.....*London*.....(Canada)

Date*Feb 5 1919*..... Signed*[Signature]*.....M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature*[Signature]*.....

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

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

ORIGINAL 931678 7100
MEDICAL HISTORY SHEET

Surname Harris Christian Name Jacob Henry

Examined { on 23rd. day of December 1916.
at Chatham, Ont.

Approved by Dau Murray
Rank Capt M.O.

Birthplace { City or Town Chatham, Ont.
County Kent, County

Apparent age 22 Yrs. 6Mo.

Trade or occupation Laborer

Height 5 feet 7 1/2 Inches

Weight 156 lbs.

Chest measurement { Minimum 33 inches
Maximum expansion 35 1/2 inches

Physical development

Small-pox Marks

Vaccination Marks { Arm Right Left
Number

When Vaccinated last

(a) Marks indicating congenial 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.
Date	Result	VACCINATIONS
<u>17/2/12</u>	<u>Y.S.S.</u>	M.O.
		M.O.
		M.O.
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>24/1/17</u>	<u>Y.S.S.</u>	<u>E.E. Shepley</u> M.O.
<u>4/4/17</u>	<u>Y.S.S.</u>	<u>Dau Murray</u> M.O.
<u>24/4/17</u>	<u>Y.S.S.</u>	<u>Dau Murray</u> M.O.

Enlisted on 23rd. day of December 1916 at Chatham, Ont.

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>No. 2 Construction</u> <u>Path. C.E.F.</u>	<u>931678</u>		<u>23/12/16</u>
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Windsor, Ont.</u> <u>S.A. Buntz</u> Major, C. A. M. E.	<u>FEB 22 1917</u>	<u>on enlistment</u> <u>Y.S.S.</u> Major, C. A. M. E.	<u>Fit</u> <u>W.F. Beasley</u> <u>kins and</u>

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 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 *Pte* Name *Harris* Surname *J.H.*
Unit or Corps *2nd Cont Bn* (If a soldier) Regt. No. *931678*
Born at *Chatham, Ont* on date *5 June, 1895*
Signature (for identification) *J.H. Harris*

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

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe. *no*

Weight *195* lbs.
Height *5.8* ins.

2. NUTRITION AND DIATHESIS ?

normal

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 ?

normal

4. RESPIRATORY SYSTEM.

normal

5. HEART ?

Abnormal Sounds? *no*
Abnormal Size? *no*
Pulse Rate? *80* Intermittence or irregularity? *no*

6. ARTERIES.—Any hardening?

no

7. DIGESTIVE SYSTEM ?

normal

8. GENITO-URINARY SYSTEM ?

normal

Urinalysis—s.g. ? *1.024* Reaction ? *ac* Albumen ? *no* Sugar ? *no*

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

normal

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

no

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

good

Examined at *Park Kimmel* Signed *J. H. Harris* M.O.
Date *29.12.15* Signed *W. J. ...* M.O.

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.

Special attention upon leaving the service

of the

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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 Bn. C.E.F.**

(2) Regimental Number..... **931678**

(3) Full Name of Soldier..... **Jacob Henry David**

(4) Place of Birth..... **Chatham Ont.**

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

(6) If married, state,
 (a) Full name of your wife..... **Mrs. Mary Elizabeth David**

(b) Present Postal Address..... **39 Turk St., Chatham Ont.**

(7) Are you a widower?..... **No**

(8) Have you any children?..... **No**

If so, give number of boys and girls..... **X**

Also their names and ages..... **X**

(9) Is your Father alive? Yes

If so, state name and address X

(10) Is your Mother alive? Yes

If so, state name and address Mrs Roxey ~~Grant~~ Grant
39 Rue St. Charles Ant

(11) If your Mother is a widow (Remarried)

Are you her sole support, or not? X

(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.

X

(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.

X

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

Yes

(15) Are you insured? No

If so, in what Company? X

Have you made arrangements for payment of your Insurance premium? X

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



Date.....

Arthur Carr

Lieut-Col.
No. 2 Construction Batt'n. C. E. F.
Officer Commanding.

