

NAME

Christie Edmund

REGT. NO.

2323384

UNIT

C2C

H. Q. FILE NO.

2-0

CONTENTS

DATE RECEIVED

11/25/35

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON-EFFECTIVE BY

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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)

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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)

*MTB 184**PM 1375**Cade 5009A**200003**MT 667**Cade 5009A**misc*

DEATH

Category

19709

DISCHARGE

Category

Remod

DESERTION

*Dental Serv 18/6/20**Deceased 12-9-53*

DISPERSAL STATION T

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.) War Service Badge
Class "A" No. 172389

1. No.	2323384		
2. Rank.	Pte.		
3. Name.	Edmund John Christie		
4. Unit.	C.F.C.		
5. Date of Discharge	11/4/19	Place	Vancouver
6. Reason for Discharge	Demob. A - Vanc - wife - Farmer - 1		
7. Authority.			
8. Proposed Residence after Discharge	815 - 13 th Ave E Vancouver		
9.	<p>CERTIFICATE TO BE SIGNED BY SOLDIER.</p> <p>I hereby acknowledge that at the undernoted place and date I received my discharge Certificate</p> <p>M. F. W.? 39</p> <p>SLI - 11 FL MAR 29/19 ARR HIX APL 5 .. 1 M T *CARONIA*</p> <p>E. J. Christie</p> <p>Signature of Soldier.</p>		
10.	<p>CONFIRMATION.</p> <p>The discharge of the above named man is hereby confirmed.</p> <p>Place.....</p> <p>Date.....</p> <p>Signature.....</p> <p>(O. C. Discharging Unit.)</p>		

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate.....Militia Form W. 23
 or Particulars of Recruit.....Militia Form W. 133
 Field Conduct Sheet.....Militia Form W. 178 or A.F.B. 122
 Casualty Form.....Militia Form W. 54 or A.F.B. 103
 Last Pay Certificate.....Militia Form W. 44
 Certificate that missing documents are unobtainable.....
 Medical History Sheet.....Militia Form B. 313 or A.F.B. 178
 Proceedings of Medical Board.....M.F.B. 227, A.F.B. 179 or A.F.A. 45
 Dental History Sheet.....Militia Form B. 465
 Medical Report.....M. F. W. 129 or D. M. S. 1375
 Regimental Conduct Sheet.....Militia Form B. 263
 Company Conduct Sheet.....Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23)
Particulars of Recruit (M.F.W. 133)
2. Casualty Form (A.F.B. 103)
3. Medical History Sheet (M.F.B. 313)
4. Proceedings of Med. Board (M.F.B. 227)
5. Dental Certificate (C.A.D.A. 5600a)
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (M.F.B. 218a)
8. Discharge Certificate (M.F.W. 54)
(Enclosed in special envelope (260M))
9. Copy of Discharge Certificate (M.F.W. 54a)
10. Dispersal Certificate (M.F.W. 54b)
11. Supplemental Statement (M.F.W. Form (D.O.S. 2)
(and Clipping)
12. Last Pay Certificate (M.F.W. 44)
13. Pay Book (A.F.B. 103)
14. War Service Gratuity (Form M.F.W. 2595).
15. Salary Documents.

Group A
 Checked by No. 12
 Date 28-3

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

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

350m.—5-16

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps *Forestry Draft Attached 102 Regt PMR*
 Regimental No. *2323384* Rank *Pte* Name *Christie Edmund John*
 Enlisted (a) *4.4.17* Terms of Service (a) *20 y w* Service reckons from (a) *4.4.17*
 Date of promotion to } Date of appointment } Numerical position on }
 present rank } to lance rank } roll of N. C. Os. }
 Extended... Re-engaged... Qualification (b) *civil Teamster*

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				
		<p>T. O. S. No 11 DD 29 Mch 19</p> <p>S. O. S. C. E. F Apr 11 19 T Area</p> <p>No 11 DD do 105-Apr 15-19</p> <p><i>A MacLean Capt</i></p>			

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

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				

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

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

250M. 4-1-16.

H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps

Foresty Draft C.F. Attached to 102nd Regiment. Recd.

Regimental No.

2323384

Rank

Private

Name

Christie, Edward John.

Enlisted (a)

4th April 1917

Terms of Service (a)

duration of war

Service reckons from (a)

4th April 1917

Date of promotion to present rank.

Date of appointment to lance rank

Numerical position on roll of N. C. Os.

