

ATTESTATION PAPER.

No. 2100598

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Joyce
- 1a. What are your Christian names?..... Jerry Allan
- 1b. What is your present address?..... 19 Somerset St., St. John, NB
2. In what Town, Township or Parish, and in what Country were you born?..... St. John, NB
3. What is the name of your next-of-kin?..... Patrick Joyce
4. What is the address of your next-of-kin?..... 19 Somerset St., St. John NB
- 4a. What is the relationship of your next-of-kin?..... father
5. What is the date of your birth?..... 15th April, 1898
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
11. Do you understand the nature and terms of your engagement?..... yes
12. Are you willing to be attested to serve in the } CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } yes
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? .. no
14. If so, what was the nature of the disability?..... nil
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected?..... no
16. If so, what was the reason?..... nil

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Jerry Allan Joyce, 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. April 9 1918 191

Jerry Allan Joyce (Signature of Recruit)
W. H. Baker (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Jerry Allan Joyce, 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. April 9 1918 191

Jerry Allan Joyce (Signature of Recruit)
W. H. Baker (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 ST. JOHN, N. B. this 9th day of April 1918 191

W. H. Baker (Signature of Justice)

Description of Jerry Allan Joyce on Enlistment.

Apparent Age 19 years 11½ months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 7 ft. ins.

Chest measurement { Girth when fully expanded 34 ins.
Range of expansion 3 ins.

Complexion Ruddy

Eyes blue

Hair black

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

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).

NIL Hearing normal both ears
Vision RD-20-20
LD-20-20

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 April 9 1918 191

Place ST. JOHN, N. B.

J. B. McNamee
Capt. a.m.c.
Medical Officer.

*Insert here "fit" or "unfit."

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

CERTIFICATE OF OFFICER COMMANDING UNIT.

Jerry Allan Joyce 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.

J. B. McNamee Major (Signature of Officer)
CO #9 o/s Siege Battery CEF

Date April 9 1918 191

2/8/18 am

Proceedings of Court of Inquiry or on men
reported Missing on Active Service.....

Attestation Papers.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for
Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

M.F.W. 129 — 1
M.F.W. 82 — 1
Q.F.B. 122 — 1
paycard 1.

DISCHARGE DOCUMENTS



Name, *JOYCE HARRY*
Regt, No. *2100598* Rank, *Ans.*
Comps, *940/5 Sea Bty*

ALAN

R. O. No.....
H. Q. No.....

Don't know
2/10/18

Minor

Index Card
Casualty Card	1
Non-effective Card
Part II Order Card	1
Change of Address Card
Honour & Award Card

14151



Medical Examination upon leaving the Service
of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank..... *Gunner* Name..... *Jerry Allan* Surname..... *Joyce*
Unit or Corps *9th o/s Siege Battery, C.E.F.* (If a soldier) Regtl. No. *2100598*
Born at *19 Somerset St., St. John, N.B.* on, (date) *30th December 1900*
Signature (for identification)..... *J. A. Joyce*

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

1. PHYSIQUE—Any deformity, maiming or lameness? If so, describe.

Weight..... *140* lbs. Colour of eyes..... *Blue*
Height..... *5* ft. *7* in. Identification Marks..... *Nil*

2. NUTRITION AND DIATHESIS?

Good

After searching enquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. NERVOUS SYSTEM? Is there a history of previous disability?

Nil

4. RESPIRATORY SYSTEM? Is there a history of lung trouble?

Nil

5. HEART?

Abnormal Sounds?..... *Nil*
Abnormal Size?..... *Nil*
Pulse Rate?..... *70* Intermittence or Irregularity?..... Muscular Tone? *Good*

6. ARTERIES.—(a) Any hardening or nodulation?

(b) Blood Pressure. *No*

7. DIGESTIVE SYSTEM? (Condition of teeth and tonsils to be included).

Good

8. GENITO-URINARY SYSTEM?

Urinalysis—S.G.?..... Reaction?..... Albumen?..... Sugar?.....

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

Good

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

No

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

Health excellent
Physical condition good

Examined at..... *Battery Point Camp, St. John* Signed..... *F. A. Smith* M. O.
Date..... *18th July 1918* Signed..... *W. Smith* M. O.

Signature note of soldier.

If any disease or impairment of health or physical condition is discovered or complained of by the soldier examined, this report should be sent at once to the O. C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

1

1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 26

100

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 2100593 (Rank) Gunner

Name (in full) Jerry Allan Joyce enlisted in
the 9th o/s Siege Battery, C.E.F.

CANADIAN EXPEDITIONARY FORCE at St. John, N.B. on the 9th
day of April 1918

HE served in 9th o/s Siege Battery, C.E.F.
and is now discharged from the service by reason of

Minor M.D.7 4-J-140

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

Age 17
Height 5 ft. 7 ins.
Complexion Ruddy
Eyes Blue
Hair Black

Marks or Scars

Nil

J. A. Joyce
Signature of Soldier

P. A. DeMorie
Issuing Officer

Major

Rank

20-6-16

Appointment

Date of Discharge July 8th, 1918

Signed at St. John, N.B. this 15th day of July 1918

in Military District No. 7

File Reference No. M.D.7 4-J-140

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. 2100598 (Rank) Gunner Name Jerry Allan Joyce

Unit 9th o/s Siege Battery, C.E.F.

