

REGIMENTAL DOCUMENTS

NAME

WOODSON JOHN

REGT. NO.

931672

UNIT

2nd Const Bn

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

DEATH

Category

DISCHARGE

Category

DESERTION

ATTESTATION PAPER (M.F.W. 23, 133, or 51)

CASUALTY FORM (M.F.W. 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)

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)

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)

COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)

M

33265

H

17-15
17-15
9-15

3

1921
NAME

REGT. NO.

RANK AND UNIT

27
NEXT OF KIN

CABLE

NATURE OF CASUALTY

No.

DATE

S.A. 261 712011

HE No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

Number

931672

Rank

plu

Surname

WOODSON

Christian Names

John

Unit

2nd CO. R.C.C.

Theatre of War

France

Date of Service

17-5-17

R.R. 3

Remarks

Essex

Ontario

Latest Address

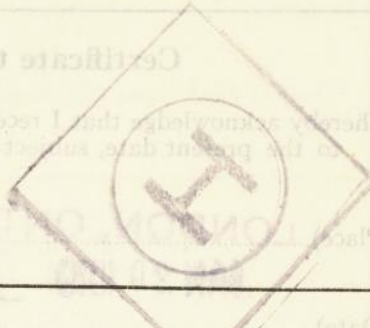
~~303 McLeod St.~~
~~Toronto Ont.~~

Roll No.

Page 3246

Proceedings on Discharge.

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

No. 931672	
Rank PRIVATE	
Surname WOODSON,	
Christian Name John	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company) 2nd Construction Batty.	
Date of Discharge JAN 29 1919 D.O.# 28.28.1.19	
Place of Discharge LONDON, ONT.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age 40 years months.	Descriptive Marks SCAR RIGHT ARM
Height 5 feet 9 inches.	
Complexion DARK	
Eyes BROWN	
Hair BLACK	
Trade VALET	
Intended place of residence } 303 McCONB St., (To be given as fully as practicable.) } Detroit, Mich	
2. The above-named man is discharged in consequence of ON DEMOBILIZATION R.O. 1420.	
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.	
3. Conduct and character while in the service have been, according to the records, etc.	
N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	

M. F. B. 218.

100M.—1-17.

H. Q. 1772-39-113.

(OVER)

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

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

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date).....

Commanding

8. **Certificate to be signed by the Soldier on Discharge**

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

(Place) LONDON, ONT. J. Crook (Signature of Soldier.)

(Date)..... (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

~~9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.~~

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

.....(Signature of Soldier.)

10. **Statement of Service.**

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

Total.....years.....days.

11. **Confirmation of Discharge.**

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

(Place).....LONDON, ONT.....

(Date)

(Signature)

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

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

None

List of Discharge Documents.

James J. Wood

Reg. Conduct Sheet, Minuta form B-304	Attestation Paper, Minuta form B-333
Company, Battery, Squadron } Conduct Sheet, " B-304	Proceedings on Discharge, " " B-312
Copies of Certifications by C.F. in MS.	
Med. Hist. Sheet, Minuta 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-337	(a) Proceedings on Discharge.
Statement of Man's Account on Transfer and Last Pay Certificate, " " B-317	(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 sum is to be noted hereon.

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	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 Certificate,	" 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.

SURNAME

CHRISTIAN NAME OR NAMES

REG. NO.

WOODSON

J.

931672.

RANK

UNIT

Co.

TROOP

BATTY.

Pte.

NS. 2 Con.

HOSPITAL

DATE OF ADMISSION

C.F.C. Hosp. La Joux Jura.

22-4-18.

1. " " " "

HOSP. 7-7-18
7-11-18

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

1.

Mumps. *P. Diarrhoea at.*

2.

P. M. O. at

3.

DISPOSITION

DATE

CL. 2-5-18. A202-2.

14. 6-18 @ 239.

16-7-18 @ 265.

18-7-18 @ 267.

15-11-18 @ 371-1.

28-11-18 @ 382-2.

REMARKS

Dis. 7. 6. 18.

Dis. 11. 7. 18.

Dis. 20. 11. 18.

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.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps 2nd Const. Bn Regimental Number 931672

*Substantive Rank Pte. Surname Woodson Christian Names John

*Acting Rank _____

(* To be entered in pencil to facilitate alteration.)

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date.	From whom received.					

17.12.18. NSRD. D.O. 305 T.O.S and att'd 2nd Bn Bshott 14.12.18
for Quarter & Rations

NSRD

ON COMMAND TO CDD Kimmel Rhys BRAMSHOTT

27 12/18
NSRD 313
PART II D.O.

