

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

- 1. What is your surname?..... Rose
- 1a. What are your Christian names?..... Ernest
- 1b. What is your present address?..... Aurora, Ont.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Queensville, Ont. Canada.
- 3. What is the name of your next-of kin?..... Maria Rose
- 4. What is the address of your next-of-kin?..... Box 495, Aurora, Ont.
- 4a. What is the relationship of your next-of-kin?..... Mother
- 5. What is the date of your birth?..... 30 April 1889
- 6. What is your Trade or Calling?..... Farmer
- 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?..... 12th. York Rangers
- 10. Have you ever served in any Military Force?..... No
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... Yes
- 12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? }..... Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Ernest Rose, 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.

Ernest Rose (Signature of Recruit)

Date 31 July 1916 M. H. Southwood (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Ernest Rose, 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.

Ernest Rose (Signature of Recruit)

Date 31 July 1916 M. H. Southwood (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 Aurora this 31 day of July 1916.

W. J. S. (Signature of Justice)

Description of ERNEST ROSE 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. 7 ins.

Chest measurement { Girth when fully expanded 35 ins.
 Range of expansion 2½ ins.

None

Complexion Ruddy

Eyes Blue

Hair LT. Brown

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 31 July 1916.

W. J. Stevenson

Place Aurora, Ont.

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.

Ernest Rose 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.


W. J. Brown Lieut. Col. (Signature of Officer)
 O/C 220th Overseas Bn. C.E.F.

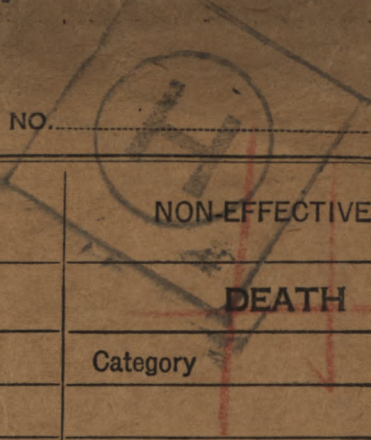
Date July 31st 1916.

