

B. Co.

No. 2 M. D. 1st/ Depot Battalion 2nd. C. O. R. Regiment

Regtl. No. 10.3108964

TRIPPLICATE

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

M.S.A.

(Class ONE.)

1. Surname..... Johnston

2. Christian name..... Arthur Harold

3. Present address..... 12 Isabella St. Toronto Ont.  
828055

4. Military Service Act letter and number.....

5. Date of birth..... July 16th 1895

6. Place of birth..... Fort Rich, Ont.  
(town, township or county and country)

7. Married, widower or single..... Single.

8. Religion..... Methodist

9. Trade or calling..... Farmer

10. Name of next-of-kin..... Arthur C. Johnston

11. Relationship of next-of-kin..... Father

12. Address of next-of-kin..... Clarksberg, Ont. *SW*

13. Whether at present a member of the Active Militia..... No

14. Particulars of previous military or naval service, if any..... None

15. Medical Examination under Military Service Act:—  
(a) Place..... Toronto Ont. (b) Date..... 5th Nov. (c) Category..... A-2

DECLARATION OF RECRUIT

I, Arthur Harold Johnston, do solemnly declare that the above particulars refer to me, and are true.

*Arthur Harold Johnston* (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age..... 22 yrs..... 4 mths.

Height..... 5 ft..... 5 1/2 ins.

Chest measurement } fully expanded..... 36 ins.  
range of expansion..... 3 ins.

Complexion..... med.

Eyes..... brown

Hair..... brown.

Distinctive marks, and marks indicating congenital peculiarities or previous disease.  
Large Tonsils. Vision R.D. 80 L.D. 30. Hearing nose & throat O.K.

*E. W. Clippert* MAJOR  
For O. C. 1st Depot Bn., 2nd C. O. R. Depot Btl.  
Regt.

Place..... Hamilton Ont. Date..... 6th May 1918.

PARTICULARS OF RECRUIT  
DRAFTED UNDER MILITARY SERVICE ACT 1917

(Class)

1. Name of recruit

2. Present address

3. Military service (if any) and number

4. Date of birth

5. Place of birth

6. Married, widower or single

7. Religion

8. Trade or calling

9. Name of next of kin

10. Relationship of next of kin

11. Address of next of kin

12. Whether at present a member of the Active Militia

13. Particulars of previous military or naval service, if any

14. Medical examination under Military Service Act

15. Part (a) (i) (b) (c) (d) (e) (f) (g) (h) (i) (j) (k) (l) (m) (n) (o) (p) (q) (r) (s) (t) (u) (v) (w) (x) (y) (z)

DECLARATION OF RECRUIT

I, the undersigned, do solemnly declare that the above particulars refer to me, and are true.

Signature of Recruit

DESCRIPTION ON CALLING UP

1. Height

2. Weight

3. Chest (fully expanded)

4. Chest (normal)

5. Length of arm

6. Length of hand

7. Length of foot

8. Colour of eyes

9. Colour of hair

10. Colour of skin

11. Colour of complexion

12. Colour of nose

13. Colour of lips

14. Colour of tongue

15. Colour of throat

16. Colour of palate

17. Colour of pharynx

18. Colour of larynx

19. Colour of trachea

20. Colour of bronchi

21. Colour of lungs

22. Colour of pleura

23. Colour of peritoneum

24. Colour of intestines

25. Colour of stomach

26. Colour of liver

27. Colour of spleen

28. Colour of pancreas

29. Colour of gall bladder

30. Colour of bladder

31. Colour of ureters

32. Colour of kidneys

33. Colour of testicles

34. Colour of ovaries

35. Colour of uterus

36. Colour of vagina

37. Colour of cervix

38. Colour of rectum

39. Colour of sigmoid

40. Colour of sigmoid

41. Colour of sigmoid

42. Colour of sigmoid

43. Colour of sigmoid

44. Colour of sigmoid

45. Colour of sigmoid

46. Colour of sigmoid

47. Colour of sigmoid

48. Colour of sigmoid

49. Colour of sigmoid

50. Colour of sigmoid

REGIMENTAL DOCUMENTS

NAME *Johnston Arthur H.*

(Pte) REGT. NO. *3108964* UNIT *1st S.S. 2nd C.O.R.* H. Q. FILE NO.



**CONTENTS**

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505  
REFERENCE

NON-EFFECTIVE BY

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 54 or A.F.B. 103)

TRAINING HISTORY SHEET (M.F.W. 113)

FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)

REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)

COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)

MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)

DENTAL HISTORY SHEET (M.F.B. 465) *cont.*

MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)

MEDICAL EXAMINATION (M.F.W. 129)

TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)

PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)

DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)

LAST PAY CERTIFICATE (M.F.W. 44)

PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)

PARTICULARS OF CHARACTER (A.F.W. 3226)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

