R/Board John Henry Rawsthorne Slack

Original

Dec/83

ATTESTATION PAPER.

No. 174073

83rd Overseas Battn. C.E.F.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name? — J. R. Slack
2. In what Town, Township or Parish, and in what Country were you born? — Manchester, England.
3. What is the name of your next-of-kin? — Bertha Slack
4. What is the address of your next-of-kin? — 38 Lindsey Ave, Toronto, Canada.
5. What is the date of your birth? — Nov. 25 1883
6. What is your Trade or Calling? — Clerk
7. Are you married? — yes
8. Are you willing to be vaccinated or re-vaccinated? — yes
9. Do you now belong to the Active Militia? — yes. No
10. Have you ever served in any Military Force? — ~~yes~~ 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

J. R. Slack (Signature of Man).

H. Smith (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, J. H. R. Slack, do solemnly declare that the above answers made by me to the above questions 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.

J. R. Slack (Signature of Recruit)

Date 18 Aug 1915 H. Smith (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, J. H. R. Slack, 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.

J. R. Slack (Signature of Recruit)

Date 18 Aug 1915 H. Smith (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 Toronto this 18 day of Aug 1915

W. Mills (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

C. D. Cotton (Approving Officer)

M. F. W. 23.
200 M.—5-15.
H. Q. 1772-89-841.

Description of John Henry Rawthorne Slack on Enlistment.

Apparent Age 33 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 3½ ins.

Chest measurement:
- Girth when fully expanded ..... 35 ins.
- Range of expansion ..... 2 ins.

Complexion Fair

Eyes Blue

Hair Light Brown

Religious denominations:
- Church of England ..... yes
- Presbyterian .....
- Wesleyan .....
- Baptist or Congregationalist .....
- Other Protestants ..... (Denomination to be stated.)
- Roman Catholic .....
- Jewish .....

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).

Scar over Left eye.

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 Aug. 20th 1915 ..... F. W. Merritt

Place Toronto ..... Major
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.

H. R.
John Slack 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.

Reg Pellatt Lt Col (Signature of Officer)

Date AUG 20 1915 191 .

7/5/18

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

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms.....

Proceedings on discharge..... 2

Corps History Sheet.....

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

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 2

Proceedings of Regt. Court Martial .....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit..... 1

Last Pay Certificate..... 1

1A 7 B122.

1B122

M. F. W. 62.
100m.—6-17.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

R. O. No.....

H. Q. No.....

Name SLACK John Henry Rawthorne

Regt. No. 172073 Rank Pte

Corps 83rd Bn

Phys. Defect.

Mel 21/4

M

Ret 2-10-19

Ret. 3.10.19

23414

H

Form (D.M.S. 1312). A.F.B. 179 Canada (Revised). 3737. 50M.

Reserved for M.H.C.

Regt. No. 172073 Rank Private Surname SLACK Christian Name JOHN HENRY RAWSTHORNE

Unit or Corps—(a) Overseas from United Kingdom not applicable (b) In United Kingdom 12th Reserve

Born at—Town Manchester County or Province Lancashire Country England

Date of Birth—Day 25 Month November Year 1882 Age 33 yrs. 4 months.

Joined at Toronto Ontario Canada Date August 18th 1915

Former Trade or Occupation Clerk

Permanent marks or peculiarities that will serve for future identification:—
Scar over Left Eye 1 inch long
Scar in Palm of Left hand 3 inches long

Height—feet 5 inches 3½ Colour of eyes Blue

Signature of Soldier (*for identification purposes*) John H. R. Slack

Medical Report.

☞ *The answers to the questions below are to be filled in by the Officer in medical charge of the case. He will carefully discriminate between the soldier's unsupported statements and the evidence as recorded in the medical or other military documents bearing on the case. He will plainly state the existence of any of the disability prior to the soldier joining for the present war.*

1. DISABILITY (*State the actual disabling conditions as distinguished from the diseases or injuries from which they resulted*). (*Follow the official nomenclature as far as possible.*)

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*) SHORTNESS BREATH

Disabilities Group (*b*) —

Disabilities Group (*c*) —

2. CAUSE OF DISABILITY. (*Follow the official nomenclature in stating the disease or injury.*)

	Disease or injury to which the disability is due.	Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	V. D. H.	Kearsley England.	1900.
(*ii.*) As to Group (*b*) above.	—		
(*iii.*) As to Group (*c*) above.	—		

NOTE.—By Active Service is meant Service with the Colours in Canada, United Kingdom, or elsewhere during the present war (since August 4th, 1914).

3. Is the disability due to disease contracted or injuries received prior to Active Service?

(*i.*) As to Group (*a*) above? yes If yes, has Active Service aggravated it? yes

(*ii.*) As to Group (*b*) above? — If yes, has Active Service aggravated it? —

(*iii.*) As to Group (*c*) above? — If yes, has Active Service aggravated it? —

4. Is the disability due to disease contracted or injuries received while on Active Service—

(*i.*) As to Group (*a*) above? no

(*ii.*) As to Group (*b*) above? —

(*iii.*) As to Group (*c*) above? —

PART I. *(continued).*

5. If a cause of disability was an injury received on Active Service, was it received—

(i.) While on duty? not applicable (ii.) While off duty?

(iii.) Was a Court of Inquiry held? (iv.) Where? (v.) When?

(vi.) Opinion of the Court?