27.12.18 NSRD. T.O.S M.D. 1st Conc camp.
Embarked for Canada.

C.A. Knight LIEUT.
OFFICER i/c RECORDS,
NOVA SCOTIA REGTL. DEPOT.
27-12-18
A.E. Over Lt.
for M.D. 1.

10.1.19 funer Taken on strength No. 1 District Depot London D.O. 24

JAN 29 1919 DISCHARGED LONDON, ONT
ON DEMOBILIZATION

F.C. German Lieut
NO. 1 DISTRICT DEPOT
S. Fletcher Lieut
O. C. Discharge Section, No. 1 D. D.

To be folded on this line.

Nothing to be written in this margin.

W1889-PP1150 500,000 5/18 G.W.P.Co.(3490)

ORIGINAL

931672

MEDICAL HISTORY SHEET

Surname

Woodson

Christian Name

John

Examined

on 11th day of Dec 1916 at Winnipeg, Man

Approved by

J. A. Murray
Capt. a.m.c.

Birthplace

City or Town U.S.A.
County Virginia

Rank

M.O.

Apparent age

38 yrs

Trade or occupation

Valer

Height

5 feet 9 Inches

Weight

lbs.

Chest measurement

Minimum 34 inches
Maximum expansion 37 inches

Physical development

Good

Small-pox Marks

None

Vaccination Marks

Arm Right Left
Number

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease

None

(b) Slight defects but not sufficient to cause rejection

R.E. 20/20 L.E. 20/20

Date

Result

ANTI-TYPHOID INOCULATIONS, ETC.

Date	Result	VACCINATIONS	M.O.
17/4/17	198/155	Slepley	M.O.
26/2/17	198/155	Dau Murray	M.O.
13/3/17	198/155	Dau Murray	M.O.
5/4/17	198/155	Dau Murray	M.O.

Enlisted on

11th day of December 1916 at

1916

Winnipeg, Man

Joined on enlistment

#2 Construction
Batt'n C.E.F. 931672

Transferred to

11/12/16

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.

Surname *Woodson* Christian Name *John*
 MEDICAL HISTORY SHEET

STATION	Date of Arrival at the Station	DATES OF						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
		Admission into Hospital			Discharge from Hospital						
		Day	Month	Year	Day	Month	Year				
<i>1st</i>	<i>1890</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>
<i>2nd</i>	<i>1891</i>	<i>2</i>	<i>2</i>	<i>2</i>	<i>2</i>	<i>2</i>	<i>2</i>	<i>2</i>	<i>2</i>	<i>2</i>	<i>2</i>
<i>3rd</i>	<i>1892</i>	<i>3</i>	<i>3</i>	<i>3</i>	<i>3</i>	<i>3</i>	<i>3</i>	<i>3</i>	<i>3</i>	<i>3</i>	<i>3</i>
<i>4th</i>	<i>1893</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>	<i>4</i>
<i>5th</i>	<i>1894</i>	<i>5</i>	<i>5</i>	<i>5</i>	<i>5</i>	<i>5</i>	<i>5</i>	<i>5</i>	<i>5</i>	<i>5</i>	<i>5</i>
<i>6th</i>	<i>1895</i>	<i>6</i>	<i>6</i>	<i>6</i>	<i>6</i>	<i>6</i>	<i>6</i>	<i>6</i>	<i>6</i>	<i>6</i>	<i>6</i>
<i>7th</i>	<i>1896</i>	<i>7</i>	<i>7</i>	<i>7</i>	<i>7</i>	<i>7</i>	<i>7</i>	<i>7</i>	<i>7</i>	<i>7</i>	<i>7</i>
<i>8th</i>	<i>1897</i>	<i>8</i>	<i>8</i>	<i>8</i>	<i>8</i>	<i>8</i>	<i>8</i>	<i>8</i>	<i>8</i>	<i>8</i>	<i>8</i>
<i>9th</i>	<i>1898</i>	<i>9</i>	<i>9</i>	<i>9</i>	<i>9</i>	<i>9</i>	<i>9</i>	<i>9</i>	<i>9</i>	<i>9</i>	<i>9</i>
<i>10th</i>	<i>1899</i>	<i>10</i>	<i>10</i>	<i>10</i>	<i>10</i>	<i>10</i>	<i>10</i>	<i>10</i>	<i>10</i>	<i>10</i>	<i>10</i>
<i>11th</i>	<i>1900</i>	<i>11</i>	<i>11</i>	<i>11</i>	<i>11</i>	<i>11</i>	<i>11</i>	<i>11</i>	<i>11</i>	<i>11</i>	<i>11</i>
<i>12th</i>	<i>1901</i>	<i>12</i>	<i>12</i>	<i>12</i>	<i>12</i>	<i>12</i>	<i>12</i>	<i>12</i>	<i>12</i>	<i>12</i>	<i>12</i>

This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical

No. 2 Construction Battalion Court ATTESTATION PAPER.