102a.142

LAST PAY CERTIFICATE

Regt.No. 931678 Rank *Plt.* Name *Harris Jacob Henry*
Corps *n 2R* who was *Discharged*
on *8²/₁₉* to

The following is a statement of the account of the above named
from *1²/₁₉* to *8²/₁₉*

Bal Dr	from mon. of		Bal. Cr.	from mon. of	<i>Jan</i>	<i>23</i>	<i>70</i>
	from L.P.C.			from L.P.C.			
ASSIGNED PAY:		<i>4 00</i>	Regt. Pay	<i>8</i> dys. @ \$ <i>1</i>		<i>8</i>	<i>00</i>
<i>24440</i>			F'ld. All.	<i>8</i> dys. @ \$ <i>10</i>		<i>80</i>	
SEPARATION ALLOWANCE:		<i>8 00</i>	SEPARATION ALLOWANCE:			<i>8</i>	<i>00</i>
OTHER CHARGES:			OTHER CREDITS:				
			Clothing Allowance			<i>35</i>	<i>00</i>
PAYMENTS:		<i>63 50</i>	Subsistence,				
<i>24441</i>			Bal. Dr. (to be deducted)				
Bal. Credit (to be pd.)			(from soldier \$)				
<i>PDP</i>		<i>75 50</i>	(from Dependent \$)			<i>75</i>	<i>50</i>

SEPARATION ALLOWANCE	ASSIGNED PAY	VICTORY BOND
at \$ <i>30</i> per month	at \$ <i>15</i> per month	Subscribed \$
has been paid to <i>8²/₁₉</i>	has been paid to <i>8²/₁₉</i>	Pd. by other
by this unit.	by this unit.	Units <i>mi</i>
		Pd. by this
		Unit \$

Dependent or Beneficiary: *Mrs Mary Elizabeth Harris (wife)*
Address: *291 Wellington St. Chatham Ont.*

REMARKS: *19038 Discharged. 8²/₁₉.*
On Denob.
Date of Enlistment *23¹/₇₆*
If married and if Separation Allowance card submitted

I have carefully examined this statement of account and find it to be a correct extract from the Paylist of this Unit.

Date:
London, Ontario.
J. D. Patterson Captain.
Paymaster No. 1 District Depot.

STATE OF CALIFORNIA

1901

1902

1903

1904

1905

1906

And further in pursuance of the report of the State Auditor

to

the

<p>1901</p> <p>1902</p> <p>1903</p> <p>1904</p> <p>1905</p> <p>1906</p>	<p>1901</p> <p>1902</p> <p>1903</p> <p>1904</p> <p>1905</p> <p>1906</p>	<p>1901</p> <p>1902</p> <p>1903</p> <p>1904</p> <p>1905</p> <p>1906</p>
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<p>1901</p> <p>1902</p> <p>1903</p> <p>1904</p> <p>1905</p> <p>1906</p>	<p>1901</p> <p>1902</p> <p>1903</p> <p>1904</p> <p>1905</p> <p>1906</p>	<p>1901</p> <p>1902</p> <p>1903</p> <p>1904</p> <p>1905</p> <p>1906</p>
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Department of the State Auditor

San Francisco, California

Approved: _____

State Auditor

1906

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

HARRIS

M.D. J.H.

REGIMENT

2 Const

RANK

Ote

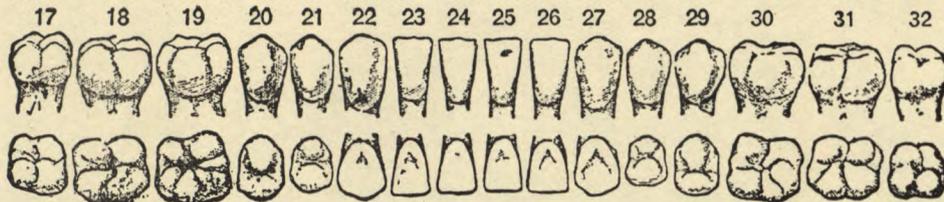
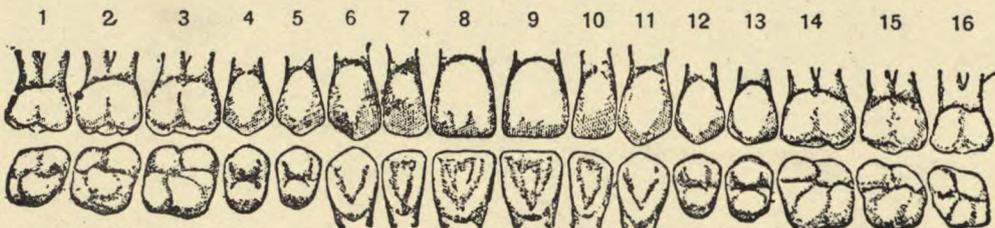
No.