Extended

Re-engaged

Qualification (b)

*Military. nil
Civil. Seaman.*

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				
		<i>Embarked R.M.T. 2810</i>	<i>Halifax</i>	<i>28/5/17</i>	
		<i>Disembarked</i>	<i>Liverpool</i>	<i>19/6/17</i>	
<i>22-6-17</i>	<i>C.F.C. B.D. on draft</i>	<i>T.O.S. Base Depot, C.F.C. from Canada.</i>	<i>Sunningdale</i>	<i>10-6-17.</i>	<i>Part 11 orders No 48.</i>
					<i>Lieut. A/ADJT. C.F.C.</i>
<i>27.7.17.</i>	<i>C.F.C.</i>	<i>S.O.S. BASE DEPOT C.F.C. on posting to No. 57 Coy. France.</i>	<i>SUNNINGDALE.</i>	<i>27.7.17.</i>	<i>PT. II. DO. NO 78.</i>
					<i>LT. & A/ADJ. C.F.C.</i>
		<i>Disembarked</i>	<i>Havre</i>	<i>28.7.17</i>	
<i>5-1-18</i>	<i>n/57</i>	<i>apptd Cook with pay at the rate of £1.25 per week</i>	<i>Field</i>	<i>31.12.17</i>	<i>B213 p 20 no 3 d. Jan 1918</i>
<i>16-2-18</i>	<i>Do</i>	<i>Granted 14 days leave to</i>	<i>Mk.</i>	<i>14/2/18</i>	<i>B213 p 50 no 9 d. Jan 1918</i>
<i>9.3.18</i>	<i>Do</i>	<i>Rejoined Unit</i>	<i>Field.</i>	<i>3.3.18</i>	<i>B213.</i>

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

[P.T.O.]

CERTIFIED CORRECT.

10 AUG. 1917

CAN. RECORDS, LONDON.

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				
12/7/19	aa H.	S.O.S. for demobilisation to C.F.C. Depot	Sunnyvale	12/7/19	N/R. KH 27612 Pt. 2.0/S. 18.9 6/19/17 A. Brauer Lieut. for Lt. Col A.A.G. Cdn. Sect. G.H.Q.
21-2-19		O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale from 57 C. France O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale	Sunningdale	18-2-19	Pt. 11 D.O. 53 Pt. 17 D.O. W. T. Stewart
19-3-19	B.D.B.F.C.	S.O.S. BASE DEPOT C.F.C. Transfer M.D. 11 on posting to Can. Camp Rlygt.	SUNNINGDALE	19-3-19	Pt. II D.O. 78. G. B. Rose Lt. for O.C. B.D.B.F.C. SLI-1111 MAR 23/19 ARR HX APL 5 H.M.T. CARONIA
		Attached C.C.C. Kimmel Park for return to Canada. Part 11 Orders No. _____ Ceases to be attached C.C.C. Kimmel Park on marking for Canada, Part 11 Order No. _____ Commanding _____ Wing, Kimmel Park Camp.			

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 2323384

(Rank) Private

Name (in full) Edmund John Christie enlisted in

the Canadian Forestry Corps

CANADIAN EXPEDITIONARY FORCE at Kamloops BC on the 4th

day of April 19 17

HE served in Canadian Forestry Corp - France

and is now discharged from the service by reason of Demobilization.

Medical Unfitness.

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

Age 40

Marks or Scars _____

Height 5ft - 7ins

Complexion Fair

Eyes Blue

Hair Brown

E. J. Christie

Signature of Soldier

Date of Discharge

11th April 1919

P. A. Macleod

Issuing Officer

Captain

Rank

Date 11th April 19 19

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.

MK

Rank Name CHRISTIE Edward John
Dft to Base Depot Forestry If in perm. Corps }
Unit What Unit?
Corp Sunningdale
Place and Date of Enlistment Kamloops Apr 4th 1917

Reg'l No 2323384

Married or Single Married

Place of Birth Orange Banffshire

Name and Address, Next-of-Kin Mrs Edmund Christie
815-13th Ave. E. Vancouver B.C.
713.12th Ave East Vancouver

SCOTLAND England

Relationship Wife.

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Reason

Character

H. W. V., Ltd.—9346-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date. <i>F.D.</i>	REMARKS Taken from Official Documents.				
Date.	From whom received.								
3 CHECKED									
ARRIVEL IN ENGLAND 9-6-17 S/S OLYMPIC									
22.6.17. C.F.C. ED T O S SUN DALE 10 6. 17 Pello 48									
27.7.17	C.F.C. B.D. S.O.S. to Coy. 57. France	"	27.7.17	P.R. D.O. 78	57th Coy. C.F.C. 1st 1st 1st 8-07				
SOS to FICFC, 15 2.19									
57 Co. D.O. 6 1.27 219 &									
T O S B O J F C S:dale									
DO 52 d 21 2:19									
20-3-19	11 m d e w	F.O.S. pend'g ut to lon	Pte Rhyl	18-3-19	- 68				
19-3-19	B d e t e	SOS to 11 m d e w Rhyl	- Sdale	19-3-19	- 78				
34 T. 29.3.19									
31-3-19	11 m d e w	DO 1 to C B 7 am 134	✓ Rhyl	29-3-19	- 77				
mul coc.									

N/E. R.B. N3 11581

File R.L.

Category

O R C A N

Character

A.F.B. 103 C.I. CHECKED

[illegible]

CANADIAN RECORD OFFICE

OLD BAILEY?

H.C.

From:- Officer i/c Records,
Canadian Expeditionary Force.

To :-

The attached Discharge
Documents are returned to you for completion
please.

Your attention is invited

(1) to paragraphs.....
of A.F.B.268.

(2) To the fact that following documents are
missing and no certificate is attached as to

Form R.2/124.

E.E.

For attaching to Original & Triplicate A.P.