No. 931672
ORIGINAL
Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?..... Woodson
- 1a. What are your Christian names?..... John
- 1b. What is your present address?..... 149 Clinton St. Detroit U. S. C.
2. In what Town, Township or Parish, and in what Country were you born?..... West Virginia, U. S. C.
3. What is the name of your next-of-kin?..... Henry Woodson
4. What is the address of your next-of-kin?..... Louisburg West Virginia U. S. C.
- 4a. What is the relationship of your next-of-kin?..... Father
5. What is the date of your birth?..... 31 Decemr. 1878.
6. What is your Trade or Calling?..... Valet
7. Are you married?..... no
8. Are you willing to be vaccinated or re-vaccinated and inoculated?..... yes
9. Do you now belong to the Active Militia?..... no
10. Have you ever served in any Military Force?..... no
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?..... yes
12. Are you willing to be attested to serve in the }
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Woodson, 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 15th Dec 1916. John Woodson (Signature of Recruit)
G. S. Brooks (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John Woodson, 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 15th Dec 1916. John Woodson (Signature of Recruit)
G. S. Brooks (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 Winnipeg this 15th day of December 1916.

William Morley Lieut. C.F. (Signature of Justice)
J. P. Manitoba

Description of John Woodson on Enlistment.Apparent Age.....28 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. 9 ins.Chest measurement { Girth when fully expanded.....39 ins.
Range of expansion.....37 ins.Complexion.....DarkEyes.....BrownHair.....BlackReligious denominations. { Church of England.....
Presbyterian.....
Methodist.....
Baptist or Congregationalist.....yes
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.....December 11th 191 7Place.....Winnipeg, Man.

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:—

APPROVED.

SPECIAL SERVICE BATTALION BOARD M.D. TO

DATE

C. M. Green Capt
R. Guilmette Capt
L. A. Knight Capt

C.A.M.C. PRESIDENT

C.A.M.C. MEMBER

C.A.M.C. MEMBER

CERTIFICATE OF OFFICER COMMANDING UNIT.

.....John Woodson.....having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation......[Signature].....
O. Comd'g No. 2 Construction Battalion, 1st Cdn. (Signature of Officer)Date.....Jan 4th / 17 191 . 900

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

THIS SECTION FOR USE OVERSEAS

(Overseas).....Examinated at.....

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 931672.....Rank.....Pte.....Surname.....WOODSON.....
(Given name in full)

Signature.....John.....

Unit or Corps ..No. 1..District..Depot Birthplace ..Louisburg W. Virginia..U.S.A.

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

1. GENERAL DESCRIPTION:

Physique GOOD.....Weight...150 lbs. Height...5 ft. 5 1/2 in. Colour of Eyes...Brown

NutritionGOOD.....

Pulse80.....

Condition of arteries...Normal.....

Vision Rt...20/20.....Left...20/20.....

Hearing (conversational voice) Rt...21 ft.

Left...21 ft.

Identification marks, scars, or deformities.

(Give cause and date of origin.)

Scar right arm.

Scar each thigh.

Opinion as to general health and physical condition.....GOOD..Category..."A"2.....

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System...NO.....Genito Urinary System...NO...Cardio-Vascular System...NO

Special Senses...NO.....Integumentary System...NO...Respiratory System...NO.....

Disturbance of mentality...NO Muscular System...NO.....Digestive System...NO.....

Osseous and Joint System...NO Any other general condition...NO.....

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

NO SERVICE DISABILITY.

[END]

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

81-11-35000
[OVER]

EXAMINATIONS.
THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date SignedM.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at....London, Ont..(Canada)

DateJan. 27th, 1919... SignedM.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

Opinion as to general health and physical condition.....

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System.....

Special Senses.....

Integumentary System.....

Respiratory System.....

Cardio-Vascular System.....

Digestive System.....

Muscular System.....

Genito-Urinary System.....

Any other general condition.....

3. If the answer to any part of Section 2 above is "Yes", here give full particulars, with cause and date of origin; and also a description of the present condition.

