

ATTESTATION PAPER.

No.

~~No. 2 CONSTRUCTION, B'n. C.E.F.~~

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

731620
ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

Johnson

1. What is your surname?..... Johnson

1a. What are your Christian names?..... James

1b. What is your present address?..... Dresden, Ont

2. In what Town, Township or Parish, and in what Country were you born?..... Elmstead, Ont.

3. What is the name of your next-of-kin?..... Mrs. Martha Johnson

4. What is the address of your next-of-kin?..... Dresden

4a. What is the relationship of your next-of-kin?..... Mother

5. What is the date of your birth?..... March 10th 1891

6. What is your Trade or Calling?..... Laborer

7. Are you married?..... No

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 } Yes
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, James Johnson, 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.

Date Nov 8 1916

James Johnson (Signature of Recruit)

L. P. Young (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, James Johnson, 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.

Date Nov. 8th 1916

James Johnson (Signature of Recruit)

L. P. Young (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 *C. H. Asham* this *8* day of *Nov* 1916

John W. Corvill (Signature of Justice)

Description of Johnson James on Enlistment.

Apparent Age 25 years 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. 8 ins.

Chest measurement. { Girth when fully expanded 37 ins.
Range of expansion 3 ins.

Complexion Dark

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. 5th Nov 1916.

Place. Dresden Ont

[Handwritten Signature]

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.

James Johnson 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.

..... (Signature of Officer)

Date. Nov 13th NOV 13 1916 1916

NAME

JOHNSON, JAMES

REGT

620

UNIT

2nd Const. En. H. Q.

FILE NO.

(S)

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505 REFERENCE

NON-EFFECTIVE BY

- 1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)
- 2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)
- TRAINING HISTORY SHEET (M.F.W. 113)
- 1 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)
- 2 MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)
- 1 DENTAL HISTORY SHEET (M.F.B. 465)
- MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)
- 1 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)
- 1 LAST PAY CERTIFICATE (M.F.W. 44)
- 1 PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)
- PARTICULARS OF CHARACTER (A.F.W. 3226)
- 1 COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)
- 1 m.f.w. 192
- 1 m.f.w. 67
- 1 R 122
- 1 pay card

(M)

MEDICAL RECORDS

(H)

DEATH

Category

DISCHARGE

07523

Category

Demob.

DESERTION

406786



931620

I.D. number
No. d'identification

Johnson

Surname
Nom de famille

James

Given names
Prénoms

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

Location
Lieu

4878



SURNAME.

Johnson

CHRISTIAN NAMES

James

REGL. NO.

931620

RANK

Pto.

UNIT

~~*M. S. Construction*~~

100

FORMER CORPS

Nil.

CARD NO.

✓
S.O.S. No 13207

Demob. 20045.

12.2.19. #100

FOLL.

Bn.

NEXT OF KIN.

NAMES IN FULL

Johnson, Mrs. Martha.

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

Dresden. Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada. Elmstead. Ont.

DATE

Mar. 10th. 1891.

PLACE OF ATTESTATION

Chatham. Ont.

DATE

Nov. 8th. 1916.

98-3-17.

PC. 17-1-19 204 Ph. 30

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

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Labaures.

RELIGION

Methodist.

DESCRIPTION.

APPARENT AGE

25.

YEARS

Not stated

MONTHS

HEIGHT

5.

FEET

8.

INCHES

CHEST MEASUREMENT

37.

INCHES

EXPANSION

3.

INCHES

COMPLEXION

Dark.

EYES

Brown.

HAIR

Black.

DISTINGUISHING MARKS

Not stated.

MEDICAL EXAMINATION.

PLACE

Dresden, Ont.

DATE

Nov. 8th. 1916.

Present Address -

Dresden, Ont.

No. 931620 RANK

Pte.

NAME

Johnson, James

T. O. S. 8-11-16

UNIT

No 2. Construction Battalion

D.O. 76 13-11-16

M. D. 6

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1916 Nov 8.	1916 Nov. 30	✓		
	Dec.	✓		
1917 Jan.	1917 Feb.	✓		
	Mar.	n.		



KSB

Number

931620

Rank

Private

Surname

JOHNSON

Christian Name

James

Units

60 A B C

Theatre of War

France

Date of Service

17-5-17

Remarks

Latest Address

~~Dresden~~ ~~Out-~~

~~125~~ Mercer St

Roll No.