No. 2323384 Rank. Pte. Name and Initials Christie E J Unit C.F.C.

*Change of address
from 713-12 H.E. Vancouver B.C.*

To:-

*815. 13¹⁴ H.E. Vancouver
B.C.*

Authority R.L. 29.d/9/1917

Clerks Initials.....
RE L

Can. Forestry Corps

ATTESTATION PAPER.

No. 2323384

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? *Christie*
- 1a. What are your Christian names? *Edmund John*
- 1b. What is your present address? *713 12th Avenue Vancouver East 120*
2. In what Town, Township or Parish, and in what Country were you born? *Glasgow, Banffshire, Scotland*
3. What is the name of your next-of-kin? *Mrs Edmund Christie*
4. What is the address of your next-of-kin? *713 12th Avenue East Vancouver 120*
- 4a. What is the relationship of your next-of-kin? *Wife*
5. What is the date of your birth? *5th September 1878*
6. What is your Trade or Calling? *Steamer*
7. Are you married? *yes*
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*
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? *no*
14. If so, what was the nature of the disability? *no*
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? *no*
16. If so, what was the reason? *no*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Edmund John Christie*, 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 *4th April* 1917. *B. J. Christie* (Signature of Recruit)
B. J. Burchell (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Edmund John Christie*, 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 *4th April* 1917. *B. J. Christie* (Signature of Recruit)
B. J. Burchell (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 *Hamloops* this *4th* day of *April* 1917.
B. J. Burchell (Signature of Justice)

B. J. Burchell

Description of Edmund John Christie on Enlistment.

Apparent Age 38 years months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 7 ins.

Chest measurement { Girth when fully expanded 37 ins.
Range of expansion 3 ins.

Complexion Fair

Eyes Blue

Hair Brown

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

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

VISION: Right 20 Left 20
20 20

Hearing Right Normal
Left Normal

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 Overseas Expeditionary Force.
Date 9th April 1917.
Place KAMLOOPS, B.C.

*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:—

Fit for Frontiers

W. E. Smith PRESIDENT
J. B. Smith Medical Officer.

CERTIFICATE OF OFFICER COMMANDING UNIT.

Edmund John Christie having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

W. E. Smith (Signature of Officer)

Date 10 April 1917

FORESTRY DEPT, C.E.F.
ATTACHED TO 102ND REGIMENT, R.M.R.

26

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

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

No. 2323384 Rank PTE. Surname CHRISTIE
(Given name in full) EDMUND J
Unit or Corps C.F.C. Birthplace BAMFESSHIRE, SCOTLAND

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

1. GENERAL DESCRIPTION:

Physique Good Weight 150 lbs. Height 5 7/8 in. Colour of Eyes Blue
Nutrition Good
Pulse 72
Condition of arteries Normal
Vision Rt. 4/8 Left 4/8
Hearing (conversational voice) Rt. 21 ft.
Left 21 ft.

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

None

Opinion as to general health and physical condition Normal

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.

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at Summerville (Overseas)

Date 15-3-19

Signed E. R. Horner M.O.

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

Signature E. J. Christ

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

THIS SECTION FOR USE IN CANADA—

Examined at (Canada)

Date

Signed M.O.

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

Signature

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

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

[OVER]

MEDICAL HISTORY SHEET

2323384
ORIGINAL

Surname

Christie

Christian Name

Edmund John

Examined

on 9th day of April 1917
at KAMLOOPS, B. C.

Approved by

MOBILIZATION BOARD
KAMLOOPS CENTRE

Birthplace

City or Town Grand
County Banffshire Scotland

Apparent age

38

Trade or occupation

Teamster

Height

5 feet 7 Inches

Weight

145 lbs.

Chest measurement

Minimum 36 inches

Maximum expansion 37 inches

Physical development

good

Small-pox Marks

none

Vaccination Marks

Arm Right Left 2

Number 2

When Vaccinated last

Childhood

(a) Marks indicating congenital peculiarities of

previous disease

none

(b) Slight defects but not sufficient to cause rejection

none

Date

Fit or Unfit

EXAMINED FOR RE-ENGAGEMENT

Date

Result

VACCINATIONS

Date

Result

ANTI-TYPHOID INOCULATIONS, ETC.

Enlisted on

4th

day of

April

1917 at

Kamloops B.C.

Joined on enlistment

Infantry, Dept. C.E.F.

REG'TL NUMBER

2323384

HABITS

DATE

Transferred to

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

STATION

DATE

DISEASE

RESULT

KAMLOOPS, B. C.

MAY 1 1917

During duty

5/2/19

5-3-19

7 ft

Edmund John

A.

Edmund P. Hunt

A. E. Wade

Christie

Christian Name

Edmund John.

[illegible]

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters)

CHRISTIE E.J.

REGIMENT

C.F.C.

RANK

PTE

No.