COPY ONLY

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 831672 (Rank) PRIVATE

Name (in full) WOODSON, John. enlisted in
the 2nd CONSTRUCTION BATTALION, C.O.M.F.

CANADIAN EXPEDITIONARY FORCE at WINNIPEG, MAN. on the ELEVENTH
day of DECEMBER, 1919.

HE served in FRANCE (with 2nd CONSTRUCTION BATTN.,)
and is now discharged from the service by reason of ON DEMOBILIZATION

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

Age 40

Height 5 - 9

Complexion DARK

Eyes BROWN

Hair BLACK

Marks or Scars

SCAR RIGHT ARM

SCAR EACH THIGH

Signature of Soldier

Issuing Officer

Rank

Date of Discharge

DISCHARGE SECTION
JAN. 29 1919
No. 1 District Depot

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

Appointment

Signed at

LONDON, ONT.

this TWENTY-NINTH

day of JANUARY,

1919

in Military District No. ONE

File Reference No. IDD-10-W-338

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. _____ (Rank) _____ Name _____

Unit _____

Address on Discharge _____

Character and Conduct _____

Former Occupation _____

Special Qualifications of Value in Civil Life _____

Medals and Decorations _____

Remarks _____

Signed at _____ this _____ day of _____ 19 _____

Name of Officer _____

Rank _____

Appointment _____

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

LAST PAY CERTIFICATE

1Pw10-40-33

Regt. No. 931672 Rank 4th Name WOODSON, John
 Corps N.S.R. who was discharged
 on 29-1-19 to

The following is a statement of the account of the above named
 from 1-1-19 to 29-1-19

Bal Dr from mon. of from L.P.C. —	1518	Bal Cr from mon. of from L.P.C.	
ASSIGNED PAY;		Regt Pay <u>29</u> days at \$ <u>1.00</u>	29.00
		F'd All <u>29</u> days at \$ <u>10</u>	2.90
SEPARATION ALLOWANCE:		SEPARATION ALLOWANCE:	
OTHER CHARGES:		OTHER CREDITS:	
		Clothing Allowance —	35.00
PAYMENTS:		Subsistence, <u>for 20 1/4 to 25 1/4</u>	4.80
	107021		
	5652		
Bal Cr (to be paid)		Bal Dr (to be deducted)	
<u>overseas P.D.P.</u>	71.70	{ from soldier \$	
		{ " Dependant \$	71.70

SEPARATION ALLOWANCE	ASSIGNED PAY	VICTORY BOND
at \$ per month	at \$ <u>20</u> per month	Subscribed \$
has been to	has been paid to <u>31-1-19</u>	Paid by Oth- <u>Nil</u>
<u>Nil</u>	<u>by Ottawa closed</u>	er Units \$
		Paid by
		this Unit \$

Dependant or Beneficiary; Mrs W.A. Bird
 Address; 303 Macomb St. Detroit Mich. U.S.A.

REMARKS;

28 28 Discharged 29-1-19 Demob

Date of Enlistment 11-12-16

If married and if Separation Allowance card submitted No No

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

date;
 London, Ont.

J. D. Patterson Captain,
 Paymaster, District Depot No. 1

To be made out in duplicate.

931672

I.O. 54-1-23-53

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- All questions, etc., must be answered.
- One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins. #2 construction Bn. C.E.F.

(2) Regimental Number 931672

(3) Full Name of Soldier

John Woodson

(4) Place of Birth

West Virginia U.S.A.

(5) Are you married, or not?

No

(6) If married, state,

(a) Full name of your wife

(b) Present Postal Address

(7) Are you a widower?

yes

(8) Have you any children?

If so, give number of boys and girls

Also their names and ages

(9) Is your Father alive?.....*yes*.....

If so, state name and address

(10) Is your Mother alive?

If so, state name and address.

(11) If your Mother is a widow.

Are you her sole support, or not?

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

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

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

(15) Are you insured?

If so, in what Company?

Have you made arrangements for payment of your Insurance premium

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date.

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

Officer Commanding.