931678

Date of Examination in England

30/12/18

Date of Examination in France



7100

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

18

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

KINMEL PARK, NORTH WALES.

Signature of Dental Officer

[Handwritten signature]

M.D.
H.
1914

HAYES
G.E.

3/1/18

F

1111

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

Mary Eliz. Harris wife
PAYMENTS.

Name of Soldier

Harris, Jacob H.

Pte.

L. L. Job 4503.-Req. 6832.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			<p><i>Reported this in error</i> <i>per folio 10 of Lt H's folio 15-27</i> <i>File 8056 - CANADIAN</i> <i>time with last</i> ASSIGNED PAY AUDITED</p> <p>AUDIT CLERK</p> <p>DATE</p>
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917	N 30687 25	25	
Feb.		N 32243 20	20	<i>" " " 12 3/4 h.</i>
March		<i>P. 38723</i>	<i>36</i>	<i>chs per add 20 1/2 h.</i> <i>mailed 19-3-17</i>
April				
May				<i>Dis. 17/2/17 R.O. 13/3/17 to 19</i>
June				
July				<i>36 due to close</i> <i>Want better address</i>
Aug.				
Sept.				
Oct.				
Nov.		<i>9 M.M.L. N 21455</i>	189	<i>189 83 Peane Pt.</i> <i>Mailed 31/1/17</i>
Dec.				
Jan.	1918	<i>F 2 CANADIAN</i>	20	<i>\$ 245.00</i> <i>JP</i>
Feb.				
March				
April				
May				
June				
July				

\$ 36.00 *<* *5*
20
11.



ACCOUNT CLOSED
DATE..... PER.....

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.				

23-12-16

MILITIA AND DEFENCE

M. F. W. 11.
50m.—6-16.
H. Q. 177-39-513.

SEPARATION ALLOWANCE

Name *Mary Eliz. Harris,*Name of Soldier *Harris, Jacob H.*Address ~~*Mercer St.,*~~Regtl. No. *931678**33 Reame St. Windsor, Ont.*Rank *Pte.*~~*59 Kirk St. Chatham.*~~Corps *# 2 Constr. Batten.*Relation to Soldier } *wife*