2328384

Date of Examination in England

21/2/19

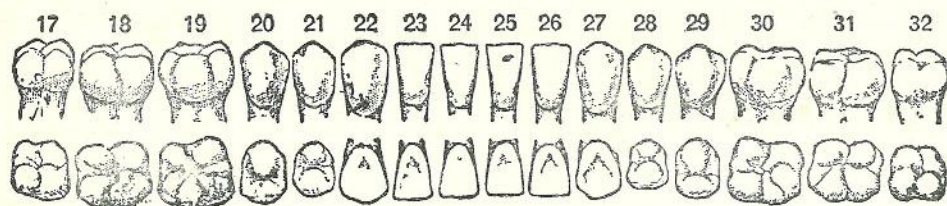
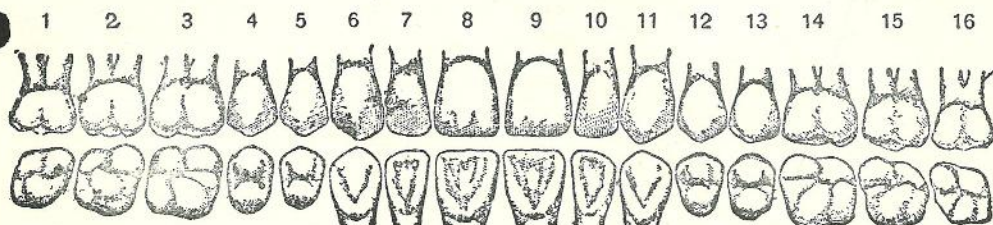
Date of Examination in France

DIRECTIONS TO
DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to Partial Dentures the numbers of teeth thereon will be stated



PRESENT DENTAL REQUIREMENTS

1. FILLINGS

none

2. EXTRACTIONS

"

3. CROWNS

"

4. DENTURES

(a) Full Upper

-Remake-

(b) Part Upper

(c) Full Lower

(d) Part Lower

Remake

HAS HE EVER REFUSED DENTAL TREATMENT?

no.

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

(a) In Canada

(b) In England

(c) In France

yes

Signature of Dental Officer

J. H. Reid capt

1. On* examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge.

FORM LETTER "D"

174.

417 MENZIES ST,
VICTORIA, B. C.

OCT 12 1920

To Dr. J.C. Morrison.....

Mission B.C.

Dental treatment.

#2323384, Pte. E.J. Christie, C.F.C.

The marginally named man has been authorized to receive dental treatment from you.

He is entitled to - Examination; Full upper and full lower dentures.

and the total amount authorized to be paid for this work is \$ 37.00

In case the patient desires a different class of work to that specified above, the difference in cost must be borne by the patient. The Militia Department will in no case assume any responsibility for any expenditure in excess of that authorized by them.

M.F.W. 2650.
21m-4-20.M.
H.Q.1772-39-1469.

Capt.
District Dental Officer
Military District No. XI.

417 MENZIES ST.
VICTORIA, B. C.

FORM LETTER "C". 174

OCT 14 1920

To Mr. E.J. Christie

Mission City B.C.

Dental treatment.

You are hereby authorized to receive dental treatment
from Dr. J.C. Morrison Mission City B.C.

You are entitled to the following work: Examination; Full
upper and full lower dentures.

and the amount allowed for this work is \$ 37.00

You will please forward immediately on completion of
this work, an account in quadruplicate, showing that the work
for which payment is claimed has been performed, certified by
the Dental Surgeon.

M.F.W. 2649.
21m.-4-20.(M)
H.Q.1772-39-1468.

District Dental Officer, ^{Capt.}
Military District No. XI.

COPY

CADC 5009A. CANADIAN ARMY DENTAL CORPS, C.M.F.C.
DENTAL CERTIFICATE FOR DEMOBILIZATION.

Directions to
Dental
Officers.

NAME OF SOLDIER CHRISTIE E.J.

REGIMENT C.F.C. RANK Pte. No. 2323384

Date of examination in England 21-2-19

Date of examination in France. _____

1. This form will be made out for each individual at the time of demobilization in England or France.

2. Figures as per chart will be used to designate teeth concerned.

3. In reference to partial dentures, the numbers of teeth thereon will be stated.

CHART

Present Dental Requirements.

- | | |
|----------------|--------|
| 1. Fillings | None |
| 2. Extractions | " |
| 3. Crowns | " |
| 4. Dentures | |
| (a) Full Upper | Remake |
| (b) Part Upper | |
| (c) Full Lower | |
| (d) Part Lower | Remake |

Has he ever refused Dental Treatment? No

Has he ever received Dental Treatment? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada
(b) In England
(c) In France. Yes

Signature of Dental Officer. J.H.Reid Capt.

CANADIAN ARMY DENTAL CORPS—C.E.F.

REPORT FOR WEEK ENDING.

(Showing work for each day in week.)

191

From (Name of Operator).....

Attached to.....

[illegible]

SUMMARY

Number of Patients Treated.....

“ “ “ Completed.....

“ “ “ Incompleted

“ “ Dentures.....

“ “ Operations.....

..C.A.D.C.

NOTE SPECIAL CASES ON BACK OF FORM.

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

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) 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.
- (c) All questions, etc., must be answered.
- (d) 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.
- (e) 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..... Forestry Draft. C.E.F.
..... Attached to 102nd Regiment. R.M.R.

(2) Regimental Number..... 2323384

(3) Full Name of Soldier..... C H R I S T I E . Edmund John.
.....