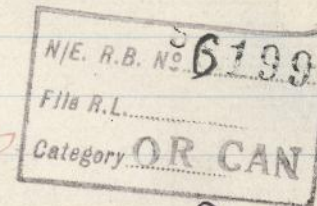
JM Rank Name **WOODSON, John.** Reg'l No. **931672**
 Unit **No.2.Const.Bn.** If in perm. Corps, }
 What Unit? }
 Married or Single **Single.**
 Place and Date of Enlistment **Winnipeg. 11th Dec 1916.** Place of Birth **West Virginia, USA.**
 Name and Address, Next-of-Kin **Henry Woodson..**
Louisberg, West Virginia, U.S.A. Relationship **Father.**

Assigned Pay Monthly \$ Payable to

Separation Allowance \$ Payable to

Relationship

Relationship



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.				
		Arrived in England per L.S. Southland		7.4.17	AWD
14.6.17	2 nd Co. Co. 4	Uninjured in France	Field	17.2.17	P220118
16.12.18	NSRD.	TOS from 2 nd Co. Co. 4	The Bishopth.	14.12.18	DO 305471 / 19.12.18 2 nd Co. Co. 4
27.12.18	NSRD	O/C to C.D.D. Rhyl		27.12.18	313
19 JAN. 1919	NSRD	SOS to CEF in CANADA	Bshott	9 JAN. 1919	PT2DO 16

A.F.B. 103 CHECKED
31 MAR 1917

[illegible]

Casualty Form - Active Service

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				
17.7.17	O.C.	Sentenced 7 days H. "2" Disobeying a standing order Irregular Conduct in Camp after lights out.	Id.	16/7/17	B2069 Pt. 11.0 122. 78/17
16/2/18	O.C. Univ	Granted 14 day leave to UK.		12/2/18	B213 P29511 dy 25/2/18
2/3/18	"	Reqd. for leave	Unid	26/2/18	B213
22.4.18	G. F. L. Hos.	Mumps. Adm.	"	22.4.18	E 7368. W. 9000.
27.4.18	O.C. Univ	Adm. to Hosp.	"	22.4.18	B213
7-6-1918	June Hosp	Mumps rec. Discharged	"	7-6-18	W 3773 F 6766
8-6-18	June Hosp	Rejoined from hosp	Id	7-6-18	B213
7-7-18	June Hosp	Dysentery. Adm	Unid	7-7-18	W 6504/4-799
11-7-18	Id	" " Disch	Unid	11-7-18	W 6937/91621
13-7-18	O.C. Univ	Admitted to Hospital	"	7-7-18	B213
13-7-18	Id	Rejoined from Hospital	"	11-7-18	B213
7-11-18	June Hosp	Recd admitted	"	7-11-18	W 1201.
7-11-1918	June Hosp	Is Hospital	"	7-11-1918	B213
23/1/18	O.C.	Rejoined	Unid	20/1/18	B213
20/11/18	C.F.C. Hosp.	Discharged. to	"	20/1/18	W 7680.
11/12/14	aaq	Trans to England & posted to U.S. Regt Depot	Branshott	14/12/18	K.R. 344

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

John

Name **Woodson** RankPle Reg. No. **931672**

Unit

2nd Const C.Next of Kin **W S A**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
22-4	C.F.H. La Joux	Trumps	A	201		971/16
7-6	Discharged	"	A	239		1913-11
7-7	C.F.H. La Joux	Dianhoca (V)	A	265		1507/15
11-7	Discharged	"	A	267		2585/8
4-11-18	ban for Lp. La Joux.	P.U.O.	A	271		5525-7
20-11-18	Discharged	"	A	282		5829-8

[illegible]

SURNAME.

Woodson

CARD No.

I

K

CHRISTIAN NAMES

John

REGL. No.

931672

RANK

Pte

UNIT

No. 2 Construction

FORMER CORPS

Nil

606 Dis. 29-1-19
FOLL.
80-28728-1-19 80-1
Grand

Bro

NEXT OF KIN.

NAMES IN FULL

Woodson, Henry

RELATIONSHIP TO SOLDIER

Father

ADDRESS

Louisburg, W. Va., U. S. A.

CHANGE OF ADDRESS

COUNTRY OF BIRTH

USA West Virginia

DATE

Dec. 27th 1879

PLACE OF ATTESTATION

Winnipeg, Man.

DATE

Dec. 11th 1916R/C, 17/1/19, 25⁴/₂₉, I

From Halifax Express S.S. 'Southland' 28/3/17

MARRIED

SINGLE

Yes

WIDOWER

TRADE OR CALLING

Vallet

RELIGION

Baptist

DESCRIPTION.

APPARENT AGE

38

YEARS

—

MONTHS

HEIGHT

5

FEET

9

INCHES

CHEST MEASUREMENT

37

INCHES

EXPANSION

2

INCHES

COMPLEXION

Dark

EYES

Brown

HAIR

Black

DISTINGUISHING MARKS

Not Stated

MEDICAL EXAMINATION.

PLACE

Winnipeg. Man

DATE

Dec. 11th 1916

*Present Address, 179 Linton St, Detroit,
Mich., U.S.A.*

NAME

RANK AND CORPS

CABLE

No.