6. HISTORY OF THE CASE. *(State concisely the essential points of the history, noting the entries made on the Medical History Sheet and other records).*

Was in France 3 months with Concert Party.
While in army has done no drills, employed in stores.
Never in Military Hospital.
Eighteen years ago acute Rheumatism, following which had he says Valvular disease of Heart. Since then only one acute attack of Rheumatism which was 8 years ago.
Medical Board East Sandling 18-1-17. V.D.H. B^III (Singer)

7. PRESENT CONDITION. *(Give previous and present weight if likely to indicate progress of disability.)*

Complains of Shortness of Breath on exertion, unable to do route marches, or P.T. Heart enlarged. Right Border 1½ inches from middle line, Left Border 5 inches from middle line apex in 6th Intercostal nipple line. Loud Blowing murmur heard most prominent in 2nd Right Intercostal, & covering both sounds transmitted up into neck & down sternum to apex. Pulmonic & Tricuspid ~~Areas~~ sounds masked by this murmur. Apex systolic murmur transmitted into axilla, 2nd sounds not clear, & sharp. Liver Enlarged. & Border 1½ inches below Costal margin. Nipple line. no swelling ankles.

8. OPERATION. (i.) Was one performed?

(ii.) If so, state what. not applicable

(iii.) Was one advised and declined?

Pulse setting 84. Exertion 180 after 10 minutes 84
Renal. Digestive. Respiratory Nervous system normal

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto unless there is evidence to the contrary.

9. (i.) Is there loss or decay of teeth attributable to Active Service? no

(ii.) If so, describe.

10. DO YOU RECOMMEND:—

(a) Fit for duty? no

(b) Fit for base duty? yes B^III Permanent

(c) Invalid to Canada? no

(d) Discharge from the Service as permanently unfit? no

Date of Report Feb 11 1918 Signed J. H. Coates Capt

Station East Sandling Officer in medical charge of case. D.O.S. Pris 62

I have satisfied myself of the general accuracy of the above Report, and concur therein ~~*except~~ C. E. Flatt Capt

Officer i/c Hospital / S.M.O. / Brigade / Strike out one of these.

Dated at East Sandling Station, on 15/2/1918

* Delete if inapplicable.

PART II.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

☞ *Clear and decisive answers are to be given to all questions. Such terms as "may," "perhaps," "probably," "possibly," are not to be employed. Disability due to causes arising on Active Service is to be clearly shown in order that the Pensions Authorities may deal with the case properly.*

11. Is the disability fully indicated in Part I. (1)? yes
If not, indicate it.

12. Is the cause of the disability fully indicated in Part I. (2)? yes
If not, indicate it.

13. Was the disability caused or aggravated by— (*a*) Negligence of the Soldier { Caused? no / Aggravated? no } (*b*) Misconduct of the Soldier { Caused? no / Aggravated? no }

14. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(*Estimate at none*, 10%, 20%, 30%, 40%, 50%, 60%, 70%, 80%, 90%, *or* 100%.)
not applicable

15. THE PENSIONABLE DISABILITY.—*see Part I.* (3). *Aggravation on Active Service of a disability existing previous to joining is to be included in the estimate*).
What part of the entire disability estimated next above in (14) is due to causes arising during Active Service?
(*Estimate at none*, $\frac{1}{5}$, $\frac{2}{5}$, $\frac{3}{5}$, $\frac{4}{5}$, *or all.*)
not applicable

16. Permanency of the Pensionable Disability estimated next above in (15).
(*i.*) Is it permanent? not applicable
(*ii.*) If not permanent, what is its probable minimum duration (*in months*)? not applicable

17. If an operation was advised and declined, do you consider the refusal to have been unreasonable? not applicable

18. Remarks.

19. Recommendation:—(*a*) Fit for duty? no
(*b*) Fit for base duty? yes Bill not liable to be recalled in 6 months
(*c*) Invalid to Canada? no
(*d*) Discharge from service as permanently unfit? no

Classification for the Military Hospitals Commission.

Date of Board 12/2/18

Signatures of the Board. G. S. Mollenville Maj President.

Station East Sandling

Approved J. P. Goodall Major A.D.M.S.

Dated at Station

Proceedings of the Pensions and Claims Board on the Soldier mentioned in Part I.

The Pensions and Claims Board, Canadian Expeditionary Force, assembled at

on the day of 191

Members of the Board :—

The Board having considered the evidence of the soldier marginally named, together with the documents submitted, recommend :—

Dated at this day of 191

Signatures of the Board

President.

This space to be for numbers.

Proceedings on Discharge.

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

No.	172073
Rank	Pte.
Name	SLACK , J.H.R.
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	83 Bn.
Date of Discharge	April 11, 1918
Place of Discharge	Toronto, Ont.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 35 years 4½ months.
Height 5 feet 3½ inches.
Complexion Fair
Eyes Blue
Hair Brown
Trade Clerk
Intended place of residence (To be given as fully as practicable.) 22 St. New Toronto Ont.

Descriptive Marks
Vacc. Left Arm
Scar on Palm of Left Hand.

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

PHYSICAL UNFITNESS

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.

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

3. Conduct and character while in the service have been, according to the records, etc.

Very Good. H.M.

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

Clerk

M. F. B. 218.
100m.—6-16.
H. Q. 1772-39-113

(OVER)

Duplicate W.S.S. Comp. D
28-5-19
26/6/19 J. S.
M. E. B.
KCR 2-10-19 23

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

Nil

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

6. Medals and Decorations ..... Nil

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) Toronto, Ont.

(Date) April 11, 1918

Commanding W M Richardson Lieut.
For O. C. Casualties, C. E. F., M. D. No. 2

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) Toronto, Ont. John R. Slack (*Signature of Soldier.*)

(Date) April 11, 1918 H S Benner (*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) Toronto, Ont.

(Date) April 11, 1918

(Signature) W M Richardson Lieut.
For O. C. Casualties, C. E. F., M. D. No. 2

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.)

(OVER)

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263.	Attestation Paper,	Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet,	" B. 263a.	Proceedings on Discharge	" B. 218.
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia Form B. 313		
Medical Report for Invalid*	" B. 227.		
Statement of Man's Account on Transfer and Last Pay Certificate,	" D. 877.		