(4) Place of Birth..... G R A N G E .
..... BANFFSHIRE, Scotland.

(5) Are you married, or not?..... yes

(6) If married, state,
(a) Full name of your wife..... Mrs. Jemima Christie.
.....
(b) Present Postal Address..... 713- 12th Avenue East.
..... VANCOUVER, British Columbia.

(7) Are you a widower?.....

(8) Have you any children?..... yes..... (2)
If so, give number of boys and girls..... 1 - Boy. 1 - Girl.
Also their names and ages..... William..... Christie..... Age 18 years.
..... Kathleen..... Christie..... Age 8 " "
.....
.....
.....

(9) Is your Father alive?.....no.....

If so, state name and address

(10) Is your Mother alive?.....no.....

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?.....yes.....

If so, in what Company?.....Prudential Insurance Co of America.....

Have you made arrangements for payment of your Insurance premium.....yes.....

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

Date.....April 4th, 1917.

E. J. Christie
E. J. Christie
Officer Commanding.

SURNAME.

CHRISTIAN NAMES

REGL. NO. 2323284. RANK

UNIT

FORMER CORPS

NEXT OF KIN.

NAMES IN FULL

RELATIONSHIP TO SOLDIER

ADDRESS

CHANGE OF ADDRESS

COUNTRY OF BIRTH

PLACE OF ATTESTATION

DATE

DATE

L. L. 10437. M. & D. 7253.

M. F. W. 22. 100M.—11-16. H. Q. 1772-39-339.

1(T) CARD NO.

808 No. 11-4-19 100.108 of 15-4-19 100.11

FOLL.

15-4-19 100.11

Christie, Mrs. Edmund
 Wife
~~713 12th Ave.~~ Vancouver
 815-13th Ave. E. East. B.C.

Q2.

S.A.P. 18-8-17

Scotland Grange Banff
 Hamlopes B.C.
 Sept. 5th 1898
 Apr. 4th 1917
 O/S. 2-6-17. 855/3.
 P/C 5-4-19 29/8 45 P/L T. 11

Sailed from Halifax per S. S. Olympic 2/6/17

MARRIED *yes.*

SINGLE

WIDOWER

TRADE OR CALLING

Teamster

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

38

YEARS

MONTHS

HEIGHT

5-

FEET

INCHES

CHEST MEASUREMENT

37.

INCHES

EXPANSION

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Brown

DISTINGUISHING MARKS

nil

MEDICAL EXAMINATION.

PLACE

Hamloops B.C.

DATE

apr. 9th 1917

*Present Address. 713 - 12th ave.
Vancouver East B.C.*

REGT. No. 232

DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 232

NAME OF KIN	RELATIONSHIP	PARTICULARS	EFFECTIVE DATE	AUTHORITY	ORIGINAL UNIT C.E.F.
ADDRESS		English L.P.C. a/c		31/3/19	PLACE OF ATTESTATION
					DATE OF ATTESTATION
IS SEPARATION ALLOWANCE PAID?	DATE EFFECTIVE				ASSIGNED PAY \$
TO WHOM PAID	RELATIONSHIP				PAYABLE TO
ADDRESS					ADDRESS
					STOP PAYMENT FOR ASSIGNED PAY RENDERED, DATE
					DISCHARGED

MONTH	PAY AND F.A.			OTHER CREDITS			TOTAL CREDITS			ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY			R ME CHA					
	NO. OF DAYS	RATE	AMOUNT	\$	C.	\$	C.	\$	C.	COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3	\$	C.	\$		C.	\$	C.	\$	C.
										NO.	DATE	NO.	DATE	NO.	DATE	\$	C.	\$		C.	\$	C.	\$	C.
3/3/19	175					205	17	205	17	Pyl	Brat	train												
18/4/19	18	175	31 50			66	50	OK					9 73	4 87	5 00	20	00							
<p>Certified that all payments have been made on this account for which covering authority has been received to date.</p> <p><i>[Signature]</i> Lieut. Paymaster, Demobilization Pay M.D. No. 11</p>										<p>War Service Gratuity</p> <p>Service <u>2</u> years <u>✓</u> months</p> <p>May 22 1 80 36 7 57 75 41 -</p> <p>June 11 80 35 68 - 9 70 30 30</p> <p>July 11 82 03 44 - 70 30</p> <p>Aug 1 83 56 96 - 70 30</p> <p><u>500</u></p>														
<p>I certify that all payments of War Service Gratuity have been made on this account according to the period of Service shown on the M.F.W. 2595 received.</p> <p><i>[Signature]</i> Officer i/c War Service Gratuity M.D. No. 22</p>																								

Auditor <i>em</i>		Paymaster <i>h</i>	
Baronia 5/4/19			
Options, Reductions and Reversions Affecting Daily Rate of Pay and Allowances		REGT. No. 2323384 RANK <i>Cpl</i> NAME (IN FULL) CHRISTIE E. J.	
ORIGINAL UNIT C.E.F.		IF IN P.F. WHAT UNIT?	
PLACE OF ATTESTATION		TRANSFERRED TO	
DATE OF ATTESTATION		DATE	
ASSIGNED PAY \$		DATE EFFECTIVE	
PAYABLE TO		RELATIONSHIP ANY CHANGE IN ASSIGNEE OR ADDRESS	
ADDRESS			
STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE		EFFECTIVE	
DISCHARGED <i>MSX1</i>		PLACE DATE REASON AUTHORITY IF ENTITLED TO POST DISCHARGE PAY <i>yes</i>	