To what Corps belonging }

wife, child or mother }

when called out }

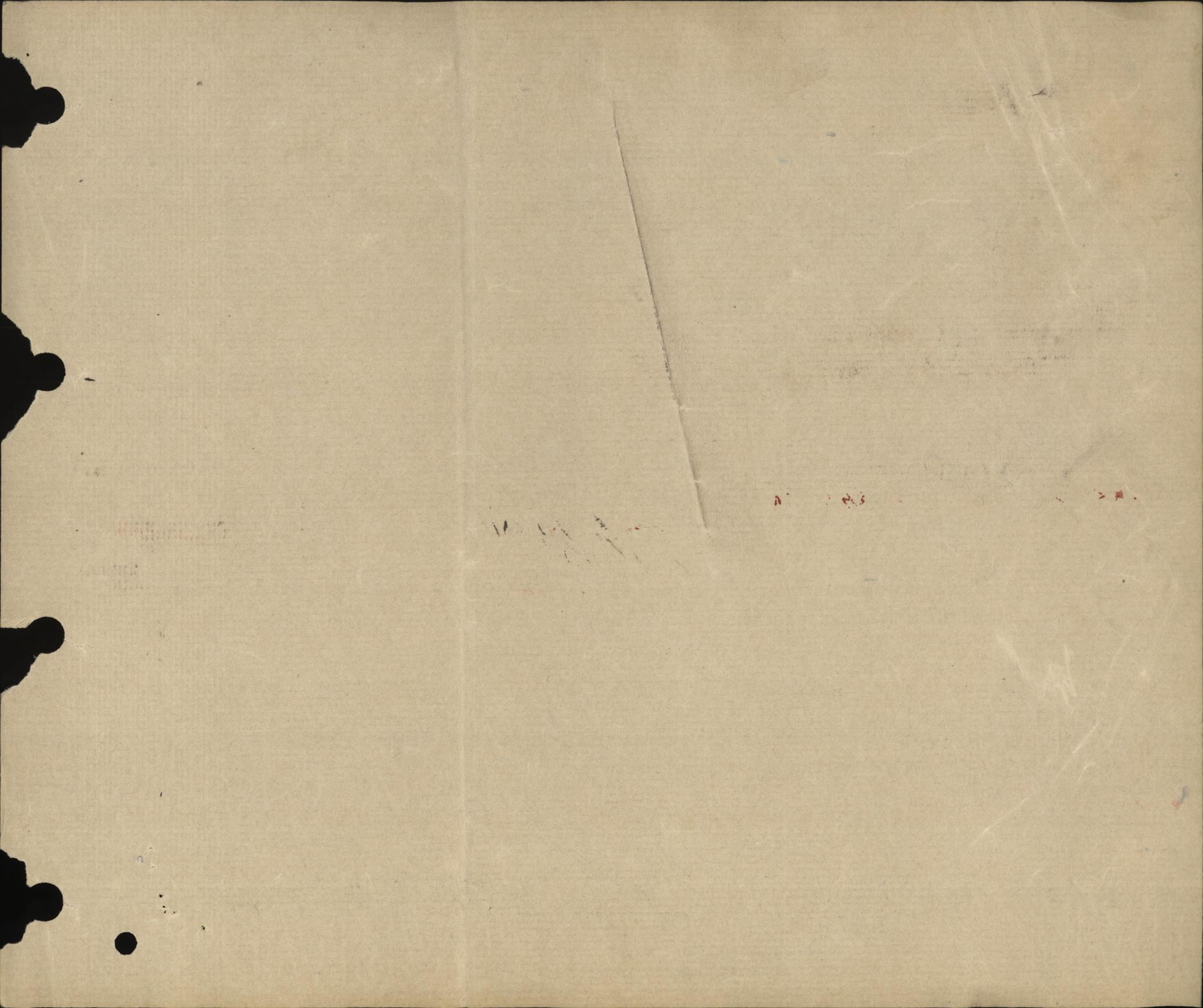
PAYMENTS

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				

*to consolidated***ACCOUNT CLOSED**DATE... CANADIAN
ASSIGNED PAY AUDITED

AUDITOR

DATE



ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.
(Assigned)

Mrs Mary Elizabeth Harris

PAYMENTS.

Wife

Name of Soldier

Harris Jacob Henry

No 931648

Pt No 2 const. 19w.

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>15.00</i>	<i>APR 1917</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>Z 4854</i>	<i>15</i>	
May	<i>15. 8.</i>	<i>H 8687</i>	<i>15</i>	<i>15.00 Cancelled 3/5/17 amt \$8687</i>
June		<i>Z 19264</i>	<i>15</i>	
July		<i>P 22304</i>	<i>15</i>	<i>5.00</i>
Aug.		<i>p 29588</i>	<i>15</i>	<i>\$135.00</i>
Sept.		<i>y 36206</i>	<i>15</i>	<i>to Post Office Chatham Ont 4917</i>
Oct.		<i>N 42164</i>	<i>15</i>	<i>41 Duke St Chatham Ont 707</i>
Nov.		<i>H. 58014</i>	<i>15</i>	<i>29.9.17 to</i>
Dec.		<i>L 59064</i>	<i>15</i>	<i>33 Reane St, Chatham, Ont</i>
Jan.	1918			<i>33 Scare St - Chatham Ont (29.11.17)</i>

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE

CANADIAN
ASSIGNED PAY AUDITED
AUDIT CLERK
DATE *20/6/19*

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

Month.	Year.	Cheque No.	Amnt.	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.				

