R. 171.

Unit C-A-M-C Rank Capt Name Johnstone

OFFICERS' DECLARATION PAPER

CANADIAN OVERSEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS).

1. (a) What is your Surname? Johnston
   (b) What are your Christian Names? Stephen Reginald.
2. (a) Where were you born? (State place and country) Dartmouth Nova Scotia.
   (b) What is your present address? C-C-A- Witley.
3. What is the date of your birth? July 27 1884
4. What is (a) the name of your next-of-kin? A-E Johnston
   (b) the address of your next-of-kin? Dartmouth Nova Scotia
   (c) the relationship of your next-of-kin? Father.
5. What is your profession or occupation? Physician
6. What is your religion? C. of E.
7. Are you willing to be vaccinated or re-vaccinated and inoculated? yes
8. To what Unit of the Active Militia do you belong? C-A-M-C.
9. State particulars of any former Military Service? yr. C-A-M-C 2 yrs Canadian Militia.
10. Are you willing to serve in the CANADIAN OVERSEAS EXPEDITIONARY FORCE? yes.

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

S R Johnston Capt. (*Signature of Officer*).

CERTIFICATE OF MEDICAL EXAMINATION.

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

I consider him* fit for the CANADIAN OVERSEAS EXPEDITIONARY FORCE.

Date 6-27-17 191 6

Place Witley

R. D. Criswell Capt. C.A.M.C.
Medical Officer.

* Insert here "fit" or "unfit."

Unit ..... Rank ..... Name .....

OFFICERS' DECLARATION PAPER

CANADIAN OVERSEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE ANSWERED BY OFFICER.

(ANSWERS)

1. (a) What is your Surname?

(b) What are your Christian Names?

2. (a) Where were you born? (State place and country)

(b) What is your present address?

3. What is the date of your birth?

4. What is (a) the name of your next-of-kin?

(b) the address of your next-of-kin?

(c) the relationship of your next-of-kin?

5. What is your profession or occupation?

6. What is your religion?

7. Are you willing to be vaccinated or re-vaccinated and inoculated?

8. To what Unit of the Active Militia do you belong?

9. State particulars of any former Military Service?

10. Are you willing to serve in the CANADIAN OVERSEAS EXPEDITIONARY FORCE?

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

(Signature of Officer).

CERTIFICATE OF MEDICAL EXAMINATION.

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

I consider him * for the CANADIAN OVERSEAS EXPEDITIONARY FORCE.

Date 19

Place .....

Medical Officer.

* Insert here "fit" or "unfit."

C.E.F. REGIMENTAL DOCUMENTS
WAR SERVICE RECORDS D.V.A.

JOHNSTON STEPHEN REGINALD CAPT. C.A.M.C. 09771

DEMOB.

406829

Issued 1-11-67

W.S.B. CLASS. "A"

Army Form B. 103.

Casualty Form—Active Service.

Regimental Number _____

Regiment or Corps Canadian Army Med. Corps.

Rank Capt Surname Johnston Christian Name Stephen Reginald

Religion C of E Age on Enlistment _____ years _____ months.

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

Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended { _____ } Re-engaged { _____ } Qualification (b) _____ or Corps Trade and Rate _____

_____ Signature of Officer i/c Records.

Report: Date	Report: From whom received	Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
		Embarked ...			
		Disembarked ...			
13-9-16	M. Bks Hosp	T.O.S. Can. Con Hospt	Uxbridge	8-9-16	Part II DO 256
16-10-16	Uxbridge	App. Adj & Registrar	Do	16-10-16	Part II DO 289
~~7-12-17~~	~~Uxbridge~~	~~SOS to Moore Barracks~~	~~do~~	~~8-12-17~~	~~Pt ii D/O 340~~ Cancelled. Pt II D/O 341
28-12-17	DMS	SOS to Epsom on Posting	do	28-12-17	DMS Lette AMD 1b/4-J-126
					L R Murray Lt Col Adjutant for O.C. Canadian Conv. Hospital, Hillingdon House, Uxbridge
29-12-17	C.C.H. Epsom	T.O.S. from Con. Hosp. Uxbridge effect 28-12-17	Epsom	28-12-17	Pt II 363-29-12-17 (auth A.M.D 16/4-J.126/26-12-17)

(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) Signaller, Shoeing-Smith, &c.