*C.D.D.*

*Disp. cont. R 12b*

*cop card*



DEATH

Category

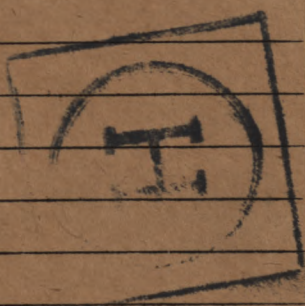
DISCHARGE

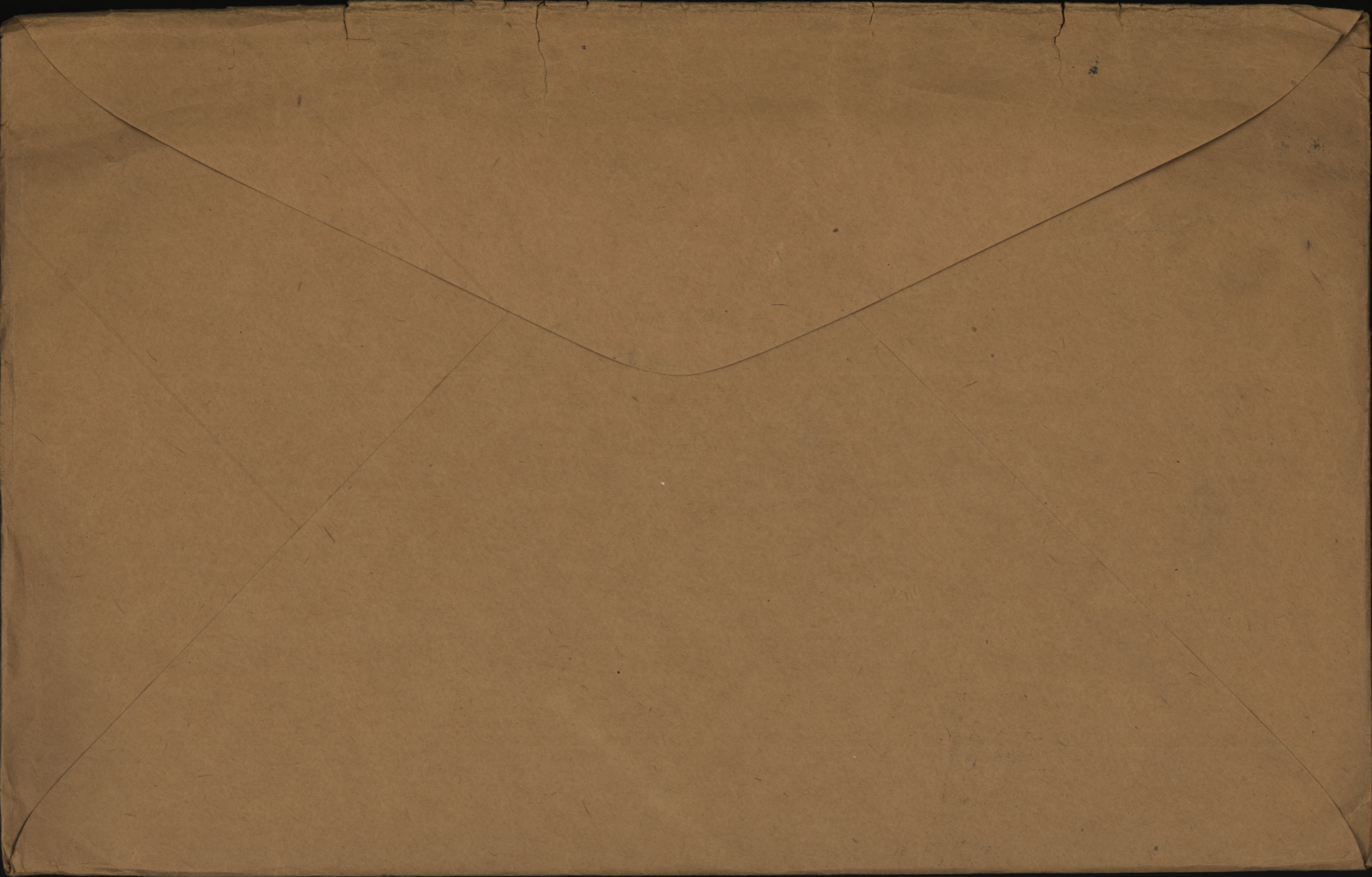
Category

*Demobil*

03715

DESERTION





MGH

Number

3108964

Rank

pte

Surname

JOHNSTON

(A)

Christian Name

Arthur Harold

Units

60R

Theatre of War

England

Date of Service

21-6-18

Remarks

Latest Address

~~R.R. #2 Blackburg~~  
Dunchurch Ontario

Roll No.

A Page 2734

200m.-2-21.M.

DESP DEC 4 1922

REG. NO. 215083

NAME.

*Johnston Arthur Harold*

RANK.

*Pvt.*

REC. FILE.

*"D" 2 4*

No.

*3108964*

T.O.S. *May 6 1918*

CORPS.

*1st Dep. Br.*

D.O. Part II No *127*

BIRTH

ENLISTMENT, PLACE.

*Canada, Fort Rich, Ont.*

DATE.

*July 16<sup>th</sup> 1895*

*Enlistment*

DISCHARGE, PLACE.

*Hamilton, Ont.*

DATE.

*May 6<sup>th</sup> 1918.*

REASON.

ADDRESS ON DISCHARGE.

*Sol Dis 17-9-19  
Demit  
auth 50263 of 20-9-19  
2 DD.*

DOCUMENTS.