REGIMENTAL DOCUMENTS

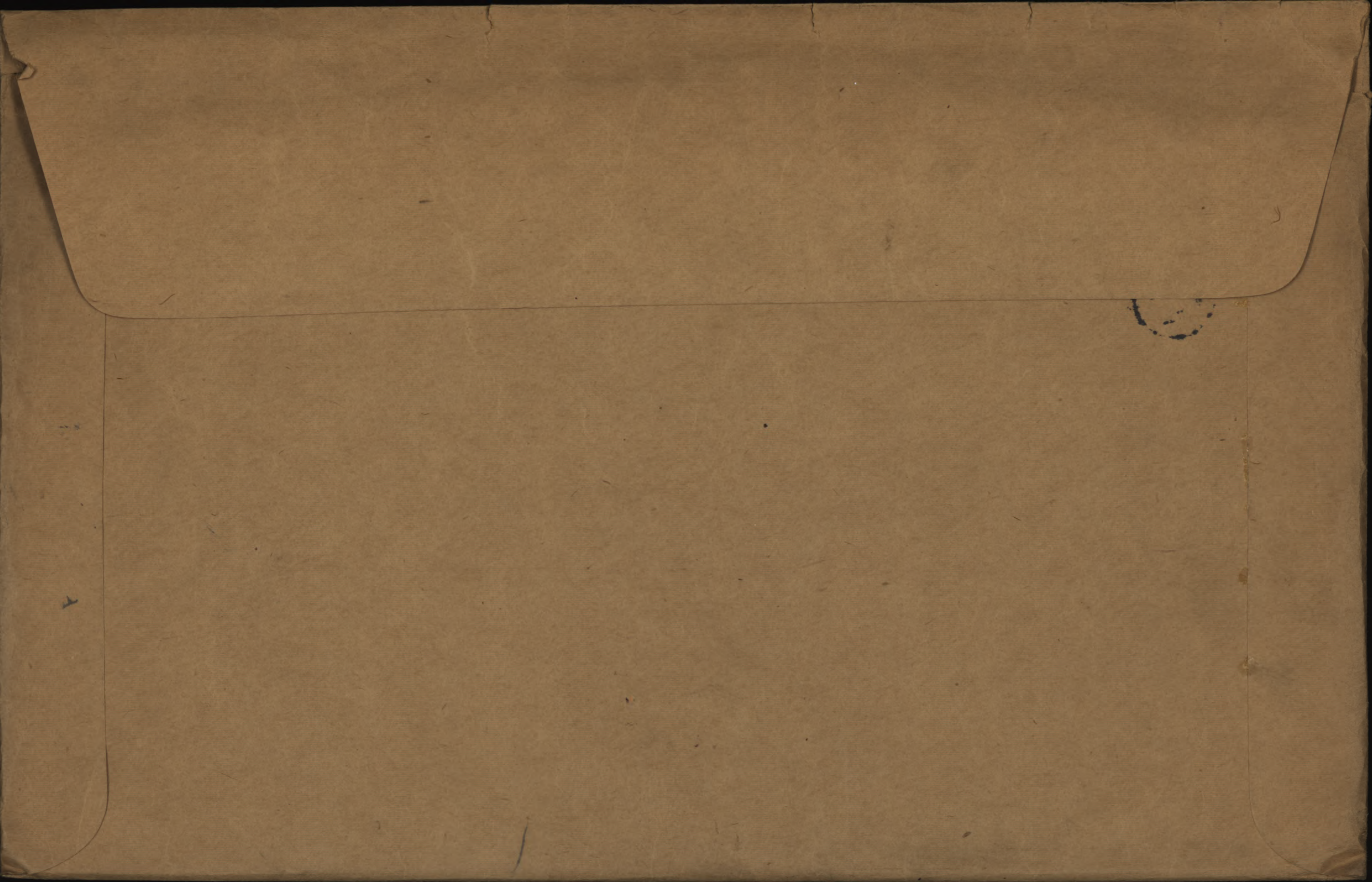
NAME *Rose Ernest*

REGT. NO. *285538* UNIT *2204 Bn* H. Q. FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH Category
CASUALTY FORM (M.F.B. 54 or A.F.B. 103)					
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					DISCHARGE Category
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					
DENTAL HISTORY SHEET (M.F.B. 465)					
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					DESERTION
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)			22616		
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
<i>See above</i>					
<i>Ref will</i>					
<i>Rf 122</i>					
					34 ——— 9 16 ——— 9 4 ——— 9
					1



mx
2/1/20



NAME

Rose Ernest

REG'T'L. No. 283-538

H. Q. FILE NO 649

RANK AND CORPS

Pte

15th Bn. form 220 ~~th~~ Bn

FOLLOWS

No.

CABLE

No.

DATE

NATURE OF CASUALTY

FOLLOWS

N. of N.

Mrs. Marie Rose (Mother)

99-3

Box 495 Aurora Ont

Q. 500

4-9-18

No. in A. Aug. 29th 1918

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

a309' Dept from Base 29-8-18 Killed in action

acc
[Signature]

Number 285-5-38

Rank

Pte -

~~B~~

Surname

ROSE

Christian Name

Ernest

~~X~~

Units

15th

Bn. Can. Inf.

Theatre of War

France.

Date of Service

26-3-18

D

Remarks

Mother

Latest Address

Mrs. Maria Rose

Box 455 Aurora

Roll No

Out.

200m. -2-21. M.

"B" Page 9067

Next of kin _____

Address on leave _____

Address on discharge _____

Transportation issued Yes No Date _____ Character on discharge _____

Previous occupation _____ Date and place of enlistment _____

Diagnosis _____ Date of Medical Boards _____

Date _____ Remarks _____

DES. 141521
NOV 14 1921
REGN. NO. 1277

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

6499-R-13516

Rose, E. Pte. # 285538-15th.Bn.

not liq. for star

Medals & Dec. (Mother)

Mrs. Maria Rose,
Aurora, Ont. *Box 455*

P. & S. (Father)

Mr. Andrew Rose,
Aurora, Ont. *Box 455*

(Serial no. 789548.)