*Only if discharged "Medically unfit."

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

(a) Proceedings on Discharge.

(b) Attestation.

(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.

Form E. & O. 6045
1298 [illegible] 29/11/16.

138589

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Jan 18 1917

No. 172073 Rank Pte Name Slack John H. R.

Local Unit 12th Res Overseas Unit Concert Party Age 34

Examination held at East Dunaling.

DISABILITY.
~~Overseas~~—Local.
(scratch one out)

V. D. H.

PRESENT CONDITION.

Mitral Regurge murmur
Slight Enlargement
Compensation Good
Shortness of breath on exertion

B III

Singer

BOARD RECOMMENDS:—

1. Fit for Duty
2. Fit for duty after ..... weeks' physical training.
3. Fit for Temporary Base Duty ..... weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:—

Members: W. Bethune Capt. President.
J. D. Birch Capt.

APPROVED
CAPT. C.A.M.C.
for G.O.C. CANADIANS.

APPROVED

Dated at 19 JAN 1917 1916.

S. L. Walker
For A.D.M.S. CAPT.
FOR A.D.M.S. CANADIANS, SHORNCLIFFE.

81-9-18

174-21-5-18

8/9/18

PROCEEDINGS OF A MEDICAL BOARD.

Dated at ..... 19[illegible]

Name ..... Rank .....

Local Unit ..... Overseas Unit ..... Age .....

Examination held at .....

DISABILITY:
Cause — Local
(Specially one out)

PRESENT CONDITION

BOARD RECOMMENDS

1. Fit for Duty .....
2. Fit for duty after ..... weeks physical training
3. Fit for Temporary Base Duty ..... weeks
4. Fit for Permanent Base Duty .....
5. Discharge .....

Signatures:

President .....

Members .....

APPROVED

Dated at ..... 19 JAN 1919 19[illegible]

For A.D.M.S. ..... for A.D.M.S. (Administration) Quarter

NOK- Wife. Mrs. Bertha. Slack. Ex.by. Winnett. Toront .Major.
22. St. New. Toronto. Aus.Ans.Ry.Ln.
Mans. Bld. sarn.

(Medical Officers will please read this Form carefully before using it. See instructions, page 4.)

FORM TO BE USED FOR WARRANT OFFICERS, N.C.O'S, AND MEN

MEDICAL HISTORY OF AN INVALID

STATION ..... DATE 34-Sl-41

1. (a) Unit ..... (b) Regimental No. Toronto. ..... (c) Rank. 18.

(d) Surname #2. Cas. ..... (e) Christian name 173073 ..... Pte.

2. Age last birthday SLACK. ..... Date of birth J.H.Rawsthorne. .....

3. Enlisted at 35. ..... on Nov. 25. 1882. .....

Toronto ..... Aug. 20/15. .....

4. Personal description :—

(a) Height ..... (b) Weight (stripped) ..... (c) Complexion .....

(d) Colour of hair 5'.3½" ..... (e) Colour of eyes 130 ..... (f) Identification marks Farr. .....

Brown ..... Blue. .....

5. Address after discharge (for the use of the Board of Pension Commissioners.) Scar over left eye. vacc. 2 rt. arm. .....

6. Former trade or occupation 22. St. New Toronto, Ont. .....

7. (a) Service Clerk

	Periods From	Periods To	Years	Days
			2	227.
83.Bn.	Aug.20/15.	July 6/16.		
12. Res. Bn.	July 6./16.	Mar.19/18.		
#2.Cas.Unit.	Mar.19/18.	Date.		

(b) Has he been Overseas ? .....

8. Present disease or disability (use authorized nomenclature if possible).

(a) Date of origin Yes, France. ..... (b) Place of origin (1) Valvular disease of heart. (2) Myalgia. .....

(c) Cause* 1. July 1916. (2) 1896. ..... 1. 2. England. .....
*(Here include original disease or injury)

9. Present condition. (1) Service. Impossible. (Important, to be a full description of the present disabling condition or conditions).

(2) SUBJECTIVE- Patient has a dull pain in praecordial region noticed most in morning on rising and after any exertion as walking up a flight of 20 steps or walking ½ mile on level. No headaches. but has dizzy spells Any work or slight exertion as stated above causes Dyspnoea. Eats. well sleeps well. Has cardiac alpitation at intervals.
OBJ- Compensation good. hands and feet. warm and color good. no swelling in hands or feet. Apex out past nipple line 4½" from middle line & Rt. border of heart 1½" from middle line of body On auscultation there is a double Aortic murmur transmitted up into carotids. A double

[After describing all abnormalities, anatomical and functional, contributing to present incapacity (see section 11) state whether such incapacity is directly due to (a) weakness, (b) loss (complete or partial) of an organ or member or of its functions, or (c) to the necessity for rest of the body or of some of its parts.]

M. F. B. 227.
150M.-6-17.
1772-39-117.

See page. 4.

10. History ;

Here give a description of wounds, scars, deformities, and signs and symptoms of abnormal conditions present and not included in answer 8. This section cannot be completed without stripping the soldier and subjecting him to a thorough physical examination

Vacc. scars 1 left arm. Scar on palm of left hand.

11. To what extent, state in percentages, is capacity to earn a livelihood in the untrained labour market reduced? If there is more than one disabling condition, estimate the incapacity due to each, and that due to all combined.

12. Did the disability arise on or off duty? 1. On duty. 2. Off duty.

13. Was a Court of Inquiry held? 1. 2. Not applicable.

14. If the disabling condition had its origin before enlistment, has it been aggravated on service?

Yes 1. Not applicable. No 2. Yes.

(If the answer is in the affirmative, state in percentages, to what extent the soldier is incapacitated by that aggravation.)