NEXT OF KIN

*Johnston, Arthur C.*

RELATIONSHIP

*Father*

ADDRESS

*Clarksburg Ont.*

*P/C. 14-9-19 407 Pte.  
14.*

*o/s. 9-6-18.  $\frac{1272}{22}$ .*

CHARGED OUT

RETURNED

CHARGED OUT

RETURNED

TO

DATE

BY

RECEIVED  
BY

DATE

TO

DATE

BY

RECEIVED  
BY

DATE





Reg. No. <b>3108964</b>	Rank <i>Ho</i>	Surname <b>JOHNSTON</b>	Category <i>2</i>	Dentally Unfit.
Christian Names (1) <i>Arthur</i>		(2) <i>Harold</i>	(3)	Date

Place of Enlistment: <i>Hamilton</i>	Date of <b>6.5.18</b>	Taken on from <i>Canada</i>	Religion <i>Method</i>	Inoculations <i>29.5.18</i>	Company <i>7/9</i>
Province: <i>Ontario</i>	Age on <i>22</i>	Date <i>21.6.18</i>		Vaccination <i>23.5.18</i>	

On Command.....	Hospital.....	Permanent Cadre Date taken on	Employed as
Date Proceeding	Date Admitted		

Record of Overseas Service:	Profession or Trade (Civil) <i>Farmer</i>
Reason for Return:	Transferred or Posted to Date.....

Married or Single ..... <i>Single</i>	<b>LEAVE.</b>			
Address of Next of Kin <i>Arthur C. Johnston Ford Rich, Ontario Canada</i>	No. of Pass Issued.	FROM.	To.	Free Transportation.
	<i>Quitting</i>	<i>9-8-18.</i>	<i>14-8-18</i>	<i>Yes</i>
		<i>20-12-18</i>	<i>27-12-18</i>	<i>Yes</i>



CANADIAN EXPEDITIONARY FORCE  
DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 3108964 (Rank) Pvt

Name (in full) JOHNSTON Arthur Harold enlisted in  
the 1st Depot Bn 2nd C.O. Bn

CANADIAN EXPEDITIONARY FORCE at Hamilton Ont on the 6<sup>th</sup>  
day of May 1918

HE served in the U.K. with the C.O.R.D

Demobilization.

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

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

Age 24 yrs

Marks or Scars

Height 5'5 3/4

Complexion Medium

Vacc mark left arm

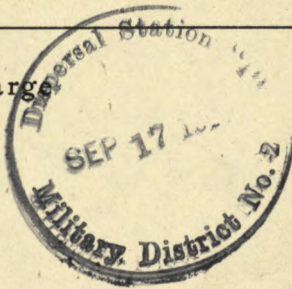
Eyes Brown

Hair Brown

A. H. Johnston  
Signature of Soldier.

Stuck  
Issuing Officer.

Date of Discharge



For O. C. No. 2 District Depot.

Rank

Date ..... 19...

SEP 17 1919

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.



*[Faint, illegible handwriting, possibly bleed-through from the reverse side of the page.]*

*[Handwritten signature or name in dark ink, located in the lower right quadrant.]*

*[Faint, illegible text at the bottom of the page, likely bleed-through.]*

# 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. 3108964 Rank Pte. Surname JOHNSTON  
(Given name in full)  
 ..... A ..... H .....  
 Unit or Corps 2nd COY Birthplace Ont

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

**1. GENERAL DESCRIPTION:**

Physique Good Weight 152 lbs. Height 5 ft. 7 in. Colour of Eyes blue  
 Nutrition Good  
 Pulse 76  
 Condition of arteries Normal  
 Vision Rt. 6/12 Left 6/12  
 Hearing (conversational voice) Rt. 20 ft.  
 Left 20 ft.

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

V. m. Reflans

Opinion as to general health and physical condition Good

**2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)**

Nervous System No Genito Urinary System No Cardio-Vascular System No  
 Special Senses No Integumentary System No Respiratory System No  
 Disturbance of mentality No Muscular System No Digestive System No  
 Osseous and Joint System No Any other general condition No

**3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.**

No M. H. S. or C. S.

**EXAMINATIONS.**

**THIS SECTION FOR USE OVERSEAS—**

Examined at Wetter (Overseas)

Date 14/8/19

Signed [Signature] M.O.

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

Signature [Signature]

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

**THIS SECTION FOR USE IN CANADA—**

Examined at..... (Canada)

Date .....

Signed ..... M.O.

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

Signature .....

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

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

Chart D H 9 10-48912-6-10

[OVER]

R

# CANADIAN ARMY DENTAL CORPS, O.M.F.C. DENTAL CERTIFICATE FOR DEMOBILIZATION

1

## DIRECTIONS TO DENTAL OFFICERS

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

JOHNSTON Arthur Harold

REGIMENT

6000

RANK

Pte

No.