[P.T.O.

(938). Wt. 15012/5156. 1,000,000. 1/16. P.P.Ltd. Forms/B.103/3.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
17-12-18.	To be acting Major, whilst Registrar of Canadian Convalescent Hospital Epsom, Epsom 16-10-18. (authy A.G. M.S. C.O. No 76 H of				14-12-18)
14-6-19	M.C.H. Epsom.	Is shown on command to Canadian Forestry Corps. 12-6-19.	Epsom.	12.6.19.	Pt II D.O. 165. M.C.H. Epsom
18-6-19	Epsom.	Is shown off Command to Canadian Forestry Corps.	Epsom.	18-6-19	pt II D.O. 169 - 18-6-19.
18-6-19.	do.	Off. Command to C.F.C. Newcastle.	Epsom.	18-6-19	Pt II DO.
10-7-19.	M.C.H Epsom.	S.O.S. on posting to No. 16 C.G.H. Orpington.	Epsom.	10-7-19.	Pt II DO. 190 d/9-7-19.
					CAPT. A/ADJT. CONVALESCENT HOSPITAL, WOODCOTE PARK, EPSOM
10.7.19.	16 C.G.H.	S.O.S. from M.C.H Epsom.	Orpington	10.7.19.	Pt. II DO. 162.
14.11.19.	DO	To Temp. Major (authority Corps Orders 7.9. - 9.7.19)	DO.	11.7.19.	Pt. II DO. 163
13/12/19.	S.O.S. O.M.F. of C. ON EMBARKATION FOR CANADA.				

For MAJOR General,
Adjutant General, Canadians

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

M. F. W. 54. (A. F. B. 10s.
500M.—9-16
H. Q. 1772-39-9-20.

Casualty Form—Active Service.

Unit, Regiment or Corps.....

Regimental No..... Rank Major C. E. F. Name Johnston Stephen Reginald

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

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

Extended..... Re-engaged..... Qualification (*b*)..... .....

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
9-1-20	M.H.Q. Ottawa	T.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 6	14-12-19	C.E.F. R.O. No. 2351-19
9-1-20	M.H.Q. Ottawa	S.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 6	30-12-19	C.E.F. R.O. No. 2351-20

for Director Personal Services

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

[P.T.O.

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

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. ..... Rank Major Surname Johnston

(Given name in full)

Stephen ~~Robert~~ Reginald

Unit or Corps C.A.M.C. Birthplace Dartmouth N.S.

(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. 11 in. Colour of Eyes Blue

Nutrition Good

Pulse 84 - regular

Condition of arteries soft

Vision Rt. 6/6 Left 6/6

Hearing (conversational voice) Rt. 20 ft.

Left 20 ft.

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

Opinion as to general health and physical condition fit

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.**

Nil

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Epsom (Overseas)

Date June 24th 1919 Signed H. MacDermot Lt. R.A.M.C. 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 [illegible]

(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.)

[OVER]

M.F.W. 129.
1033 (D.P.) 500M-11-18.
1772-39-1142.

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

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

NAME OF SOLDIER (Block Letters) JOHNSTON S. R.

REGIMENT C.A.M.C. RANK MAJOR No.

Date of Examination in England 23-7-19 | Date of Examination in France

PRESENT DENTAL REQUIREMENTS

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

   } nil

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 no
- (b) In England yes
- (c) In France no

Signature of Dental Officer G E Gillan Capt.

Occupational Group 19
Dispersal Area 3

Major Johnston S.R.

Proceedings of an Officer or Nursing Sister Struck off Strength OF THE Canadian Expeditionary Force.