B

Windsor

200m-2-21.M.

Page 18036

Ontario

consider 57565 (last) 11.9.70

REPLACEMENT ON PREPAYMENT

751 Mercer St., Windsor, Ont.

BWM
V.M.S

OCT 14 1970



DEST. CT 21 1922
REGN. NO. *27045-234*

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE 22.11.74

NAME JOHNSON JAMES
NOM

Service No. 931620 ARMY W^W1
Matricule N^o

CPC No.
CCP N^o

WVA No. 296862
AAC N^o

Information Received from:

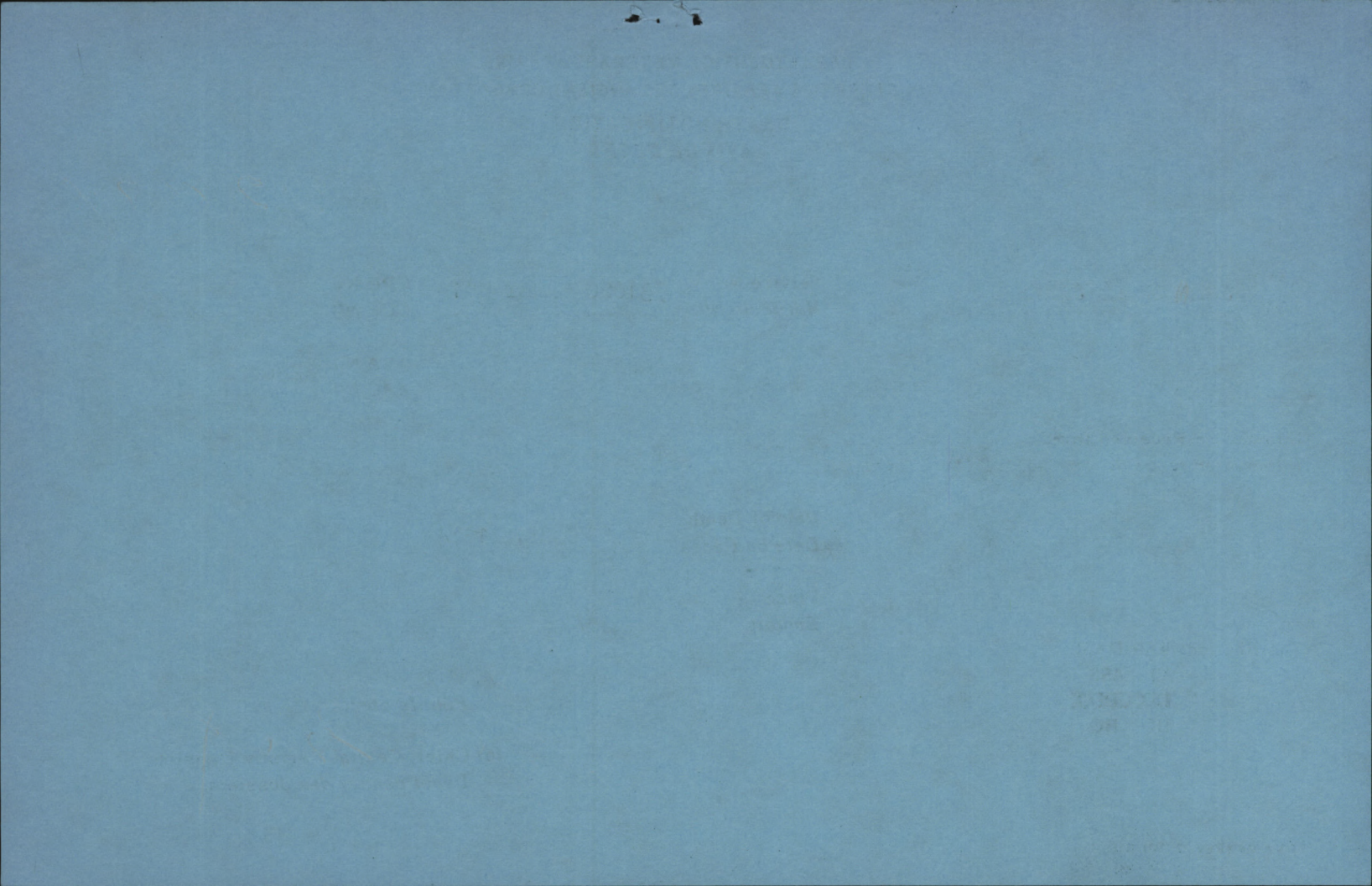
Information reçue de: DVA 93 LONDON DIST

Date of Death 21 AUG 1974
Date du Décès

Place N/S
Endroit

Distribution: WSR-DASG
VI - ASS
~~XXXXXX~~
HO - BC

Pour le chef,
for Chief, Central Registry Division.
Dépôt central des dossiers.