3108964

Date of Examination in England

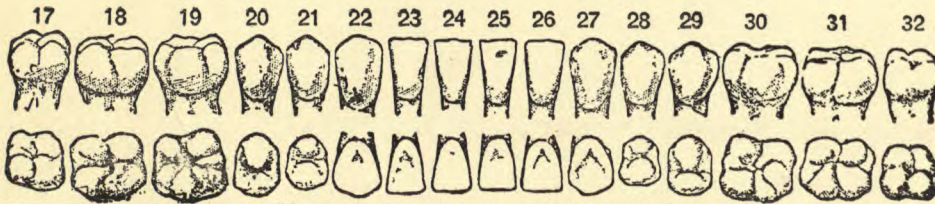
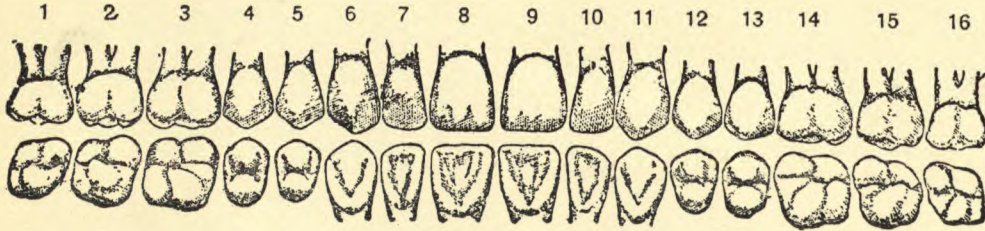
14/79

Date of Examination in France

1. This form will be made out for each individual at the time of Demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



### PRESENT DENTAL REQUIREMENTS

1. FILLINGS

4

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(a) Full Upper

(b) Part Upper

(c) Full Lower

(d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

No

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada

(b) In England

(c) In France

Yes

Signature of Dental Officer

R. Crosby Capt

JOHNSTON  
1877



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

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

350M.—5-16

H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps .....

Regimental No. 3108964 Rank Pte Name Johnston, Arthur Harold  
C. E. F.

Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....

Date of promotion to } Date of appointment } Numerical position on }  
 present rank } to lance rank } 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				
St	3 10 1919 17 1919	O. S. T. O. S. No. 2 DISTRICT DEPOT, TORONTO S.O.S. (DISCHARGED FROM H. M. S.) No. 2. DIS. DEPOT,		1919	PART II D. O. 263 PART II D. O. 263  <i>Sturckell</i> Captain, For O. C. No. 2 District Depot.

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



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. *1<sup>st</sup> Depot Bn. 2<sup>nd</sup> C. O. R.*

Regimental No. *D. 3108964* Rank *Pte* Name *Johnston Arthur Harold*

Enlisted (a) *5/7/18* Terms of Service (a) *6 mths* Service reckons from (a) *5/7/18*

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) *Summer*

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				
		<i>Embarked Canada</i>		<i>JUN -3 1918</i>	<i>H.M.S. "Garrand"</i>
		<i>Disembarked London</i>	<i>21.6.18</i>		<i>E. G. Litchin Major O.C. Dr 44</i>
<i>14.7.18</i>	<i>8<sup>th</sup> Res.</i>	<i>2.O.S. from Canada</i>	<i>Witley</i>	<i>21.6.18</i>	<i>DO-195.</i>
<i>31.3.19</i>	<i>- - -</i>	<i>Sol. to 2<sup>nd</sup> Coy Remaining on command to # 2 Bnt of m.c.a.</i>	<i>Witley</i>	<i>31.3.19</i>	<i>DO 90.</i>
<i>1/8/19</i>	<i>N Wing</i>	<i>200 N Wing par 2<sup>nd</sup> Coy Bnt Witley</i>	<i>Witley</i>	<i>25/7/19</i>	<i>F. Whiston Plt 95</i>

(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.

Casualty Form - Active Service

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
12/8/19	N Wing	S of N Wing to 2nd Lt OAK	Witley	8/8/19	PTD 102  .....Capt, Officer i/c Records, "N" Wing, C.C.C.

# 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.

Forms/B. 103/8

HWV(R1460)

3/19 100,000

W10416—P2151

(6 28 19)

(1)*Substantive rank *Acting rank *(To be entered in pencil to facilitate alteration.) (4) Surname <b>JOHNSTON</b> (5) Christian Names <b>Arthur Harold.</b> (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin ( <i>vide</i> A.C.I. 578 of 1918) (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.  <div style="font-size: 2em; font-family: cursive;">3108964</div>
--	-----------------------	--

(10) Enlistment (b) (12) Service reckons from ( <i>date</i> ) (14) Any subsequent variations (if any) } of conditions of service	(11) Engagement (c) (13) Special conditions (if any) of enlistment ( <i>d</i> )
(Authority)	( <i>date</i> )

Initials and Rank of  
an Officer.

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

(17) Next of Kin (18) Demobilizer ( <i>f</i> ) (19) Pivotal-man ( <i>f</i> ) (20) Qualifications ( <i>y</i> )	(Place) (Date) or (21) Corps trade and rate
(22) Extended {	(23) Re-engaged {
(24) Miscellaneous entries:—	

(Signature of  
Posting Officer)

**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, Shoehing-smith, &c.



B. Co. No. 3108964

ORIGINAL

M.S.A. 15.

MILITARY SERVICE ACT, 1917.

4 MEDICAL HISTORY SHEET.

IMPORTANT.—If the man's name does not appear upon the schedule of men reporting for service, or if he has not made an application for exemption or a report for service, or, although having made one, he does not know the number, he will be instructed that the copy of this medical history sheet (which will be handed to him) must be attached by him to a report for service or claim for exemption which he may make on application to any Postmaster in Canada, or be sent by him after he has noted upon it the number on the receipt he obtained from the Postmaster to a Registrar or Deputy Registrar under the Military Service Act. In any event the duplicate medical history sheet will be sent by the Medical Board to the District Officer Commanding unless instructions have been given by the latter to forward it direct to a Registrar or Deputy Registrar.