~~23 Beane St.~~
~~41 Duke St~~
~~Chatham Ont~~
 29.9.17 700

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

To Whom *Mrs Mary Elizabeth Harris*

Wife

By Whom Assigned *Harris Jacob Henry*

Address ~~39 Kirk St~~
~~King St Chatham Ont~~
39 Kirk St

Regtl. No. *931678*

Rank *Pte*

Corps *no 2 const Bn*

Rate *15* APR 1917
33 Beane St Chatham Ont

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				



1001 22
1002 23

151

1003 24
1004 25
1005 26

1006 27

351

10-Ha-142

31

ADD FOR PAYMASTER

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

REGT. No. 931678

RANK P6

NAME (IN FULL) HARRIS James Henry

M. OR S.

NEXT OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.	IF IN P.F. WHAT UNIT?
ADDRESS					W.S.R.	
IS SEPARATION ALLOWANCE PAID	DATE EFFECTIVE				PLACE OF ATTESTATION	TRANSFERRED TO DATE AUTHORITY
TO WHOM PAID	RELATIONSHIP				DATE OF ATTESTATION	TRANSFERRED TO DATE AUTHORITY
ADDRESS					ASSIGNED PAY, \$	DATE EFFECTIVE
	Same as A.P.		Pd to 31-1-19		23 ¹² / ₁₆	15
					PAYABLE TO	RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS
					Mrs Mary Elizabeth Harris wife	
					ADDRESS	
					291 Wellington St. Chatham Ont.	34 Kirk Street, Chatham Ontario. 17/9/19.
					STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE	EFFECTIVE
					DISCHARGED	PLACE DATE REASON AUTHORITY IF ENTITLED TO PAY
					London	8 ² / ₁₉ Demob. No 37

MONTH	NO. OF DAYS	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
		RATE	AMOUNT			COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3					DEBIT	CREDIT	
6/19/18	31				3087							15-		30- 487 5-	5487	2400		check by train
7/9/19	31	10	310	1360	4770										2400	2400	23.70	Sub 20'19-5 ² / ₁₆ 29
7/19/19	8	110	880	350	2370							63 00	4 00	5 00	67 50	5 00		350 clothes
				8	8 00													WAR SERVICE GRATUITY
8/2/19			70	20	100							59 50	8		100			W.S.G. 2 year \$310 + S.A. 120
8/3/19			280	120	400													W.M. 120
8/4/19			210	90	300													W.M. 120
8/5/19			140	60	200													W.M. 120
8/6/19			70	30	100													W.M. 120
					400													
					500													
					350													
					120													
					30													

86 921678

Harris, J.H.

1507

DATE	PAY		FIELD ALLOWANCE		WORKING OR SPECIAL PAY		ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS				CASH PAYMENTS				ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS							
	No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE				AMOUNT		No.	DATE	No.	DATE	No.	DATE				No.	DATE				1	2	3	4	CR	DIT	DEBIT
			\$	c.						\$	c.																					
MONTH	PARTICULARS	CR.1	CR.2	PARTICULARS	DR.1	DR.2	DR.3	DR.4	BALANCE																							
	Oct Bal								74.78																							
Nov	P.P.	33	-						15																							
	AR 822. 28 ⁹ / ₁₇ C.F.C.				3	57																										
	" 846 12 ¹⁰ / ₁₇ "				3	57																										
	" 968. 25 ¹⁰ / ₁₇ "				3	57																										
DEC	" "	34	10						15.9760																							
		67	10						20																							
JAN	1918 P.P.	34	10						15																							
	" 1286 23 ¹¹ / ₁₇ 2 Com to the				12	49																										
	" 1429. 21 ¹² / ₁₇ --	34	10						7.14																							
					19	63			15																							
FEB	"	30	80						15																							
	Assigned Pay																															
	" 1852. 24 ¹⁵ / ₁₇ C.F.C.				3	57																										
	" 1595 4/1/18 Jura	30	80						7.14																							
									15																							
MAR	1918	34	10						15																							
	Acc Pay																															
	AR 202. 14 ¹¹ / ₁₈ "				7	14																										
	" 2319. 18 ³ / ₁₈ "	34	10						7.14																							
									114.28																							
									15.110.55																							

150

* Strike out whichever inapplicable.

ASSIGNED PAY.	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.
EFFECTIVE DATE: 1 APR 1917		EFFECTIVE DATE: -	
AMOUNT: 15 ⁰⁰		AMOUNT: -	

NAME: *HARRIS Jacob Henry*
NUMBER: *931678*

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.

*Mrs Mary Elizabeth Harris wife
39 Kirk St. Chatham Ont*

Stopped Effect 1/1/19

PARTICULARS OF RANK OR APPOINTMENT		
AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		<i>Pte.</i>

UNIT AND TRANSFERS

ORIGINAL UNIT: *2 Construction Bn*
DATE ACCOUNT FIRST OPENED: *1 APR 1917*

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T SP'D	UNIT TRANSFERRED TO
			<i>Canada</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
<i>9/12</i>	<i>6585</i>	<i>C.F.C.</i>	<i>466</i>				
<i>18/12</i>	<i>3569</i>	<i>12 R.R.G.</i>	<i>973</i>				

1439 new book #74739 issued 1/12 Sep 1918.