DATE

NATURE OF CASUALTY

REGT'L. No.

H. Q. FILE NO. 649

FOLLOWS

No.

FOLLOWS

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
A 202	Canton Corps La Joux Jura	22-4-18	Mumps
A 234	Discharged	7-6-18	"
A 265	C 7 C La Joux Jura	7-7-18	Diarrhoea
A 267	Discharged	11-7-18	"
A 371	C 7 C La Joux Jura	7-11-18	P. U. C.
A 382	Discharged	20 11-18	"

No. 931672 RANK *Pte.*NAME *Woodson John*T. O. S. *11-12-16*

UNIT

*No 2. Construction Battalion**D.O. 2. 2. 1-17.*M. D. *6*

PAID FROM	PAID TO	SIG. OR REC'T	* PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1916 Dec 11</i>	<i>1917 Jan 31</i>	<i>✓</i>		
	<i>Feb.</i>	<i>✓</i>		
	<i>Mar.</i>	<i>✓</i>		

MILITIA AND DEFENCE
 ASSIGNED PAY
 OVERSEAS CONTINGENTS

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

To Whom

Address

Rate

By Whom Assigned

Regtl. No.

Rank

Corps

W. A. Bird
~~Central Police Sta~~
~~1st Precinct~~
303 Macomb St.
Detroit Michigan
U.S.A.

Woodson John
931672
Pte
2 Cons Battr

2000

APR

1917

PAYMENTS

(16/5/17)

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				



ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

Mrs W.A. Bird

(Assignee)

PAYMENTS.

Name of Soldier

Woodson John
Pte 931672 #2 Cons Battr

L. L. Job 5470—Req. 6883.

Month.	Year.	Cheque No.	Amt.	Remarks.
			<i>2000</i>	<i>APR 1917</i>
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April		<i>35184</i>	<i>no -</i>	
May		<i>322616</i>	<i>20</i>	
June		<i>1819013</i>	<i>20</i>	
July		<i>X 25740</i>	<i>20</i>	
Aug.		<i>33850</i>	<i>20</i>	
Sept.		<i>J 41298</i>	<i>20</i>	
Oct.		<i>A 24217</i>	<i>20</i>	
Nov.		<i>A 36573</i>	<i>20</i>	
Dec.		<i>W 6120R</i>	<i>20</i>	
Jan.	1918		<i>180</i>	
Feb.				
March				
April				
May				
June				
July				

303 Macomb St. Detroit,
*(16/5/17 WR) Mich., U.S.A.*CANADIAN
ASSIGNED PAY AUDITED

AUDIT CLERK

DATE *4/6/19* *F Lane*

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.	1919					
Jan.						
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						
Dec.	1920					
Jan.						
Feb.						
March						
April						
May						
June						
July						
Aug.						
Sept.						
Oct.						
Nov.						

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Apr 1/17

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

20			
----	--	--	--

9591

PARTICULARS OF SEPARATION ALLOWANCE

No. 931672

Rank *Pte* Promoted Reverted Discharge

Soldier's Name *John Woodson*

Battalion *#2 Cons. Batta*

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name *Mrs W.A. Bird*

Address *303 Macomb St.*

Detroit Mich Change of Address *Michigan*

1 *U.S.A.*

2

3

4

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
31-12	~		180	180	
Jan 18	71023		20	20	✓
Feb	71474		20	20	✓
Mar	91411		20	20	✓
Apr	X 9620		20	20	✓
May	X 19796		20	20	✓
June	Z 17219		20	20	✓
July	Z 28680		20	20	✓
Aug	Z 41553		20	20	✓
Sept	Z 53829		20	20	✓
Oct	Z 70927		20	20	✓
Nov	Z 85497		20	20	✓
Dec	Z 101251		20	20	✓
Jan/19	Z 116007		20	20	✓
			440	440	

31-1-19

A/c Closed *Olympic*

Ret'd per.....

Date..... 17-1-19 M.F.W.187

Clerk.....

CANADIAN
ASSIGNED PAY AUDITED

AUDIT CLERK

DATE 4/6/19

M. F. W. 128
400M.-6-17-1772-38-1141
L. L. 22320-M. & D. 7483.

MD1

19736-8-74

LUR0 LP 51090 OK m'g RW



Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

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/AAmount
A/P

Total

REMARKS

ASSIGNED PAY ~~ENGLAND~~ CANADA. SEPARATION ALLOWANCE. ~~ENGLAND OR~~ CANADA.