1. Surname Johnston Christian name Arthur Harold  
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule 8.28055  
3. Consecutive number on schedule of men reporting for service (if he appears on it) \_\_\_\_\_  
4. Address (including street and number, if any) 12 Isabella Street, Toronto, Ont.

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 5 day of Nov. 1917, by the undersigned medical board sitting at Toronto, Ont.

5. Age as stated 22 Years 4 Months. 6. Apparent age 22 Years 4 Months  
7. Height 5 Feet 5 3/4 Inches. 8. Weight 138 Pounds.  
9. Chest measurement { Minimum 33 Ins. 10. Complexion Med. { Eyes Brown  
Maximum 36 Ins. { Hair Brown  
11. Physical development Fair { Good Fair Poor 12. Smallpox marks Nil  
13. Number of vaccination marks { Right arm Nil 14. When vaccinated last Nil  
Left arm Nil  
15. Distinctive marks and marks indicating congenital peculiarities or previous disease Nil

Large Tonsils

16. Slight defects but not sufficient to cause rejection Nil

The man denies having had { Rheumatism Tuberculosis Syphilis We find no evidence of past { Rheumatism Tuberculosis Syphilis Eyesight RD 80 LD 30 Hearing R Normal L Normal Nose Normal Throat ---

We have examined the above named man in accordance with the C. E. F. Regulations for medical examinations, and he is placed in Category

**A2**

NO NO

Earl H. Carey President. Wm. Cooke Member. A. Mulholland Member.

Date	Result	VACCINATIONS	Date	Result	ANTI-TYBHOID INOCULATIONS, ETC.
<u>23/5/18</u>		<u>J.P.R. Williams</u> M.O.	<u>23/5/18</u>		<u>J.P.R. Williams</u> M.O.
		M.O.	<u>25/5/18</u>		<u>J.P.R. Williams</u> M.O.
		M.O.	<u>29-5-18</u>		<u>J.P.R. Williams</u> M.O.

**DUPLICATE FROM MEDICAL BOARD**

Joined \_\_\_\_\_ day of \_\_\_\_\_ 191 at \_\_\_\_\_

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment				
Transferred to.....				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION	DATE	DISEASE	RESULT

N.B.—This sheet is 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.

Signature of Man Arthur Harold Johnston









CR. Rank Name JOHNSTON, Arthur Harold. ✓ Reg'l No. 3108964. ✓  
 44th Ift 1st En 2nd C, O, R Unit If in perm. Corps, }  
 What Unit? } Married or Single Single. ✓  
 Place and Date of Enlistment Hamilton, May 6th. 1918. ✓ Place of Birth Ford Rich, Ont. ✓  
 Name and Address, Next-of-Kin Arthur C. Johnston, ✓  
 Clarksborg, Ont., Canada Relationship Father. ✓  
 Assigned Pay Monthly \$ Payable to Relationship  
 Separation Allowance \$ Payable to Relationship  
 Discharge, Date and Place Reason Character

H/E. R. B. No. 10890  
 File R.L.  
 Category O. B. C. A. B.

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.			
2ND CEN. ONT. REGT.	Arrived in England	21-6-18	S/F CASSANDRA	
14. 7. 18	8th, Res T. O, S, from CANADA	WITLEY.	21. 6-18	DO 190
7. 4. 19	2 CORP S.O.S. from 8 Res on loan to No 2 Y.M.C.A. Witley	Witley	31. 3. 19	DO 79 (8 Res DO 90 / 31. 3. 19)
31. 3. 19	8 Res. On loan to No 2 Y.M.C.A. Witley		21. 3. 19	DO 90
28. 7. 19	2 CORP. Ceases on/comid Y.M.C.A. S.O.S. to N' Wing.	Witley	25. 7. 19	DO 151 (N' Wing Lt. No. 95 / 21. 8. 19)
8-8-19	2 CORP. TOS & att'd to N. Wing.		8-8-19	DO 157
12-8-19	N' Wing S.O.S. to 2nd CORP	" "	8-8-19	- 102
13-8-19	R" of TOS pend R.T.C.	" "	12-8-19	- 107 2nd CORP S.O.S. DO 159 13-8-19

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.				
12-4-14	R. M. W.	103 - I - 74 lost in Canada	Neth.	6-9-19 6-9-14	50133.

ASSIGNED PAY: ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.

NAME: **JOHNSTON Arthur Harold**

EFFECTIVE DATE: **1-3-18** EFFECTIVE DATE: **1-3-18**

NUMBER: **D. 3108964**

AMOUNT: **\$ 15.** AMOUNT: **---**

PARTICULARS OF RANK OR APPOINTMENT

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.