EMB'K'D SOUTHAMPTON 15-12-19
R.M.S TUNISIAN

M

1. RANK Major,
2. NAME Johnston S.R.
3. UNIT No.16 Canadian General (Ontario) Hospital. Orpington, Kent.
4. DATE STRUCK OFF STRENGTH | PLACE
5. REASON SOS 30-12-19 RO 2351-20

Cessation of Hostilities. 3/4

6. AUTHORITY
7. PROPOSED RESIDENCE

This folder should contain the following documents :—

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report, M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

Tunisian Darling 13/10/19

H

Checked 18-2-22 11/6

Reboard 24-8-19

M. F. W. 2591.
(923) Wt. /45P 3/19 15M D.St.

CANADIAN EXPEDITIONARY FORCE

L.T.6-45.
L.B.

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

This is to Certify that (Rank) Major.

(Name in full) Stephen Reginald JOHNSTON.

Enlisted in The Canadian Army Medical Corps.

CANADIAN EXPEDITIONARY FORCE, on the xxxx

CANADIAN EXPEDITIONARY FORCE

Certificate of Service

ISSUED TO OFFICERS AND NURSING SISTERS

Number _____ Rank Major

Surname JOHNSTON

Christian Name Stephen, Reginald

Units _____ Theatre of War England

Date of Service 24-7-16

Remarks _____

Latest Address 9 College St
Dartmouth Halifax
N. S.

Roll No. C.A.M.C.

200m.-6-21. A Page H647

(This form to be filled in by all ranks on voyage to Canada.)

o.....

CR	RANK	SURNAME	INITIALS	UNIT
.....	.....	.....	.....	.....

al address..... (Street) (City or Town) (Province)

one person to be notified of arrival.....

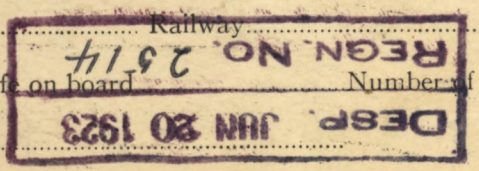
.....

Station in Military District to which a furlough warrant is required.....

..... Railway.....

ed, is your wife on board..... Number of children on board.....

stination.....



(Sgd.).....

2502

6

CARD NO.

S.O.S. Demob. 30/12/19
DO. 20 FOLL. 29/12/19
St John Dep. C.Sc.
RO 2351 of 9-1-20.

SURNAME. Johnston

CHRISTIAN NAMES Stephen Reginald

REGL. NO. RANK Capt.

UNIT ~~A.M.C.~~ R.A.M.C. ~~Civilian Practitioneer~~

FORMER CORPS A.M.C.

NEXT OF KIN.

NAMES IN FULL Johnston, Mr, A.C.

RELATIONSHIP TO SOLDIER

ADDRESS Wentworth St., Dartmouth, N.S.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Canada, DATE

PLACE OF ATTESTATION Halifax DATE

R/C 27/12/19 Major 452

L. L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE WIDOWER

TRADE OR CALLING RELIGION

DESCRIPTION.

APPARENT AGE YEARS MONTHS

HEIGHT FEET INCHES

CHEST MEASUREMENT INCHES EXPANSION INCHES

COMPLEXION EYES HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE DATE

REGT'L. No.

H. Q. FILE No 649

NAME Johnston Stephen Reginald

RANK AND CORPS Capt C A M C.

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY
N of R	A. C.	Johnston (R.N.S.) Dentworth St Dartmouth
01961	1-11-18	Ser ill Horton Co. of London War Hs. Epsom Oct 31st/18, Influenza albuminuria
		This information belongs to Capt. (Adjt) Qtr. Master. Jonathan Locke Johnston C.A.M.C.

Cancelled 5-6-4 per 200 H

L. L. 31493. M. & D. 8476.

M. F. W. 42—100M.—28-11-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
1126 2.	Horton (Co. of London) War Epsom	31-10-18	Sergt. Influenza & Albuminuria

Cancelled. This information should refer to Hon Capt. & Q.M. Johnston, J. L.