Address on Discharge Battery Point Camp, St. John, N.B.

Character and Conduct Fair

Former Occupation Laborer

Special Qualifications of Value in Civil Life

Laborer

Medals and Decorations None

Remarks

Signed at St. John, N.B. this 18th day of July 1918

P. A. O'Brien

Name of Officer

Major

Rank

20-6-16

Appointment

#9 OVERSEAS SIEGE BATTERY, C. E. F.
FORM OF WILL

I, Jerry Allan Joyce (Name in full)

Regimental Number 2100598 serving in #9 OVERSEAS SIEGE BATTERY, 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 devise all my real estate unto

my father, Patrick Joyce, 19 Somerset
St., St. John, NB Canada

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

absolutely, and my personal estate I bequeath to

the aforesaid Patrick Joyce.

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

NOTE

This space for the
appointment of
Executor if
necessary.

IMPORTANT
NOTE

This must be signed
and Dated by
THE SOLDIER
HIMSELF.

this 11 day of April A.D. 1918

Jerry Allan Joyce.
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.

Signature of First Witness Harry D. Taylor.

Address of Witness ST. JOHN, N. B.

THE TWO
WITNESSES

Occupation of Witness Pay Sergt. #9 OVERSEAS SIEGE BATTERY, C. E. F.

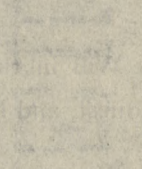
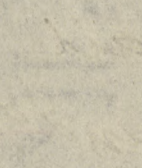
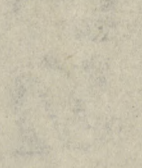
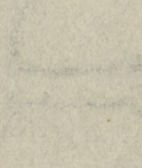
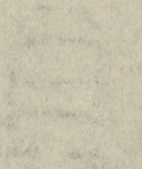
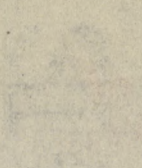
MUST
SIGN HERE

Signature of Second Witness W H Baker

Address of Witness ST. JOHN, N. B.

Occupation of Witness Sergeant #9 OVERSEAS SIEGE BATTERY, C. E. F.

FORM OF WILL



CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 2100598 Rank Gunner Name Joyce, Jerry Allan

Corps #9 OVERSEAS SIEGE BATTERY, C.E.F. who was Discharged.

On July 18 1918, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from July 1 1918, to July 18 1918, the inclusive date of transfer or discharge.

Dr.	\$	c.	Cr.	\$	c.
Bal. Dr. from prev. month			Bal. Cr. from prev. month	10	00
Advances } No.			Reg'tl Pay <u>18</u> days at \$ <u>1</u> c. <u>00</u>	18	00
Cheques } No.			Field Allow. <u>18</u> days at \$ c. <u>10</u>	1	80
Assigned Pay and Sep'n Allce. No.			Separation Allowances* (Monthly)		
Other charges			Other Allowances* <u>Clothing Allowance</u>	35	00
Payment on transfer or discharge No. <u>411</u>	44	57	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	64	80	Total	64	80

* Give particulars.

A monthly stoppage of \$ Nil. (†) has (‡) been paid on account of Assigned Pay for the month of 191... } (to) Assignee.
and Sep'n Allce. for month of 191... }
(Address)

(†) Insert amount to be assigned, whether it has been paid or not.
(‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer

Outfit Allowance of \$..... has been paid by Paymaster, Military District No.....

REMARKS:—

- State (1) date of enlistment 9/4/18
(2) if married and if a Separation Allowance Card has been submitted Nil.
(3) cause of discharge Minor. authority M.D. 7 4 J 140
(4) authority for transfer

NOTE.—Separation Allowance and Assigned pay Card and Index Card (M. F. W. 71) are to accompany the original Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date 18/7/18

Place Battery Point Camp,
St. John N.B.

PA O'Brien Major
O.C. #9 Overseas Siege Battery, C.E.F.
Paymaster.

N.B.—For purposes of transfer this form is to be made out in quadruplicate. Original copy to paymaster of new unit; duplicate to District Paymaster; triplicate to accompany the pay-list at the end of the month, and quadruplicate for retention as a record.

For purposes of discharge it is to be made out in triplicate. Original copy to accompany discharge papers; duplicate to accompany pay-list at the end of the month, and triplicate for retention as a record.

If a man on discharge is entitled to three months' Post Discharge Pay, Last Pay certificate will be made out in quadruplicate. The original Last Pay Certificate will be forwarded with other documents to Paymaster Post Discharge Pay and triplicate, with his discharge documents.

M. F. W. 44.

10M.—12-17.
H. Q. 1772-39-903.