Mem. Cross. (Mother)

See above.

MAR 10 1920
Scroll Desp. Reqn. No 2-27090

SEP 29 1920
Plaque Desp. 28892 Reqn. No PA207

D
Desp 3-11-20

(m) c 28935

M

649-T-7287

737

7
—
12
18

No. 285538 RANK Pte

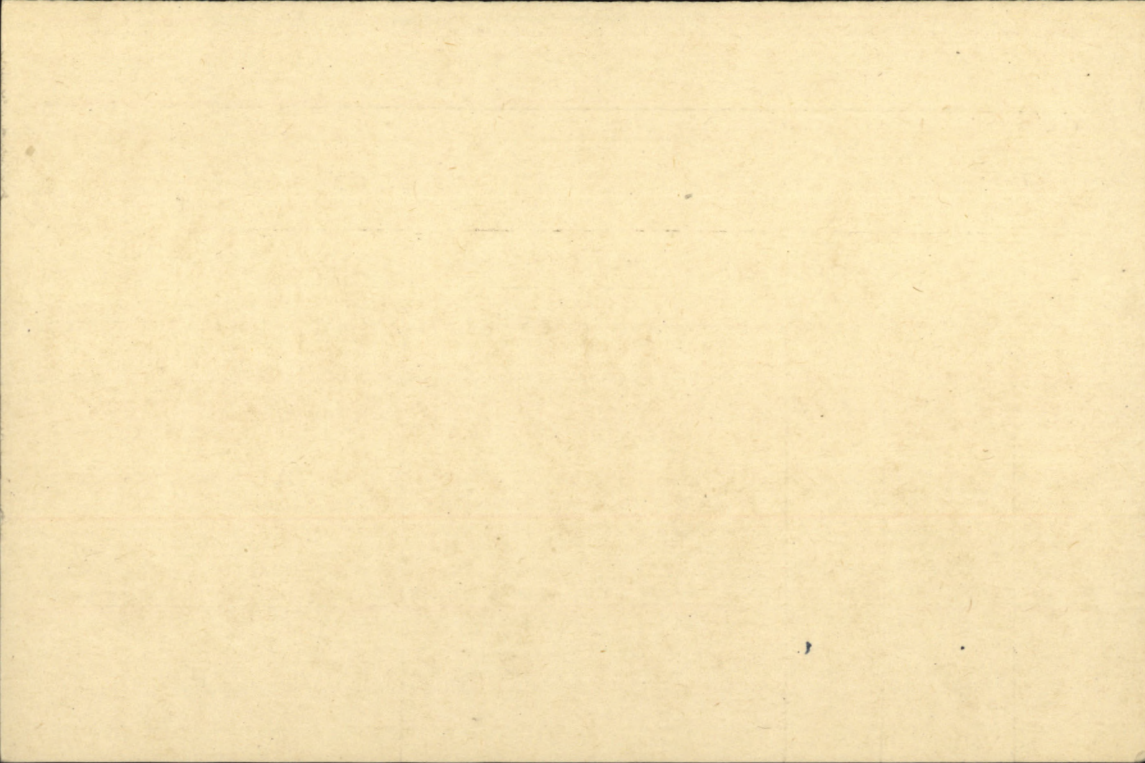
NAME Rose. Exnert

T. O. S. 1-8-16
no 91 of 2-8-16

UNIT 220th Battalion C-E. I

M. D. 2

			PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
PAID FROM	PAID TO	SIG. OR REC'T	PARTICULARS	AUTHORITY
1916	1916			
Aug 1	Aug 31	✓		
Sept		✓		
Oct		✓		
Nov.		✓		
Dec		✓		
1917	1917			
Jan.		✓		
Feb.		✓		
Mar.		✓		
Apr.		u.		



K. 19

SURNAME.

Rose

CARD NO.

✓

CHRISTIAN NAMES

Ernest

FOLL.

REGL. NO.

283338

RANK

Plt

UNIT

220th

Pin

FORMER CORPS

12th York Rangers

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Rose, Mrs Maria

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

Box 493- Aurora, Ont.