Name **Johnson, James** Rank **Pte** Regtl. No. **931620**

Original unit Present unit **2nd. Const. Bn.** M. or S. Age **27** Religion **Presb** Fyle Depot **1DD-10-J-110** Ref. H.Q. **1-D-30-J-348**

Port, ship and date of arrival **HX Olympic 1779**

Next of kin **Mother Mrs Martha Johnson Dresden Ont**

Address on leave

Address on discharge **Dresden, Ont.**

Transportation issued Yes No Date Character on discharge

Previous occupation **Labourer** Date and place of enlistment **Charlton 11/96**

Diagnosis **N.A.** Date of Medical Boards **10-2-19, London, Ont.**

Date.	Remarks.	Pt. 2 Order No.
T.O.S.		
10-1-19	No. 1 D.D.	
20-1-19	Posted to Cas. Coy. and granted furlough with sub. allowance to 3-2-19.	35

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

Date.

Remarks

Pt. 2 Order No.

13-2-19

Discharged from H. M. S. On demobilization. (P.D.P.)

43

Dresden Ont
use 1

FORM OF WILL.

I, James Johnson (Name in full)
Regimental Number 431620 serving in No. 2 CONSTRUCTION, B'n. C.E.F.
of the Canadian Expeditionary Force, do hereby revoke all former Wills by me
made and declare this to be my last Will.

I bequeath all my real estate unto
My Mother + Father
Mrs Sarah Johnson +
Mrs Martha Johnson
Dresden Ont

Name and Address
of person or
persons to whom
it is to go.

By absolutely, and my personal estate I bequeath to
My Mother + Father
Mrs Sarah Johnson +
Mrs Martha Johnson
Dresden Ont.

Name and Address
of person or
persons to receive
personal estate*
(See note).

**IMPORTANT
NOTE**
This must be Signed
and Dated by
THE SOLDIER
HIMSELF.

this 16 day of March A. D. 191 7

James Johnson Signature of Soldier.

*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence
of us both present at the same time, who in his presence, at his request, and in
the presence of each other have hereunto subscribed our names as Witnesses.

**THE TWO
WITNESSES
MUST
SIGN HERE**

Signature of First Witness Arcil Bennett

Address of Witness Shelburne Ont.

Occupation of Witness Labourer

Signature of Second Witness E. Lionel Cross

Address of Witness St. John's, Trinidad, B.W. I.

Occupation of Witness Journalist

FORM OF WILL

I, the undersigned, of legal age and sound mind, do hereby make this my last will and testament, in and to the effect hereinafter expressed, to wit:

I bequeath all my real estate unto

Name and Address of person or persons to whom bequeathed

John D. Smith, New York, N.Y.

absolutely, and my personal estate I bequeath to

Name and Address of person or persons to whom bequeathed personal estate

John D. Smith, New York, N.Y.

Date

1st day of January, 1901

Signature of testator

John D. Smith

IMPORTANT NOTE: This form is subject to the provisions of the Act of March 22, 1901, Chapter 110, Laws of 1901, and the Act of March 22, 1902, Chapter 110, Laws of 1902.

This form is subject to the provisions of the Act of March 22, 1901, Chapter 110, Laws of 1901, and the Act of March 22, 1902, Chapter 110, Laws of 1902.

Witness my hand and seal this 1st day of January, 1901, at New York, N.Y.

Subscribed and sworn to before me this 1st day of January, 1901, at New York, N.Y.

Notary Public in and for the State of New York

931620

DUPLICATE

To be made out in duplicate.

H.Q. 51-21-23-53

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.

No. 2 CONSTRUCTION, B'n. C.E.F.

(1) Name of Overseas Unit which Soldier joins.....

(2) Regimental Number 931620

(3) Full Name of Soldier Johnson James

(4) Place of Birth Elmstead Ontario

(5) Are you married, or not? No

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

(b) Present Postal Address Presden Ontario

(7) Are you a widower? no

(8) Have you any children?..... X

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

Also their names and ages..... X

(9) Is your Father alive?..... yes Noah Johnson
If so, state name and address..... Dresden Ont.