NAME:- **WOODSON** *John*

EFFECTIVE DATE:- **1 APR 1917**

EFFECTIVE DATE:-

NUMBER:- **931672**

AMOUNT:- **20.00**

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

*Mrs W.A. Bird Friend
Central Police Sta.
1st Precinct Detroit, Mich. U.S.A.*

PM.

*Stopped
1-1-19.*

UNIT AND TRANSFERS

ORIGINAL UNIT:- *2 Construction Bn.*

DATE ACCOUNT FIRST OPENED:- **1 APR 1917**

AUTHORITY

DATE EFFECTIVE

DATE LEDGER SHEET T'S'F'D

UNIT TRANSFERRED TO

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
<i>9/12</i>	<i>6640</i>		<i>4.66</i>				
<i>8/12</i>	<i>3595</i>		<i>9.72</i>				
			<i>14.39</i>				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY

PAY

F.A.

P.F.A.

SUBSCE ALL'CE

1

10

PARTICULARS OF RENDERING NON-EFFECTIVE: *Discharge M.B. 1/2 1-1-19*

Lpc. 44 59 Ledger 59-08

1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
MAR	<i>Bal Forward</i>								<i>06</i>		
Apr	<i>P. Pay</i>	<i>33</i>		<i>ban ass Pay</i>				<i>20</i>			
				<i>AR 10 8/4 CFC para</i>	<i>3 57</i>						
				<i>AR 274 27/4 - " -</i>	<i>3 57</i>				<i>5 80</i>		
		<i>33</i>			<i>7 14</i>			<i>20</i>			
May	<i>P. Pay</i>	<i>34 10</i>		<i>b. a.p.</i>				<i>20</i>			
				<i>AR 415 9/5 CFC para</i>	<i>3 57</i>						
				<i>- 429 23/5 - " -</i>	<i>3 57</i>				<i>12 76</i>		
		<i>34 10</i>			<i>7 14</i>			<i>20</i>			
June	<i>P. Pay</i>	<i>33</i>		<i>ass pay</i>				<i>20</i>			
				<i>AR 716 7/6 CFC 5</i>	<i>3 57</i>						
		<i>33</i>		<i>AR 879 27/6 CFC para</i>	<i>3 57</i>				<i>18 62</i>		
					<i>7 14</i>			<i>20</i>			
July	<i>P. Pay</i>	<i>34 10</i>		<i>Can a.p.</i>				<i>20</i>			
				<i>AR 916 10/7 CFC 5</i>	<i>3 57</i>						
		<i>34 10</i>		<i>1 1100 25/7</i>	<i>3 57</i>				<i>25 58</i>		
					<i>7 14</i>			<i>20</i>			
Aug	<i>P. Pay</i>	<i>34 10</i>		<i>Can a.p.</i>				<i>20</i>			
				<i>AR 1263 10/8 CFC 5</i>	<i>3 57</i>						
				<i>AR 1478 25/8</i>	<i>3 57</i>				<i>32 54</i>		
		<i>34 10</i>			<i>7 14</i>			<i>20</i>			

Stopped
1-1-19

UNIT AND TRANSFERS

ORIGINAL UNIT:- 2 Construction Bn.

DATE ACCOUNT FIRST OPENED:- 1 APR 1917

AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T'S P'D UNIT TRANSFERRED TO

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
9.12	6640		4 66				
8.12	3595		9 13				
			14 39				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY PAY F.A. P.F.A. SUBS'CE ALL'CE

1 10

PARTICULARS OF RENDERING NON-EFFECTIVE: Discharge 1-1-19

Lec. 44 69 Ledger 59 08

1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR 1	DR 2	DR 3	DR 4	BALANCE	DEFERRED	SEPARATION
MAR	Bal Forward								06		
Apr	P. Pay	33	-	ban ass Pay				20			
				a.R 10 8/4 CFC para	3 57						
				AR 274-27/4 - " -	3 57				5 80		
		33			7 14			20			
May	P. Pay	34	10	b. a.P.				20			
				AR 415 9/5 CFC para	3 57						
				- 429 23/5 - " -	3 57				12 76		
		34	10		7 14			20			
June	P. Pay	33	-	ass Pay				20			
				AR 716 7/6 CFC 5	3 57						
		33		AR 879 27/6 CFC para	3 57				18 62		
					7 14			20			
July	P. Pay	34	10	Can a.P.				20			
				AR 916 10/7 CFC 5	3 57						
				1 1100 25/7	3 57				25 58		
		34	10		7 14			20			
Aug	P. Pay	34	10	Can a.P.				20			
				AR 1263 10/8 CFC 5	3 57						
				AR 1478 25/8	3 57				32 54		
		34	10		7 14			20			
Sep	P. Pay	33	-	Can a.P.				20			
				AR 1679 5/9 CFC 5	3 57						
				AR 1883 24/9	3 57				38 40		
		33			7 14			20			

Nov	✓	33.	cap.	✓	26. 11	1306	20.
Dec	✓	34/10	2920.	✓			20. 5908
			cap				
			6640.	✓	10/12	466	
			3595	✓	19.12	973	4469
		67/10.			2745		40.