COUNTRY OF BIRTH

Canada Queensville

DATE

Ont- April 30th 1889

PLACE OF ATTESTATION

Aurora, Ont

DATE

July 31st 1916

O/S. 29/4/17.

From Halifax Per. S.S. "Olympic" 29-4-17

MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

yes
Methodist

DESCRIPTION.

APPARENT AGE

23

YEARS

MONTHS

HEIGHT

50

FEET

7

INCHES

CHEST MEASUREMENT

33

INCHES

EXPANSION

2 1/2

INCHES

COMPLEXION

Ruddy

EYES

Blue

HAIR

Light Brown

DISTINGUISHING MARKS

Nil

MEDICAL EXAMINATION.

PLACE

Aurora, Ont.

DATE

July 31st 1916

Present address.

Aurora, Ont.

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

Rose

E.

285-138

RANK

UNIT

Co.

TROOP

BATTY.

Plt
HOSPITAL

1st Lt 15-

DATE OF ADMISSION

1.

HOSP.

2.

OSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

1.

2.

3.

R-F B - Killed in Action 29-8-18 R

DISPOSITION

DATE

of 3.9.18 a309.

REMARKS

A.M.D. 2 DEPT.
Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

2.

3.

4.

5.

6.

7.

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

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

250M.—1-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 220th YORK RANGERS, OVERSEAS BN. C.E.F.

Regimental No. 285538 Rank Private Name ROSE, Ernest

Enlisted (a) 31/7/16 Terms of Service (a) ONE YEAR, OR DURING THE WAR, OR FOR SIX MONTHS AFTER THE WAR Service reckons from (a) 31/7/16

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) James, Pte.

Date	Report From whom received	Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
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<u>14-5-17</u> <u>7th</u>	<u>O.C. 220th</u> <u>Pvt.</u>	<u>Embarked</u> <u>Disembarked</u> <u>Transferred to 3rd</u> <u>Reserve Battalion</u> <u>D.O. Pt. 2 #92.</u>	<u>Halifax</u> <u>Liverpool</u> <u>W. Sandling</u>	<u>28/4/17</u> <u>7/5/17</u> <u>7/5/17</u>	<u>Adjutant</u> <u>ADJUTANT 220th YORK RANGERS</u> <u>OVERSEAS BATTALION C. E. F.</u>
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<u>9/5/17</u>	<u>O.C. 3rd</u> <u>Res. Bn. C.E.F.</u>	<u>Taken on Strength</u>	<u>W Sandling</u>	<u>7/5/17</u>	<u>Pt II Bn O</u> <u>126</u>
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<u>JUN 4 1917</u>	<u>O.C. 3rd</u> <u>Res. Bn. C.E.F.</u>	<u>Transferred to</u> <u>134th</u> <u>Bn</u>	<u>W Sandling</u>	<u>JUN 4 1917</u>	<u>152</u>
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W. Sandling
O.C. 3rd RESERVE BN. C.E.F.

<u>5-6-17.</u>	<u>O.C. 134th</u> <u>Bn.</u>	<u>Taken on strength of 134th</u> <u>Canadian Infantry Battalion.</u>	<u>Witley</u>	<u>4-6-17.</u>	<u>Pt. 11 D.O. No. 156.</u>
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(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.

285538 Plt. Rose E.

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				
6-3-18	Of 134 th Bn	Transferred 12 th Res. Bn	Witley	6-3-18	Part Two DO No 25 ✓ Transferred 12 th Res. Bn
7-3-18	12th. Bn.	T.O.S. 12th. Res. Bn.	Witley.	6-3-18	Part II 57 ✓
26-3-18	do.	S.O.S. to 15th. Bn.	do.	26-3-18	Part II 73. <i>E. J. Hoag</i> Lieut. i/c Records 12th. Res. Bn.
	C. B. D.	ARRIVED C. B. D.	FRANCE	26/3/18	N. R. D. 28/3/18 PART II ORDERS No. 24 D. 2/4/18
	C. B. D.	LEFT C. B. D. FOR	66R6	30/3/18	N. R. D. 30/3/18
11 AOU 1918	C. B. D.	ARRIVED 66R6 BN.	FIELD	" "	B. 213 NR. 311
17 AOU 1918		LEFT FOR UNIT		11 AOU 1918	
		JOINED UNIT		13 AOU 1918	
30-8-18.	15th Bn.	Killed in Action.	Field.	29-8-18.	Telegram. KA.T/16708. Pt. II. O. 73 d/31-8-18.