(10) Is your Mother alive?..... yes Mrs Martha Johnson
If so, state name and address..... Dresden Ont.

(11) If your Mother is a widow.....
Are you her sole support, or not?.....

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.
.....

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.
.....

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

(15) Are you insured?..... No
If so, in what Company?.....
Have you made arrangements for payment of your Insurance premium.....
If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

D.H. Sutherland..... LT. COL.
Comd'g No. 2 Construction Battalion, C. E. F.
.....
Officer Commanding.

Date..... Nov. 14th/16

1 P.M.

10 J. 110

ORIGINAL

LAST PAY CERTIFICATE

Regt. No. 931620 Rank Pte Name JOHNSON James
Corps who was Discharged
on 13-2-1919 to

The following is a statement of the account of the above
named from 1-1-19 to 13-2-19

Bal Dr from mon. of 68.89 Bal Cr from mon. of
from L.P.C. from L.P.C.
ASSIGNED PAY: Regt. Pay 44 days @ \$ 48.40
F'ld All. 44 days @ \$

SEPARATION ALLOWANCE: SEPARATION ALLOWANCE:
OTHER CHARGES: OTHER CREDITS:
Clothing Allowance 35.00
PAYMENTS: # 4642 35.00 20-1 to 3-2-19 @ 35
AR90 Subsistence @ 80¢ per day 12.00

Bal. Credit (to be pd.) 103.89 Bal. Dr. (to be deducted) 84.9
(from soldier \$ 84.9)
(from Dependent \$ 19) 103.89

SEPARATION ALLOWANCE ASSIGNED PAY VICTORY BND
at \$ per month has been to by this Unit
at \$ 20 per month has been paid to 31-1-19 by this Unit
Subscribed \$ Pa. by other Units pd. by this Unit

Dependent or Beneficiary: Mrs Noak Johnson
Address: Dresden Ont

REMARKS: D.O. 43 Discharged 13-2-19 on Demobilization.
Date of Enlistment: If married and if Separation Allowance card submitted. No No

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

Date: SEP 17 1919
London, Ontario, No. 1 LONDON, ONT.
J D Patterson Captain.
Paymaster, No. 1 District Depot.

In any further
correspondence on
this subject please
quote Number and
Date of this Com-
munication.

No.

191

From

To

Director, Bureau of Investigation, U.S. Department of Justice, Washington, D.C.

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 2 Const Batty

Regimental No. 931620 Rank pte Name Johnston James

Enlisted (a) 8-10-16 Terms of Service (a) D D W Service reckons from (a) 8-11-16

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) Labourer

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				

LONDON, ONT.

DISCHARGED

DEMobilIZATION

FEB 11 1919

R. W. Jackson - Lieut.
O. C. Discharge section, No. 1 D. D.

(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.

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. 931620 Rank Pte Surname J. O. H. N. S. O. N
(Given name in full)

James

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

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

1. GENERAL DESCRIPTION:

Physique Good Weight 170 lbs Height 5 ft 7 3/4 Colour of Eyes Brown

Nutrition Good

Pulse 68

Condition of arteries Good

Vision Rt 20/20 Left 20/20

Hearing (conversational voice) Rt 21x ft

Left 21 ft

Identification marks, scars, or deformities.
(Give cause and date of origin.)
Scar 1 1/2" long at base of left thumb. Cause, got caught in revolving shaft in winter of 1914.

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 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 disability due to service.

MEDICAL EXAMINATIONS OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

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 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.)

ORIGINAL MEDICAL HISTORY SHEET 931620

ORIGINAL

Surname Johnson Christian Name James

Examined { on 8th day of November 1916
 { at Dresden Ont

Approved by [Signature]
 Rank Lieutenant M.O.

Birthplace { City or Town Elmstead Ont
 { County Essex

Apparent age 25 M.O.
 Trade or occupation Laborer M.O.
 Height 5 feet 8 Inches M.O.
 Weight 185 lbs. M.O.
 Chest measurement { Minimum 34 inches M.O.
 { Maximum expansion 37 inches M.O.
 Physical development Fit M.O.
 Small-pox Marks None M.O.