S.O. 10 Jan 9. 1. 19.
S.O. 16. 19. 1. 19 Ndb.

CANADIAN
ASSIGNED PAY AUDITED

AUDIT CLERK
DATE 4/6/99 Lane

1306
702
1039
3491

RELATIONSHIP OF DEPENDANT

NAME OF HOSPITAL _____

[illegible]

931672 Woodson, J

20⁰⁰

DATE	PAY				FIELD ALLOWANCE				WORKING OR SPECIAL PAY				ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS								CASH PAYMENTS		
	No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE	AMOUNT		No. OF DAYS	RATE	AMOUNT					1		2		3		4		1	2	3
			\$	C.			\$	C.			\$	C.				No.	DATE	No.	DATE	No.	DATE	No.	DATE			
MONTH	PARTICULARS				CR.1	CR.2	PARTICULARS				DR.1	DR.2	DR.3	DR.4	BALANCE	DEFER. SER. PAY ENG.	RED. ALLCE. PAY ENG.									
	OUT - Bal														53 73											
Nov	P.P.				33	-									20											
							AR 833.28 ² / ₁₇ C.F.C.				3	57														
							" 857.12 ² / ₁₇ -				3	57														
							" 979.25 ¹⁰ / ₁₇ -				3	57														
DEC	--				34	10	" 1097.10 ¹¹ / ₁₂ -				3	57			20	66 55										
					67	10					14	28			40											
JAN	1918 P.P.				34	10									20											
							" 1266.23 ¹¹ / ₁₇ 2 Bonch B				12	49														
							" 1440.21 ¹² / ₁₇ -				7	14			61	02										
					34	10					19	63			20											
FEB	-				30	80	Assigned Pay								20											
							" 1858.24 ¹ / ₁₈ C.F.C.				3	57														
							" 95092 Lou 18 ⁷ / ₁₈				14	60														
							" 95409 " 20 ⁷ / ₁₈				9	73														
							" 1602.4 ¹ / ₁₈ C.F.C. Jura				3	57			20	40 35										
					30	80					31	47														
MAR	1918 "				34	10	Ass Pay								20											
							AR 590 C.F.C. Jura 11 ⁷ / ₁₈				14	80														
							" 1903 " 14 ² / ₁₈				3	57														
							" 2325 " 18 ³ / ₁₈				7	14			20	06										
					34	10					54	51														

CANADIAN
ASSIGNED PAY AUDITED

AUDIT CLERK

DATE 4/6/19 F. Lane

[illegible]

10-26-33

3925

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

REGT. No. 931672

M. OR S. S

NEXT OF KIN

RELATIONSHIP

PARTICULARS

EFFECTIVE
DATE

AUTHORITY

ORIGINAL UNIT
C.E.F.PLACE OF
ATTESTATIONDATE OF
ATTESTATION

ASSIGNED PAY, \$

PAYABLE TO

ADDRESS

STOP PAYMENT FORM
ASSIGNED PAY
RENDERED, DATE

DISCHARGED

IS SEPARATION ALLOWANCE PAID?

DATE EFFECTIVE

TO WHOM PAID

RELATIONSHIP

ADDRESS

Nil.

MONTH

100 PAY AND F.A. 10

NO.
OF
DAYS

RATE

AMOUNT

OTHER
CREDITSTOTAL
CREDITS

ACQUITTANCE ROLLS

CASH PAYMENTS

ASSIGNED
PAYREGI-
MENTAL
CHARGESOTH
CHARBalance from
previous
account

31/12/18.

44 69

4 80

3190 35 00

71 70

WAR SERVICE GRATUITY

29/1/19

70

70

29/1/19

70

WAR SERVICE GRATUITY

29/2/19

280

280

70

29/3/19

210

210

70

29/4/19

140

140

70

29/5/19

70

70

70

350

350

350

AUDITOR	PAYMASTER
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~~A. Reinst~~
Capt

[illegible]

[illegible]