Richard Fox

LIEUT.
FOR LT COL.
A.A.G.

CERTIFIED CORRECT.
APR 10 1918
CAN. RECORDS DIV.



m + 21/10/20

G.C. Rank 220th. Bn. to 1st. Cent. Unit Name ROSE. Ernest. Reg'l No. 285538.
 If in perm. Corps What Unit? Married or Single Single.
 Place and Date of Enlistment Aurora. 31st. July 1916. Place of Birth Queensville Ont.
 Name and Address, Next-of-Kin Maria Rose, Box. 495. Aurora. Ont. Canada. Relationship Mother.
 Assigned Pay Monthly \$ _____ Payable to _____ Relationship _____
 Separation Allowance \$ _____ Payable to _____ Relationship _____

(Handwritten circled 'H')

N/E R.B. No. 14071
 File R.L. 25-R-2788
 Category Am A

Discharge, Date and Place Reason Character
 H. W. V., Ltd.—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.				
<i>C</i>		ARRIVED IN ENGLAND 7 5 17 S.S. OLYMPIC			
<i>9.5.14</i>	<i>3rd Res</i>	<i>T.O.S</i>	<i>W. Sandling</i>	<i>7.5.14</i>	<i>Pt 110 126 220th Bn Pt 110 92</i>
<i>4.6.17</i>	<i>"</i>	<i>S.O.S to 134th Bn</i>	<i>"</i>	<i>4 6/17</i>	<i>152 (P.O. 156 5-6-17) 134th Bn.</i>
<i>7.3.18</i>	<i>12 Res</i>	<i>I.O.S from 134th Bn</i>	<i>Pt Witley</i>	<i>6.3.18</i>	<i>Pt 10.57. 25d 6 318 134th Bn.</i>
<i>26.3.18</i>	<i>"</i>	<i>I.O.S to 15th Bn etc.</i>	<i>"</i>	<i>26.3.18</i>	<i>Pt 1073. 24d. 2-4.18. 15th Bn</i>
<i>31.8.18</i>	<i>15th Bn</i>	<i>Killed in action</i>	<i>"</i>	<i>Field</i>	<i>29.8.18 — 43</i>

APR 1918 CHECKED

ORIGINAL MEDICAL HISTORY SHEET.