Form R. 149.

FAF

Name JOHNSTON Rank CAPT Reg. No.

~~A~~ Stephen Reginald

Unit CAMC. CC H. Epsom

Next of Kin Canada

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
~~30-10~~	Horton War Hospital					
31-10	~~Warspital~~, Epsom (Tele C10413)					
	SERIOUSLY ILL.		Influenza & Albuminuria	1156	01961	31/10
	Cancel above as this entry refers to					
	Hon Capt & O M Johnston J L 1129					
	CAMC CCH Epsom					

Date	Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List
	Epsom 1/8						

R. 150

Folio 54.

A.F.B. 158

Sep. 1. 1916. Uxb
OCT 1 1916 do
NOV 1 1916 do
FEB 1 1917 do
MAR 1 1917 do
APR 1 1917 do

Surname JOHNSTON, MAJOR

Rank ~~CAPTAIN~~.

Promotion

TUS 24.7.16

Unit C.A.M.C.

Place of birth 27-7-1882. Dartmouth, Nova Scotia.

Married (Yes or No)

Appointments

Date of leaving Canada

Christian Names Stephen, Reginald.

Name and Address of Next-of-Kin

A.C. JOHNSTON, (Father)
Dartmouth,
Nova Scotia.

M

RL 9 J 186

Date and Cause of Resignation

CAMC

Report Date	Report From whom received	Record of Promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
					CAN MED CORPS
28-8-16.	D. M. S.	To be Temp Captain C.A.M.C. C.E.F. & Posted to C.A.M.C. T.S.		24-7-16.	Lon. Gaz. 15-9-16. Pt.2.Ord.244. (TS) C.O.1585. D.O.4526.(CTD)
4-9-16.	Do.	Transferred to Moore Bk's Hp.		2-9-16.	Pt.2.Ord.246-250.(M. Bk's) C.O.1636. Pt.2.Ord.250.(TS)
11-9-16.	Do.	Transferred to Can Conv Hp Ux'Bdge.		8-9-16.	Pt.2.Ord.256. (Uxbridge) C.O.1687. Pt.2.Ord.254(M Bks)
15-10-16.	C.C. Hp. Uxbdge	Appointed Registrar & Adjutant.		16-10-16.	Pt.2.Ord.289. Pt. 0/218. CAMC.D.
7.12.17	do	S.O.S. on Posting to M Bks.		8.12.17	Pt. 0/340
29.12.17	DMS	Posted to Can Conv. Hosp Epsom from Uxbr.		28.12.17	C.O. 1687
~~31-10-18~~	~~AMS~~	~~Adm. Norton (County of London) War Hp. Epsom (Seriously ill)~~ Refers to Hon. Capt & Q.M. Johnston J.L.		~~31-10-18~~	~~Ch. 1126 Influenza & Albuminuria~~ corrected by Ch. 1129 d/4-11-18
6-12-18	W.O.	To be Acting Major CAMC (while empld as Registrar M.C. Hp.)		16-10-18	Lon. Gaz. 31053.
18-6-19.	M.C.H. Epsom.	"On Comind" to Can Forestry Corps.		18-6-19	Pt. II Ord. 169.
7.7.19	WO	To be Temp Major CAMC		16.4.19	L.G. 31438
10-7-19	16 C.G.H	To S on Posting from MCH Epsom		10-7-19	Do 162.
9-7-19	M.C.H. Epsom	S.O.S. this Unit posting 16. C.G. Hospital		10-7-19	Do 190

K

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				
18.12.19.	DGmd.	Sos. om F of C to Canada.		14.12.19.	Cont.
		Sailed for Canada "S.S. Tunisian"		14.12.19.	S/L D 70
			Sos. 30.12.19		