Vaccination Marks { Arm Right Left
 { Number 1
 When Vaccinated last 1898

(a) Marks indicating congenital peculiarities or previous disease
Capillary Angioma
above scapular on right side
Slight Variocole

(b) Slight defects but not sufficient to cause rejection
None
Both Eyes eyes

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
Date	Result	VACCINATIONS
<u>17/2/17</u>	<u>Fit</u>	<u>S. S. Slepely</u> M.O.
<u>27/10/17</u>	<u>Fit</u>	<u>Dau Murray</u> M.O.
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>14/2/17</u>	<u>Fit</u>	<u>S. S. Slepely</u> M.O.
<u>24/3/17</u>	<u>Fit</u>	<u>Dau Murray</u> M.O.
<u>5/4/17</u>	<u>Fit</u>	<u>Dau Murray</u> M.O.

Enlisted on 8th day of November 1916 at Dresden, Ont.

CORPS	REG'L NUMBER	HABITS	DATE
<u>#2. Coast</u>	<u>931620</u>		<u>8/11/16</u>
<u>Battn 657</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION	DATE	DISEASE	RESULT
<u>Windsor, Ont.</u>		<u>on enlistment</u>	<u>Fit</u>
<u>[Signature]</u> Major, A. M. C.		<u>[Signature]</u> Capt., A. M. C.	<u>[Signature]</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.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 931620 (Rank) Private

Name (in full) JOHNSON, James enlisted in

the 2nd Construction Battalion C.O.M.F.

CANADIAN EXPEDITIONARY FORCE at CHATHAM, ONTARIO on the EIGHTH

day of NOVEMBER 1919.

HE served in FRANCE (with 2nd Construction Battalion)

and is now discharged from the service by reason of

ON DEMOBILIZATION

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

Age 27

Height 5' 8"

Complexion Dark

Eyes Brown

Hair Black

Marks or Scars

Scar - Left Thumb.

Signature of Soldier
DISCHARGE SECTION
FEB 13 1919
No. 1 District Depot

R. W. Jackson
Issuing Officer

Libt. **CAPTAIN**
Rank

Date of Discharge

O. C. Discharge Section, No. 1 D

Appointment

Signed at LONDON, ONT. this THIRTEENTH day of FEBRUARY 1919.

in Military District No. ONE

File Reference No. 1 D 30-J-348
1 DD 10-J-110

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.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. (Rank) Name

Unit

Address on Discharge

Character and Conduct

Former Occupation

Special Qualifications of Value in Civil Life

Medals and Decorations

Remarks

Signed at this day of 19

Name of Officer

Rank

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

J.P. Rank

Name

JOHNSON, James

Reg'l No.

931620.

Unit No2. Const Bn.

If in perm. Corps
What Unit? }

Married or Single

Single.

Place and Date of Enlistment Chatham. 8th Nov. 1916.

Place of Birth Elmstead. Ont.

Name and Address, Next-of-Kin Mrs. Martha Johnson.

Dresden. ONT. CAN

Relationship

Mother.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

N/E. R. B. No.	8939
File R.L.	
Category	OR CAN

Discharge, Date and Place

Reason

Character

H. W. V., Ld.—9546-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS Taken from Official Documents.
Date.	From whom received.				
		Arrived in England ss "Southland"		7-2-17	<i>Alw. W. W.</i>
14. 6. 17	2 nd Lt. L. L.	Landed in Brance	Heed	17. 5. 17	PT#0 115
16-12-18	N.S.R.D	TOS from 2 nd Lt. L. L.	Bshott	14-12-18 - 20071	19-12-18 2 nd Lt. L. L.
27. 12. 18	N.S.R.D	ofc to C.D.D. Rhyl	-	27. 12. 18 - 313	
19 JAN. 1919	N SRD	SOS to CEF	Bshott		PT2DO 16
		CANADA			

A.F.B. 193 CHECKED
29 MAY 1917

9 JAN 1919

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

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

350M.—5-16

H. Q. 1772-30-920.

Casualty Form—Active Service.