15. Was the disability caused or aggravated by negligence, by vice or by misconduct, or by unreasonable refusal to accept treatment? 1. 2. No.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

16. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 1. Permanent. 2. 2 mos.

17. Treatment (Case reports, general or special, should be secured and attached where possible).

M.H.S. shows no treatment.

18. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit?

No.

19. Can the former trade or occupation be resumed? Yes.

20. Recommendations

E.

F. Hamilton Capt

Medical Officer by whom the case is brought forward.

STATEMENT OF THE SOLDIER.

(Sections 8, 9 and 10 are to be read to the soldier.)

I, the undersigned J. R. SLACK have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of

J. R. Slack

Signature of soldier examined.

OPINION OF THE MEDICAL BOARD

21. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticized.

#10. We concur. In addition we find testicle on right side to be undescended. Not present in inguinal canal. No disability.

#12. 2. We do not concur. Should read "Not applicable".

#16. 2. We do not concur. Should read "Six months".

Otherwise we concur.

22. Is the soldier fit for

(a) General service,	(Category A)	(Yes or No).	no
(b) Service abroad, not general service,	(" B)	(Yes or No).	no
(c) Home service, (Canada only),	(" C)	(Yes or No).	no
(d) Temporarily unfit,	(" D)	(Yes or No).	no
(e) Unfit for service in Categories A, B and C,	(" E)	(Yes or No).	yes

23. It is certified that the soldier

(a) ~~Does require treatment.~~
(b) Does not require treatment.
(c) Should pass under his own control.
(d) ~~Should not pass under his own control.~~

(Strike out condition not applicable).

24. It is recommended that the soldier be discharged. (When not for discharge add special recommendation).

That he be placed into Category "E" and be discharged as physically unfit.

W. T. McKeon Major — *President.*
A. B. Clark Capt
[illegible] Capt. — *Members.*

STATION Ravina Barracks, Toronto.

DATE Apr.4th.1918.

APPROVED BY

DATE 8/4/18

J. B. Chisholm Capt for *Assistant Director of Medical Services.*

APPROVED BY

DATE

Director-General of Medical Services.

mitral of which the Diastolic is very marked. 1st. sound at apex sharper than normal. Mitral murmur are transmitted out and down into axillary line. The murmurs are also heard in Pulmonary area and over Tricupid Area. Pulse 84.sitting. regular and slightly of water hammer Type. Resp.20. after running 33 yds. increases to pulse 120 Resp. 24. returning to pulse 84 and Resp. 20 after 3 mins rest. Patient has ~~xxxx~~ prominent eyes as of a patient suffering from air hunger .Thyroid normal.

(2)SUBJ- Patient has sharp pains on both legs worse in damp weather. . Pains are in feet and~~xxxxx~~ then again in ankles. and knees.

OBJ- Mostly nil. all joints, movements free and normal. all other systems normal.Incapacity is due t (1) Partialloss of function of Heart.(2) ~~My~~ Myalgia. in legs.

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned,.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the soldier to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

INSTRUCTIONS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of pages 1 and 2 of this Form. The President of the Board of Medical Officers is responsible for the proper completion of the space, of page 3, reserved for recording the Proceedings of a Board of Medical Officers.
3. In answering the questions, Medical Officers will carefully obtain and record the soldier's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation ; it must be made clear whether such statements are obtained from the soldier concerned, from witnesses, or from documents.
4. If a complete answer to any question requires more space than that reserved for it, the answer may be continued on the blank space on this page.
5. The nomenclature of diseases to be followed is that described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London, (1915), by Messrs. Harrison and Sons.

Date of Enlistment 18-8-15

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment May 1st/6

RATE OF SEPARATION ALLOWANCE

20	$ 25.00		

P.C. 3257

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 172073

Rank Pte Promoted Reverted Discharge

Soldier's Name J. H. Slack

Battalion 83 Battn

Beneficiary Mrs Bertha Slack

Relationship Wife

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Bertha Slack (Wife)

Address ~~78 Lindsay ave~~

Change of Address ~~Toronto Ont.~~

1 22nd St. New ~~Ont.~~ Toronto Ont.

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total
Dec. 31	—	568	300	868
~~Jan 18~~	~~G. 65308~~	~~30~~	~~15~~	~~45~~
Jan 18	E 60782	30	15	45
Feb	E 64156	25	15	40
Mar.	T 90760	25	15	40
Apr.	~~T 10255~~	~~15~~	~~25~~	~~40~~
		640	345	

REMARKS

Cancelled G. 65308. - 9.13.

A/c Closed 31-3-18

Ret'd per Ongar

Date 21-3-18 26-3-18

T 10255 Cancelled S.P.M. Clerk W. J. Quinn

M.R.O. 2.B. Rendered.

M. F. W. 128
400M.—6-17—172-39—141
L. L. 2232O—M. & D. 7493.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

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—1772-89-1141
L. L. 22320—M. & D. 7993.

No. 2 DISTRICT DEPOT

AUDITOR	PAYMASTER

M. OR S.

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

REGT. No. 172073. RANK Pte. NAME (IN FULL) Slack J.R. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ — DATE EFFECTIVE

PAYABLE TO — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS c/o Ross & Curtis,
Palace Theatre Bldg. New York U.S.A.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE — DATE — REASON — AUTHORITY — IF ENTITLED TO POST DISCHARGE PAY

MONTH	PAY AND F.A. NO. OF DAYS	PAY AND F.A. RATE	PAY AND F.A. AMOUNT $	PAY AND F.A. AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	$	C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 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.	BALANCE CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																						
May.					27	-			27	-					139	205					27	-									27	-						R.O. # 70.