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	<i>1</i>	<i>10</i>		

PARTICULARS OF RENDERING NON-EFFECTIVE

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
<i>MAR</i>	<i>Bal Ford</i>								<i>110 55</i>		
<i>apl</i>	<i>P. Pay</i>	<i>33</i>		<i>b.a.p.</i>				<i>15</i>			
				<i>AR 474 CFC June</i>	<i>357</i>				<i>121 41</i>		
				<i>266 27/4</i>	<i>357</i>						
		<i>33</i>			<i>714</i>			<i>15</i>			
<i>May</i>	<i>P.P.</i>	<i>34 10</i>		<i>b.a.p.</i>				<i>15</i>			
				<i>AR 408 1/5 CFC June</i>	<i>357</i>				<i>133 37</i>		
				<i>422 23/5</i>	<i>357</i>						
		<i>34 10</i>			<i>714</i>			<i>15</i>			
<i>Jun</i>	<i>P.P.</i>	<i>33</i>		<i>b.a.p.</i>				<i>15</i>			
				<i>AR 709 7/6 CFC 5</i>	<i>357</i>				<i>144 23</i>		
				<i>891 27/6</i>	<i>357</i>						
		<i>33</i>			<i>714</i>			<i>15</i>			
<i>July</i>	<i>P.P.</i>	<i>34 10</i>		<i>Can a P</i>				<i>15</i>			
				<i>AR 949 10/7 CFC 5</i>	<i>357</i>				<i>156 19</i>		
				<i>AR 1093 25/7</i>	<i>357</i>						
		<i>34 10</i>			<i>714</i>			<i>15</i>			
<i>Aug</i>	<i>P.P.</i>	<i>34 10</i>		<i>Can a P</i>				<i>15</i>			
				<i>AR 1256 10/8 CFC 5</i>	<i>357</i>				<i>168 15</i>		
				<i>AR 1482 25/8</i>	<i>357</i>						
		<i>34 10</i>			<i>714</i>			<i>15</i>			
<i>Sep</i>	<i>P.P.</i>	<i>33</i>		<i>Can a P</i>				<i>15</i>			
				<i>CP 3187 9/9 London</i>	<i>5840</i>						
				<i>AR 1672 5/9 CFC 5</i>	<i>714</i>						
				<i>CP 33019 12/9 London</i>	<i>973</i>						
				<i>AR 3839 5/9 CFC 5</i>	<i>9733</i>						
		<i>33</i>			<i>17260</i>			<i>15</i>	<i>1355</i>		

CANADIAN ASSIGNED PAY AUDITED
 OK [Signature]
 DATE 20/6/19

at agent

NUMBER 931678

RANK

Pte

NAME

HARRIS, J. H.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
				<i>Ford</i>					1355		
<i>Oct</i>	<i>PP</i>	<i>3410</i>		<i>E.A.P</i>				<i>15</i>			
				<i>MR 2251 12/10 126565</i>	<i>373</i>						
				<i>700 312 14/10/18 80 58 24/10</i>		<i>710</i>			<i>2122</i>		
		<i>3410</i>			<i>373</i>	<i>770</i>		<i>15</i>			
<i>Nov</i>	<i>PP 7112</i>	<i>6710</i>		<i>E.A.P</i>				<i>15</i>			
				<i>MR 2904 26/11 6765</i>	<i>1306</i>						
				<i>E.A.P Dec</i>				<i>15</i>	<i>4526</i>		
				<i>MR 6585 10/12 6431</i>	<i>466</i>						
				<i>3569 18/12 13116</i>	<i>973</i>						
<i>Jan 19</i>	<i>PP</i>	<i>3410</i>		<i>E.A.P</i>				<i>15</i>			
		<i>6710</i>			<i>2745</i>			<i>30</i>	<i>3087</i>		
				<i>S.O.S. to Gen 9/1/19 WARRD. NO 16 19/1/19</i>							

This space to be for numbers

7150

7-12-38

Proceedings on Discharge.