Awara
931620

Unit, Regiment or Corps # 2 Const. Batt'n. C.E.F.
 Regimental No. 931620 Rank Pte. Name James Johnson
 C. E. F. and 6 mos
 Enlisted (a) Nov. 8th/16 Terms of Service (a) Duration, of war. Service reckons from (a) 8/11/16
 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
17/1/17	C. C. No 2 Constn Bath.	Embarked, Canada Disembarked, England Proceeded Overseas	Halifax C.E.F. Liverpool Seafood	25/3/17 17/4/17 17/5/17	Pt 2. D.O. # Adjutant, No. 2 Construction B't'n. C.E.F.
21/5/17	OC	Landed in France Forfeits 5 days pay for being away with Iron Rations	Fr nce	17-5-17	N.R. 21/5/17 22069 3119 25/17
4/1/18	OC Unit	Granted 14 days leave to	UK	30/1/18	B213/295 N° 80/13/2/18
9-3-18	do.	Rejoined from leave	Field	14/2/18	B213
19-10-18	do	Granted 14 days leave	UK	19-10-18	B213/259 of 11/19/18
9-11-1918	do	Rejoined from leave	Field	5/11-18	B213

(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

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
------	--------------------	---	-------	------	---

11 ¹² / ₁₈	A.H.	Trans. to Eng. & worked to N.S. Reg. Depot	Bramshott	14 ¹² / ₁₈	KR 344. A. Hewitt
----------------------------------	------	--	-----------	----------------------------------	----------------------

Lieut. for Lt.-Col., A. A. G.
Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

17-12-18.	H. S. R. D.	T.O.S. & attached to 2nd C.B.D. for Quarters & Rations.	B'shott	14-12-18.	D.O. ² 305.
-----------	-------------	---	---------	-----------	------------------------

NSRD ON COMMAND TO CDD Kimmel Phyl BRAMSHOTT

PART II D.O. NSRD 3/3 27¹²/₁₈

C.A. Wright LIEUT.
OFFICER IN CHARGE RECORDS,
NOVA SCOTIA REGTL. DEPOT.

28/12/18	NSRD	T.O.S. M.A.1, Conc. Camp, Phyl	Phyl	P.T.O	A. E. O'Keefe Lieut Officer of M.A.1 Wing
----------	------	--------------------------------	------	-------	--

Embarked for Canada

10-1-19	J.M.O.P.S	T.O.S. N.T. B'shott	Phyl	Part II D.O. 35	F.A. Herman Lieut Officer of M.A.1 Wing
---------	-----------	---------------------	------	-----------------	--

"mother"
MILITIA AND DEFENCE
ASSIGNED PAY
Martha
OVERSEAS CONTINGENTS

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

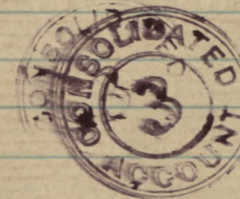
To Whom *Mrs. Frank Johnson,*
Address *Dresden,*
Ont.

By Whom Assigned *Johnson, James.*
Regtl. No. *931620*
Rank *Pte*
Corps *N^o 2 Construction Btn.*

Rate ~~*\$15.00*~~ *20.00 from Oct 1st 1917*
APR 1917

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>(1) 2 m/13th Jan 22nd 17</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



"mother" of
MILITIA AND DEFENCE

M. F. W. 12a.
50m.—7-16
1772—39—819.

Martha

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.
(Assignee)

Mrs. Frank Johnson.

Name of Soldier

Johnson, James
Pte - 2 Compton Btu.

PAYMENTS.

931620-
\$15.00

L. L. Job 5470—Req. 6888.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			20 ⁰⁰ from Oct 1st 1917
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		Z 4902	15	
May		P 9014	15	15-65
June		M 17577	15	0 Ba
July		D 22791	15	Lu
Aug.		Y 30360	15	Lo
Sept.		@ 37189	15	5
Oct.		Z 44465	15	
Nov.		V 48516	15	
Dec.		H 52717	15	30⁰⁰ Dec 31st and H 52717 cancelled
Jan.	1918	57834	30	20 ⁰⁰ in future
Feb.				
March				
April				
May				
June				
July				

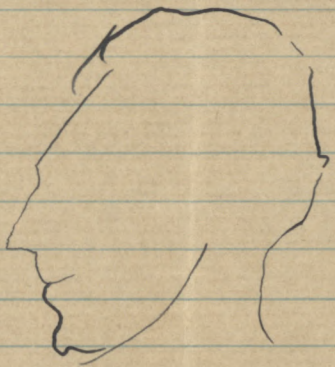
MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier _____