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

SLACK, Pte. J.H. R#172073 649-S-16844

Army Overseas

1st C.O.R.D

M. & D.	Widow	Mrs. Bertha Slack, 119-22nd St., New Toronto, Ont.
P. & S.	"	as above
Memorial X	"	" "
Memorial X	Mother	Mrs. Cathrine Slack, 87 Station Rd., Kearsley, Farnworth, S.O England. Lancs.

M

989087

Elig. for B.W.M.

Death is attributable to Military Service

10/pa

ev

Number 172073. Rank Pte

Surname SLACK

Christian Name John Henry Rawsthorne

Units 83rd Bn Can Inf Theatre of War England

Date of Service 7-3-16.

Remarks 119

Latest Address 22 St. New Toronto, Ont.

Roll No. A Page 2465

200m.-2-21.M.

CANADIAN ARMY DENTAL CORPS, MILITARY DISTRICT NO.

DENTAL CERTIFICATE ON DISCHARGE.

M.F.B.484.
100m-2-18.
1772-39-1219.

To Officer i-c Dental Services at Spadina Hosp

Name Slack G. H. R. Regimental Number 172073

has been given Dental examination previous to discharge and is entitled to Dental treatment to the extent of:- extract. prophylaxis.

This certificate to be presented within two months of the date on discharge papers.

H H Semple Capt

Officer i-c Dental Examination on Discharge.

Examined at Ravina Date APR 4 1918

D.C.5009.
2-18.

142013. *

Pte Slack: J.H.R
1st C.C.D.

DENTAL CERTIFICATE.

The following Certificates will be attached to the Medical History Sheets of all Other Ranks being returned to Canada for disposal.

Date of Examination.	Present Dental Condition.	In case of loss or decay of teeth. Is the loss due to wounds, injury or disease directly attributed to Active Service?	Has he ever declined Dental Treatment.	Recommendation.
25.2.18	Dit	Failed to report for examination		

John Henry Rawsthorne Slack

Original

MEDICAL HISTORY SHEET.

172073

Surname Slack Christian Name John H. R.

Examined on 20 day of August 1915 at Toronto

Birthplace City or Town Manchester County Eng.

Apparent age 33

Trade or occupation Clerk

Height 5 Feet 3½ Inches.

Weight 165 Lbs.

Chest measurement Minimum 33 inches. Maximum expansion 2 inches.

Physical development Good

Small-Pox Marks Nil

Vaccination Marks Arm Right. Left. Number ✓

When Vaccinated last Nil

(a) Marks indicating congenital peculiarities or previous disease Nil

(b) Slight defects but not sufficient to cause rejection Nil

Approved by F. Wansbrough

Rank Major M.O.

Date	Fit or Unfit	Examined for Re-engagement,
		M.O
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
		M.O.
		M.O.
30/8/15		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
23/8/15		Nathan W. McPhail Capt. M.O.
27/8/15		2/9/15 2nd Lieut C. B. Barnes M.O.
31/8/15		M.O.

Enlisted on 18th day of August 1915 at Toronto

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	83rd C.E. Batt.	172073		
Transferred to..				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
East Dunaling	18/1/18	V.D.H.	Bill J. A. Burch Capt
do	12/2/18	do	Bill not likely to be received in future.
Ravina Barracks Toronto.	Apr. 4th. 1918	V.D.H. Myalgia	"E"

SHORNCLIFFE 22 FEB 1918

Major, A.M.C.

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.

M. F. B. 313.

100M.—5-15.
H. Q. 1772-39-439.

Surname Macp Christian Name John Henry Rankin

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital.			DISEASE.	Number of days in Hospital.	Remarks on nature of the disease: how induced: if mild or severe: if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				

1. L.P.C. issued, date.. 22.2.18

2. Authority. CORD 18/2/18 PO 3451 8/2/18

3. Discharged to. Canada

4. Pay Book verified. W. Ackland

5. Balance shown on L.P.C.$. 13.75

6. Balance shown in Ledger Sheet $. 30.78

7. Full particulars of entries making difference between 5 and 6 if any. . .

No.	Date.	Unit & Particulars of entries.	Amount Debit		Amount Credit	
1304	24/1/18	E Sandling 30/-	7	30		
1376	13/2/18	do £2	9	73		
		Net Difference $17 03	17	03		

8. Assigned Pay cancelled A.3.M. Forms rendered. Stopped eff 1/3/18

or

9. Separation Allowance and Assigned Pay continued to dependent in England and transferred to Accounts Branch for payment.

Certified correct. . . [signature]

Officer i/c Group.

27
210

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

M. F. 2
No. 28

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

Regimental No. 172073 Rank Pte. Name J. H. R. Slack

Corps #2 Cas. Unit who was* Discharged

On Apr. 11 191 8, to

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from Feb. 22, 191 8, to Apr. 11 191 8, the inclusive date of transfer or discharge.

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from prev. month	15	98	Bal. Cr. from prev. month		
Advances by Cheques No.			Regt'l Pay 49 days at $ 1 c.	49	
Advances by Cheques No.			Field Allow. 49 days at $ c. 10	4	90
Assigned Pay and Sep'n Allce. No. 19446	9	15	Separation Allowances* (Monthly) Apr.	9	15
Other charges			Other Allowances* Sub	12	
Payment on transfer or discharge No. 19447	115	92	Other Credits* Clothing	8	
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)	58	
Total	141	05	Total	141	05

*Give particulars.

A monthly stoppage of $ 15.00 (†) has (‡) been paid on account of Assigned Pay for the month of Mar. 191 8 and Sep'n Allce. for month of Apr. 191 8 (to) Assignee Mrs. Bertha Slack,

(Address) 22nd St. New Toronto, Ont.

(†) 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 .....

(2) if married and if a Separation Allowance Card has been submitted Yes

(3) cause of discharge ..... authority D.O.99

(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 9/4/18

Place Toronto

L. Nurse
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.

100M.—1-18.
H. Q. 1772-3-903.