25480

13.12.19
Tunisian 29.12.19

AUDITOR | PAYMASTER

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

M. OR S. | REGT. No. | RANK Major | NAME (IN FULL) Johnston S.R. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN | RELATIONSHIP
ADDRESS
IS SEPARATION ALLOWANCE PAID? | DATE EFFECTIVE
TO WHOM PAID Nil | RELATIONSHIP
ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY
Tons	14-12-19	MD. 4 Lo. 20

ORIGINAL UNIT C.E.F. b. a. m. b. | IF IN P.F. WHAT UNIT?
PLACE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY
DATE OF ATTESTATION | TRANSFERRED TO | DATE | AUTHORITY
661
ASSIGNED PAY $ | DATE EFFECTIVE
PAYABLE TO Nil | RELATIONSHIP | ANY CHANGE IN ASSIGNEE OR ADDRESS Bank of Montreal City
ADDRESS
STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE | EFFECTIVE
DISCHARGED | PLACE bdsd | DATE 30/12/19 | REASON Demob | AUTHORITY MD. 4 Lo. 20 RO-2351 | IF ENTITLED TO POST DISCHARGE PAY

E.L.H.

adjusted MONTH to	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $ C.	OTHER CREDITS $ C.	$ C.	TOTAL CREDITS $ C.	ACQUITTANCE ROLLS COL. NO. 1 NO. DATE	COL. NO. 2 NO. DATE	COL. NO. 3 NO. DATE	CASH PAYMENTS COL. NO. 1 $ C.	COL. NO. 2 $ C.	COL. NO. 3 $ C.	ASSIGNED PAY $ C.	REGIMENTAL CHARGES $ C.	OTHER CHARGES $ C.	$ C.	TOTAL DEBITS $ C.	BALANCE DEBIT $ C.	CREDIT $ C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT 30.11.19		6.50													232 50					Advance London
															201 50					Advance W.S.G. on boat
																	434 00	434 00		
1/12/5 to 30/12/19	30	6.50	195 00	12 00		207 00										434 00	434 00	227 00		$12.00 Messing in England
	183 days			1189 50		1189 50							169 50		227 00			793		1915241 4-2-20
													201 50					591 50		1917282 26-3-20
													591 50					Nil		1917381 29-3-20
				1189 50		1189 50							962 50		227 00		1189 50			

Certified that all payments due on this acct. have been paid.
[signature] CAPT.
For Senior Officer Pay Services, M. D. 6

100M-1-19.—L. L. 53962-M & D. 9723.
M. F. W. 2596.
1772-39-1320.

FORM P.15
7347 16M 11-2-19 D.565

ASSIGNED PAY.

UNIT. NAME OF Camb.

RATE OF P. AND A.

RANK. Major

DATE 16 4/19. AUTHORITY DSG 547. 30 6/19

NAME. Johnston.

Beneficiary

Address

Amount $

Separation Allowance Issued. Yes or No.....

Pay

F.A.

Messing

Initials S. R.

Bank of Montreal. Waterloo Place.

DATE 1919	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES TO BE INITIALED BY P.M. IN EVERY CASE	INITIALS
Dec 4	Advance Decr P.A. Bank.			232 50		Dr. 232 50 ✓		
4	Endorsed on LPC.							
13	Subs 1. 13 12/19 Direct	834					£5.6.10 $26.00	
Jany 30	Dr. Bal chgd to Canada No 8		232 50			—		

FORM P.15

7847 16M 11-2-19 D.565

ASSIGNED PAY.

UNIT.

NAME OF

RATE OF P. AND A.

RANK.

DATE AUTHORITY

NAME.

Beneficiary

Address

Amount $

Separation Allowance Issued. Yes or No.....

Pay

F.A.

Messing

Name

Initials

Bank

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES TO BE INITIALED BY P.M. IN EVERY CASE	INITIALS

P—15.

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	Mess. DATE	AUTHORITY	NAME.
Beneficiary	C.A.M.C.T.S.			Capt.	26-8-16	D.M.S. Corps Order #1585 d/28-8-16	Name Johnston Initials S.R. Bank of Montreal.
Address							
Amount. $							
Separation Allowance issued. Yes or No.....							