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				



PLC 931620

Johnson, James

20⁰⁰

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		1	2	3	4	1	2				3	4				CREDIT	DEBIT
			\$	c.						\$	c.																
	MONTH PARTIULARS		CR 1	CR 2	PARTIULARS		DR 1	DR 2	DR 3	DR 4	BALANCE	REFR. PAY	SER. ALLOE. ENS.														
	Oct Bal										8575																
Nov	P.P.		33	-							20																
					AR 824	28 ⁹ / ₇₇	CPC	3	57																		
					847	12 ⁰ / ₇₇	-	3	57																		
					969	25 ⁰ / ₇₇	-	3	57																		
DEC			34	10	1088	10 ⁰ / ₇₇	-	3	57	20																	
			67	10			14		28	40																	
JAN 1918	P.P.		34	10							20																
					1257	23 ² / ₇₇	2 Com. in Am	12	49																		
					1431	21 ¹² / ₇₇	-	7	14	9304																	
			34	10			19		63	20																	
FEB			30	80	Assigned pay						20																
					1853	24 ⁴ / ₇₈	CPC	3	57																		
					456	30 ¹ / ₇₈	Jura	53	53																		
					1871	78 ¹ / ₇₈	"	3	57																		
					1596	41 ¹ / ₇₈	"	3	57	5960																	
			30	80			64		24	20																	
MAR 1918			34	10	Acc pay						20																
					AR 2370	18 ³ / ₇₈	Jura	7	14	6656																	
			34	10			7		14	20																	

NUMBER 221670

RANK Ste

NAME Johnson

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Oct	MP	24/10		Howard Cap				20	85.00		
				483 12/10 6% 1/2	373						
				720 7/10 6% 1/2	116						
				CA 515 5/10 4% 1/2	323						
				6245 10/10 6% 1/2	5840				5.20		
		24/10			9392			20			
Nov	MP N/A	6/10		Barney				40	22.30		
				AK 2687 11/11 6% 1/2	373						
				1 2908 26/11	373				24.80		
				2019 10/12 6% 1/2	746						
				2578 8/12 6% 1/2	977				10.45		
		6/10			2185			40			
				Navy 2/1/19. N/A. 6% 1/2	1947				9.02		
					1947						
S.O.S. to Gov 9/1/19 100.16 7/1/19 19/1/19											

1439
 9392
 746
 11577

1439
 9392
 746
 11577

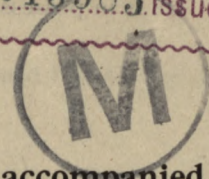
57

War Service Badge

Class **A** No. 245985 Issued

This space to be for numbers.

Proceedings on Discharge.



23-2-34

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

No.	931620
Rank	Private
Surname	JOHNSON,
Christian name	James
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	2nd Construction Battalion C.O.M.F.
Date of discharge	13.2.19 2043 12/2/19
Place of discharge	LONDON, ONT.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age.....27.....years.....	months.....	Descriptive marks
Height.....5.....feet.....8.....inches.....		
Complexion	Dark	Scar - Left Thumb.
Eyes	Brown	
Hair	Black	
Trade	Laborer	
Intended place of residence <small>(To be given as fully as practicable.)</small>	Dresden, Ontario.	

2. The above-named man is discharged in consequence of **ON DEMOBILIZATION**

Authority for discharge.....

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.

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.)

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

amk
14-4-19

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, and that I have received my permanent discharge certificate.

(Place) LONDON, ONT. *J. Johnson* (Signature of Soldier.)

(Date) 13 2 19 *J. Redden* (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.

(Signature).....

R. W. Jackson Lieut

(Date) 13 2 19

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

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

None

John J. Johnson

Reg. Conductor Sheet	W. 204	Medical Report for Invalidity	W. 204
Separation Battery Company	B. 203a	Dental History Sheet	B. 405
Field Conductor Sheet	W. 178	Last Day Certificate	W. 44
Copies of Conviction by C. P. in MS.		Duplicate Discharge Certificate	W. 204
Med. Hist. Sheet	W. 24	Form of Will	W. 22
Casualty Form		Should it be discharged "Medically unfit"	
		Should it man has not been overseas	
		Documents not accompanying this form should be crossed out	

I hereby certify that the following documents are unobtainable.