**Miss Zella Johnston**  
**P.O. #2 Clarksbury Ont**  
**(Sister - H. Roll)**

AUTHORITY: **L.P.C. Man.** DATE EFFECTIVE: **---** RANK OR APPOINTMENT: **Pt.**

UNIT AND TRANSFERS

ORIGINAL UNIT: **44<sup>th</sup> Dpt. 1<sup>st</sup> Depot Bn 2<sup>nd</sup> L.V.C.**

DATE ACCOUNT FIRST OPENED: **---**

AUTHORITY: **L.P.C. Man.** DATE EFFECTIVE: **---** DATE LEDGER SHEET TSPD: **---** UNIT TRANSFERRED TO: **1<sup>st</sup> Res Bn**

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
<del>11/9/18</del>	<del>1176</del>	<del>R. being</del>	<del>39.93</del>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBSCE ALL'CE
<b>L.P.C. Man.</b>	<b>1</b>	<b>10</b>		

**Job Canada 1/9/19 N.R. 12585 B'shott 12/8/19 Wicly MD-12**

**ledger Bal. C? 43.98**  
**L.P.C. 4.85**  
**18.93**

PARTICULARS OF RENDERING NON-EFFECTIVE: **Note: Assigned pay for month of May 1918 deducted on pay list of Regimental paymaster for that month**

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
	<b>30.5.18 B's balance from Canada</b>								<b>12.95</b>		
<b>July</b>	<b>P.a for June</b>	<b>33</b>		<b>AP for June &amp; July</b>				<b>30</b>			
	<b>" July</b>	<b>34.10</b>		<b>AR 656 8<sup>th</sup> Res Det. 12-7-18</b>	<b>4.80</b>						
				<b>" 3243 " 25-7-18</b>	<b>4.80</b>				<b>40.31</b>		
		<b>67.10</b>			<b>9.74</b>			<b>30</b>			
<b>Aug</b>	<b>P.P.</b>	<b>34.10</b>		<b>AP</b>				<b>15</b>			
				<b>AR 3607 8/8/18 8 Res</b>	<b>38.93</b>						
				<b>" 2-21- 29/7/18</b>	<b>1.42</b>						
				<b>AR 4223- 28/8/18</b>	<b>9.73</b>						
		<b>34.10</b>			<b>50.08</b>			<b>15</b>	<b>9.33</b>		
<b>Sept</b>	<b>P.P.</b>	<b>33</b>		<b>AP</b>				<b>15</b>			
				<b>✓ 4475. 10/9/18</b>	<b>7.30</b>						
				<b>✓ 4881. 26/9/18</b>	<b>7.30</b>				<b>12.73</b>		
<b>Oct</b>	<b>"</b>	<b>33</b>		<b>Q4005. 27 19/9/18</b>	<b>14.60</b>			<b>15</b>			
		<b>34.10</b>		<b>Q45402. 10/10. 8 Res.</b>	<b>1.78</b>						
				<b>H.P.</b>	<b>9.73</b>			<b>15</b>			
				<b>Q45965. 29/10. 8 Res.</b>	<b>9.73</b>						
		<b>34.10</b>			<b>21.24</b>			<b>15</b>	<b>10.59</b>		
<b>Nov</b>	<b>"</b>	<b>33</b>		<b>A.P.</b>				<b>15</b>			
				<b>Q46510. 27/11. 8 Res.</b>	<b>9.73</b>						
				<b>" 6249 14/11</b>	<b>7.20</b>						
<b>Dec</b>	<b>"</b>	<b>34.10</b>		<b>A.P.</b>				<b>15</b>			
				<b>Q47046. 20/12. 8 Res.</b>	<b>19.47</b>						
<b>Jan</b>	<b>✓</b>	<b>34.10</b>		<b>AP</b>				<b>15</b>			
					<b>36.50</b>			<b>45</b>	<b>30.29</b>		
<b>Feb</b>	<b>✓</b>	<b>101.20</b>		<b>AP</b>				<b>15</b>			
		<b>30.80</b>		<b>AR 7455. 10/1/19</b>	<b>9.73</b>						
				<b>Q4005. 889 7/1</b>	<b>36</b>						

COMPILED BY **W. Woodford**

checked by **W. Woodford**

Carried forward

NUMBER D 3108964

RANK

NAME JOHNSTON

*Arthur Harold*

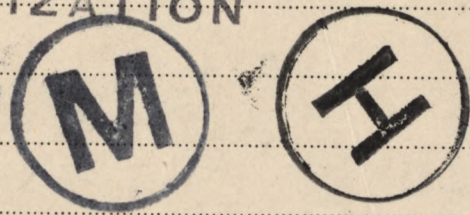

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Feb.	Brought forward	3080			1009			15	3029		
				A.R. 8030. 12/2/19 8 Res. Bn.	1460						
				✓ 8215. 26/12 ✓	973						
Mar	P.P	3410		A.P.				15			
				7 Res. 1/3. 8 Res.	973						
		6490			4415			30	2104		
Apr		33		A.P.				15	3904		
				A.R. 9102. 24-3-19. 8 Res.	973				2931		
				" 187. 16-4-19. N Wing.	730				2201		
May		3410		A.P.	1460			15	4111		
				A.R. 1709. 13/5/19. ✓	3163				2651		
		6710			3163			30			
June	PP	33		A.P.				15	4451		
				A.R. 196 27-5-19 N Wing (2)	1217				3234		
				3182 11-6-19 (2)	973				2261		
July		3410		A.P.	2190			15	4171		
	93.61	6710			2190			30			
Aug.				A.R. 4930 14/7 N. Wing	973						
				8N 4036 27/6	730				2468		
					1703						
Aug.	P. Pay	3410		C.A.P. Aug.				15	5878		
				11726 Rubble 13/8	3893				485		
		3410			3893			15			

*S.O.S. 6/9/19. S.L. 103.*

41.71  
 34.10  
 75.81  
 32.63  
 43.78 Ledger.  
 38.93  
 4.85 L.P.C.