ORIGINAL

Surname ROSE Christian Name ERNEST

Examined { on <u>31</u> day of <u>July</u> 191 <u>6</u> { at <u>Aurora</u>	Approved by <u><i>[Signature]</i></u> Rank <u><i>[Signature]</i></u> M.O.																																	
Birthplace { City or Town <u>Queensville</u> { County <u>York</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Date.</th> <th style="width: 10%;">Fit or Unfit.</th> <th style="width: 75%;">EXAMINED FOR RE-ENGAGEMENT.</th> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.																														
Date.		Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.																															
Apparent age <u>25 years</u> Trade or occupation <u>Farmer</u> Height <u>5</u> Feet <u>7</u> Inches. Weight <u>140</u> Lbs. Chest measurement { Minimum <u>32½</u> inches. { Maximum expansion <u>35</u> inches. Physical development <u>Good</u> Small-Pox Marks <u>None</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Date.</th> <th style="width: 10%;">Result.</th> <th style="width: 75%;">VACCINATIONS.</th> </tr> <tr> <td><u>2/2/17</u></td> <td><u>X</u></td> <td><u><i>[Signature]</i></u> M.O.</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Date.	Result.	VACCINATIONS.	<u>2/2/17</u>	<u>X</u>	<u><i>[Signature]</i></u> M.O.																											
Date.		Result.	VACCINATIONS.																															
<u>2/2/17</u>	<u>X</u>	<u><i>[Signature]</i></u> M.O.																																
Vaccination Marks { Arm <u>None</u> Right. Left. { Number <u>None</u> When Vaccinated last <u>Never</u> (a) Marks indicating congenital peculiarities or previous disease <u>None</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Date.</th> <th style="width: 10%;">Result.</th> <th style="width: 75%;">ANTI-TYPHOID INOCULATIONS, ETC.</th> </tr> <tr> <td><u>4/10/16</u></td> <td><u>X</u></td> <td><u><i>[Signature]</i></u> M.O.</td> </tr> <tr> <td><u>11/10/16</u></td> <td><u>X</u></td> <td><u><i>[Signature]</i></u> M.O.</td> </tr> <tr> <td><u>19/10/16</u></td> <td><u>X</u></td> <td><u><i>[Signature]</i></u> M.O.</td> </tr> <tr> <td><u>7/16/17</u></td> <td><u>X</u></td> <td><u><i>[Signature]</i></u> M.O.</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.	<u>4/10/16</u>	<u>X</u>	<u><i>[Signature]</i></u> M.O.	<u>11/10/16</u>	<u>X</u>	<u><i>[Signature]</i></u> M.O.	<u>19/10/16</u>	<u>X</u>	<u><i>[Signature]</i></u> M.O.	<u>7/16/17</u>	<u>X</u>	<u><i>[Signature]</i></u> M.O.																		
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<u>7/16/17</u>	<u>X</u>	<u><i>[Signature]</i></u> M.O.																																
(b) Slight defects but not sufficient to cause rejection <u>None</u>																																		

Enlisted on 31 day of July 1916 at Aurora

CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	220th O.S. Bn. 285538		31/7/16
Transferred to	<u>134th P. In.</u>		<u>4-6-17</u>
	<u>12th Res. P. In.</u>		<u>6-3-18</u>
	<u>15th P. In. 26/2/18</u>		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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.

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12.
 25m—4-17.
 H. Q. 1772-39-819.

To Whom *Mrs Miria Rose.* By Whom Assigned *Rose Ernest*
 Address *Aurora* Regtl. No. *295538*
Ont. Rank *plz.*
 Corps *220th Batt.*