1916-17

DATE 1916	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS.
Sept 5	Bank. Pd. $24 7/16 to 31 8/16. Mess $26 8/16.			152 25 ✓				
20	Pro. Capt rates $24 7/16-31 8/16 Mess $26 8/16 No 7753		152 25 ✓					
20	Pay Sept R		142 50 ✓					
26	Bank	9466		142 50		— 0		
Oct 25	Pay Oct R.		147 25 ✓					
25	Bank			147 25		— 0		
Nov. 22	Pay Nov. R		142 50					
28	Bank			142.50		— 0		
Dec 13.	Pay Dec R		147 25					
" 18	Bank			147 25		— 0		
1917 Jan 25	Pay. Jan R.		147 25					
" 26	Bank	19288		147 25 ✓		— 0		
Feby. 15	Pay. Feby R.		133 —					
" 21	Bank	21903		133 —		— 0		
Mch 15	Pay. Mch. R.		147 25					
" 26	Bank	24836		147 25 ✓		— 0		

FORM P.15
5986—25M—19/1/17

ASSIGNED PAY.

UNIT. NAME OF: C.A.H. Corps / Uxbridge 7 — DATE: — AUTHORITY: Pay 3 pd. / " A 75 " / " " / Gen 50 "

RANK. Capt. / ~~Adj~~ / radj — DATE: 26/8/16. / / 16/10/17 / Hon — AUTHORITY: D.M.S.C.O. 1585 / df. 28/8/16 / hon area 1265 df 4 & 7.

NAME. Name Johnston. Initials S.R. Bank of Montreal.

Beneficiary

Address

Amount. $ ✓

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

JAN 7 - 18

DATE 1917	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
Apr 20	Apr. Pay. R.		142 50					
" 26	Bank	3010		142 50				
May 15	May. Pay. R.		147 25					
" 26	Bank	6029		147 25				
June 18	June Pay. R.		142 50					
" 27	Bank	9004		142 50				
July 15	July Pay R.		147 25					
" 24	Bank	13071		147 25				
Aug 15	Aug Pay R.		147 25					
" 23	Bank	17361		147 25				
" 29	Adjutants Pay 16 10/16 - 31 8/17	bon	11088	160				
	Do - 00 Bank.		17697		160			
Sep 18	Sep Pay. R.		157 50					
" 20	Bank	21905		157 50				
Oct 15	Oct Pay. R.		162 75					
" 19	Bank	26282		162 75				
Nov 19	Nov Pay. R.		157 50					
" 21	Bank	30733		157 50				
Dec 14	Dec Pay. R.		162 75					
"	Bank	35096		162 75				
Jan 9	Subs - 14. 31 12/17	11689					£3.14.0 $18.00	
" 19	Jan Pay. R.		162 75					
"	Bank	39459		162 75				
Feb 16	Pay Feb. R.		147 -					
	Bank	41013		147 -				

Forward

FORM P. 15
5986–25M–19/1/17

ASSIGNED PAY.

UNIT.

	NAME OF	DATE	AUTHORITY
	C.C.H.		Pay 3-
	Uxbridge		T.A. .75
	Woodcote Hosp.		Mess 1-
	Epsom.		~~Adjt .5~~

RANK.

	DATE	AUTHORITY
Capt		
~~Adjt~~	28 12/17	DMSCO 1687-29 12/17
ceases to be	Adjt. eff 1/3/18.	

NAME.

Name Johnston
Initials S. R.
Bank of Montreal

Beneficiary
Address

Amount. $
Separation Allowance issued. Yes or No.....