SHORT FORM.  
PROCEEDINGS ON DISCHARGE.  
(Demobilization.)

O.G. 1  
S.G. 32  
D.A. I

1. No.	<u>3108964</u>	
2. Rank.	<u>Plt</u>	
3. Name.	<u>JOHNSTON Arthur Harold</u>	
4. Unit.	<u>C. O. R. D</u>	
5. Date of Discharge	<u>SEP 17 1919</u>	Place <u>Toronto</u>
6. Reason for Discharge	<u>DEMOBILIZATION</u>	
		
7. Authority.	<u>No. 2 District Depot, Part II, D.O. No. 263</u>	
8. Proposed Residence after Discharge	<u>R. R. 2 Clarksburg Ont</u>	
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.?	
	<u>Arthur Harold Johnston</u>	
	Signature of Soldier.	
10.	CONFIRMATION.	
	The discharge of the above named man is hereby confirmed.	
	Place	
	Date	
		<u>Churches</u>
	Signature	Capt. and Adjutant
		For O. C. No. 2 District Depot.
		(O. C. Discharging Unit.)

O.C. 1  
S.C. 23  
D.A. 2

SHORT FORM  
PROCEEDINGS ON DISCHARGE  
(Demobilization)

1	3108964
2	PT
3	TOWNSTON
4	CORP
5	SEP 1 1919
6	REASON FOR DISCHARGE DEMORILIZATION
7	No 2 District Dept, Part II, D.O. No. 2
8	Proposed Reason for Discharge
9	I hereby acknowledge that at the undated place and date I received my discharge (Certificate to be signed by Soldier)
10	CONFIRMATION The discharge of the above named man is hereby confirmed.



Signature of Soldier





LIST OF DISCHARGE DOCUMENTS

Minutes Form W. 20	Attendance Paper, Triplicate
Minutes Form W. 100	or Particulars of Report
Minutes Form W. 110 or A. B. 1	Field Conduct Sheet
Minutes Form W. 22 or A. B. 100	Executive Form
Minutes Form W. 21	Last Day Certificate
Minutes Form B. 212 or A. W. 100	Certificate that military treatment was discontinued
M. R. 227 A. B. 100 or A. B. 1	Medical History Sheet
Minutes Form B. 100	Proceedings of Medical Board
M. F. W. 122 or D. M. 100	Medical History Blank
Minutes Form H. 100	Medical Report
Minutes Form H. 200	Regimental Conduct Sheet
	Company Conduct Sheet

The following documents are to be prepared and submitted to the Medical Board at the time of discharge:

1. Medical History Sheet  
 2. Field Conduct Sheet  
 3. Executive Form  
 4. Last Day Certificate  
 5. Certificate that military treatment was discontinued  
 6. Medical Report  
 7. Regimental Conduct Sheet  
 8. Company Conduct Sheet

These documents should be submitted to the Medical Board at the time of discharge, and the original copies should be retained by the Medical Board.

Approved: \_\_\_\_\_  
 Date: \_\_\_\_\_

**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.3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851).
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group ..... *B*

Checked by No. .... *[Signature]*

Date. **AUG 30 1919**

MINNEKAHDA 14-9-19.

DISPERSAL "1"

AUDITOR PAYMASTER

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

REGT. No. 3108964

RANK PTE.

NAME (IN FULL)

92042 JOHNSTON, A.H.

M. OR S.

Form fields for NEXT OF KIN, ADDRESS, IS SEPARATION ALLOWANCE PAID?, TO WHOM PAID, ADDRESS.

Form fields for PARTICULARS, EFFECTIVE DATE, AUTHORITY.

Form fields for ORIGINAL UNIT C.E.F., PLACE OF ATTESTATION, DATE OF ATTESTATION, ASSIGNED PAY \$, PAYABLE TO, ADDRESS, STOP PAYMENT FORM, DISCHARGED, PLACE, DATE, REASON, AUTHORITY, IF ENTITLED TO POST DISCHARGE PAYES.

Main accounting table with columns for MONTH, PAY AND F.A., OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS, CASH PAYMENTS, ASSIGNED PAY, REGIMENTAL CHARGES, OTHER CHARGES, TOTAL DEBITS, BALANCE (DEBIT/CREDIT).