Officer Commanding

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

4-41-0

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a Company } or Field Conduct Sheet " W. 178</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia form B. 313</p> <p>Casualty Form " W. 54</p> <p>Medical Report for Invalid§ " B. 227</p> <p>Dental History Sheet " B. 465</p> <p>Last Pay Certificate " W. 44</p> <p>Duplicate Discharge Certificate " W. 39A</p> <p>‡Form of Will " W. 82</p> <p>§Only if discharged "Medically unfit."</p> <p>‡Only if man has not been overseas.</p>	<p>Attestation Paper Militia Form W. 23 or Particulars of Recruit " W. 133</p> <p>Proceedings on Discharge " B. 218</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet.</p>
--	--

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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.

10-80-49

AUDITOR PAYMASTER

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

M. OR S. *S.* REGT. No. *931620* RANK *Pte* NAME (IN FULL) *JOHNSON James*

Form with fields: NEXT OF KIN, ADDRESS, IS SEPARATION ALLOWANCE PAID?, TO WHOM PAID, ORIGINAL UNIT C.E.F., PLACE OF ATTESTATION, DATE OF ATTESTATION, ASSIGNED PAY, PAYABLE TO, ADDRESS, STOP PAYMENT FORM, DISCHARGED, REASON, AUTHORITY, IF ENTITLED TO POST DISCHARGE PAY.

Table with columns: MONTH, PAY AND F.A., OTHER CREDITS, TOTAL CREDITS, ACQUITTANCE ROLLS, CASH PAYMENTS, ASSIGNED PAY, REGIMENTAL CHARGES, OTHER CHARGES, TOTAL DEBITS, BALANCE (DEBIT, CREDIT), PARTICULARS OR REMARKS.

No P.O. held for further advice from England. Protect possible Dr. from E.L.P.C.

WAR SERVICE GRATUITY

Table detailing War Service Gratuity with columns for days, rate, amount, and balance.

Handwritten notes and signatures in the right margin, including dates like '20.00 at Jan.' and '29/9/19', and names like 'Majors'.

SEP 20 1919

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

2507

Coet 1-1917
Apr 17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

<i>H</i>	<i>20</i>		
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PARTICULARS OF SEPARATION ALLOWANCE

No. *931620*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *James Johnson*
 Battalion *No 2 Coast Bn.*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mus Hoak Johnson*
 Address *Drexler Out*
 Change of Address
 1
 2
 3
 4

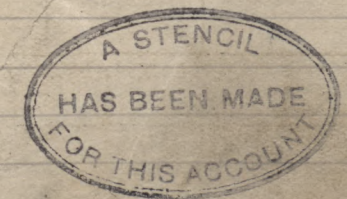
Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>1917</i>					
<i>Dec 31</i>			<i>150</i>	<i>150</i>	
<i>1918</i>					
<i>Jan</i>	<i>B 69624</i>		<i>20</i>	<i>20</i>	<i>91</i>
<i>Feb</i>	<i>K 74612</i>		<i>20</i>	<i>20</i>	
<i>Mar</i>	<i>J 99936</i>		<i>20</i>	<i>20</i>	
<i>Apr</i>	<i>J 14345</i>		<i>20</i>	<i>20</i>	
<i>May</i>	<i>F 11217</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>June</i>	<i>C 20211</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>July</i>	<i>R 29940</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Aug</i>	<i>H 35168</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Sept</i>	<i>L 44318</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Oct</i>	<i>M 48890</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Nov</i>	<i>E 53233</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>Dec</i>	<i>K 66031</i>		<i>20</i>	<i>20</i>	<i>✓</i>
<i>1919</i>					
<i>Jan</i>	<i>K 64342</i>		<i>20</i>	<i>20</i>	<i>✓</i>
			<i>H10</i>	<i>H10</i>	

99596-393

*AN. \$15.00 until Sept 30-17
and \$20.00 from Oct 1-17*

M. F. W. 128
400M-6-17-1772-89-141
L. L. 22320-M. & D. 7593.

A/c Closed *31/1/19*
 Ret'd per *Olympic*
 Date *17/19* M.F.W. 187 *22/19* *YMAA*
 Clerk *Cam Hornell*
No 58417 eff 1/2/19 *Lam*



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No. _____

Rank _____ Promoted _____ Reverted _____ Discharge _____

Soldier's Name _____

Battalion _____

Beneficiary _____

Relationship _____

Address _____

Name _____

Address _____

Change of Address _____

1 _____

2 _____

3 _____

4 _____

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

M. F. W. 128
400M-6-17-1773-39-1141
L. L. 22320-M. & D. 1983.