R—122

A.G.R.

Rank | Name SLACK, John Henry Rawsthorne. | Reg'l No. 172073

Unit 83rd Bn. | If in perm. Corps, What Unit? | Married or Single Married.

Place and Date of Enlistment Toronto, 18th Aug., 1915. | Place of Birth Manchester, England.

Name and Address, Next-of-Kin Bertha Slack,

38 Lindsey Ave., Toronto, Canada. | Relationship

Assigned Pay Monthly $ | Payable to

Relationship

Separation Allowance $ | Payable to

Relationship

N/E. R.B. No. 12552
File R.L.
Category Can C.R.

Discharge, Date and Place | Reason | Character

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.
		Arrived in England	17 MAY 19		S.S. Olympic
7-7-16	83rd	S.O.L. on Ft. 12th Bn.	West Sandling	6-7-16	Pt. II D.O. 176
7.7.16	12th Btn	Taken on strength.	Shoreham	6.7.16	" 189
20.9.16	12 Bn	On Command with YMCA Concert Party overseas	W Sandling	19-9-16	Pt II O 256
22-12-16	"	Ceases to be shown on Command.	" "	19.12.16	" " 334.
7-2-17	12th Res Bn	SoS to CCAC & attached 12th Res Bn	E. Sandling	18-1-17	— 32 (CCAC Pt II do 56)
2.2.17	CCAC	ToS & On Command 12th Res Bn	Shoreham	18.1.17	— 56
20-3-17	1st CORD.	To.S from C.C.A.C. remains On Command 12th Res. Bn	W. Sandling	11.3.17	— 11 Appt. A.
19.4.17	12th Res.	Ceases attached from C.C.A.C. on posting to 1st C.O.R.D. re attached from 1st CORD	E. "	19.4.17	— 99

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.
14.11.17	12 Resh	Permission to wear 1 G.C. Badge	Wand	14.11.17.	279
12.2.18	12 Resh	Cease to be attached	—	12.2.18	37 (45th 14.2.18 1 CORD)
14.2.18	1 CORD	on Com 10 1 CCD	Pk	13.2.18	45 (44th 15.2.18 1 CCD)
19.2.18	"	Ceases Att 166 D. On Com 6 DD Buxton	"	Sheffe 19.2.18	D050 (Hqd 20.2.18. 166 D)
11.3.18	"	Cease On Comm 6 DD. SOS to Canada	"	Witley 26.2.18.	Pt 068. Disposal by A.G.

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No. 8264

Name Black, John Henry Rawsthorne

Regt'l No. 172073 Rank Sgt. File Numbers 8 m 25 58

Former Units 1 bo R 10 Original Unit 83rd Battn

Date of arrival in Canada 11 3 18 Boat Lauradia Port of Disembarkation Halifax

Rates of Pay:—Regt'l. $1.00 Field 1.04 Date of arrival in M.D.2

Separation Allowance. Date paid to 31 3 18 Rate $25.00 If continued by Chief Paymaster, England no

Assigned Pay. Date paid to 31 3 18 Rate $15.00 If continued by Chief Paymaster, England no

Name and address of Beneficiary Mrs Bertha Black (wife) 22nd St. New Toronto Ont.

Pay claimed on English L.P.C. to 21-2-18 to be paid by new Unit from 22-2-18

Name of new Unit No. 2 Dep. Halifax Date L.P.C. forwarded to new Unit 8/4/18

A Pdrangedar Eng. L P b to 28.2.18

L.L. 34682—M. & D. 8645.

Credit Balance shown on English L.P.C.	OTHER CREDITS DUE	TOTAL CREDITS	Charges to be made on account of advances since English L.P.C. made out: On Boat	At Cl. Depot &c. (A.P.)	OTHER CHARGES	TOTAL DEBITS	BALANCE TO NEW UNIT: Credit	Debit	REMARKS
$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	$ c.	
13 75		13 75							Th. 26.3.18 HP 26.3.18
			9 73						ARq
			5 00						" 9
				15 00					March 18.
Debit Bal.		15 98				29 73			
		29 73				29 73		15 98	

M. F. W. 41a.
120m. 1-18
1772-39-1213

English L.P.C. No.....

Name.....

Regt'l No.....Rank.....File Numbers { .....
.....

Former Units.....Original Unit.....

Date of arrival in Canada.....Boat.....Port of Disembarkation.....

Rates of Pay:—Regt'l.....Field..... Date of arrival in M.D.....

Separation Allowance. Date paid to.....Rate.....If continued by Chief Paymaster, England
.....

Assigned Pay. Date paid to.....Rate.....If continued by Chief Paymaster, England
.....

Name and address of Beneficiary { .....
.....

Pay claimed on English L.P.C. to.....to be paid by new Unit from.....

Name of new Unit.....Date L.P.C. forwarded to new Unit.....

Credit Balance shown on English L.P.C.		OTHER CREDITS DUE		TOTAL CREDITS		Charges to be made on account of advances since English L.P.C. made out				OTHER CHARGES		TOTAL DEBITS		BALANCE TO NEW UNIT				REMARKS
						On Boat		At Cl. Depot &c.						Credit		Debit		
$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	$	c.	

M. F. W. 41
100M-1-18.
1772-39-889.

Name Pte. Slack, J.H.R.