ACQUITTANCE ROLLS			CASH PAYMENTS						ASSIGNED PAY	REGI-MENTAL CHARGES	OTHER CHARGES	TOTAL DEBITS	BALANCE		PARTICULARS OR REMARKS
NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3								DEBIT	CREDIT	
DATE	NO.	DATE	NO.	DATE	NO.	\$	C.	\$	C.	\$	C.	\$	\$	C.	
<i>1/19</i>	<i>1</i>	<i>1/19</i>	<i>1</i>	<i>1/19</i>	<i>1</i>	<i>9.73</i>	<i>4.87</i>	<i>5.00</i>	<i>20.00</i>			<i>39.60</i>		<i>205.17</i>	
<i>1/19</i>	<i>1</i>	<i>1/19</i>	<i>1</i>	<i>1/19</i>	<i>1</i>	<i>302.07</i>						<i>302.07</i>	<i>70.00</i>		<i>35.00 other clothing</i>
<i>1/19</i>	<i>1</i>	<i>1/19</i>	<i>1</i>	<i>1/19</i>	<i>1</i>					<i>19.00</i>		<i>19.00</i>	<i>89.00</i>		<i>19.00 other chg 19 day Sa 00 p</i>
<i>1/19</i>	<i>1</i>	<i>1/19</i>	<i>1</i>	<i>1/19</i>	<i>1</i>					<i>12.25</i>		<i>12.25</i>	<i>101.25</i>	<i>cred.</i>	<i>12.25 other chg 7 day Pa 00 p</i>
War Service Gratuity															
Service 2 years months															
<i>May 22</i>	<i>1</i>	<i>80</i>	<i>36</i>	<i>7</i>	<i>57</i>	<i>75</i>	<i>41</i>			<i>19</i>		<i>101.25</i>	<i>26</i>	<i>77</i>	<i>513.1</i>
<i>June 11</i>	<i>1</i>	<i>80</i>	<i>36</i>	<i>7</i>	<i>57</i>	<i>75</i>	<i>41</i>			<i>19</i>		<i>98.75</i>	<i>210</i>	<i>90</i>	
<i>July 11</i>	<i>1</i>	<i>80</i>	<i>36</i>	<i>7</i>	<i>57</i>	<i>75</i>	<i>41</i>			<i>19</i>		<i>100</i>	<i>140</i>	<i>60</i>	
<i>Aug 11</i>	<i>1</i>	<i>80</i>	<i>36</i>	<i>7</i>	<i>57</i>	<i>75</i>	<i>41</i>			<i>19</i>		<i>100</i>	<i>40</i>	<i>30</i>	
												<i>100</i>	<i>1</i>	<i>1</i>	
												<i>500</i>	<i>Rm.</i>		

[illegible]

DATE ACCOUNT FIRST OPENED. - 1/6/17

DATE
EFFECTIVE

DATE LEDGER
SHEET T'S E'D

UNIT TRANSFERRED TO

CH France

a/c agreed 31/10/18. P.850

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
1²/₂₉		Remit	12 Dist	7 00	<input checked="" type="checkbox"/>			
27²/₂₉		8890	D.A. £20	97 35				
				104 83				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS. ALLC.
Ad. 3-72 1/8. SM 31 1/2 2-9-12/3/19-57 Co.	1 75 1 00		10	

PARTICULARS OF RENDERING NON-EFFECTIVE:

31³/₁₉ Dis to Can. C4. @ S'dale NR 3916. 28³/₁₉ NR 4. D & T. 11

MONTH	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATE
1918											
March	Balce Ford								59 33	31 25	
April	Cook Pay	52 50		Canada							
				AR 63 NO 5 Dist C/O Ctr 8 th 18	3 57				88 26		
May	Cook Pay	52 50		Canada	3 57						
		54 25		AR 116.5 Dist C/O Ctr 25/5/18	3 57				118 91	43 75	
		54 25			3 57						
June	"	52 50		Canada							
				AR 590 9-6-18 5 Dist C/O Ctr 7 th	3 57						
				RR 137 5-6-18 " " 57 64	30 ..						
		52 50		AR 776 25/6/18 " "	3 57				114 30		
July	"	54 25		b.a. Pay	37 14						
				AR 973 15-7-18 " "	3 57						
				" 1158 25-7-18 " "	3 57				141 41		
Aug.	"	54 25		b.a. Pay	7 14						
		54 25		AR 1281 10/8/18 " "	3 57						
				" 1493 25/8/18 " "	3 57				168 52	43 75	
		54 25			7 14						
Sep.	"	52 50		Car.							
				AR 1695 " 11.9.	3 57						
				" 1899 " 25.9.	3 57				193 88	50 00	
		52 50			7 14						
Oct	Books Pay	54 25		Car							
				AR 2117 - 12/10/18 - 5 Dist	3 73				224 40	57 00	
		54 25			3 73						
Nov	"	52 50		Car							
Dec	"	54 25		" 2546 - 13/11/18 - 12 Dist	11 19						
Jan	"	54 25		Car							
				" 2835 - 14/12/18 " "	20 53						
				" 765 - 12/12/18 " "	20 00				273 68		
		161 00		car.	51 72						