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



No.	931678	
Rank	PRIVATE	
Surname	HARRIS,	
Christian Name	Jacob Henry	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.		
Corps (Squadron, Battery or Company)	2nd Construction Battn. C.O.M.F.	
Date of Discharge	FEB -8 1919 <i>D.6. 58, 7.2.19.</i>	
Place of Discharge	LONDON, ONT.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.		
Age.....24..... years..... months.	<p>Descriptive Marks N I L</p>	
Height.....5..... feet.....7½..... inches.		
Complexion		DARK
Eyes		BROWN
Hair		BLACK
Trade		LABOURER
Intended place of residence (To be given as fully as practicable.)		33 SCANE ST., CHATHAM, ONT.
2. The above-named man is discharged in consequence of ON DEMOBILIZATION		
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.		
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.	3. Conduct and character while in the service have been, according to the records, etc.	
	N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.	
	4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

M. F. B. 218.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

Commanding

8. Certificate to be signed by the Soldier on Discharge

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

(Place) LONDON, ONT. H. H. Harris (Signature of Soldier.)

(Date) FEB -8 1919 G. Pedder (Signature of Witness.)

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

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

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

.....(Signature of Soldier.)

10. Statement of Service.

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

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

11. Confirmation of Discharge.

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

(Place) LONDON, ONT.

(Date) FEB -8 1919

(Signature) E. ... St

Reservations referred to at Para. 8.

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

List of Discharge Documents

[Handwritten signature]

J. H. Harris

<p>Attestation Paper Military Form B-203</p>	<p>Reg. Conduct Sheet Military Form B-204</p>
<p>Proceedings on Discharge H-218</p>	<p>Conduct Sheet H-206 Squadron Battery Company</p>
<p>In the case of recruits who are rejected on final approval, the discharge documents will consist of:</p>	<p>Copies of Convictions by C.P. in M.S.</p>
<p>(1) Proceedings on Discharge.</p>	<p>Medical Report for Inval. B-207</p>
<p>(2) Attestation.</p>	<p>Statement of Man's Account on Transfer and Last Pay Certificate D-217</p>
<p>(3) Medical History Sheet (in the event such having been prepared).</p>	<p>*Only if discharged "Medically unfit."</p>

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

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p>(a) Proceedings on Discharge.</p> <p>(b) Attestation.</p> <p>(c) Medical History Sheet (in the event of such having been prepared.)</p>
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N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

23-12-16

Separation and Assigned Pay Branch

H

3162

Apr 1/17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

22	25 ^{1/2}	30	
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pc 2753
Mo 20829

RATE OF ASSIGNMENT

15			
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PARTICULARS OF SEPARATION ALLOWANCE

No. 931678
 Rank Pte Promoted Reverted Discharge
 Soldier's Name Jacob Henry Harris
 Battalion # 2 Coast Batts
 Beneficiary Mary Eliz Harris
 Relationship Wife
 Address 33 Seave St
 M.F.W. 2554-8-8-18

PARTICULARS OF ASSIGNMENT

Wife
 Name Mrs. Mary Elizabeth Harris
 Address ~~132 King St, Chatham, Ont.~~
~~33 Seave St.~~
 1 85 Mercer St, Windsor Ont
 28^{1/2} 219 McDougal St, Windsor Ont
 21^{3/4} 56 Mercer St Windsor Ont
 15^{1/4} 4 291 Wellington St Chatham, Ont
 M.F.W. 24-1-18

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
1917					8032-6-6.
Dec 31		245	135	380	
Jan 1918	68919	30	15	45	M.R.O. 13271. a. 21 ^{1/8}
Feb	F 70508	25	15	40	M.R.O. 49796. a. 16-12-18
Mar	H. 98536	25	15	40	M.O. 60025-D. 23-1-19 Same
Apr	I 9798	25	15	40	
May	D 5251	25	15	40	
June	a 15809	25	15	40	
July	w. 30750	25	15	40	
Aug	D 30332	25	15	40	
Sept	C 37789	25	15	40	
Oct	E 44665	25	15	40	
Nov	C 52743	25	15	40	
Dec	F. 63222	45	15	60	
1919 Jan	C. 72053	30	15	45	
		600	330	930	

M. F. W. 128
4003-6-17-1772-88-141
L. L. 22320-M. & D. 7983.

M. D. 1
 A/c Closed 31-1-19
 Ret'd per Olympic
 Date 17-1-19 M.F.W. 187 23-1-19
 Closed Willson

CANADIAN
 ASSIGNED PAY AUDITED
 AUDITCERK
 DATE 20/6/19



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

--	--	--	--

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
 4009-6-17-1772-39-1141
 L. L. 22320-M. & D. 1933.