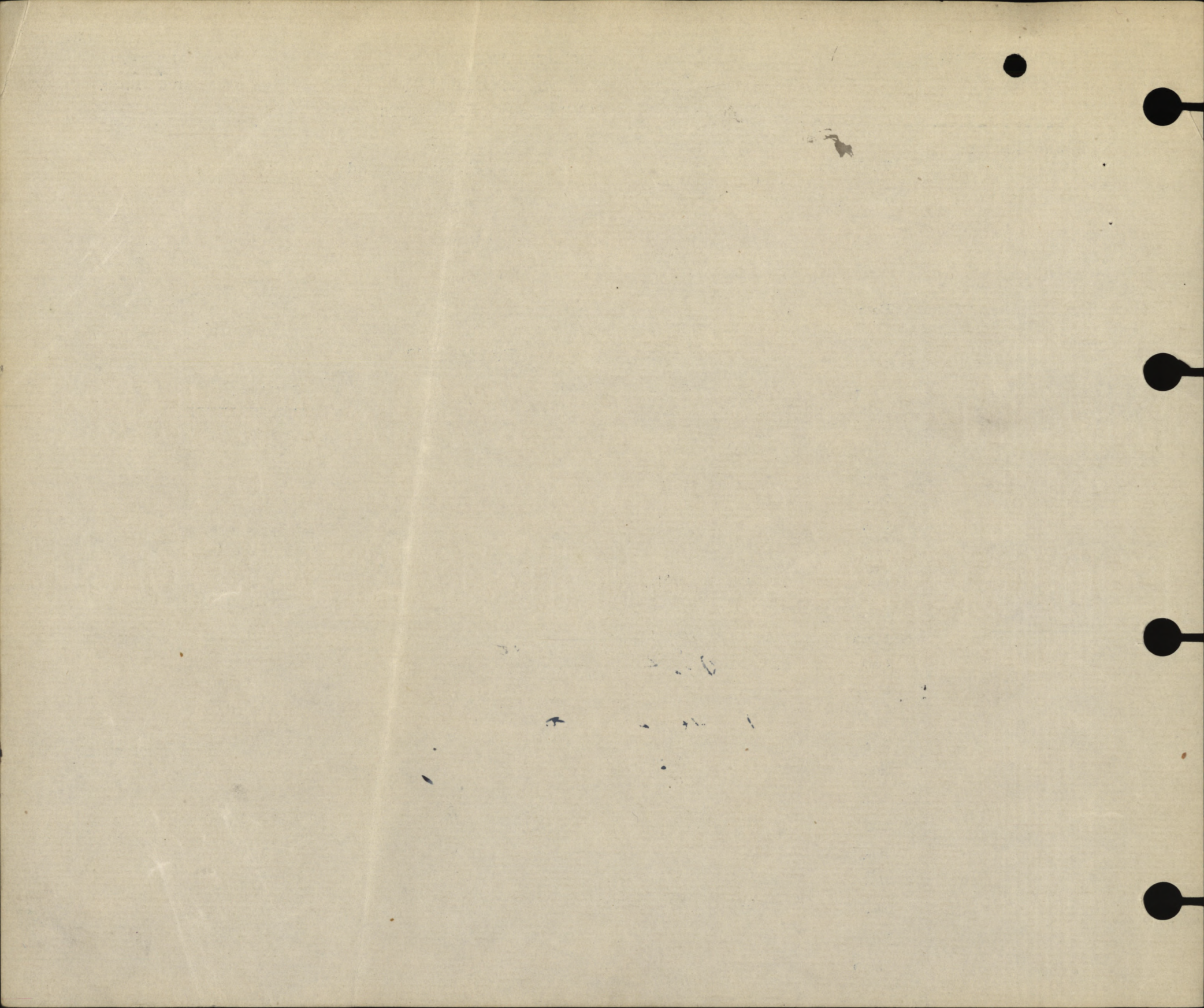
Rate *\$ 20.00*

MAY 1 1917

May 1st 1917. PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				





MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.
 50m.-6-16.
 1772-39-819.

Sheet No. 2 *Mrs Miriam Rose.*

OVERSEAS CONTINGENTS

Name of Soldier *Rose Ernest*

PAYMENTS.

L. L. Job 4503. - Req. 6332.

ptg. 285538. 220th Br.
#20.00 MAY 1 1917
May 1st 1917

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May		<i>Z 14400</i>	<i>20</i>	
June		<i>S 18189</i>	<i>20</i>	<i>B.</i>
July		<i>M 28645</i>	<i>20</i>	<i>b</i>
Aug.		<i>2 32352</i>	<i>20</i>	
Sept.		<i>J 39696</i>	<i>20</i>	<i>lu</i>
Oct.		<i>D 46827</i>	<i>20</i>	
Nov.		<i>T 52630</i>	<i>20</i>	
Dec.		<i>J 62706</i>	<i>20</i>	<i>160 1/4</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

not

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

ASSIGNED PAY	ENGLAND OR CANADA.	SEPARATION ALLOWANCE.	ENGLAND OR CANADA.	NAME: ROSE Ernest			
EFFECTIVE DATE: 1/5/17		EFFECTIVE DATE: -		NUMBER: 285588			
AMOUNT: 80.		AMOUNT: -		PARTICULARS OF RANK OR APPOINTMENT			
NAME, ADDRESS, RELATIONSHIP & AUTHORITY			WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.	AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT			
M ^{rs} Maria Rose (mother) Aurora. Ont							
stopped off 1/9/18.							
EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS				UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK			
DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R.	UNIT PAID BY	AMOUNT
DAILY RATES OF PAY AND ALLOWANCES							
AUTHORITY		PAY	F.A.	P.F.A.	SUBS'CE ALL'CE		
		1-	10				