NUMBER		RANK		NAME							
MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Jan	Bab Lord								273 68	31	25
Feb	Cook Pay	49 00		AR. 3125 - 5/1/19 - 12 D.	11 19						
				R. 786 - 3.1.19 12 D.	7 00						
				AR. 3448 - 4.2.19 "	11 19						
				Cap Feb				20			
Mar		54 25		Cap Mar				20			
"	Int on Def Pay to 31.1.19	1 95		B. 8890 - 27/4/19 - B D.	97 33						
				R. 797 - 1/2/19 - 12 D.	7 00						
				Diff. T.P. + P.P. 14/2/19 - 31/3/19 46 D. @ 65¢		29 90					
				AR. 4209 25/3/19 - K.P.	9 73				165 54		
		105 20			143 44	29 90		40	165 54		
May	T. Prescribed 14/4/19 to 31/3/19	29 90							195 44		
		29 90									

A 3 M. FORM REMP. STOPPED 1/4/19
DISCHARGED TO Can DATE 31/3/19
PAY BOOK VERIFIED 1.3.19
Cr. BAL 205 17 P.C. REMP. 1/4/19
AUTHY. GEN R 3916 28 3/19

L. Darg.
COMPILED BY
CHECKED BY

AR. 4209 Cu. L.P.C. 195.44
Fluorinated - 225 34 R.P.C.

SAS Canada 29 3/4 St 34

R. 797 - 1/2/19 - 12 D. 700
 Diff. T.P. + P.P. 14/4/19 - 31/3/19 46 D. @ 65⁺
 AR. 4209 25/3/19 - K.P. 973

2990

143 44 2990

40

165 54

165 54

195 44

105 20

2990

2990

May T.P. recorded 14/4/19 31/3/19 2990

A 3 M. FORM REN'D STOPPED 1/4/19
 DISCHARGED TO Can DATE 31/3/19
 PAY BOOK VERIFIED 1.3.19
 Ch. BAL 205¹⁷ P.C. REN'D 1/3/19
 AUTHY. CACN R 3916 28³/19

COMPILED BY L. Darg.
 CHECKED BY C. M. K.

AR. 4209 En. L.P.C. 195.44

T.P. recorded on 225 34
 K.P.

SOS Canada 29 3/4 34

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

4-4-17

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20	25	30	
----	----	----	--

1-12-14
P.C. 32571-9-18
P.C. 2753
M.O. 26748

PARTICULARS OF SEPARATION ALLOWANCE

No. 2323384

Rank *Pte* Promoted

Reverted

Discharge

Soldier's Name

Edmund John Christie

Battalion

Forest Battr (Forestry Battr)

Beneficiary

Jamima Christie

Relationship

Wife

Address

MFW 2554

PARTICULARS OF ASSIGNMENT

Name

Mrs Jamima Christie

Address

4130 12 Ave East Vancouver

Change of Address

BB

1

815-13^{1/2} Ave, E, Vancouver B.C.

2

3

4

1917	Date	Cheque No.	Amount S/A	Amount A/P	Total
	Dec. 31		178	120	298
	Jan.	S 65628	30	15	45
	Feb. 18	D 94055	25	20	45
	Mar. 18	K 72099		5	5
	Mar	A 112241	25	20	45
	April	M 7578	25	20	45
	May	K 18284	25	20	45
	June	G 22288	25	20	45
	July	T 32281	25	20	45
	Aug.	S 35421	25	20	45
	Sep.	G 43774	25	20	45
	Oct.	I 52980	25	20	45
	Nov.	D 52982	25	20	45
	Dec	D 64175	45	20	65
	JAN	G 73265	30	20	50
	FEB	M 77508	30	20	50
	MAR	N 84606	30	20	50
	APR	J 3225	30	20	50
			625	440	1063

3193-E-4

REMARKS

MFW 2554 Rec'd OK 16th J.S.

M.R.O. 13. issued 5/2/18

mailed 6/2/18

A/c Closed 20. 4-19.

Ret'd per Baronia

Date 4-4-19 M.F.W. 187 M.D. 11

Closed M. Hunt - 11. 4-19

M/Ro 90014

AUDITED

M. F. W. 128.
400M. 6-17-1772 38-114.
L. L. 2320-M. & D. 7363.

Date of Assignment

OVERSEAS CONTINGENTS

RATE OF ASSIGNMENT

--	--	--	--

PARTICULARS OF ASSIGNMENT

4

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22320—M. & D. 7993.

D/C MILITIA AND DEFENCE

SEPARATION ALLOWANCE

M. F. W. 11.

50m.—6-16.