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
	Brought forward							
Mar 7	O/Pid Adjts Pay @ 50c - 28 12/17 - 28 2/18	V. 498.		31 50			Recover in March.	
" 18	Pay Mar R.		147 25					
20	Bal Mar P & A.	Bank 42185		115 75				

FORM P. 15
5986–25M–19/1/17

ASSIGNED PAY. UNIT. Rates RANK. NAME. ✓

	NAME OF	~~DATE~~	~~AUTHORITY~~		DATE	AUTHORITY	
Beneficiary	Wcote Hosp	Pay	~~3~~ 5.50 ~~4~~ Pd.	Capt	26 8/16	DMSCO. 1585-28 8/16	Name Johnston
Address	Epsom.	F.A.	~~7~~ 51		28 12/17.	.. 1687-29 12/17	Initials S. R.
		Mess.	1 -	A/Major.	16 10/18.	DLG 468 d/29 11/18.	Bank of Montreal

Amount. $

Separation Allowance issued. Yes or No..... Add'l Outfit Allce 1/8/18 £100.00

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1918								
Apr 18	Pay Apr R.		142 50					
27	Bank.	1173.		142 50		0		
May 14	Pay May R.		147 25					
27	Bank.	2645		147 25		0		
June 11	Pay June R.		142 50					
19	Clothing issued on Repay. 14/6/18 £4-11-0 List 175 June.	1760		22 14				
27	Bank.	4144		120 36		0		
July 10	Pay July R.		147 25					
"	Adv. July P & A.	4710		24 33				
25	Bank.	5625		122 92		0		
Aug 8	Adj. Pay fr. 16/18 - 31 7/18.	8009	61					
"	" " Bank.	6180		61				
23	Pay Aug. R.		178 25					
26	Bank	7235		178 25				
Sept. 11	Pay Sept. R.		172 50					
24	Bank.	9162		172 50		0		
Oct 9	Pay Oct. R.		178 25					
	Bank	10403		178 25		0		
Oct 31	Addit outfit allce. 1-8-18		100					
	Bank	10853		100.				
Nov 22	Nov. Pay		192 50					
	Bank.			192 50		0		
Dec 8	Dec Pay		232 ~~186~~ 50					
" 9	Dif bet Capts & Maps: rates fr 16 10/18-30 11/18 DLG 468 d/29 11/18 Vic 18404		69					
	Cash.	13205		69				
	Bank.	13786		232 50		0		

FORM P. 15
5986—25M—19/1/17

ASSIGNED PAY.	UNIT. NAME OF	DATE	AUTHORITY	RANK.	DATE	AUTHORITY	NAME.
Beneficiary	West Park Epsom.	Pay.	5.50.				Name Johnston
Address		F.A.	1	T/Major	16/4/19	DLG.547, 30/6/19	Initials S R.
		Messing	1				Bank of Montreal
Amount. $							
Separation Allowance issued. Yes or No.....							

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case.	INITIALS
1919						0		
Jan 18	Adv Jan P/A £100.0 Bank	15033		48 67				
22	Jan Pay		232 50					
24	Bank.	15528		183 83		0		
Feb 12	Feb Pay.		210.					
	Bank.	17136		210		0		
March 13	March Pay		232 50.					
" 20	Adv. March P&A (£10).	Cash.	18182	48 67.				
	Bank.	18393		183 83		0		
April 10	April Pay		225					
	Bank.	1053		225		0		
May 8	May Pay.		232 50					
23	Bank	2772		232 50		0		
	June Pay R.		225					
25	Bank			225		0		
July	Pay R.		232 50					
25	Bank	5698		232 50		0		
26	Trav Allce 12.18 6/19	5030					£5.2.6	
Aug 1	Add Ont allce 1 8/19		100					
	Bank	5027.		100				
	Aug Pay R.		232 50					
26	Bank			232 50		0		
Sept	Sept Pay R.		225					
23.	Bank.			225		0		
Oct 11	Advance Oct & Novr P&A.	Bank	118	457 50				
	Pay Oct R1		232 50					
	Pay Novr R1		225			0		

RETURNED TO CANADA
L.P.C. TO 30. 11. 19. [illegible]
TRANSFER TO [illegible]OGER