Regimental No. 172073

Unit 83 Bn

Date of enlistment

Place of "

Married (yes or no) yes

Amount of pay assigned monthly $15.00 per week

To whom payable Mrs Bertha Slack
Apt 22nd St. New Toronto Ont

Name and address of next-of-kin

Date and place discharged sepallce from apr 1

Reason for discharge

Character on discharge

APR 13 1918

Date From	Date To	PAY No. of Days	PAY Rate	PAY Amount	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount	Other Credits	Total Credits	Voucher No.	Voucher Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
Feb 22	Apr 11	49	1	49	49	10	490 12		8305					1598	58	D.O.91. Sub. Mar. 19-Apr. 2.
								8		19446			915			Dis 10099
								915		19447		11592				915 sep allce

Due new ledger
apply further credit
& see closing allce

M. F. W. 41
100M-1-18.
1772-39-889.

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date					

35196/702

POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

16906-J-2

Name Slack, J.H.R.
Surname Christian Name

Regimental Number 172073 Rank Pte.

Unit 83rd Bn.

Original Unit

District where paid M.D.2

Date of Discharge 11-4-18

P. D. P. Filing Number 18-470-2

Address (in full) 22nd St.
New Toronto, Ont.

Rates:—Regimental pay $ 1.00 per diem: Field Allowance $ .10 per diem. Separation Allowance $ 25.00 per month.

L. L. 22573—M. & D. 8009.

Total Credits 91 days		FIRST PAYMENT Cheque No. A	Date	Amount 30 days		SECOND PAYMENT Cheque No. B	Date	Amount 30 days		FINAL PAYMENT Cheque No. C	Date	Amount 31 days		Balance Over-payments to be Recovered		Total Amount Paid	
175	10	~~7774 cancelled~~ 7775	11-5-18	58	00	7500	11-6-18	59	10					58.	00	117	10

Remarks: Debit on P.D.P.

M. F. W. 127.
80M—6 17.
1779-39-1140.

Dec'n No 35196/202 W. S. G. File No 16.905 - 9-10

Award 153 days at $ 1.00 per day $ 500.00

S. A. ..... months at $ ..... per mo. $ ..... $ 175.10

Less P. D. P. Credited $

Less further debit balance $ .....

Net due paid as below 324.90

TO SOLDIER				TO DEPENDENTS		
Ag. No	Ch. No	Amount		Ag. No	Ch. No	Amount
ACO	475810	174 90		ACO	475811	120 00
23132	x	x	x	23133	x	x
	x	x	x		x	x
					x	97x 1
				ACO 95875	5-095	30 90
		174 90				120 00

22 18 19

GEN'L AUDITOR
Posting checked by
C. Webster
Date 15-6-19

Mrs Bertha Slack.
Box 306
Kew Toronto

18/8/'15

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name Slack Mrs Bertha

Address ~~38 Lindsay Ave~~ New 22nd St Toronto Ont

Relation to Soldier wife, child or mother: Wife

Name of Soldier Slack Jno. H. R.

Regtl. No.

Rank Pte

Corps 53rd Bn

To what Corps belonging when called out

PAYMENTS

42229 M. CO.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.		K 6572	28 -	28
Oct.		H 17134	20	20
Nov.		F 20081	20	20
Dec.		M 14873	20	20
Jan.	1916	O 18204	20	20
Feb.		M 24628	20	20
March		L 29841	20	20

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
60m.—12-15.
1772—39—818.

Sheet No. 2. Bertha Slack Wife

Name of Soldier Slack, J. H. R.

L. L. Job 89002.—Req. 6213.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916	L 4149	20	20
May		V 919	20	20
June		Y 5769	20	20
July		O 11138	20	20
Aug.		X 12851	20	20
Sept.		D 16685	20	20
Oct.		R 20943	20	20
Nov.		A 24342	20	20
Dec.		A 27620	20	20
Jan.	1917	W 30325	20	20
Feb.		W 33193	20	20
March		X 36480	20	20
April		92986	20	20
May		W 5713	20	20
June		W 9222	20	20
July		W 12455	20	T
Aug.		O 16628	20	M 19247 Resignied address below 11.10.17 RH
Sept. 10 Oct		M 19247	20	M 22nd New Toronto
Oct.		T 21265	20	T
Nov.		F 25114	20	B
Dec.		S 27343	20	S
Jan.	1918		368	
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

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.					

L- L. Job 310—M. & D. 6574.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

Wife

To Whom Mrs Bertha Slack

Address ~~38 Lindsay Ave~~ ~~22nd St New York R.C.~~ Toronto, 22nd Street New Ont

Rate 15.00

MAY 1- 1916

By Whom Assigned Slack, J. H. R

Regtl. No. 172073

Rank Pte

Corps 83rd Battalion

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				

CONSOLIDATED ACCOUNT 2

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mrs. Bertha Slack wife

Name of Soldier Slack, J. H. R.

172073 - Rte 83rd Battalion

L. L. Job 310.—Req. 6574.

15.00

MAY 1 1916

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		B 5794	15	
June		E 42280	15	
July		R 11485	15	
Aug.		L 14748	15	
Sept.		S 18576	15.	
Oct.		H 23317	15	
Nov.		R. 29557	15	
Dec.		V 32480	15	
Jan.	1917	Y 41710	15	
Feb.		Y 47221	15	
March		K 53381	15	15-B
April		94730	15.	15-Ch
May		J 113901	15.	
June		H 18169	15	15-Ch
July		J 25494	15	6
Aug.		X 31914	15	
Sept.		L 39422	15	22nd St. New ~~Toronto P.O.~~ Toronto Ont 11/9/17
Oct.		Q 44365	15	
Nov.		Q 51119	15	
Dec.		Q 59977	15	
Jan.	1918			
Feb.			300	
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.					

Married or Single: Married

Place of Birth: Manchester. England.

Name and Address of Next of Kin: Mrs. Bertha Slack
38 Lindsay Ave Toronto Canada.

Relationship of Next of Kin: Wife

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $: Effective (Date):

Payable to:

Relationship of Dependant:

Casualties, Promotions, &c.

Particulars	Effective Date	Authority

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l No. 173073 Rank: Private Name: Slack John Henry Rawsthorne

If in Permt. Corps What Unit: Unit: 8th Battn.