H. Q. 1774-39-818.

Name *Jamima Christie*

Name of Soldier

*Christie, Edmund J*Address ~~713-12th Ave. East~~

Regtl. No.

~~815-13th~~ *Vancouver*
B. C.

Rank

Pte

Corps

Forestry Reinforce

Relation to Soldier

wife, child or mother

To what Corps belonging

when called out

Wife

PAYMENTS

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



SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

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

Jamina Christie

Wife
PAYMENTS. *Rt*

Name of Soldier

Christie, Edmund

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			<i>815-13th ave. E.</i>
Feb.				
March				
April				
May		<i>F 6968</i>	<i>38</i>	<i>38 R</i>
June		<i>C 7615</i>	<i>20</i>	<i>20</i>
July		<i>B. 11935</i>	<i>20</i>	<i>20</i>
Aug.	<i>13th</i>	<i>F. 14439</i>	<i>20</i>	<i>R</i>
Sept.		<i>E 17713</i>	<i>20</i>	<i>B</i>
Oct.		<i>K 22657</i>	<i>20</i>	<i>T</i>
Nov.	<i>Rt. 7/11/17-</i>	<i>G 25313</i>	<i>20</i>	<i>X 815-13th ave E. Vancouver B.C.</i>
Dec.		<i>J 25644</i>	<i>20</i>	<i>F 17800</i>
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
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	1920			
May				
June				
July				
Aug.	1920			
Sept.				
Oct.				
Nov.				
Dec.	1920			
Jan.				
Feb.				
March				
April	1920			
May				
June				
July				
Aug.	1920			
Sept.				
Oct.				
Nov.				

*Wife*MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

M. F. W. 12.

25m-4-17.

H. Q. 1772-39-819.

To, Whom

Mrs Jamima Christie,
815-13th Avenue, E 713-12th Avenue E.,
Vancouver,

Address

By Whom Assigned

Regtl. No.

Rank

Corps

Christie, Edmund John
2323384
Pte
Forrestry Btm.

Rate

\$15.00
*20⁰⁰ x 1st Oct 17**JUN 1 1917*

PAYMENTS

Month

Year

Cheque
No.

Amt.

REMARKS

Aug.

1914

Sept.

Oct.

Nov.

Dec.

Jan.

1915

Feb.

March

April

May

June

July

Aug.

Sept.

Oct.

Nov.

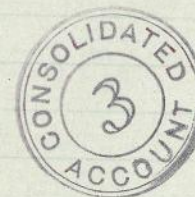
Dec.

Jan.

1916

Feb.

March

① 2 M 30⁰⁰ - 1st Oct 17

Wife

MILITIA AND DEFENCE

M. F. W. 12a.

18m.-4-17.

1772-39-819.

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2

(Assignee)

Name of Soldier

L. L. Job 19227-M. & D. 7814.

PAYMENTS.

2323384-

Christie, Edmund John
Pte - Forrestry Btn.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June		W 22117	15	
July		I 25861	15	
Aug.		B 30896	15	
Sept.		X 35650	15	
Oct.		W 46015	15	
Nov.		R 54960	25	
Dec.		A 44445	20	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

15⁰⁰ 20⁰⁰ 1st Oct 1917
JUN 4 1917

W 18

25⁰⁰ Nov. to adjust
20⁰⁰ future
120 00

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.				

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

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

Applo Cook with pay @ 75 per day

31/1/77

ADMISSIONS TO HOSPITAL, &c.

DATE
ADMITTEDDATE
DISCHARGED

V.
OR
A.

NAME OF

[illegible]

IS. &c.
ACTIVE
TE
1.7 Do. 3-M/1.8
5760 08/28

AUTHORITY

TAL. &c.
NAME OF HOSPITAL

REG'L. No. 2323384 RANK *Pte* NAME *Christie, Edmund John*
IF IN PERMT. CORPS } *C.P.C.* UNIT
WHAT UNIT
PERMANENT FORCE ALLOWANCES
PLACE OF ATTESTATION *Kamloops*
DATE OF ATTESTATION *4/4/17.*
TRANSFERRED TO *B.C. France* DATE *1/11/17* AUTHORITY
TRANSFERRED TO DATE AUTHORITY
TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY \$ *20.00* DATE EFFECTIVE *1/10/17*
PAYABLE TO *Mrs. E. Christie, 713-12 Ave Vancouver B.C.* RELATIONSHIP *Wife*
Mrs. J. Christie, 815-13 Ave Vancouver B.C.

ASSIGNED PAY MONTHLY \$ DATE EFFECTIVE
PAYABLE TO RELATIONSHIP
STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON
DISCHARGE DATE AND PLACE REASON AND AUTHORITY
ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)
ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

UITTANCE ROLLS
2 3 4
DATE NO. DATE NO. DATE

CASH PAYMENTS					ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
1	2	3	4					CREDIT	DEBIT			
								23 75				<i>Bel from Canada</i>
					15		15	41 75				
					15		15	60 85				
4 87					15		19 87	75 08				
					15		15	93 08				
4 87					60		64 87	93 08				

2323384 ^{Cook C 1⁷³} Pte Christie Edmund John
AP \$20.00 ban

[illegible]

[illegible]