PARTICULARS OF RENDERING NON-EFFECTIVE: - K in A. 29/8/18. C.A. 309. 3/9/18.													
MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION		
1918									19 34				
April	P.P.	33		Apr 68. 1 st Wing CERC 5/4/18 Can - A.P.	3 57			20					
				Apr 172 1 st Wing 6626 2/4	3 57			20	25 20				
		33			7 14								
May	P.P.	34	10	Can A.P.				20					
				Apr 300 1 st Wing CERC 5/5	5 35								
				43 CERC 20/5	4 46			20	29 49				
		34	10		9 81								
June	P.P.	33		Can. A.P.				20					
				498 1 st Wing C.E. RC 7/6	3 57								
				618 " " " 20/6	4 46			20	31 46				
		33			8 03								
July	"	34	10	Can A.P.				20					
				9207 1 st Army must. C. 2/7	4 46			20	44 10				
		34	10		4 46								
August	"	34	10	Can A.P.				20					
				990 5/8. 1 st Div. CERC	3 57								
				9952. 17.7.18 do.	3 57								
				497. 22-8-18. 3 Bds	3 57				47 49				
		34	10		10 71			20					
Sept	for Note #10331 Cash in Effects.								50 46				
					29								
May				DMOR 2271 24/4/19 to Ottawa	50 46				Nil				
					50 46								

Amt. of a/c rend. to Estates Beh. 7/2/19 \$50.46 credit.

20

Perforated sheet for Will from Pay Book of Reg.

No. 285538

Name Pte E. Rose

Unit 220th Bn 3rd Reserve
(3rd Can. Res. Bn)

Military Will

In the event of my death I
leave all my personal estate
to my mother

Maria Rose

Box 495 PO

Aurora

Ontario

Signature E. Rose

Rank and Regt. Pte 220th CEF

Date 1/6/17

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

May 1/19

RATE OF SEPARATION ALLOWANCE

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RATE OF ASSIGNMENT

<i>20</i>			
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06531

R

PARTICULARS OF SEPARATION ALLOWANCE

No. *285-538*
 Rank *Pte* Promoted Reverted Discharge
 Soldier's Name *C Ernest Rose*
 Battalion *220 Batt*
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name *Mrs Miria Rose*
 Address *Aurora ent.*
 Change of Address
 1
 2
 3
 4

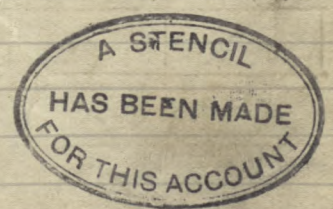
Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec 31</i>	<i>—</i>		<i>160</i>	<i>160</i>	
<i>Jan</i>	<i>964782</i>		<i>20</i>	<i>20</i>	
<i>Feb</i>	<i>979801</i>		<i>20</i>	<i>20</i>	
<i>Mar</i>	<i>95012</i>		<i>20</i>	<i>20</i>	✓
<i>Apr</i>	<i>775-3</i>		<i>20</i>	<i>20</i>	✓
<i>May</i>	<i>V 15489</i>		<i>20</i>	<i>20</i>	✓
<i>June</i>	<i>S. 26279</i>	✓	<i>20</i>	<i>20</i>	✓
<i>July</i>	<i>E 20885</i>	✓	<i>20</i>	<i>20</i>	✓
<i>Aug</i>	<i>S 40752</i>		<i>20</i>	<i>20</i>	✓
<i>Sep</i>			<i>40</i>	<i>320</i>	✓

015 623 - E - 10.

*Killed in Action per C.L. 293. fol H.
 Aug 9th. 6th Sept 1918
 M.R.O. Destroy issued 6966. G.H.B. 12/9/18
 P.B.C. para. 1. Rendered 10/9/18.
 E.H. Baskley 12/9/18.*

*8. 2. 13 R
A.H.*

M. F. W. 128
 400M. - 6-17-1772-39-1141
 L. L. 22320 - M. & D. 1933.



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

Table with 4 empty columns for separation allowance rate.

RATE OF ASSIGNMENT

Table with 4 empty columns for assignment rate.

PARTICULARS OF SEPARATION ALLOWANCE

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Table with columns: Date, Cheque No., Amount S/A, Amount A/P, Total, REMARKS

M. F. W. 128
400M-617-1772-39-141
L. L. 22220-M. & D. 1188