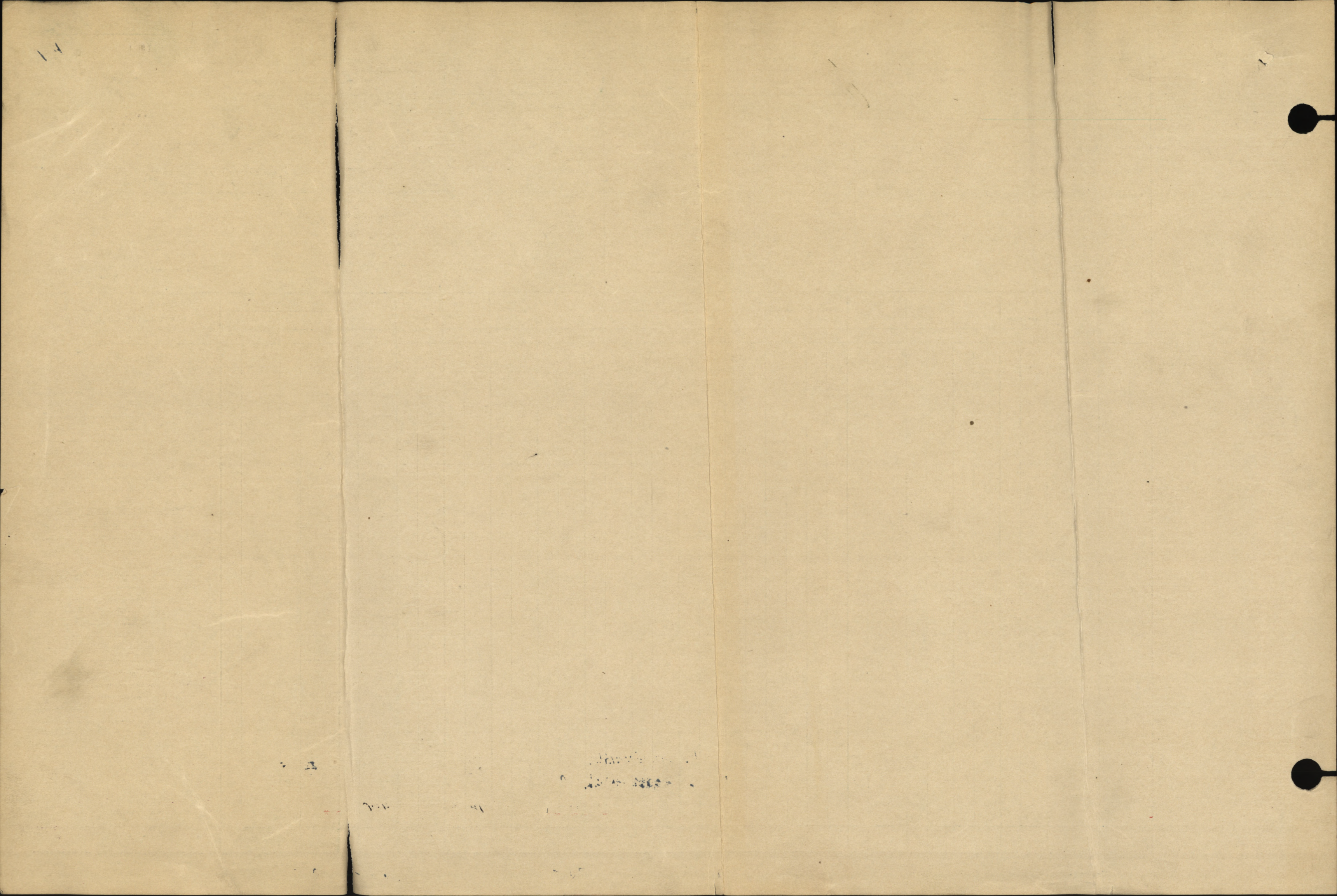
BALANCE FROM PREVIOUS ACCOUNT

T.O.S. 6919 D.O. 263 PARTIULARS OR REMARKS

Credit Balce... Both Alce 1st W.S.G. Both Cheque Boatsman Sept. A.P.

W.S.G. Paid as above 3 days P.A. over and W.S.G. 1st W.S.G. Paid by #2 D.D.

W.S.G. PAID IN FULL CAPTAIN FOR PAYMASTER WAR SERVICE GRATUITY



Date of Enlistment 6/5/18

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

2005

1st June 18

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.   
 Rank   
 Promoted   
 Reverted   
 Discharge   
 Soldier's Name   
 Battalion 1st Depot Bn., 2nd C.O.R 1/3 of 44 Wgt.   
 Beneficiary   
 Relationship   
 Address

Name   
 Address   
 Change of Address   
 1 MISS ZELLA JOHNSTON,   
 2 R.R.#2   
 3 CLARKSBURG, ONT. 15 15.00   
 4 % D 3108964 PTE. ARTHUR HAROLD JOHNSTON   
 FIFTEEN DOLLARS

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
June	V 26949		15	15	✓
July	X 24993		15	15	✓
Aug	H 34694		15	15	✓
Sept	D 43823		15	15	✓
Oct.	J 56183		15	15	✓
Nov.	E 52725		15	15	✓
Dec.	K 65663		15	15	✓
1919 Jan.	F 76174		15	15	✓
Feb.	G 77861		15	15	
Mar	Q 84402		15	15	
April	F 4697		15	15	
May	U 7896		15	15	B.
June	R 9925		15	15	B.
July	2 12070		15	15	✓
Aug	K 13470		15	15	
	U 16410		15	15	
			240	240	

09591 P. 386

A/c Closed 30-9-19  
 Ret'd per Minnelohda  
 Date 14-1-19 M.F.W. 187  
 Closed B. J. Piper 27-9-19

M.R.O. L.P. 193923 (rest) 27/9/19

M. F. W. 128  
 4000x-617-177-38-1141  
 L. L. 22220-M. & D. 7583.

AUDITED

AUTHORITY FOR NEW ACCT. } N.R. M. 102-13-3  
P. C. Cullen 19/6/18

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

20 2 2 2

2

Relationship

3

Address

4

Date

Cheque No.

Amount S/A

Amount A/P

Total

REMARKS

M. F. W. 128.  
400 MC. 47-1772 89-1141  
L. L. 22320-M. & D. 7893.