Permanent Force Allowances

Place of Attestation: Toronto Canada

Date of Attestation: 18/8/15.

Transferred to: 12th. Bn. Date: 16/7/16 Authority: A.O. 126

Transferred to: Non. Effec. a Date: 1/3/18. Authority:

Transferred to: Date: Authority:

Transferred to: Date: Authority:

Assigned Pay Monthly $: 15.00 Date Effective: 1/5/16. a2m. 8/12/17. G. 1/1/18.

Payable to: Mrs. Bertha Slack, 22nd Street, New Toronto, Ont. ~~38 Lindsay Ave, Toronto,~~ Can. Relationship: Wife

Assigned Pay Monthly $: Date Effective:

Payable to: Relationship:

Stop-Payment Form (Assigned Pay) Rendered (Date): 21/2/18. Effective: 1/3/18 Reason: Discharged to Canada

Discharge Date and Place: To Canada. 21/2/18 Reason and Authority: 1 GO.R.D. P.O. 3451 8-2-18 B.M.

Account Transferred to Non-Effective Branch (Date):

Account Transferred to Officers' Pay Branch (Date):

Checked by H. Gibbon

Date 1916	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
														8-	8-																				Bal. Naus from Canada
																															800				
May	31	1.00	31	00	31	.10	3	10							34	10	39		72					973	973			1500		3446	764				
June	30	1.00	30	00	30	.10	3	00							33	00	114	16	148	30				973	487			1500		2960	1104				
H. Bates 1-15 July	15	1.00	15	00	15	.10	1	50							16	50												1500		1500	1254				
July 16-31	16	1.00	16	00	16	10	1	60							17	60			1423	1587					487					487	2527				
Aug 1-31	31	1.00	31		31	10	3	10							34	10	1492	31/7	1553	15/8				730	1217			15		3447	2490				
Sept 1-30	30	1.00	30		30	10	3	-							33		1634	31/8	1632	15/9				730	730			15		2960	2830				
																					1328	9/10	23rd			436									
Oct 1-31	31		31		31		3	10							34	10	1684	31/9			1360	9/10	"	1217		436		15		3589	2651				
Nov 1/30	30	-	30	-	30	-	3								33	-					1412	30/10	22nd			308		15		2808	3145				
																					2642	1/12	12 TD			8 42									
																					808	12/11	60th Bn			3 48									
																					1440	12/11	22nd Bn			5 23									
Dec 1/31	31		31		31		3	10							34	10												15		3243	3310			350	
S.D. 1931	12-16		24	50			24	50							✓									✓	✓	✓	✓	✓	✓	✓	✓				
1917 Jan 1-31	31		34	10											34	10												15-		15	5220			3-	
Feb 1-28	28	1.00	30	80											30	80	17	7/1	107	31/1	961	5/12	4th Bn	487	487	1744		15		4718	4082				
			334	40										800	342	40								51 10	4381	5667		150		30158					

17 2073. Pte. Slack. John Henry. Rawsthorne.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
Feb Fwd			33	40										8 00	34 40									51 10	43 81	56 67		150		301 58	40 82				
Mar 1-31	31	1 00/10	34	10											34 10	256	1/3	396	31/3					7 30	12 17										
																204	15/3	332	15/3					7 30	9 73			15		61 80	23 47				
Apl 1-30	30		33												33													15		15	41 42				
May	31		34	10											34 10	48	12/4							7 30											
																112	30/4							9 73				15		32 03	43 49				
June																152	15/5							9 73											
1-30	30		33												33	240	30/5							9 73				15		34 46	42 03				
July 1-31	31		34	10											34 10													15		15	61 13				
Aug 1-31	31		34	10											34 10									19 46	7 30			15		41 76	53 47 ✓				
Sept 1-20	20		33												33	726	30/6	655	15/6						9 73										
																		533	14/7					9 74	7 30			15		41 77	44 70				
			569	80										8 —	577 80									131 39	90 04	56 67		255		533 10					

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED PAY	SEP. ALLCE. ENG.
1917		~~[illegible]~~							44 70	Nil	
Oct.	31 days @ 1 00/10	34 10						15			
				ar # 593. 25/7/17 12 days	12 17						
				ar 807 15/9/17 12th Res.	9 73						
				ar # 876 29/9/17 " "	7 30				34 60		
		34 10			29 20			15			
Nov.	P. Pay.	33 —		ban. ar.				15			
				ar. 955. 26/10/17. 12th Res.	7 30						
				ar. 1021. 15/11/17. " "	9 73						
				ar. 902. 19/10/17. " "	12 17						
Dec.	P. Pay.	34 10		ban ar.				15	42 50		
		67 10			29 20			30			
1918. Jany.	P. Pay.	34 10		ban ar.				15			
				ar. 1132. 19/12/17. 12th Res.	9 73						
				ar. 1083. 28/11/17. " "	9 73						
				Bn. ar. 1117. 8/12/17. " "	9 73				32 41		
		34 10			29 19			15			
Febry 1/21	P.P.	23 10		ban. ar.				15			
				ar. 1223. 10/1/18. 12th Res.	9 73				30 78		
				" 1304. 25/1/18. " "	7 30						
		23 10		" 1376. 13/2/18. " "	9 73			15	13 75		
					26 76						

Balance transf. to Canadian Liab. Account

Balance transferred to N. E. Branch. Nil

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFER-RED PAY	SEP. ALLCE. ENG.

A.G.H. FORM REM. EFFEC. 1/3/18
DISCHARGED Canada DATE 27/7/18
PAYBOOK VERIFIED
Credit $ 13.75 L.P.O. GEN'L 22/7/18
AUTHY. records 18/7/18 P.O. 83451
8/8/18 B.M.

Checked