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 Joyce Christian name Jerry Allen
2. Number of report for service or claim for exemption according to Postmaster's receipt or schedule Not app
3. Consecutive number on schedule of men reporting for service (if he appears on it) _____
4. Address (including street and number, if any) 19 Somerset Street St John NB

The following are accurate particulars with regard to the above named man as ascertained by the medical examination on the 11 day of April 1917, by the undersigned medical board sitting at West St John NB

5. Age as stated 19 Years _____ Months. 6. Apparent age 19 Years _____ Months
7. Height 5 Feet 7 Inches. 8. Weight 140 Pounds.
9. Chest measurement { Minimum 31 Ins. 10. Complexion Medium { Eyes Blue
Maximum 34 Ins. Hair Black
11. Physical development. Good { Good Fair Poor 12. Smallpox marks Nil
13. Number of vaccination marks { Right arm Nil 14. When vaccinated last Never
Left arm Nil
15. Distinctive marks and marks indicating congenital peculiarities or previous disease _____

16. Slight defects but not sufficient to cause rejection _____
The man denies having had { Rheumatism We find no evidence of past { Rheumatism
Tuberculosis Tuberculosis
Syphilis Syphilis
(Strike out disease admitted or suspected.)

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
J R Nash President.

Member.			Member.		
Date	Result	VACCINATIONS	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
19-4-18	good	<u>J R Nash</u> M.O.	6.6.18	<u>J R Nash</u> M.O.	
		M.O.			M.O.
		M.O.			M.O.

Joined 9th day of April 1918 at West St John NB

	CORPS	REG'TL NUMBER	HABITS	DATE
Joined on enlistment	<u>9th Siege Bty</u>	<u>2100598</u>		<u>9-4-18</u>
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 J. A. Joyce

SURNAME.

Joyce

CHRISTIAN NAMES

Jerry Allan,

REGL. NO.

2100 5-98

RANK

Gr.

UNIT

9th Siege Bty.

FORMER CORPS

nil

CARD NO.

7
✓

Sold. Dec. 18-7-18. 7
Pl. 11. 200 19-7-18.
FOLL.
minor 19th Dec 1898

T. O. S. *April 9* 19.18

D.O. Part II No *101*

NEXT OF KIN.

NAMES IN FULL

Joyce, Patrick,

RELATIONSHIP TO SOLDIER

Father,

ADDRESS

19 Somerset St., St. John, N. B.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

Canada, St. John, N. B.

DATE

Apr 15th. 1898.

PLACE OF ATTESTATION

St. John. N. B.

DATE

Apr 9th. 1918.

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

No 2100598 RANK

NAME

T. O. S. 9/4/18

UNIT

9th Overseas Siege Battery

(D.O. 101) of 11/4/18

M. D. 6

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1918 Apr 9	1918 Apr. 20	n.	A.H.L. Awarded 3 days CB.	(D.O. 120) of 30/4/18
May		n.	A.H.L. Forfeits 12 days pay	(D.O. 131)
June		✓	A.H.L. " " " "	(D.O. 106) of 9/6/18.



Proceedings on Discharge.

No.	2100598
Rank	Gunner
Surname	Joyce
Christian Name	Jerry Allan
<small>The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Corps (Squadron, Battery or Company)	9th o/s Siege Battery, C.E.F.
Date of Discharge	July 18th, 1918
Place of Discharge	St. John, N.B.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age 17 years months.	Descriptive Marks Nil
Height 5 feet 7 inches.	
Complexion Ruddy	
Eyes Blue	
Hair Black	
Trade Laborer	
Intended place of residence	19 Somerset St. St. John, N.B.
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of Minor M.D. 4-J-140	
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. Fair	
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.

100M.—1-17.
H. Q. 1772-39-113.

(OVER)

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

None

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

6. Medals and Decorations.....

None

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) St. John, N.B.

PA Oetmore Major

(Date) July 18th, 1918

Commanding 9th o/s Siege Battery CEF

8. Certificate to be signed by the Soldier on Discharge

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

(Place) St. John, N.B.

J. B. Joyce (Signature of Soldier.)

(Date) July 18th, 1918

PA Oetmore (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.

J. B. Joyce (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.....(the date to which the Record of Service is completed).....years 100 days.

Total.....years 100 days.

11. Confirmation of Discharge.

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

(Place) St. John, N.B.

(Signature) PA Oetmore Major

(Date) July 18th, 1918

C.O. 9th o/s Siege Battery, C.E.F.

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.)

Nil

No Reservations

.....Signature

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.

Attestation Paper,

Militia Form B. 235.

Squadron }
Battery } Conduct Sheet, " B. 263a.
Company }

Proceedings on Discharge

" B. 218.

Copies of Convictions, by C. P. in MS.

Med. Hist. Sheet, Militia Form B. 313

In the case of recruits who are rejected on final approval, the discharge documents will consist of

Medical Report for Invalid* " B. 227.

(a) Proceedings on Discharge.

Statement of Man's Account on
Transfer and Last Pay Cer-
tificate, " D. 877.

(b) Attestation.

*Only if discharged "Medically unfit."

(c) Medical History Sheet (in the event of such having been prepared.)

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.

Statement of Service.

Confirmation of Discharge.

The discharge of the above named man is hereby confirmed.

St. John, N.S.

July 18th, 1913

(Signature)

C.O. 9th c/o 5th Battery, C.S.F.